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**WORKERS' COMPENSATION AND INJURY MANAGEMENT  
ACT 1981**

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**WORKERS' COMPENSATION  
AND INJURY MANAGEMENT  
AMENDMENT REGULATIONS  
(No. 2) 2005**



Western Australia

## **Workers' Compensation and Injury Management Amendment Regulations (No. 2) 2005**

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Workers' Compensation and Injury Management Act 1981

## **Workers' Compensation and Injury Management Amendment Regulations (No. 2) 2005**

Made by the Governor in Executive Council.

**1. Citation**

These regulations are the *Workers' Compensation and Injury Management Amendment Regulations (No. 2) 2005*.

**2. Commencement**

These regulations come into operation on 14 November 2005.

**3. The regulations amended**

The amendments in these regulations are to the *Workers' Compensation and Injury Management Regulations 1982*\*.

[\* *Reprint 4 as at 17 April 2003.*

*For amendments to 17 October 2005 see Western Australian Legislation Information Tables for 2004, Table 4, p. 465, and Gazette 21 January 2005 p. 275-7.]*

**4. Regulation 2A amended**

Regulation 2A(1)(b) is amended by deleting "clause 1 of Schedule 5 to the Act," and inserting instead —

“ the Act Schedule 5 clause 1, ”.

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**5. Regulation 4 amended**

- (1) Regulation 4 is amended by inserting before “The” the subregulation designation “(1)”.
- (2) At the end of regulation 4 the following subregulation is inserted —  
“
  - (2) The form of election referred to in section 31H of the Act must be in the form of Form 1A in Appendix I or, in the case of a worker suffering from noise induced hearing loss, in the form of Form 2CA in Appendix I.”.

**6. Regulation 6AA amended**

- (1) Regulation 6AA(1) is amended as follows:
  - (a) by inserting after “Form 2C” —  
“ or Form 2CA, as the case requires, ”;
  - (b) by deleting “84I(1)(b)” and inserting instead —  
“ 178(1)(b) ”.
- (2) Regulation 6AA(2) is amended as follows:
  - (a) by deleting “84I(1)(b)” and inserting instead —  
“ 178(1)(b) ”;
  - (b) by deleting “176(1)(a)” and inserting instead —  
“ 292(1)(a) ”.
- (3) Regulation 6AA(3) is amended as follows:
  - (a) by deleting “84I(1)(b)” and inserting instead —  
“ 178(1)(b) ”;
  - (b) by deleting “84I(2)” and inserting instead —  
“ 178(2) ”.

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**7. Regulation 6AB inserted**

After regulation 6AA the following regulation is inserted —

“

**6AB. Relevant document (section 180(1)(j))**

A certificate of currency in respect of the employer's insurance policy referred to in section 160(7) of the Act is prescribed under section 180(1)(j) of the Act as a relevant document.

”

**8. Regulation 6A amended**

- (1) Regulation 6A(1) is amended by deleting “and 57B(1)(b)(i)” and inserting instead —

“ , 57B(1)(b)(i) and 231(1)(b)(i) ”.

- (2) Regulation 6A(2) is amended by deleting “176(1)(a)” and inserting instead —

“ 292(1)(a) ”.

**9. Regulation 8 amended**

- (1) Regulation 8(4) is amended by deleting “a medical review or examination” and inserting instead —

“ an examination under section 64 or 65 of the Act ”.

- (2) After regulation 8(4) the following subregulations are inserted —

“

- (5) A worker must not, under section 64 or 65 of the Act, be required to attend medical examinations by more than 3 medical practitioners who are specialists in the same field of medicine.

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- (6) Nothing in subregulation (5) limits the number of times a worker may be required to attend a medical examination by a medical practitioner.

”.

**10. Regulation 10 amended**

Regulation 10(2) is amended by deleting “, under section 84N of the Act, refer the dispute to the Director for conciliation.” and inserting instead —

“

apply under section 181 of the Act for determination of the dispute by an arbitrator.

”.

**11. Regulations 10A and 10B replaced**

Regulations 10A and 10B are repealed and the following regulation is inserted instead —

“

**10A. Medical certificate for statutory expenses**

Form 7 in Appendix I is the form prescribed under sections 231(2)(b) and 241(2)(b) of the Act.

”.

**12. Regulation 12 amended**

- (1) Regulation 12(1) is amended by deleting “Directorate” and inserting instead —

“ office of the DRD ”.

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- (2) Regulation 12(2) is amended by deleting “for each item, the percentage loss of the full efficient use of a part or faculty of the body for which compensation is to be paid, and the amount of the compensation.” and inserting instead —

“

for each item —

- (a) if the Act Part III Division 2 applies in respect of the personal injury or noise induced hearing loss that is the subject of the agreement —
- (i) the percentage loss of the full efficient use of a part or faculty of the body for which compensation is to be paid; and
  - (ii) the amount of compensation;

or

- (b) if the Act Part III Division 2A applies in respect of the personal injury or noise induced hearing loss that is the subject of the agreement —
- (i) the degree of permanent impairment of a part or faculty of the body for which compensation is to be paid; and
  - (ii) the amount of compensation.

”.

**13. Regulations 12AA and 12AB replaced by regulation 12AA**

Regulations 12AA and 12AB are repealed and the following regulation is inserted instead —

“

**12AA. Notice of intention to dismiss worker (section 84AB)**

- (1) This regulation applies to a notice of intention to dismiss a worker to which section 84AB of the Act refers.
- (2) Form 15G in Appendix I is the form prescribed for the notice.

”.

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**14. Regulation 12A amended**

- (1) Regulation 12A(1) is amended by deleting "109(1)(a)" and inserting instead —  
" 109(1) ".
- (2) Regulation 12A(2) is amended by deleting "109(4)(a)" and inserting instead —  
" 109(4) ".

**15. Regulation 13A inserted**

Before regulation 14 the following regulation is inserted —

“

**13A. Prescribed rate of interest (sections 222(2), 223(2)  
and 224(2))**

- (1) Interest payable under an order made under section 222(1) of the Act must be calculated at a rate of 6% per annum.
- (2) Interest payable under section 223(1) of the Act must be calculated at a rate of 6% per annum.
- (3) Interest payable under section 224(1) of the Act in respect of a sum agreed to be paid must be calculated at a rate of 6% per annum.

”.

**16. Regulation 14 repealed**

Regulation 14 is repealed.

**17. Regulation 16 repealed**

Regulation 16 is repealed.

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**18. Regulation 16A inserted**

Before regulation 17 the following regulation is inserted —

“

**16A. Clause 1C notifications and elections**

- (1) The form of notification for the purposes of the Act Schedule 1 clause 1C(1) must be in the form of Form 29 in Appendix I.
- (2) The form of notification for the purposes of the Act Schedule 1 clause 1C(4)(a) must be in the form of Form 30 in Appendix I.
- (3) An election for the purposes of the Act Schedule 1 clause 1C(2) or clause 1C(4) or (6) must —
  - (a) be made in writing;
  - (b) specify —
    - (i) the name and address of the dependant;
    - (ii) the relationship (child or step-child) of the dependant to the deceased worker;
    - (iii) the name of the deceased worker, and the address of the deceased worker at the time of death;
    - (iv) whether the dependant elects to receive an apportionment of the notional residual entitlement or a child's allowance under the Act Schedule 1 clause 1A;
    - (v) whether the worker died leaving any spouse or de facto partner wholly dependent on the workers' earnings, and whether that spouse or de facto partner is a parent of the dependant making the election;

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- (vi) that the dependant has been independently advised of the financial consequences of the election, and the name, title, address and phone number of the person who gave that advice; and
- (vii) the date on which the election is made;
- (c) be signed by the dependant or, in the case of an election by a person under a legal disability, the parent or guardian of that person;
- (d) include the signature and full name and address of a witness to the signature of the dependant or his or her parent or guardian; and
- (e) be given to the Director.

”.

**19. Regulation 17 amended**

Regulation 17 is amended by inserting before “clause 11(2)” —  
“ the Act Schedule 1 ”.

**20. Regulation 17AA amended**

Regulation 17AA(1) is amended by deleting “Schedule 1 clause 19(1) of the Act,” and inserting instead —  
“ the Act Schedule 1 clause 19(1), ”.

**21. Regulations 17AB, 17AC and 17AD inserted**

After regulation 17AA the following regulations are inserted —

“

**17AB. Exceptional circumstances — clause 18A(2aa)(c)(ii)**

- (1) For the purposes of the Act Schedule 1 clause 18A(2aa)(c)(ii) the circumstances in relation to the medical and associated conditions, treatment and



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management of a worker are exceptional if operative intervention and reasonable post-operative treatment of a kind related to an MBS item are required to alleviate substantially the consequences of serious impairment and improve the worker's physical condition.

- (2) For the purposes of the Act Schedule 1 clause 18A(2aa)(c)(ii) the applicant must produce the following information to the arbitrator in writing —
- (a) clear medical opinion from a treating specialist that operative intervention and reasonable post-operative treatment of a kind related to an MBS item are required to alleviate the consequences of serious impairment and improve the worker's physical condition; and
  - (b) a management plan provided by the treating specialist that indicates that substantial medical improvement to the worker's physical condition is anticipated as a result of operative intervention and reasonable post-operative treatment.
- (3) In this regulation —
- “MBS item”** means an item specified in the Medicare Benefits Schedule published by the Commonwealth Department of Health and Aged Care;
- “treating specialist”**, in relation to an applicant, means a medical practitioner who —
- (a) is treating the applicant; and
  - (b) is a specialist in a relevant field of medicine.

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**17AC. Management plan — clause 18A(2ac)**

A reference in the Act Schedule 1 clause 18A(2ac) to a management plan is a reference to a management plan produced under regulation 17AB(2)(b).

**17AD. Extending final day**

- (1) A worker may apply to the Director to extend the final day under the Act Schedule 1 clause 18B.
- (2) The application is made by —
  - (a) lodging with the Director a completed application in the form of Form 31 in Appendix I; and
  - (b) providing to the Director, with the application form, anything that this regulation requires to be provided with the application form.
- (3) When the application form is lodged —
  - (a) if the worker has, in writing, requested an approved medical specialist to assess the worker's degree of permanent whole of person impairment, the Director must be provided with a copy of the worker's request; and
  - (b) if the approved medical specialist has notified the worker, in writing, that more time is or was required to give the worker the documents required to make an application under the Act Schedule 1 clause 18A(1b) before the final day, the Director must be provided with a copy of the notification.
- (4) The Director may, within the limits imposed by the Act Schedule 1 clause 18B(4), extend the final day until a day that the Director, having regard to the further time needed by the approved medical specialist, considers will give the worker a reasonable opportunity to make

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an application under the Act Schedule 1  
clause 18A(1b).

”.

**22. Regulation 17A amended**

Regulation 17A is amended by deleting “clause 1 of Schedule 5  
to the Act” and inserting instead —

“ the Act Schedule 5 clause 1 ”.

**23. Regulation 17B inserted**

After regulation 17A the following regulation is inserted —

“

**17B. Witness allowances**

A person who appears before a dispute resolution  
authority to give evidence is entitled to any allowance  
for that appearance set by the Costs Committee  
established under section 269 of the Act.

”.

**24. Parts 2A and 2B inserted**

After regulation 18 the following Parts are inserted —

“

**Part 2A — Assessment of costs**

**18A. Application of this Part**

This Part applies in relation to any costs incurred on or  
after 14 November 2005 in relation to a proceeding  
determined, or otherwise dealt with, by a dispute  
resolution authority.

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**18B. Meaning of terms used in this Part**

In this Part —

“**agent service**” has the meaning given to that term in section 261 of the Act;

“**applicant**” means an applicant for assessment of costs under regulation 18C;

“**application**” means an application for assessment of costs under regulation 18C;

“**legal service**” has the meaning given to that term in section 261 of the Act;

“**taxing officer**” means the Director or an arbitrator.

**18C. Application for assessment of costs**

A person who has paid or is liable to pay, or who is entitled to receive or who has received, costs as a result of an order for the payment of an unspecified amount of costs made by a dispute resolution authority may apply under the *Workers' Compensation (DRD) Rules 2005* for an assessment of the whole of, or any part of, those costs by a taxing officer.

**18D. Taxing officer may require application to be given to other persons**

- (1) A taxing officer may, by written notice, require an applicant to give a copy of the application to —
  - (a) a party to the proceeding in respect of which the relevant order for costs was made; or
  - (b) a legal practitioner, agent or other interested party,

specified by the taxing officer.

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- (2) The application must be given in accordance with the *Workers' Compensation (DRD) Rules 2005* Part 3.
- (3) If a person fails, without reasonable excuse, to comply with a notice given under subregulation (1) the taxing officer may decline to deal with the application.

**18E. Taxing officer may require documents or further particulars**

- (1) A taxing officer may, by written notice, require a person (including the applicant, a party to the proceeding in which the relevant order for costs was made, the legal practitioner or agent concerned or any other legal practitioner or agent) to produce any relevant documents of or held by the person in respect of the matter.
- (2) A taxing officer may, by written notice, require an applicant to give to the taxing officer further particulars as to any item of costs claimed.
- (3) A notice given under subregulation (1) or (2) must specify the period within which the notice is to be complied with.
- (4) If a person fails, without reasonable excuse, to comply with a notice given under subregulation (1) or (2) the taxing officer may decline to deal with the application or may continue to deal with the application on the basis of the information provided.
- (5) Nothing in this regulation prevents a person from objecting to the production of a document on the grounds of legal professional privilege.

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**18F. Consideration of application**

- (1) A taxing officer must not determine an application unless the taxing officer —
  - (a) has given the applicant and any other party to the proceeding in which the relevant order for costs was made a reasonable opportunity to make oral or written submissions in relation to the application; and
  - (b) has given due consideration to any submissions so made.
- (2) In considering an application a taxing officer is not bound by the rules of evidence and may inform himself or herself on any matter in such manner as the taxing officer thinks fit.

**18G. Assessment to give effect to order and costs determination**

An assessment of costs must be made in accordance with, and so as to give effect to, orders of the dispute resolution authority and any costs determination published under section 273 of the Act.

**18H. Matters to be considered**

- (1) When dealing with an application the taxing officer must consider —
  - (a) whether or not it was reasonable to carry out the work to which the costs relate; and
  - (b) what is a fair and reasonable amount of costs for the work concerned.

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- (2) In assessing what is a fair and reasonable amount of costs, the taxing officer may have regard to any or all of the following matters —
  - (a) the skill, labour and responsibility displayed on the part of the legal practitioner or agent responsible for the matter;
  - (b) the complexity, novelty or difficulty of the matter;
  - (c) the quality of the work done and whether the level of expertise was appropriate to the nature of the work done;
  - (d) the place where and circumstances in which the legal services or agent services were provided;
  - (e) the time within which the work was required to be done;
  - (f) the outcome of the matter.
- (3) If the dispute resolution authority has ordered that the costs are to be assessed on a specified basis, the taxing officer must assess the costs on that basis.

**18I. Cost of assessment**

The costs of and incidental to an assessment are at the discretion of the taxing officer.

**18J. Enforcement of assessment**

- (1) The taxing officer must issue to each party a certificate that sets out the amount in which costs have been assessed and allowed by the taxing officer.
- (2) The costs are payable under the order made by the dispute resolution authority as to the costs.

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**18K. Correction of error**

At any time after making a determination a taxing officer who made the determination may, for the purpose of correcting an inadvertent error in the determination —

- (a) make a new determination in substitution for the previous determination; and
- (b) issue a certificate under regulation 18J that sets out the new determination.

**Part 2B — Medical assessment**

**18L. Definitions**

In this Part —

“**prescribed details**”, in relation to a worker, means —

- (a) the worker's name and address and any other details necessary to identify the worker;
- (b) details sufficient to enable the worker to be contacted;
- (c) the worker's date of birth;
- (d) the date on which the worker's injury occurred;
- (e) a description of the worker's injury;
- (f) if a claim for compensation has been made under the Act with respect to the worker's injury — details sufficient to identify the claim, including any claim number that has been given to the claim;
- (g) the employer's name and address and any other details necessary to identify the employer;



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(h) details sufficient to enable the employer to be contacted; and

(i) the insurer's name, if any;

**“relevant provisions of the Act” means —**

(a) Part III Division 2A of the Act (which provides for lump sum payments for specified injuries);

(b) Part IV Division 2 Subdivision 3 of the Act (which provides for restrictions on awarding, and the amount of, damages);

(c) Part IXA of the Act (which provides for specialised retraining programs); or

(d) (except in regulation 18R(3)(e)) clause 18A of Schedule 1 to the Act (which provides for additional sums to be allowed for medical expenses).

**18M. Request for assessment by approved medical specialist of worker's degree of impairment**

For the purposes of section 146A(3) of the Act, a request for a worker's degree of impairment to be assessed by an approved medical specialist has to be given in writing to the approved medical specialist, specifying —

(a) the prescribed details in relation to the worker;

(b) the approved medical specialist's name;

(c) the relevant provisions of the Act for the purposes of which the assessment is to be made; and

(d) the date of the request for the assessment.

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**18N. Requirement to attend at place specified by approved medical specialist**

For the purposes of section 146G(1)(a) of the Act, the requirement for a worker to attend at a place specified by an approved medical specialist —

- (a) has to be given in writing to the worker and sent to the worker's address specified in the request for assessment referred to in regulation 18M; and
- (b) has to specify —
  - (i) the prescribed details in relation to the worker;
  - (ii) the approved medical specialist's name;
  - (iii) details sufficient to enable the approved medical specialist to be contacted;
  - (iv) the relevant provisions of the Act for the purposes of which the assessment is to be made; and
  - (v) the time when and the place where the worker is to submit to examination, as required under section 146G(1)(d) of the Act.

**18O. Requirement to produce to approved medical specialist relevant documents and information and give consent**

- (1) For the purposes of section 146G(1)(c)(i) of the Act, the requirement to produce to an approved medical specialist any relevant document or information has to be given in writing to the worker, the employer, or the employer's insurer, specifying —
  - (a) the prescribed details in relation to the worker;

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- (b) details of any relevant document or information to which the requirement applies;
  - (c) the approved medical specialist's name;
  - (d) details sufficient to enable the approved medical specialist to be contacted; and
  - (e) the relevant provisions of the Act for the purposes of which the assessment is to be made.
- (2) For the purposes of section 146G(1)(c)(ii) of the Act, the requirement to consent to another person who has any relevant document or information producing it to an approved medical specialist has to be given in writing to the worker, the employer, or the employer's insurer, specifying —
- (a) the prescribed details in relation to the worker;
  - (b) details of any relevant document or information to which the requirement applies;
  - (c) the name of the person who has the relevant document or information;
  - (d) the approved medical specialist's name;
  - (e) details sufficient to enable the approved medical specialist to be contacted; and
  - (f) the relevant provisions of the Act for the purposes of which the assessment is to be made.

**18P. Period for compliance with requirements**

If the time for complying with a requirement referred to in regulation 18O is not specified in the requirement, the requirement has to be complied with within 7 days after the day on which the person who is to comply with the requirement receives it.

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**18Q. Requirement for worker to produce requested information**

- (1) On being requested in writing to do so by the approved medical specialist, a worker who has requested an approved medical specialist to assess his or her degree of impairment is required to produce to the approved medical specialist for use in dealing with the requested assessment, within 7 days after the day on which the worker receives the approved medical specialist's request, any information that —
  - (a) relates to the injury from which the impairment resulted; and
  - (b) is specified in the approved medical specialist's request.
- (2) A request by an approved medical specialist under subregulation (1) has to include —
  - (a) the approved medical specialist's name; and
  - (b) details sufficient to enable the approved medical specialist to be contacted.
- (3) A person who contravenes a requirement under subregulation (1) commits an offence and is liable to a fine of \$2 000.
- (4) Subregulation (1) does not apply to any information that is the subject of a requirement referred to in regulation 18O(1).

**18R. Reports and certificates regarding outcome of assessment**

- (1) A report of a worker's degree of impairment given by an approved medical specialist under section 146H(1)(a) of the Act has to include —
  - (a) the prescribed details in relation to the worker;

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- (b) the approved medical specialist's name;
  - (c) details sufficient to enable the approved medical specialist to be contacted;
  - (d) the date of the examination of the worker by, or at the request of, the approved medical specialist; and
  - (e) the relevant provisions of the Act for the purposes of which the assessment was made.
- (2) A certificate specifying a worker's degree of impairment given by an approved medical specialist under section 146H(1)(b) of the Act has to include —
- (a) the prescribed details in relation to the worker;
  - (b) the approved medical specialist's name;
  - (c) details sufficient to enable the approved medical specialist to be contacted; and
  - (d) the date of the examination of the worker by, or at the request of, the approved medical specialist.
- (3) A report given by an approved medical specialist under section 146H(2)(c) of the Act has to include —
- (a) the prescribed details in relation to the worker;
  - (b) the approved medical specialist's name;
  - (c) details sufficient to enable the approved medical specialist to be contacted;
  - (d) the date of the examination of the worker by, or at the request of, the approved medical specialist; and
  - (e) the relevant provisions of the Act for the purposes of which the relevant certificate under section 146H(2) of the Act was given.

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**18S. Requirement to attend at place specified by approved medical specialist panel**

For the purposes of section 146L(2)(a) of the Act, the requirement for a worker to attend at a place specified by an approved medical specialist panel has to be given in writing to the worker, specifying —

- (a) the prescribed details in relation to the worker;
- (b) the names of the members of the approved medical specialist panel; and
- (c) the time when and the place where the worker is to submit to examination, as required under section 146L(2)(d) of the Act.

**18T. Requirement to produce to approved medical specialist panel relevant documents and information and give consent**

- (1) For the purposes of section 146L(2)(c)(i) of the Act, the requirement to produce to an approved medical specialist panel any relevant document or information has to be given in writing to the worker, the employer, or the employer's insurer, specifying —
  - (a) the prescribed details in relation to the worker;
  - (b) details of any relevant document or information to which the requirement applies; and
  - (c) the names of the members of the approved medical specialist panel.
- (2) For the purposes of section 146L(2)(c)(ii) of the Act, the requirement to consent to another person who has any relevant document or information producing it to an approved medical specialist panel has to be given in writing to the worker, the employer, or the employer's insurer, specifying —
  - (a) the prescribed details in relation to the worker;

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- (b) details of any relevant document or information to which the requirement applies;
- (c) the name of the person who has the relevant document or information; and
- (d) the names of the members of the approved medical specialist panel.

**18U. Period for compliance with requirements**

If the time for complying with a requirement referred to in regulation 18T is not specified in the requirement, the requirement has to be complied with within 7 days after the day on which the person who is to comply with the requirement receives it.

**18V. Requirement for worker to produce requested information**

- (1) On being requested to do so by the approved medical specialist panel, a worker in respect of whom a question as to degree of impairment has been referred to an approved medical specialist panel is required to produce to the approved medical specialist panel for use in dealing with the referral, within 7 days after the day on which the worker receives the request, any information that —
  - (a) relates to the injury from which the impairment resulted; and
  - (b) is specified in the approved medical specialist panel's request.
- (2) A request by an approved medical specialist panel under subregulation (1) has to include the names of the members of the approved medical specialist panel.

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- (3) A person who contravenes a requirement under subregulation (1) commits an offence and is liable to a fine of \$2 000.
- (4) Subregulation (1) does not apply to any information that is the subject of a requirement referred to in regulation 18T(1).

**18W. Reports and certificates regarding outcome of assessment**

A report of a worker's degree of impairment given by an approved medical specialist panel under section 146O(2)(a) of the Act, or a certificate specifying a worker's degree of impairment given by an approved medical specialist panel under section 146O(2)(b) of the Act, has to include —

- (a) the prescribed details in relation to the worker;
- (b) the names of the members of the approved medical specialist panel; and
- (c) the date of the examination of the worker by, or at the request of, the members of the approved medical specialist panel.

”.

**25. Regulation 19A amended**

Regulation 19A is amended in the definition of “clause” by deleting “Schedule 7 to the Act.” and inserting instead —

“ the Act Schedule 7. ”.

**26. Regulation 19C amended**

- (1) Regulation 19C(5) is amended by deleting “a disability” and inserting instead —

“ an injury ”.



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- (2) Regulation 19C(8) is amended by inserting after “section 24A” in both places where it occurs —

“ or 31E ”.

**27. Regulation 19E amended**

Regulation 19E(1) is amended by deleting “section 24A(2)” and inserting instead —

“ sections 24A(2) and 31E(3) ”.

**28. Regulation 19F amended**

At the foot of regulation 19F(3) the following provision is inserted —

“

Penalty: a fine of \$1 000.

”.

**29. Regulation 19G repealed**

Regulation 19G is repealed.

**30. Heading to Part 3A Division 1 inserted**

Before regulation 19IA, the following Division heading is inserted —

“

**Division 1 — 1993 scheme**

”.

**31. Regulation 19IA amended**

Regulation 19IA(1) is amended by deleting “93A” and inserting instead —

“ 93CA ”.

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**32. Regulation 19J amended**

Regulation 19J(1)(b) is amended by deleting “in the Form 22”.

**33. Regulation 19K amended**

Regulation 19K(1) is amended by inserting before “degree” —  
“ level of the ”.

**34. Regulation 19L amended**

Regulation 19L(1) is amended by deleting paragraph (a) and  
“or” after that paragraph and inserting instead —

“

- (a) a dispute dealt with as required by  
section 93D(10) of the Act; or

”.

**35. Regulation 19O amended**

Regulation 19O is amended by deleting “*Workers’  
Compensation (Conciliation and Review) Rules 1994* as if it  
were an application referring for conciliation” and inserting  
instead —

“

*Workers’ Compensation and Injury Management  
(DRD) Rules 2005* as if it were an application in  
respect of

”.

**36. Regulation 19P amended**

Regulation 19P(2)(a) is amended by deleting “dispute resolution  
body” and inserting instead —

“ dispute resolution authority ”.

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**37. Part 3A Division 2 inserted**

At the end of Part 3A, the following Division is inserted —

“

**Division 2 — 2004 scheme**

**20. Recording agreement**

- (1) If —
- (a) the worker and the employer agree —
    - (i) that the worker's degree of permanent whole of person impairment is at least 15%; and
    - (ii) as to whether or not the worker's degree of permanent whole of person impairment is at least 25%;
  - and
  - (b) the worker, in writing, requests the Director to record the agreement,

the Director is required to record the agreement in a register kept for the purpose unless an agreement or assessment as to the worker's degree of permanent whole of person impairment has already been recorded under this regulation or regulation 21.

- (2) The request under subregulation (1)(b) for the Director to record the agreement has to include —
- (a) the worker's name and any other details necessary to identify the worker;
  - (b) details sufficient to enable the worker to be contacted;
  - (c) the worker's date of birth;
  - (d) the date on which the injury occurred and a description of the injury;

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- (e) if a claim for compensation under the Act for the injury has been made, the date on which the worker's claim was made and sufficient other details to identify the claim (including any claim number that may have been given to the claim);
  - (f) the employer's name and any other details necessary to identify the employer;
  - (g) details sufficient to enable the employer to be contacted; and
  - (h) the name of the insurer, if any.
- (3) The Director's record in the register is to be in the form of Form 32 in Appendix I, and the Director is required to give a copy of the record to each of the worker and the employer.

**21. Recording assessment**

- (1) If —
- (a) the worker's degree of permanent whole of person impairment has been assessed to be a percentage that is not less than 15%;
  - (b) the Director has been given —
    - (i) a copy of the certificate given to the worker under section 146H(1)(b) of the Act; and
    - (ii) if the assessment involves a special evaluation as defined in section 146C(4) of the Act, a copy of the certificate referred to in section 93N(1) of the Act on the basis of which the special evaluation was requested;

and

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- (c) the worker, in writing, requests the Director to record the assessment,

the Director is required to record the assessment in a register kept for the purpose unless an agreement or assessment as to the worker's degree of permanent whole of person impairment has already been recorded under regulation 20 or this regulation.

- (2) The Director's record in the register is to be in the form of Form 33 in Appendix I, and the Director is required to give a copy of the record to each of the worker and the employer.

**22. Electing to retain right to seek damages**

- (1) An election under section 93K(4)(a) of the Act is made by completing an election form in the form of Form 34 in Appendix I and lodging it with the Director.
- (2) Unless under subregulation (3) the Director refuses to register the election, the Director is to —
- (a) register the election in a register kept for that purpose on the day on which the Director receives the election form; and
  - (b) complete the relevant section of the election form and give a copy of it to the worker and the employer.
- (3) The Director may refuse to register the election if not satisfied that the worker has been properly advised of the consequences of the election.

**23. Extending termination day**

- (1) A worker may apply for the Director to extend the termination day under section 93M of the Act.

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- (2) The application is made by —
- (a) lodging with the Director a completed application form in the form of Form 35 in Appendix I; and
  - (b) providing to the Director, with the application form, anything that this regulation requires to be provided with the application form.
- (3) If the application is made in the circumstances described in section 93M(4)(a) of the Act —
- (a) when the application form is lodged, the Director has to be provided with —
    - (i) a copy of the approved medical specialist's certificate certifying that the worker's condition has not stabilised to the extent required for a normal evaluation of the worker's degree of permanent whole of person impairment to be made in accordance with the WorkCover Guides as described in sections 146A and 146C of the Act;
    - (ii) a copy of the approved medical specialist's recommendation of a day until which the termination day be extended; and
    - (iii) a copy of the approved medical specialist's report under section 146H(2)(c) of the Act;
  - and
  - (b) the Director may, within the limits imposed by the Act, extend the termination day until a day that the Director, having regard to the approved medical specialist's recommendation, considers will give the worker a reasonable opportunity to

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make an election under section 93K(4)(a) of the Act.

- (4) If the application is made in the circumstances described in section 93M(4)(b) of the Act, the Director cannot extend the termination day to a day that is more than 6 months after the day on which the Director gives the extension.
- (5) If the application is made in the circumstances described in section 93M(4)(c) of the Act —
- (a) when the application form is lodged —
- (i) if the worker has, in writing, requested an assessment of the worker's degree of permanent whole of person impairment, the Director has to be provided with a copy of the worker's request; and
- (ii) if the approved medical specialist has notified the worker, in writing, that more time is or was required to give the worker the documents required by section 146H of the Act than the time described in section 93O(1)(d) of the Act, the Director has to be provided with a copy of the notification;
- and
- (b) the Director may, within the limits imposed by the Act, extend the termination day until a day that the Director, having regard to the further time needed by the approved medical specialist, considers will give the worker a reasonable opportunity to make an election under section 93K(4)(a) of the Act.

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- (6) If the application is made in the circumstances described in section 93M(4)(d)(i) or (ii) of the Act —
- (a) when the application form is lodged —
    - (i) the Director has to be provided with a copy of the worker's request for an assessment of the worker's degree of permanent whole of person impairment; and
    - (ii) if the approved medical specialist has notified the worker, in writing, that it would be impracticable to give the worker the documents required by section 146H of the Act at least 7 days before the termination day, the Director has to be provided with a copy of the notification;
  - and
  - (b) the Director may, within the limits imposed by the Act, extend the termination day until a day that the Director considers will give the worker a reasonable opportunity to make an election under section 93K(4)(a) of the Act.

**24. Expected time for approved medical specialist to give assessment documents**

An approved medical specialist can reasonably be expected to take 6 weeks, after a worker requests an assessment of the worker's degree of permanent whole of person impairment, to give the worker the documents that the approved medical specialist is required by section 146H of the Act to give the worker.



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**25. Employer's obligation to notify worker**

The notice that an employer is required by section 93O(1) of the Act to give to a worker has to be given by sending the worker a document in the form of Form 36 in Appendix I.

**38. Part 4 replaced by Parts 4 to 7**

Part 4 is repealed and the following Parts are inserted instead —

**Part 4 — Registered agents**

**Division 1 — Preliminary**

**26. Meaning of terms used in this Part**

In this Part —

“**applicant**” means an applicant for registration;

“**code of conduct**” means the code of conduct set out in Appendix IV;

“**employer**”, in relation to an applicant or registered agent, means the person or body —

- (a) by which the applicant or registered agent is employed or engaged; and
- (b) as an employee or officer of which the applicant proposes to act as a registered agent, or of which the registered agent acts as a registered agent;

“**registration**” means registration under this Part as a registered agent.

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**27. Prescribed organisation (section 277(1)(e))**

The Asbestos Diseases Advisory Service of Australia is prescribed as an organisation for the purposes of section 277(1)(e) of the Act.

**Division 2 — Registration and renewal**

**28. Application for registration**

- (1) An application for registration must be made to WorkCover WA in a form approved by WorkCover WA.
- (2) The application must include a nomination of the applicant signed by the applicant's employer.
- (3) The application must be accompanied by evidence satisfactory to WorkCover WA that —
  - (a) there is, or upon registration under this Part will be, in force with respect to the applicant a policy of professional indemnity insurance for not less than \$1 million for any one claim; or
  - (b) within the meaning of subregulation (4), the applicant has sufficient material resources to provide professional indemnity.
- (4) A person has sufficient material resources to provide professional indemnity if —
  - (a) the person will not act as a registered agent other than as an employee or officer of a body referred to in section 277(1)(a), (b), (c), (d) or (e) of the Act; and
  - (b) that body —
    - (i) maintains professional indemnity insurance for not less than \$1 million for any one claim; or

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- (ii) holds legal or equitable estates or interests of not less than \$1 million in real or personal property.
  - (5) The applicant must provide WorkCover WA with any additional information or document that WorkCover WA may ask for.
- 29. WorkCover WA must register, and may impose conditions on registration**
- (1) WorkCover WA must register an applicant if the application is duly made.
  - (2) WorkCover WA cannot refuse an application unless it has —
    - (a) given the applicant written notice of the intention to refuse the application, and of the grounds for the proposed refusal; and
    - (b) allowed at least 21 days for the applicant to show cause why the application should not be refused.
  - (3) Registration has effect to the extent that the person acts as a registered agent as an employee or officer of the employer that nominates the person in the application under regulation 28(2), and not otherwise.
- 30. Indemnity and other conditions of registration**
- (1) It is a condition of registration that the professional indemnity insurance or material resources of the registered agent referred to in regulation 28(3) must be maintained during the period of registration.
  - (2) It is a condition of registration that the registered agent must comply with the code of conduct.

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- (3) It is a condition of registration that the person will not act as a registered agent other than as an employee or officer of the employer who nominated the agent in the application for registration.

**31. Duration of registration**

- (1) Except as provided in subregulation (3), a registration has effect from the day it is granted and continues in force until the following 30 June.
- (2) An application for the renewal of registration may be made at any time before the registration expires and, except as provided in subregulation (3), any such renewal has effect for the period 1 July to 30 June.
- (3) If a registered agent is removed from the register under regulation 36, or has his or her registration suspended or cancelled under regulation 38 or 39, the registration or renewal has effect until that removal or suspension, as the case requires.

**32. Application for renewal of registration**

- (1) An application for renewal of registration must be made in the same manner and form as an application for registration.
- (2) An application for renewal must be made not later than 28 days before the day on which the registration is due to expire.
- (3) WorkCover WA may shorten the period referred to in subregulation (2) and may do so either before or after the application is required to be made under that subregulation.
- (4) WorkCover WA must renew the registration if the application for renewal is duly made.

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- (5) WorkCover WA cannot refuse to renew the registration unless it has —
- (a) given the applicant written notice of the intention to refuse the application, and of the grounds for the proposed refusal; and
  - (b) allowed at least 21 days for the applicant to show cause why the application should not be refused.

**33. Certificate of registration**

- (1) WorkCover WA must issue a person with a certificate of registration —
- (a) on the registration of the person; and
  - (b) on the renewal of the person's registration.
- (2) The period for which the registration of the person has effect must be entered on the certificate.
- (3) In the absence of evidence to the contrary a certificate of registration is evidence that the person to whom the certificate is issued is registered for the period specified in the certificate.

**34. False or misleading information**

A person must not in relation to an application for registration or renewal of registration give information orally or in writing that the person knows to be —

- (a) false or misleading in a material particular; or
- (b) likely to deceive in a material way.

Penalty: a fine of \$1 000.

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**Division 3 — The register**

**35. Register**

- (1) WorkCover WA must keep a register in a manner and form determined by it.
- (2) WorkCover WA is to record in the register —
  - (a) the name and address of each registered agent;
  - (b) the name and address of the employer of each registered agent;
  - (c) the date of the initial registration and each date of renewal of registration of each registered agent; and
  - (d) such other particulars as WorkCover WA may determine.
- (3) WorkCover WA must allow any person —
  - (a) to inspect the register; and
  - (b) to take copies of, or extracts from, any part of it.
- (4) A person may, on application to WorkCover WA, obtain a certified copy of a part of, or entry in, the register.
- (5) WorkCover WA must make the amendments, additions and corrections to the register that are necessary to make the register an accurate record of the particulars in relation to all registered agents.

**36. Removal from register**

- (1) WorkCover WA may, on the written request of a registered agent and the return of the relevant certificate of registration, remove the name of the registered agent from the register.

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- (2) WorkCover WA may remove the name of a registered agent from the register if the employer who nominated the registered agent under regulation 28(2) notifies WorkCover WA in writing that the employer has withdrawn the nomination.

**Division 4 — Disciplinary powers**

**37. Restriction on exercise of powers**

WorkCover WA cannot take disciplinary action under regulation 38 or 39 unless it has given the registered agent and the employer who nominated the registered agent under regulation 28(2) an opportunity to show cause why the action should not be taken.

**38. Cancellation of registration**

WorkCover WA may cancel the registration of a registered agent if WorkCover WA is satisfied that the registered agent has ceased to be an employee or officer of the employer who nominated the registered agent under regulation 28(2).

**39. Taking disciplinary action**

- (1) Proper causes for disciplinary action in respect of a registered agent are that the registered agent —
- (a) improperly obtained registration;
  - (b) has contravened a condition of that person's registration; or
  - (c) has done or omitted to do something, or engaged in conduct, that renders the person unfit to be registered.
- (2) WorkCover WA may, on receiving a written complaint about a registered agent, carry out any investigation

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necessary to decide whether there is proper cause for disciplinary action in respect of a registered agent.

- (3) If WorkCover WA is satisfied that proper cause exists for disciplinary action, WorkCover WA may —
- (a) reprimand or caution the registered agent;
  - (b) attach a condition to the registration;
  - (c) suspend the registration for a period not exceeding 12 months; or
  - (d) cancel the registration.

**40. Return of certificate of registration**

- (1) If WorkCover WA suspends or cancels a person's registration it must give directions in writing to the person as to the return to it of the certificate of registration.
- (2) A person given a direction under subregulation (1) must comply with the direction.

Penalty: a fine of \$1 000.

**Division 5 — Review**

**41. Review**

A person aggrieved by a decision of WorkCover WA to —

- (a) refuse an application for registration or for renewal of registration; or
- (b) suspend or cancel the person's registration,

may apply to the State Administrative Tribunal for a review of that decision.



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**Division 6 — Miscellaneous**

**42. Evidentiary matters**

In all courts and before all persons and bodies authorised to receive evidence, in the absence of evidence to the contrary —

- (a) a certificate purporting to be issued by WorkCover WA and stating —
  - (i) that a person was or was not registered;
  - (ii) that a person's registration was suspended or cancelled,

on any day or days or during a period mentioned in the certificate is evidence of the matters so stated; and

- (b) a copy of, or extract from the register or any statement that purports to reproduce matters entered in the register and that is certified by WorkCover WA as a true copy, extract or statement, is evidence of the facts appearing in that copy, extract or statement.

**43. Transitional provision**

- (1) If a person, other than a legal practitioner, was, immediately before the commencement day, the representative of a party to a pending proceeding, that person may continue to act as the representative of the party in that proceeding during the transition period, and for that purpose the person is to be taken to be a registered agent.
- (2) The transition period is from the commencement day until —
  - (a) in the case of a person who does not make an application within 30 days after the

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- commencement day for registration, on the 30<sup>th</sup> day after the commencement day; and
- (b) in the case of a person who makes an application within 30 days after the commencement day for registration —
- (i) that person is registered under this Part; or
  - (ii) the application is refused and the review period is completed,
- whichever happens first.
- (3) For the purposes of subregulation (2)(b) a review period is completed when —
- (a) the time for applying for a review of the decision expires without an application for review being made; or
  - (b) an application for review of the decision is made but —
    - (i) results in the refusal being confirmed; or
    - (ii) is withdrawn, discontinued or dismissed for want of prosecution.
- (4) In this regulation —
- “commencement day”** means the day on which section 130 of the *Workers' Compensation Reform Act 2004* comes into operation;
- “dispute resolution body”** has the same meaning as in the *Workers' Compensation and Injury Management Act 1981* as in force immediately before the commencement day;

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**“pending proceeding”** means —

- (a) any matter the conciliation, review or other determination of which has been sought but not commenced before a dispute resolution body; or
- (b) any matter that has been partly or fully heard or otherwise dealt with before, but not determined by, a dispute resolution body.

### **Part 5 — Injury management**

#### **44. Vocational rehabilitation services**

The services listed in column 2 of the Table to this regulation and described in column 3 are services the provision of which, if they are for the purpose of enabling the worker to return to work, may be “vocational rehabilitation” as defined in section 5(1) of the Act.

**Table**

<b>column 1 item</b>	<b>column 2 service</b>	<b>column 3 description</b>
1	support counselling	activities to assist the worker to adjust to the injury and to the worker’s return to work; family counselling related to vocational rehabilitation; progress counselling related to the progress of, and problems with, the worker’s return to work
2	vocational counselling	activities focussed on problems the worker has in selecting and preparing for vocational change
3	purchase of aids and appliances	advising and assisting the worker with the purchase of aids and appliances

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<b>column 1 item</b>	<b>column 2 service</b>	<b>column 3 description</b>
4	case management	activities associated with the management of the worker's return to work, which may include liaising and negotiating with the parties, developing, coordinating and otherwise managing, and reviewing, the service delivery plan, and arranging for interpreter services
5	retraining criteria assistance	assisting a worker to explore eligibility to participate in a specialised retraining program and to prepare information to show that the retraining criteria are satisfied
6	specialised retraining program assistance	services to assist a worker undertake a specialised retraining program
7	training and education	assisting to develop the worker's skills and knowledge, which may include providing training courses or other aspects of injury management
8	workplace activities	activities involving analysis of work behaviour and analysis and design of job duties
9	placement activities	activities focussed on obtaining a new job for the worker, which may include assistance with the preparation of a resume and preparation for an interview and research and other assistance in finding jobs
10	assessments: (a) functional capacity	activities associated with assessing the worker's functional capacity, which may include preparing a report

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<b>column 1 item</b>	<b>column 2 service</b>	<b>column 3 description</b>
	(b) vocational	activities associated with assessing the worker's vocational and retraining options, which may include preparing a report
	(c) ergonomic	activities associated with assessing how a particular work environment would affect the worker, which may include preparing a report
	(d) job demands	activities associated with identifying and assessing the physical and cognitive demands of a job, which includes preparing a report
	(e) workplace	activities associated with assessing the suitability of various workplace alternatives and other job options, which may include preparing a report
	(f) aids and appliances	activities associated with developing recommendations for aids and appliances to assist the worker, which may include preparing a report
11	travel	travel that is associated with providing vocational rehabilitation
12	medical	discussion with specialists and other medical practitioners about vocational rehabilitation, which may include preparing a report
13	general reports	status reports relating to vocational rehabilitation

**45. Insurer to advise of injury management obligations**

- (1) Subregulation (2) specifies the action that section 155D(1) of the Act requires an insurer to take to make an employer aware of the employer's obligations under section 155B and section 155C(1) and (3) of the Act.

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- (2) Whenever the insurer issues to an employer, or renews, a policy of insurance against the employer's liability to pay compensation under the Act, the insurer has to give the employer a written notice informing the employer of the things described in subregulation (3).
- (3) The notice has to inform the employer that —
  - (a) section 155A(1) of the Act authorises WorkCover WA to issue a code of practice (injury management) and WorkCover WA will, on request, provide a copy of a code it issues;
  - (b) section 155B of the Act requires the employer to establish and implement an injury management system in accordance with the code; and
  - (c) section 155C of the Act requires the employer to establish and implement a return to work program for a worker in accordance with the code in circumstances described in that section.

**46. Particulars for notice under section 157A(1) of Act**

The prescribed particulars for a notice under section 157A(1) of the Act are —

- (a) the full name of the worker concerned;
- (b) the number given by the insurer or self-insurer to the claim by the worker for compensation; and
- (c) whether the notice is required because of knowledge described in section 157A(1)(a) of the Act or knowledge described in section 157A(1)(b) of the Act.

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## **Part 6 — Specialised retraining programs**

### **47. Recording agreement**

- (1) If —
- (a) the worker and the employer agree that the worker's degree of permanent whole of person impairment is at least 10% but less than 15%; and
  - (b) the worker, in writing, requests the Director to record the agreement,

the Director is required to record the agreement in a register kept for the purpose.

- (2) If —
- (a) the worker and the employer agree that the worker satisfies all of the retraining criteria; and
  - (b) the worker, in writing, requests the Director to record the agreement,

the Director is required to record the agreement in a register kept for the purpose.

- (3) A request under subregulation (1)(b) or (2)(b) for the Director to record an agreement has to include —
- (a) the worker's name and any other details necessary to identify the worker;
  - (b) details sufficient to enable the worker to be contacted;
  - (c) the worker's date of birth;
  - (d) the date on which the injury occurred and a description of the injury;

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- (e) if a claim for compensation under the Act for the injury has been made, the date on which the worker's claim was made and sufficient other details to identify the claim (including any claim number that may have been given to the claim);
  - (f) the employer's name and any other details necessary to identify the employer;
  - (g) details sufficient to enable the employer to be contacted; and
  - (h) the name of the insurer, if any.
- (4) The Director's record in the register is to be in the form of —
- (a) if subregulation (1) requires the record, Form 37 in Appendix I;
  - (b) if subregulation (2) requires the record, Form 38 in Appendix I,

and the Director is required to give a copy of the record to each of the worker and the employer.

**48. Extending final day**

- (1) A worker may apply for the Director to extend the final day under section 158B of the Act.
- (2) The application is made by —
  - (a) lodging with the Director a completed application form in the form of Form 39 in Appendix I; and
  - (b) providing to the Director, with the application form, particulars about —
    - (i) the action taken by the worker to obtain from the employer by the final day any



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agreement that the worker was unable to obtain as to —

- (I) the worker's degree of permanent whole of person impairment; or
  - (II) whether the worker satisfies all of the retraining criteria;
- (ii) the worker's having, at least 8 weeks before the final day, requested an approved medical specialist to assess the worker's degree of permanent whole of person impairment; and
  - (iii) the action taken by the worker towards applying under section 158C or 158D of the Act to have a matter in dispute determined by an arbitrator.
- (3) The Director may, within the limits imposed by the Act, extend the final day until a day that the Director considers will give the worker a reasonable opportunity to take the action referred to in section 158B(1) of the Act.

**49. Request for WorkCover to direct payment**

- (1) A person seeking that, under section 158F of the Act, WorkCover WA direct an employer or an insurer to make a payment may, in accordance with this regulation, request WorkCover WA to give the direction.
- (2) The request has to be made to WorkCover WA in writing, giving —
  - (a) the date on which the request is made;
  - (b) the worker's name and any other details necessary to identify the worker;

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- (c) details sufficient to enable the worker to be contacted;
  - (d) reasons justifying the giving of the direction; and
  - (e) the date, if any, by which the payment needs to be made.
- (3) If the payment is to satisfy a debt incurred or to recoup the cost of any payment that has been made, the request has to be accompanied by copies of relevant invoices or other sufficient evidence of the debt or cost, showing details of each item charged and the rate at which it was charged, if applicable.

**Part 7 — Infringement notices and  
modified penalties**

**50. Prescribed offences**

The offences described in Appendix V are the offences for which an infringement notice may be given under section 175G(1) of the Act.

**51. Prescribed modified penalties**

A penalty specified in Appendix V is the modified penalty for the corresponding offence in Appendix V for the purposes of section 175H(2)(b) of the Act.

**52. Prescribed form of infringement notice**

The form of an infringement notice is set out in Appendix I Form 40 for the purposes of section 175H(1) of the Act.

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**53. Prescribed form of withdrawal of notice**

The form of a notice to withdraw an infringement notice is set out in Appendix I Form 41 for the purposes of section 175J(1) of the Act.

”.

**39. Amendments common to various provisions**

- (1) The regulations are amended by deleting “levels of disability” in each place specified in the Table to this subregulation and inserting instead —

“ relevant levels of the degree of disability ”.

**Table**

r. 19JA(3) (in 3 places)      r. 19JB(3) (in 3 places)

- (2) The regulations are amended by inserting before “disability” in each place specified in the Table to this subregulation —

“ the degree of ”.

**Table**

r. 19J(1)(b)      r. 19JB(2)  
r. 19JA(2)

- (3) The regulations are amended by deleting “disability” in each place specified in the Table to this subregulation and inserting instead —

“ injury ”.

**Table**

r. 19N(2)(a), (aa), (b), and (c)

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**40. Appendix I amended**

(1) Appendix I Form 1 is amended as follows:

(a) by deleting “[r.4]” and inserting instead —

“ [r. 4(1)] ”;

(b) by deleting “ELECTION FOR SCHEDULE 2 INJURIES” and inserting instead —

“

**ELECTION FOR SCHEDULE 2 INJURIES UNDER  
PART III DIVISION 2**

”;

(c) by deleting “suffered personal injury” and inserting instead —

“ suffered compensable personal injury ”;

(d) by deleting “Schedule 2” and inserting instead —

“ Part III Division 2 ”;

(e) by deleting “disability” in the 3 places where it occurs and inserting instead —

“ injury ”;

(f) by deleting “(state the part of the body affected)” and inserting instead —

“ (state the part or faculty of the body affected) ”;

(g) by deleting “dispute resolution body” and inserting instead —

“ dispute resolution authority ”;

(h) by deleting “clauses 9, 17, 18 and 19 of Schedule 1” and inserting instead —

“

*the Workers' Compensation and Injury  
Management Act 1981* Schedule 1 clauses 9, 17, 18, 18A  
and 19

”;

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- (i) by deleting “rehabilitation” and inserting instead —  
“ injury management ”.
- (2) After Appendix I Form 1 the following form is inserted —

“

**Form 1A**

[r. 4(2)]

*Workers' Compensation and Injury Management Act 1981*

**ELECTION FOR SCHEDULE 2 INJURIES UNDER PART III  
DIVISION 2A**

(Section 31H)

Surname	Mr/Mrs/Miss/Ms
.....	
Other Names	
.....	
Address	
.....	
.....	
.....Postcode.....	
Phone No.(H).....(W).....(Mb).....	
Occupation .....	
(e.g. boiler maker, underground miner)	
Main tasks or duties performed .....	
(e.g. welding, drilling)	
Employer at date of injury.....	
Address of employer.....	
.....	
.....Postcode.....	

**WORKER'S DECLARATION**

Date of injury/injuries.....

Type of injury/injuries.....

.....

.....

Degree of permanent impairment.....

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\* Before that impairment was suffered I had previously suffered a permanent impairment from a compensable personal injury by accident to that part or faculty of the body resulting in ..... degree of permanent impairment of that part or faculty.

I elect to receive compensation under the *Workers' Compensation and Injury Management Act 1981* Part III Division 2A which I anticipate should be the sum of \$ ..... representing ..... % of item ..... being .....

(state the part or faculty of the body affected)

In making this election and upon an agreement being registered under Part III Division 7 of the Act or an award being made by a dispute resolution authority, I acknowledge that after registration or the making of the award:

- (1) I shall have no further entitlement to compensation under the Act for weekly payments arising out of that injury.
- (2) I shall have no further entitlement in respect of that injury subsequent to the date of this election, to payment of expenses under the *Workers' Compensation and Injury Management Act 1981* Schedule 1 clauses 9, 17, 18, 18A and 19 (that is, in general terms, medical or surgical, dental, physiotherapy or chiropractic advice or treatment, first aid and ambulance expenses, medical requisites, charges for attendance and treatment by way of injury management, charges for hospital treatment and maintenance, cost of artificial aids and travelling expenses).
- (3) I shall have no entitlement to further moneys upon any increase to the prescribed amount for this degree of permanent impairment the subject of this election.

Dated the ..... day of .....20....

.....  
(Signature of worker)

in the presence of:

.....  
.....  
.....  
(Signature and full names and address of witness)

\*Delete if not applicable.

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(3) Appendix I Form 2B is amended as follows:

- (a) by deleting “(Section 84I(1)(b))” and inserting instead —  
“ (section 178(1)(b)) ”;
- (b) by deleting “or disease” in both places where it occurs;
- (c) by deleting “or disability” in both places where it occurs;
- (d) by deleting “similar disability” and inserting instead —  
“ similar injury ”;
- (e) by deleting “I also understand that I can only claim damages at common law for my injury if it is agreed or determined that I am at least 16% disabled and I lodge an election within the time specified in the *Workers' Compensation and Injury Management Act 1981* (which in most cases is 6 months after the commencement of weekly compensation payments).” under the heading “Injured worker’s declaration”;
- (f) above the heading “INFORMATION TO BE PROVIDED TO THE INJURED WORKER” by deleting —  
“  
This organization has a return-to-work / rehabilitation program for injured workers.  Yes  No  
”.

(4) Appendix I Form 2C is amended as follows:

- (a) by deleting “[r.4, 6AA]” and inserting instead —  
“ [regs 4(1), 6AA] ”;
- (b) by deleting “(Section 84I(1)(b))” and inserting instead —  
“ (sections 24B, 178(1)(b)) ”;

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- (c) by deleting "I elect to accept under Schedule 2" and inserting instead —  
" I elect to accept under Part III Division 2 ";
- (d) by deleting "loss of item 6" and inserting instead —  
" loss of Schedule 2 item 6 of the Act ";
- (e) by deleting "at the Conciliation and Review Directorate WorkCover WA" and inserting instead —  
" by the Director, Dispute Resolution Directorate ".

- (5) After Appendix I Form 2C the following form is inserted —

“

**Form 2CA**

[regs 4(2), 6AA]

*Workers' Compensation and Injury Management Act 1981*  
(Sections 31H, 178(1)(b))

**WORKER'S CLAIM AND ELECTION FOR LUMP SUM  
COMPENSATION FOR NOISE INDUCED HEARING LOSS**

**WORKER'S DETAILS — (Worker to complete)**

Surname Mr/Mrs/Miss/Ms ..... Other Names ..... Address ..... ..... Postcode ..... Phone No. (H) ..... (W) ..... Occupation ..... (e.g. boiler maker, underground miner) Main tasks or duties performed ..... ..... (e.g. welding, drilling)	Date of Birth / /	Age	Sex M/F
If you have difficulty understanding English what is your preferred language? .....			
<b>TYPE 32</b> <b>AGENCY 991</b> <b>ICD 250</b> <b>LOCN 130</b> <hr/> office use only <b>ASCO</b> .....			



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**ELECTION FOR SCHEDULE 2 INJURY — item 44**

NIHL FILE No. .... (Office Use Only)
Date of compensable test ...../...../.....
Compensable noise induced hearing loss .....% (of item 44) Entitlement \$ .....
Employer at time of test .....
Address ..... Post Code .....
Previous settlement date ...../...../.....PLH .....

**WORKER'S DECLARATION**

I elect to accept under the *Workers' Compensation and Injury Management Act 1981* Part III Division 2A the sum of \$ ..... representing .....% of loss of Schedule 2 item 44, being loss of hearing. In making this election I declare that I have not received nor am I eligible to receive compensation in respect of the noise induced hearing loss under any law of the Commonwealth, another State or Territory of the Commonwealth, or country other than Australia. In making this election and upon an agreement being registered by the Director, I acknowledge that after registration or making an award:

1. I shall have no further entitlement to compensation under the Act for the percentage loss of hearing which is the subject of this election;
2. I shall have no entitlement to further monies upon any increase to the prescribed amount for the percentage loss of hearing which is the subject of this election.

DATED the ..... day of ..... 20.....

.....  
(Signature of worker)

in the presence of :

.....  
(Signature and full name and address of witness)**EMPLOYER DETAILS — (Employer to complete)**

Trading name of employer (e.g. Browns Welding; E.J. Drilling Service)
---

WorkCover No. ....

Local Gov.

Insurance Co.

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Address of worker's usual workplace or base	Policy No.
Name of Policy Holder _____ Address Suburb/TownPost Code	Claim No: Insurer/self insurer to complete  Insurer/self-insurer's date stamp  _____
Major activity or workplace (e.g. metal fabrication, gold mining, engineering)	office use only <b>ANZSIC</b>

**WORKER'S EMPLOYMENT HISTORY FROM 1 MARCH 1991**

**To be completed by WorkCover WA:**

Name of worker ..... File No. ....

Name of insurer ..... Period of insurance ..... Policy No. ....

Name of insurer ..... Period of insurance ..... Policy No. ....

Name of insurer ..... Period of insurance ..... Policy No. ....

Name of insurer ..... Period of insurance ..... Policy No. ....

Employer at 1 March 1991 .....  
(Name)

Address .....  
.....  
(Postcode)

Telephone Number (.....) .....

Type of work engaged in ..... Prescribed  Yes  No

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Baseline Test	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> / <b>NO BASELINE TEST</b>
(if worker has had a Full Audiological Baseline Test use the date and PLH of the full audiological test)		(please circle if applicable)
Subsequent Test	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
Subsequent Test	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
Subsequent Test	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
Subsequent Test	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
Subsequent Test	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
Subsequent Test	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
Subsequent Test	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
Subsequent Full Audio Test	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
Otorhinolaryngological assessment	Date...../...../.....	NIHLPLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
Number of years with this employer since the baseline test/1 March 1991		<input type="checkbox"/> <input type="checkbox"/>
Termination Date...../...../.....		
Subsequent test at termination	Date...../...../.....	PLH <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/>
NIHL Claims Officer check	Date...../...../.....	Signature .....
NIHL Manager check	Date...../...../.....	Signature .....

(6) Appendix I Form 3 is amended as follows:

(a) by deleting “& 61(1)” and inserting instead —  
“ , 61(1) and 231(1)(b) ”;

(b) in item 4 —

(i) by deleting “injury/disease, etc:” in the first place where it occurs and inserting instead —  
“ injury by accident or approximate date of onset of condition: ”;  
and

(ii) by deleting “injury/disease, etc:” in the second place where it occurs and inserting instead —  
“ injury: ”;

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- (c) in item 5 by deleting “injury/disease, etc.” and inserting instead —  
“ injury ”;
- (d) in item 6 by deleting “pre-disability” in both places where it occurs and inserting instead —  
“ pre-injury ”;
- (e) in item 7 by deleting “ Physiotherapy / Chiropractor  
*No. sessions recommended:* .....  Imaging  
.....” and inserting instead —  
“  
 Approved allied health treatments (specify type and include number of  
sessions recommended) .....  
.....  
 Imaging ..... ”;
- (f) in item 7 —  
(i) by deleting “If the worker is not reviewed within  
14 days the worker may” and inserting instead —  
“  
*If the worker is reviewed within 14 days, the worker cannot* ”;  
and  
(ii) by inserting after “chosen by the employer” —  
“ *that is within one month of the date of this certificate* ”;
- (g) by deleting “08 9388 5555 Country callers:  
1 800 670 055” and inserting instead —  
“ 1300 794 744 ”.
- (7) Appendix I Form 3A is amended by deleting “accident:” and  
inserting instead —  
“ injury by accident or approximate date of onset of condition: ”.

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(8) Appendix I Form 3B is amended as follows:

(a) by deleting "accident:" and inserting instead —

“  
injury by accident or approximate date of onset of condition: ”;

(b) by deleting "Signed on behalf of the insurer:" and inserting instead —

“  
If a reason is that the applicant is not a worker, state the grounds upon which this assertion is made:

.....  
.....  
.....

If a reason is that the applicant did not suffer an injury as defined in section 5(1) of the Act, state the grounds upon which this assertion is made:

.....  
.....  
.....

If a reason is that the injury was not suffered in the course of employment, state the grounds upon which this assertion is made:

.....  
.....  
.....

The provisions of the *Workers' Compensation and Injury Management Act 1981* relied on to dispute liability are

.....  
.....  
.....

Signed on behalf of the insurer.....  
(signature of senior officer responsible for claim)

”;

(c) by deleting "NOTE THAT if you wish you may, under section 84N of the Act, refer a dispute to the Director of Conciliation and Review for conciliation. You may

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obtain advice from WorkCover WA.” and inserting instead —

“

NOTE THAT if you wish you may —

- discuss this notice with the insurer or apply to have the matter heard under any internal dispute resolution process of the insurer;
- under section 181 of the Act apply to the Director Dispute Resolution for resolution of a dispute by an arbitrator;
- seek advice in relation to the dispute from WorkCover WA;
- seek advice or assistance in relation to the dispute from your trade union organisation, a legal practitioner or a registered agent.

”.

(9) Appendix I Form 3C is amended as follows:

(a) in item 3 by deleting “Director of Conciliation and Review” and inserting instead —

“ Director Dispute Resolution ”;

(b) by deleting “accident:” and inserting instead —

“

injury by accident or approximate date of onset of condition:

”.

(c) by inserting before “Signed on behalf of the insurer:” —

“

Where further medical information is required to make a decision about liability, state the nature and substance of the medical information and whether a written authority from the worker is required:

.....  
.....  
.....

Where further information on the worker’s weekly earnings is required to make a decision about liability, state the nature and substance of the information:

.....  
.....  
.....

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Where other particulars are required to help make a decision about liability, specify the particulars required:

.....  
.....  
.....

”;

- (d) by deleting “NOTE THAT if you wish you may, under section 84N of the Act, refer a dispute to the Director of Conciliation and Review for conciliation. You may obtain advice from WorkCover WA.” and inserting instead —

“

NOTE THAT if you wish you may —

- discuss this notice with the insurer or employer or apply to have the matter heard under any internal dispute resolution process of the insurer;
- under section 181 of the Act apply to the Director Dispute Resolution for resolution of a dispute by an arbitrator;
- seek advice in relation to the dispute from WorkCover WA;
- seek advice or assistance in relation to the dispute from your trade union organisation, a legal practitioner or a registered agent.

”.

- (10) Appendix I Form 3D is amended as follows:

- (a) by deleting “accident” and inserting instead —

“

injury by accident or approximate date of onset of condition

”;

- (b) by deleting “Signed on behalf of the uninsured or self-insured employer:” and inserting instead —

“

If a reason is that the applicant is not a worker, state the grounds upon which this assertion is made:

.....  
.....  
.....

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If a reason is that the applicant did not suffer an injury as defined in section 5(1) of the Act, state the grounds upon which this assertion is made:

.....  
.....  
.....

If a reason is that the injury was not suffered in the course of employment, state the grounds upon which this assertion is made:

.....  
.....  
.....

The provisions of the *Workers' Compensation and Injury Management Act 1981* relied on to dispute liability are

.....  
.....  
.....

Signed on behalf of the uninsured or self-insured employer .....  
(signature of senior officer responsible for claim)

”  
.

- (c) by deleting “NOTE THAT if you wish you may, under section 84N of the Act, refer a dispute to the Director of Conciliation and Review for conciliation. You may obtain advice from WorkCover WA.” and inserting instead —

“

NOTE THAT if you wish you may —

- discuss this notice with the employer or, if the employer is self-insured, apply to have the matter heard under any internal dispute resolution process of the employer;
- under section 181 of the Act apply to the Director Dispute Resolution for resolution of a dispute by an arbitrator;
- seek advice in relation to the dispute from WorkCover WA;
- seek advice or assistance in relation to the dispute from your trade union organisation, a legal practitioner or a registered agent.

”  
.



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(11) Appendix I Form 3E is amended as follows:

(a) in item 2 by deleting "Director of Conciliation and Review" and inserting instead —

“ Director Dispute Resolution ”;

(b) by deleting "accident" and inserting instead —

“  
injury by accident or approximate date of onset of condition  
”;

(c) by inserting before "Signed on behalf of the uninsured or self-insured employer:" —

“  
Where further medical information is required to make a decision about liability, state the nature and substance of the medical information and whether a written authority from the worker is required:  
.....  
.....  
.....  
  
Where further information on the worker's weekly earning is required to make a decision about liability, state the nature and substance of the information:  
.....  
.....  
.....  
  
Where other particulars are required to help make a decision about liability, specify the particulars required:  
.....  
.....  
.....  
”;

(d) by deleting "NOTE THAT if you wish you may, under section 84N of the Act, refer a dispute to the Director of Conciliation and Review for conciliation. You may

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obtain advice from WorkCover WA.” and inserting  
instead —

“

NOTE THAT if you wish you may —

- under section 181 of the Act apply to the Director Dispute Resolution for resolution of a dispute by an arbitrator;
- seek advice in relation to the dispute from WorkCover WA;
- seek advice or assistance in relation to the dispute from your trade union organisation, a legal practitioner or a registered agent.

”

(12) Appendix I Form 4 is amended as follows:

(a) by deleting “disability” in both places where it occurs and inserting instead —

“ injury ”;

(b) by deleting “08 9388 5555 Country callers: 1 800 670 055” and inserting instead —

“ 1300 794 744 ”.

(13) Appendix I Form 5 is amended as follows:

(a) in paragraph (1) by inserting before “report(s)” —

“ medical certificates or ”;

(b) by deleting “to the Director of Conciliation and Review for an order” and inserting instead —

“ for an order of an arbitrator ”;

(c) by deleting “disability” and inserting instead —

“ injury ”.

(14) Appendix I Form 6 is amended by deleting “a disability” and inserting instead —

“ an injury ”.

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(15) After Appendix I Form 6 the following form is inserted —

“

**Form 7**

[r. 10A]

*Workers' Compensation and Injury Management Act 1981*

(Sections 231(2)(b) and 241(2)(b))

**MEDICAL CERTIFICATE — INTERIM PAYMENT OF  
STATUTORY ENTITLEMENTS OR MINOR CLAIM**

**1. Worker's details**

First name(s): .....

Surname: .....

Address:

.....  
.....

Telephone: ..... Date of birth: ...../...../.....

Occupation: .....

Date of injury: .....

Description of injury: .....

.....  
.....

**2. Employer's details**

Name and address of worker's employer:

.....  
.....  
.....

**3. Statutory expenses claimed by worker**

.....  
.....  
.....

**4. Medical practitioner's details**

Name: .....

Registration No: .....

Address: .....

.....

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It is my opinion that the statutory expenses set out in item 3 are expenses that have been incurred by the worker for treatment or services required in relation to the injury suffered by the worker.

Signature of medical practitioner: .....

Date: ...../...../.....

”.

(16) Appendix I Form 13 is deleted.

(17) Appendix I Form 14 is amended as follows:

(a) by deleting “(Schedule 5, clause 3)” and inserting instead —

“ (Schedule 5 clause 3) ”;

(b) by deleting “clauses 9, 17, 18 and 19 of Schedule 1” and inserting instead —

“

*the Workers' Compensation and Injury Management Act 1981* Schedule 1 clauses 9, 17, 18, 18A and 19

”.

(c) by deleting “clauses 1, 2, 3, 4, 5 and 17(2) of Schedule 1” and inserting instead —

“

*the Workers' Compensation and Injury Management Act 1981* Schedule 1 clauses 1, 1A, 1B, 1C, 2, 3, 4, 5 and 17(2)

”.

(18) Appendix I Form 15 is amended as follows:

(a) by deleting “(Schedule 5, clause 3)” and inserting instead —

“ (Schedule 5 clause 3) ”;

(b) by deleting “disability” and inserting instead —

“ injury ”;

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- (c) by deleting “clause 7 of Schedule 5” and inserting instead —
- “
- the Workers' Compensation and Injury Management Act 1981* Schedule 5 clause 7
- ”;
- (d) by deleting “clauses 1, 2, 3, 4, 5 and 17(2) of Schedule 1” and inserting instead —
- “
- the Workers' Compensation and Injury Management Act 1981* Schedule 1 clauses 1, 1A, 1B, 1C, 2, 3, 4, 5 and 17(2)
- ”.
- (19) Appendix I Form 15A is amended by deleting “of Conciliation and Review” and inserting instead —
- “ Dispute Resolution ”.
- (20) Appendix I Form 15B is amended by deleting “of Conciliation and Review” and inserting instead —
- “ Dispute Resolution ”.
- (21) Appendix I Form 15C is amended as follows:
- (a) by deleting “Director, Conciliation and Review Directorate,” and inserting instead —
- “ Director Dispute Resolution ”;
- (b) in item 1 by deleting “disability (injury)” and inserting instead —
- “ injury ”;
- (c) in item 4 by deleting “Clauses 9, 10, 17, 18 and 19 of Schedule 1” and inserting instead —
- “
- the Workers' Compensation and Injury Management Act 1981* Schedule 1 clauses 9, 10, 17, 18, 18A and 19
- ”.

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- (d) in item 5(b) by deleting “Clauses 9, 10, 17, 18 and 19 of Schedule 1” and inserting instead —

“

*the Workers' Compensation and Injury Management  
Act 1981* Schedule 1 clauses 9, 10, 17, 18, 18A and 19

”;

- (e) in item 5(c) by deleting “Schedule 2” and inserting instead —

“ Part III Division 2 ”;

- (f) by inserting after item 5(c) —

“

\*(ca) the worker having elected under section 31C of the Act by a form of election dated ....., compensation payable under the Act Schedule 2 Division 2A, in respect of an impairment mentioned in Schedule 2 item ....., representing ..... degree of permanent impairment from the injury.

Totalling: \$

”;

- (g) in item 5(d) and (e) by deleting “Schedule 5 Clause 2” and inserting instead —

“

*the Workers' Compensation and Injury Management  
Act 1981* Schedule 5 clause 2

”;

- (h) in item 6 by deleting “Clauses 9, 10, 17, 18 and 19 of Schedule 1” and inserting instead —

“

*the Workers' Compensation and Injury Management  
Act 1981* Schedule 1 clauses 9, 10, 17, 18, 18A and 19

”;

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- (i) in item 7 by deleting "Clauses 9, 10, 17, 18 and 19 of Schedule 1" and inserting instead —

“

*the Workers' Compensation and Injury Management  
Act 1981* Schedule 1 clauses 9, 10, 17, 18, 18A and 19

”.

- (22) Appendix I Form 15D is amended as follows:

- (a) in paragraphs (1), (2) and (3) by deleting "disability" and inserting instead —

“ injury ”;

- (b) in paragraph (3) —

- (i) by deleting "clauses 9, 17, 18 or 19 of the Schedule 1 to the Act." and inserting instead —

“

*the Workers' Compensation and Injury Management  
Act 1981* Schedule 1 clauses 9, 17, 18, 18A or 19.

”; and

- (ii) by deleting "rehabilitation" and inserting instead —

“ injury management ”;

- (c) in paragraph (4) by deleting "have to compensation for a permanent disability, arising out of the disability referred to in the agreement under Schedule 2 of the Act." and inserting instead —

“

have under the Act Part III to compensation for a permanent impairment from a compensable personal injury by accident referred to in the agreement.

”;

- (d) by deleting paragraph (5) and inserting instead —

“

- (5) The worker forfeits any chance of a court awarding common law damages against the employer in respect of the injury referred to in the agreement (see section 93E(13) and section 93K(1) of the Act).

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That is, in general terms, the worker forfeits any chance to recover civil damages from the employer.

”.

- (23) Appendix I Form 15E is amended by deleting “IN THE CONCILIATION & REVIEW DIRECTORATE OF WESTERN AUSTRALIA”.
- (24) Appendix I Form 15F is amended as follows:
- (a) by deleting “IN THE CONCILIATION & REVIEW DIRECTORATE OF WESTERN AUSTRALIA”;
  - (b) by deleting “Order of the Compensation Magistrate’s Court” and inserting instead —  
“ order of the Commissioner ”;
  - (c) by deleting “Director, Conciliation and Review” and inserting instead —  
“ Director Dispute Resolution ”.
- (25) Appendix I is amended by inserting after Form 15F the following form —

“

**Form 15G**

[r. 12AA]

*Workers' Compensation and Injury Management Act 1981*

**NOTICE OF INTENTION TO DISMISS WORKER TO WHICH  
SECTION 84AB OF THE ACT REFERS**

TO: <i>(insert name of worker or “WorkCover WA”, as the case requires)</i>
<b><u>TAKE NOTICE</u></b>
The employer described below intends to dismiss the worker described below with effect from the following date.
Date dismissal effective:
<i>[Note that the date on which the dismissal is effective cannot be before a period of 28 days has passed after this notice is given to the worker and WorkCover WA (see section 84AB of the Workers' Compensation and Injury Management Act 1981)].</i>



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**Worker's details**

Surname		Other names
<input type="text"/>		<input type="text"/>
Date of birth	Sex	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address		
<input type="text"/>		Postcode
<input type="text"/>		<input type="text"/>
Telephone no.	WorkCover claim number (WCCN)	
<input type="text"/>	<input type="text"/>	
<i>(if not known, insurer can provide WCCN)</i>		

**Employer's details**

Name	
<input type="text"/>	
Address	
<input type="text"/>	
Postcode	
<input type="text"/>	<input type="text"/>
Telephone no.	WorkCover number (WCN)
<input type="text"/>	<input type="text"/>
Contact person	
<input type="text"/>	
Title	Telephone no.
<input type="text"/>	<input type="text"/>

**Insurer's details**

Name	
<input type="text"/>	
Address	
<input type="text"/>	
Postcode	
<input type="text"/>	<input type="text"/>
Policy no.	<input type="text"/>
Contact person	Telephone no.
<input type="text"/>	<input type="text"/>

**Injury details**

Description of injury	
<input type="text"/>	
Date injury occurred	Claim number given by insurer (if known)
<input type="text"/>	<input type="text"/>

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**Notice given to**

<b>worker</b>		Date	/ /
	_____ (signed on behalf of employer)		
<b>WorkCover WA</b>		Date	/ /
	_____ (signed on behalf of employer)		

- (26) Appendix I Form 17 is amended by deleting “OFFICERS” and inserting instead —  
“ **OFFICES** ”.
- (27) Appendix I Form 18 is amended as follows:
- (a) by deleting “(regulation 19D(3))” in the second place where it occurs and inserting instead —  
“ (regulation 19D(2)) ”;
  - (b) by deleting “PENALTY: \$200.”.
- (28) Appendix I Form 20 is deleted.
- (29) Appendix I Form 22 is amended as follows:
- (a) by deleting “Disability details” and inserting instead —  
“ **Injury details** ”;
  - (b) by deleting “Description of disability” and inserting instead —  
“ Description of injury ”;
  - (c) by deleting “Date disability occurred” and inserting instead —  
“ Date injury occurred ”;
  - (d) by deleting “Relevant level of disability” and inserting instead —  
“ Degree of disability ”;

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- 
- (e) by deleting “**only one** relevant level of disability.” and inserting instead —  
“ **only one** of the following ”;
- (f) by deleting “Director, Conciliation and Review Directorate” and inserting instead —  
“ Director Dispute Resolution ”.
- (30) Appendix I Form 22A is amended as follows:
- (a) by deleting “Disability details” and inserting instead —  
“ **Injury details** ”;
- (b) by deleting “Description of disability” and inserting instead —  
“ Description of injury ”;
- (c) by deleting “same disability and only that disability” and inserting instead —  
“ **same injury and only that injury** ”;
- (d) by deleting “Date disability occurred” and inserting instead —  
“ Date injury occurred ”;
- (e) by deleting “Relevant level of disability” and inserting instead —  
“ Degree of disability ”;
- (f) by deleting “**only one** relevant level of disability” and inserting instead —  
“ **only one** of the following ”;
- (g) by deleting “level of disability must relate to the same level of disability” and inserting instead —  
“ **level must be the same level** ”;
- (h) by deleting “Director, Conciliation and Review Directorate” and inserting instead —  
“ Director Dispute Resolution ”.

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- (31) Appendix I Form 22B is amended as follows:
- (a) by deleting "Disability details" and inserting instead —  
" **Injury details** ";
  - (b) by deleting "Description of disability" and inserting  
instead —  
" Description of injury ";
  - (c) by deleting "same disability and only that disability" and  
inserting instead —  
" **same injury and only that injury** ";
  - (d) by deleting "Date disability occurred" and inserting  
instead —  
" Date injury occurred ";
  - (e) by deleting "Relevant level of disability" and inserting  
instead —  
" Degree of disability ";
  - (f) by deleting "**only one** relevant level of disability" and  
inserting instead —  
" **only one** of the following ";
  - (g) by deleting "level of disability must relate to the same  
level of disability" and inserting instead —  
" **level must be the same level** ";
  - (h) by deleting "Director, Conciliation and Review  
Directorate" and inserting instead —  
" Director Dispute Resolution ".
- (32) Appendix I Form 23 is amended as follows:
- (a) by deleting "Disability details" and inserting instead —  
" **Injury details** ";
  - (b) by deleting "Description of disability" and inserting  
instead —  
" Description of injury ";

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- (c) by deleting "Date disability occurred" and inserting instead —  
" Date injury occurred ";
  - (d) by deleting "Relevant level of disability" and inserting instead —  
" Degree of disability ";
  - (e) by deleting "Director, Conciliation and Review Directorate" and inserting instead —  
" Director Dispute Resolution ".
- (33) Appendix I Forms 23A and 23B are amended as follows:
- (a) by deleting "Disability details" and inserting instead —  
" **Injury details** ";
  - (b) by deleting "Description of disability" and inserting instead —  
" Description of injury ";
  - (c) by deleting "Date disability occurred" and inserting instead —  
" Date injury occurred ";
  - (d) by deleting "Relevant level of disability" and inserting instead —  
" Degree of disability ";
  - (e) by deleting "Director, Conciliation and Review Directorate" and inserting instead —  
" Director Dispute Resolution ";
  - (f) in the section beginning "Director's opinion", in the note about section 93EC —
    - (i) in paragraph (a), by deleting "disability" and inserting instead —  
" *an injury* "; and

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- (ii) in paragraph (b), by deleting “disability” in both places where it occurs and inserting instead —  
“ *injury* ”.
- (34) Appendix I Form 24 is amended as follows:
- (a) by deleting “Disability details” and inserting instead —  
“ **Injury details** ”;
  - (b) by deleting “Description of Disability” and inserting instead —  
“ Description of injury ”;
  - (c) by deleting “Date disability occurred” and inserting instead —  
“ Date injury occurred ”.
- (35) Appendix I Form 25 is amended as follows:
- (a) by deleting “Disability details” and inserting instead —  
“ **Injury details** ”;
  - (b) by deleting “Description of disability” and inserting instead —  
“ Description of injury ”;
  - (c) by deleting “Date disability occurred” and inserting instead —  
“ Date injury occurred ”.
- (36) Appendix I Form 26 is amended as follows:
- (a) by deleting “Disability details” and inserting instead —  
“ **Injury details** ”;
  - (b) by deleting “Description of disability” and inserting instead —  
“ Description of injury ”;
  - (c) by deleting “Date disability occurred” and inserting instead —  
“ Date injury occurred ”;

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- (d) by deleting "Director, Conciliation and Review Directorate" and inserting instead —  
" Director Dispute Resolution ".
- (37) Appendix I Forms 27 and 28 are amended as follows:
- (a) by deleting "Disability details" and inserting instead —  
" **Injury details** ";
- (b) by deleting "Description of disability" and inserting instead —  
" Description of injury ";
- (c) by deleting "Date disability occurred" and inserting instead —  
" Date injury occurred ";
- (d) in the section beginning "Extension of time sought", by deleting "disability" in each place where it occurs and inserting instead —  
" injury ";
- (e) by deleting "Director, Conciliation and Review Directorate" and inserting instead —  
" Director Dispute Resolution ".
- (38) After Appendix I Form 28 the following forms are inserted —

“

**Form 29**

[r. 16A(1)]

*Workers' Compensation and Injury Management Act 1981*

(Schedule 1 clause 1C(1), (5))

**NOTICE OF DEPENDANT'S ENTITLEMENT TO ELECT**

**Record No.**

--

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---

**TO:**

- 1. Dependant's details

Surname	Other names
Address	
Postcode	

As a dependant referred to in the *Workers' Compensation and Injury Management Act 1981* Schedule 1 clause 1B(1)(a) or (c) you are entitled to elect to receive a child's allowance under that Act Schedule 1 clause 1A or an apportionment of the notional residual entitlement of

.....  
(name of deceased worker)

You may, within 30 days of receiving this notification, elect to receive the amount of the apportionment or a child's allowance. A form for making the election is attached.

If an election is not made within 30 days of receiving this notification, and registered by the Director, you will receive a child's allowance.

The Director may refuse to register the election if not satisfied that you have been independently advised of the financial consequences of the election.

Dated this ..... day of ..... 20.....

.....  
Director Dispute Resolution Directorate



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**Form 30**

[r. 16A(2)]

*Workers' Compensation and Injury Management Act 1981*  
(Schedule 1 clause 1C(4)(a), (5))

**NOTICE OF PROVISIONAL APPORTIONMENT**

**Record No.**

**TO:**

1. Dependant's details

Surname

Other names

Address

Postcode

As a dependant of .....  
(name of deceased worker)

The notional residual entitlement in relation to .....  
(name of deceased worker)

has been apportioned between the worker's dependants under the *Workers' Compensation and Injury Management Act 1981* Schedule 1 clause 1C(4)(a).

The amount provisionally apportioned to you is \$ .....

You may, within 30 days of receiving this notification, elect to receive the amount of the provisional apportionment or a child's allowance. A form for making the election is attached.

If an election is not made within 30 days of receiving this notification, and registered by the Director, you will receive a child's allowance.

The Director may refuse to register the election if not satisfied that you have been independently advised of the financial consequences of the election.

Dated this ..... day of ..... 20.....

.....  
Arbitrator

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**Form 31**

[r. 17AD(2)]

*Workers' Compensation and Injury Management Act 1981*

**APPLICATION TO EXTEND FINAL DAY  
[for extension under Schedule 1 clause 18B]**

**Worker's details**

Surname		Other names
<input type="text"/>		<input type="text"/>
Date of birth	Sex	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address		
<input type="text"/>		Postcode
<input type="text"/>		<input type="text"/>
Telephone no.	WorkCover claim number (WCCN)	
<input type="text"/>	<input type="text"/>	
<i>(if not known, insurer can provide WCCN)</i>		

**Employer's details**

Name	
<input type="text"/>	
Address	
<input type="text"/>	
Postcode	
<input type="text"/>	<input type="text"/>
Telephone no.	WorkCover number (WCN)
<input type="text"/>	<input type="text"/>
Contact person	
<input type="text"/>	
Title	Telephone no.
<input type="text"/>	<input type="text"/>

**Insurer's details**

Name	
<input type="text"/>	
Address	
<input type="text"/>	
Postcode	
Date the claim for compensation by way of weekly payments was made on employer	Claim number given by insurer (if known)
<input type="text"/>	<input type="text"/>
Contact person	Telephone no.
<input type="text"/>	<input type="text"/>

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**Final day**

1. Did a dispute resolution authority, acting under section 58(1) or (2) of the Act, determine the question of liability to make the weekly payments claimed?		
Yes	<input type="checkbox"/>	If so, answer question 2.
No	<input type="checkbox"/>	If not, skip question 2.
2. Was the question determined more than 3 months after the day on which compensation by way of weekly payments was claimed?		
Yes	<input type="checkbox"/>	If so, on which date? <input type="text"/>
No	<input type="checkbox"/>	
3. Was the worker first notified that liability is accepted in respect of the weekly payments claimed more than 3 months after the day on which compensation by way of weekly payments was claimed?		
Yes	<input type="checkbox"/>	If so, on which date? <input type="text"/>
No	<input type="checkbox"/>	
4. Has the final day been extended under the <i>Workers' Compensation and Injury Management Act 1981</i> Schedule 1 clause 18B?		
Yes	<input type="checkbox"/>	If so, to which date? <input type="text"/>
No	<input type="checkbox"/>	

**Extension sought**

1. Specify the reasons for seeking the extension.		
<input type="text"/>		
2. Has the worker, in accordance with the regulations and before the final day, requested an approved medical specialist to assess the worker's degree of permanent whole of person impairment?		
Yes	<input type="checkbox"/>	If so, on which date? <input type="text"/>
No	<input type="checkbox"/>	
Attach a copy of any such request.		
3. Specify date until which extension sought.		<input type="text"/>
<b>Signature of worker</b>	_____	Date <input type="text"/>

**How to lodge this form**

1. This form should be lodged with: Director, Dispute Resolution Directorate WorkCover WA Perth, WA
2. <b>WHEN LODGING THIS FORM ALSO PROVIDE ANYTHING ELSE THAT REGULATION 17AD REQUIRES YOU TO PROVIDE.</b>

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**Extension given or refused**

The final day	
is extended to	<input type="text" value=" / /"/>
is not extended.	<input type="checkbox"/>
<b>Signature of Director</b> _____	Date <input type="text" value=" / /"/>

**Copies of extension sent to**

<b>worker</b>	_____	Date	<input type="text" value=" / /"/>
	(signature of person sending copy)		
<b>employer</b>	_____	Date	<input type="text" value=" / /"/>
	(signature of person sending copy)		

**Note**

Section 93E(14) of the *Workers' Compensation and Injury Management Act 1981* provides that if a further additional sum has been allowed to a worker under Schedule 1 clause 18A(1b) of that Act in relation to an injury that is compensable under the Act, damages are not to be awarded in respect of the injury.

**Form 32**

[r. 20]

*Workers' Compensation and Injury Management Act 1981*

**RECORD OF AGREEMENT ABOUT DEGREE OF PERMANENT WHOLE OF  
PERSON IMPAIRMENT  
[recorded under section 93L(2) of the Act]**

**Record No.**

**Worker's details**

Surname	<input type="text"/>		Other names	<input type="text"/>
Date of birth	<input type="text"/>	Sex	<input type="text"/>	Occupation
Address				<input type="text"/>
<input type="text"/>				Postcode
<input type="text"/>				<input type="text"/>
Telephone no.	<input type="text"/>		WorkCover claim number (WCCN)	<input type="text"/>
<input type="text"/>				<input type="text"/>

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**Employer's details**

Name

Address

Postcode

Telephone no.                      WorkCover number (WCN)  
                     

Contact person

Title                                      Telephone no.  
                                     

**Insurer's details**

Name

Address

Postcode

Contact person                      Telephone no.  
                                     

**Injury details**

Description of injury

Date injury occurred

Date the claim, if any, for compensation by way of weekly payments was made on employer

Claim number given by insurer (if known)

**Agreement**

It has been agreed that the worker's degree of permanent whole of person impairment is —

(a) at least 15%		
<i>do not complete if "Yes" in paragraph (b)</i>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
(b) at least 25%		
<i>do not complete if "No" in paragraph (a)</i>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>

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**Recorded**

<b>Signature of Director</b> _____	Date	<input type="text" value="/ /"/>
--	------	----------------------------------

**Copies of record sent**

<b>To worker</b> _____	Date	<input type="text" value="/ /"/>
(signature of person sending copy)		
<b>To employer</b> _____	Date	<input type="text" value="/ /"/>
(signature of person sending copy)		

**Form 33**

[r. 21]

*Workers' Compensation and Injury Management Act 1981*

**ASSESSMENT OF DEGREE OF PERMANENT WHOLE OF PERSON  
IMPAIRMENT  
[recorded under section 93L(2) of the Act]**

**Record No.**

**Worker's details**

Surname		Other names
<input type="text"/>		<input type="text"/>
Date of birth	Sex	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address		Postcode
<input type="text"/>		<input type="text"/>
Telephone no.	WorkCover claim number (WCCN)	
<input type="text"/>	<input type="text"/>	

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**Employer's details**

Name

Address

Postcode

Telephone no.

WorkCover number (WCN)

Contact person

Title

Telephone no.

**Insurer's details**

Name

Address

Postcode

Contact person

Telephone no.

**Injury details**

Description of injury

Date injury occurred

Date the claim, if any, for compensation by way  
of weekly payments was made on employer

Claim number given by insurer (if known)

**Assessment**

Name of approved medical specialist assessing

Registration  
number

Degree of permanent whole of person impairment

%

Copy provided of —

- |     |   |                          |
|-----|---|--------------------------|
| (a) | certificate given to the worker under section 146H(1)(b) of the Act   | <input type="checkbox"/> |
| (b) | certificate referred to in section 93N(1) of the Act on the basis of which the special evaluation was requested ( <i>only required if the assessment involves a special evaluation as defined in section 146C(4) of the Act</i> ) | <input type="checkbox"/> |

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**Recorded**

<b>Signature of Director</b> _____	Date	<input type="text" value="/ /"/>
--	------	----------------------------------

**Copies of record sent to**

<b>worker</b> _____	Date	<input type="text" value="/ /"/>
(signature of person sending copy)		
<b>employer</b> _____	Date	<input type="text" value="/ /"/>
(signature of person sending copy)		

**Form 34**

[r. 22]

*Workers' Compensation and Injury Management Act 1981*  
**ELECTION TO RETAIN RIGHT TO SEEK DAMAGES**  
[made under section 93K(4) of the Act]

**Registration No.**

**Worker's details**

Surname		Other names
<input type="text"/>		<input type="text"/>
Date of birth	Sex	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address		Postcode
<input type="text"/>		<input type="text"/>
Telephone no.	WorkCover claim number (WCCN)	
<input type="text"/>	<input type="text"/>	

*(if not known, insurer can provide WCCN)*



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**Employer's details**

Name	
<input type="text"/>	
Address	
<input type="text"/>	
Postcode	
Telephone no.	WorkCover number (WCN)
<input type="text"/>	<input type="text"/>
Contact person	
<input type="text"/>	
Title	Telephone no.
<input type="text"/>	<input type="text"/>

**Insurer's details**

Name	
<input type="text"/>	
Address	
<input type="text"/>	
Postcode	
Contact person	Telephone no.
<input type="text"/>	<input type="text"/>

**Injury details**

Description of injury	
<input type="text"/>	
Date injury occurred	
<input type="text"/>	
Date the claim, if any, for compensation by way of weekly payments was made on employer	
<input type="text"/>	Claim number given by insurer (if known)
<input type="text"/>	<input type="text"/>
Degree of permanent whole of person impairment	
%	
<input type="text"/>	
The Director has, under section 93L of the Act, recorded an agreement or assessment as to the worker's degree of permanent whole of person impairment, and the Record Number is:	
Record Number	<input type="text"/>

**Workers' Compensation and Injury Management Amendment  
Regulations (No. 2) 2005**

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**Termination day**

1. Did a dispute resolution authority, acting under section 58(1) or (2) of the Act, determine the question of liability to make the weekly payments claimed?		
Yes	<input type="checkbox"/>	If so, answer question 2.
No	<input type="checkbox"/>	If not, skip question 2.
2. Was the question determined more than 3 months after the day on which compensation by way of weekly payments was claimed?		
Yes	<input type="checkbox"/>	If so, on which date? <input type="text"/>
No	<input type="checkbox"/>	
3. Was the worker first notified that liability is accepted in respect of the weekly payments claimed more than 3 months after the day on which compensation by way of weekly payments was claimed?		
Yes	<input type="checkbox"/>	If so, on which date? <input type="text"/>
No	<input type="checkbox"/>	
4. Has the termination day been extended under section 93M(4) of the Act?		
Yes	<input type="checkbox"/>	If so, to which date? <input type="text"/>
No	<input type="checkbox"/>	

**WARNING**

An election cannot be withdrawn after the Director registers it and a subsequent election cannot be made in respect of the same injury or injuries (see section 93L(6) of the Act).  
Registration of an election may affect your entitlement to statutory compensation under the *Workers' Compensation and Injury Management Act 1981*.

**You should seek appropriate independent advice before lodging this form.**

**Advice of consequences of election**

I have been properly advised of the consequences of making this election.

**Signature of worker** \_\_\_\_\_ Date

**Registration of this election**

This election form was lodged under regulation 22 and registered on the day shown below.

**Signature of Director** \_\_\_\_\_ Date

**Copies of election form sent to**

**worker** \_\_\_\_\_ Date   
(signature of person sending copy)

**employer** \_\_\_\_\_ Date   
(signature of person sending copy)

**Workers' Compensation and Injury Management Amendment  
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**Form 35**

[r. 23]

*Workers' Compensation and Injury Management Act 1981*

**APPLICATION TO EXTEND TERMINATION DAY  
[for extension under section 93M(4) of the Act]**

**Worker's details**

Surname		Other names
<input type="text"/>		<input type="text"/>
Date of birth	Sex	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address		
<input type="text"/>		Postcode
<input type="text"/>		WorkCover claim number (WCCN)
<input type="text"/>		<i>(if not known, insurer can provide WCCN)</i>

**Employer's details**

Name	
<input type="text"/>	
Address	
<input type="text"/>	
Postcode	
Telephone no.	WorkCover number (WCN)
<input type="text"/>	<input type="text"/>
Contact person	
<input type="text"/>	
Title	Telephone no.
<input type="text"/>	<input type="text"/>

**Insurer's details**

Name	
<input type="text"/>	
Address	
<input type="text"/>	
Postcode	
Contact person	Telephone no.
<input type="text"/>	<input type="text"/>

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**Injury details**

Description of injury

--

Date injury occurred

--

Date the claim for compensation by way of  
weekly payments was made on employer

--

Claim number given by insurer (if known)

--

**Termination day**

1. Did a dispute resolution authority, acting under section 58(1) or (2) of the Act, determine the question of liability to make the weekly payments claimed?

- |     |                          |                           |
|-----|--------------------------|---------------------------|
| Yes | <input type="checkbox"/> | If so, answer question 2. |
| No  | <input type="checkbox"/> | If not, skip question 2.  |

2. Was the question determined more than 3 months after the day on which compensation by way of weekly payments was claimed?

- |     |                          |                       |   |
|-----|--------------------------|-----------------------|---|
| Yes | <input type="checkbox"/> | If so, on which date? | <input style="width: 80px;" type="text"/> |
| No  | <input type="checkbox"/> |                       |   |

3. Was the worker first notified that liability is accepted in respect of the weekly payments claimed more than 3 months after the day on which compensation by way of weekly payments was claimed?

- |     |                          |                       |   |
|-----|--------------------------|-----------------------|---|
| Yes | <input type="checkbox"/> | If so, on which date? | <input style="width: 80px;" type="text"/> |
| No  | <input type="checkbox"/> |                       |   |

4. Has the termination day been extended under section 93M(4) of the Act?

- |     |                          |                       |   |
|-----|--------------------------|-----------------------|---|
| Yes | <input type="checkbox"/> | If so, to which date? | <input style="width: 80px;" type="text"/> |
| No  | <input type="checkbox"/> |                       |   |

**Extension sought**

1. This application is for the termination day to be extended in the circumstances described in —

- |                          |                              |   |
|--------------------------|------------------------------|---|
| <input type="checkbox"/> | section 93M(4)(a) of Act     | (worker's condition has not stabilised)   |
| <input type="checkbox"/> | section 93M(4)(b) of Act     | (employer failed to comply with section 93O of Act)   |
| <input type="checkbox"/> | section 93M(4)(c) of Act     | (more time required to give documents to worker)  |
| <input type="checkbox"/> | section 93M(4)(d)(i) of Act  | (assessment requested but documents not available within specified time — not special evaluation) |
| <input type="checkbox"/> | section 93M(4)(d)(ii) of Act | (assessment requested but documents not available within specified time — special evaluation)     |

2. Specify date until which extension sought.

--

**Signature  
of worker**

Date

/ /
-----

**Workers' Compensation and Injury Management Amendment  
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**How to lodge this form**

1. This form should be lodged with:  
 Director Dispute Resolution  
 WorkCover WA  
 Perth, WA
2. **WHEN LODGING THIS FORM ALSO PROVIDE ANYTHING ELSE THAT  
 REGULATION 23 REQUIRES YOU TO PROVIDE.**

**Extension given or refused**

The termination day

is extended to

is not extended.

**Signature of Director** \_\_\_\_\_ Date

**Copies of extension sent to**

**worker** \_\_\_\_\_ Date   
 (signature of person sending copy)

**employer** \_\_\_\_\_ Date   
 (signature of person sending copy)

Form 36

[r. 25]

*Workers' Compensation and Injury Management Act 1981*

**NOTICE TO WORKER ABOUT TERMINATION DAY FOR ELECTION  
 [under section 93O of the Act]**

Date on which notice given (*insert date*)(*Insert name of worker*)(*Insert address of worker*)WorkCover claim number (WCCN) (*insert number*)Date of injury (*insert date*)Date when claim for compensation made on employer: (*insert date*)

**Workers' Compensation and Injury Management Amendment  
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**IMPORTANT INFORMATION**

Section 93O of the *Workers' Compensation and Injury Management Act 1981* entitles you to notice of certain things that may affect the damages you could recover in court.

If your cause of action arises on or after 14 November 2005, a court will not be able to award damages for your injury if you do not elect under section 93K of the Act to retain the right to seek damages and have the election registered by WorkCover's Director Dispute Resolution.

On the other hand, registering your election may affect your entitlement to statutory compensation. You should seek advice on whether or not to make an election.

One rule about electing is that, if you claim compensation by way of weekly payments because of your injury, you cannot elect after the termination day (there are exceptions to this rule for AIDS and specified industrial diseases).

Your termination day for this injury is ..... (specify date), which is about 6 months away.

You may be able to apply for the termination day to be extended but an extension can only be given in limited circumstances (see section 93M(4) and (8) of the Act).

Also, before you can elect, an agreement (between you and your employer) or assessment (by an approved medical specialist you select — see the register kept by the Director) about the level of your degree of permanent whole of person impairment has to be made and recorded by the Director. The level agreed or assessed has to be 15% or more.

If you request an assessment, the approved medical specialist can reasonably be expected to take 6 weeks from when you make the request to give you the documents about the outcome of the assessment. In some cases 7 weeks is relevant (see section 93M(4)(d)(ii) of the Act). You need to allow for this time.

This notice is a standard document and is not meant to be relied on instead of obtaining appropriate advice.

**Employer's details**

Name

Address

Postcode

Telephone no.

WorkCover number (WCN)

Contact person

Title

Telephone no.

**Workers' Compensation and Injury Management Amendment  
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**Form 37**

[r. 47(4)(a)]

*Workers' Compensation and Injury Management Act 1981*

**RECORD OF AGREEMENT ABOUT DEGREE OF PERMANENT WHOLE OF  
PERSON IMPAIRMENT**  
[recorded under section 158B(1)(a)(i) of the Act]

**Record No.**

**Worker's details**

Surname

Other names

Date of birth

Sex

Occupation

Address

Postcode

Telephone no.

WorkCover claim number (WCCN)

**Employer's details**

Name

Address

Postcode

Telephone no.

WorkCover number (WCN)

Contact person

Title

Telephone no.

**Workers' Compensation and Injury Management Amendment  
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**r. 40**

**Insurer's details**

Name

Address

Postcode

Contact person

Telephone no.

**Injury details**

Description of injury

Date injury occurred

Date the claim, if any, for compensation by  
way of weekly payments was made on  
employer

Claim number given by insurer (if known)

**Agreement**

It has been agreed that the worker's degree of permanent whole of person impairment is —

- |     |   |     |                          |
|-----|---|-----|--------------------------|
| (a) | at least 10%                                    |     |                          |
|     | <i>do not complete if "No" in paragraph (b)</i> | Yes | <input type="checkbox"/> |
|     |   | No  | <input type="checkbox"/> |
| (b) | less than 15%                                   |     |                          |
|     | <i>do not complete if "No" in paragraph (a)</i> | Yes | <input type="checkbox"/> |
|     |   | No  | <input type="checkbox"/> |

**Recorded**

**Signature  
of Director**

\_\_\_\_\_

Date

**Copies of record sent**

**To worker**

\_\_\_\_\_

(signature of person sending copy)

Date

**To**

**employer**

\_\_\_\_\_

(signature of person sending copy)

Date



**Workers' Compensation and Injury Management Amendment  
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**r. 40**

**Form 38**

[r. 47(4)(b)]

*Workers' Compensation and Injury Management Act 1981*  
**RECORD OF AGREEMENT ABOUT RETRAINING CRITERIA**  
[recorded under section 158B(1)(b)(i) of the Act]

**Record No.**

**Worker's details**

Surname

Other names

Date of birth

Sex

Occupation

Address

Postcode

Telephone no.

WorkCover claim number (WCCN)

**Employer's details**

Name

Address

Postcode

Telephone no.

WorkCover number (WCN)

Contact person

Title

Telephone no.

**Workers' Compensation and Injury Management Amendment  
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**Insurer's details**

Name

Address

Postcode

Contact person

Telephone no.

**Injury details**

Description of injury

Date injury occurred

Date the claim, if any, for compensation by  
way of weekly payments was made on  
employer

Claim number given by insurer (if known)

**Agreement**

It has been agreed that the worker satisfies all of the retraining criteria defined in section 158(1) of the Act.

**Recorded**

**Signature  
of Director** \_\_\_\_\_

Date

**Copies of record sent**

**To worker** \_\_\_\_\_

(signature of person sending copy)

Date

**To  
employer** \_\_\_\_\_

(signature of person sending copy)

Date

**Workers' Compensation and Injury Management Amendment  
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**r. 40**

**Form 39**

[r. 48]

*Workers' Compensation and Injury Management Act 1981*

**APPLICATION TO EXTEND FINAL DAY  
[for extension under section 158B(4) of the Act]**

**Worker's details**

Surname		Other names
<input type="text"/>		<input type="text"/>
Date of birth	Sex	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address		
<input type="text"/>		
		Postcode
<input type="text"/>		<input type="text"/>
Telephone no.	WorkCover claim number (WCCN)	
<input type="text"/>	<input type="text"/>	
<i>(if not known, insurer can provide WCCN)</i>		

**Employer's details**

Name	
<input type="text"/>	
Address	
<input type="text"/>	
Postcode	
Telephone no.	WorkCover number (WCN)
<input type="text"/>	<input type="text"/>
Contact person	
<input type="text"/>	
Title	Telephone no.
<input type="text"/>	<input type="text"/>

**Workers' Compensation and Injury Management Amendment  
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**Insurer's details**

Name

Address

Postcode

Contact person

Telephone no.

**Injury details**

Description of injury

Date injury occurred

Date the claim for compensation by way of  
weekly payments was made on employer

Claim number given by insurer (if known)

**Final day under section 158B of the Act**

- |   |                          |                           |                      |
|---|--------------------------|---------------------------|----------------------|
| 1. Did a dispute resolution authority, acting under section 58(1) or (2) of the Act, determine the question of liability to make the weekly payments claimed?                                       |                          |                           |                      |
| Yes   | <input type="checkbox"/> | If so, answer question 2. |                      |
| No  | <input type="checkbox"/> | If not, skip question 2.  |                      |
| 2. Was the question determined more than 3 months after the day on which compensation by way of weekly payments was claimed?  |                          |                           |                      |
| Yes   | <input type="checkbox"/> | If so, on which date?     | <input type="text"/> |
| No  | <input type="checkbox"/> |                           |                      |
| 3. Was the worker first notified that liability is accepted in respect of the weekly payments claimed more than 3 months after the day on which compensation by way of weekly payments was claimed? |                          |                           |                      |
| Yes   | <input type="checkbox"/> | If so, on which date?     | <input type="text"/> |
| No  | <input type="checkbox"/> |                           |                      |
| 4. Has the final day been extended under section 158B(4) of the Act?  |                          |                           |                      |
| Yes   | <input type="checkbox"/> | If so, to which date?     | <input type="text"/> |
| No  | <input type="checkbox"/> |                           |                      |

**Workers' Compensation and Injury Management Amendment  
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**Extension sought**

1. This application is for the final day to be extended under section 158B(4) of the Act.		
2. Specify date until which extension sought.		[ / / ]
<b>Signature of worker</b>	_____	Date [ / / ]

**How to lodge this form**

1. This form should be lodged with: Director Dispute Resolution WorkCover WA Perth, WA
2. <b>WHEN LODGING THIS FORM ALSO PROVIDE ANYTHING ELSE THAT REGULATION 48 REQUIRES YOU TO PROVIDE.</b>

**Extension given or refused**

The final day		
is extended to	[ / / ]	
is not extended.	<input type="checkbox"/>	
<b>Signature of Director</b>	_____	Date [ / / ]

**Copies of extension sent to**

<b>worker</b>	_____	Date [ / / ]
	(signature of person sending copy)	
<b>employer</b>	_____	Date [ / / ]
	(signature of person sending copy)	

**Workers' Compensation and Injury Management Amendment Regulations (No. 2) 2005**

**r. 40**

**Form 40**

[r. 52]

*Workers' Compensation and Injury Management Act 1981*

**Infringement notice**

Serial No. ....

Date ...../...../.....

To: <sup>(1)</sup> .....

of: <sup>(2)</sup> .....

It is alleged that on ...../...../..... at or about <sup>(3)</sup> .....

at <sup>(4)</sup> .....

the alleged offender named above committed the following offence —

.....

.....

.....

contrary to section <sup>(5)</sup> ..... of the *Workers' compensation and Injury Management Act 1981*.

The modified penalty for this offence is \$ .....

If the alleged offender wishes to be prosecuted for the alleged offence in a court, the modified penalty should not be paid and no reply to this notice is required. The alleged offender may become liable to pay a fine and costs if court proceedings are taken against the alleged offender.

If the alleged offender does **not** wish to be prosecuted for the alleged offence in a court, the amount of the modified penalty may be paid within the period of 28 days after the giving of this notice. Payment may be made by either —

- posting this form and a cheque or money order, made payable to **WorkCover Western Australia**, for the amount of the modified penalty to the Chief Executive Officer, WorkCover WA, 2 Bedbrook Place, Shenton Park WA 6008; or
- delivering this form, and paying the amount of the modified penalty to an authorised officer\*, at WorkCover WA, 2 Bedbrook Place, Shenton Park WA 6008.

Name and title of authorised officer giving the notice:

.....

**Workers' Compensation and Injury Management Amendment  
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<p>Signature: .....</p> <p>*The following are authorised officers for the purposes of receiving payment of modified penalties:</p> <p>.....</p> <p>.....</p>
--

- (1) Name of alleged offender
- (2) Address of alleged offender
- (3) Time when offence allegedly committed
- (4) Place where offence allegedly committed
- (5) Section designation

**Form 41**

[r. 53]

*Workers' Compensation and Injury Management Act 1981*

**Withdrawal of infringement notice**

Serial No. ....

Date ...../...../.....

<p>To: <sup>(1)</sup> .....</p> <p>of: <sup>(2)</sup> .....</p> <p>Infringement notice No. .... dated ...../...../..... for the alleged offence of .....</p> <p>.....</p> <p>contrary to section ..... of the <i>Workers' Compensation and Injury Management Act 1981</i> has been withdrawn.</p> <p>The modified penalty of \$ .....</p> <ul style="list-style-type: none"> <li>* has been paid and a refund is enclosed.</li> <li>* has not been paid and should not be paid.</li> <li>* Delete as appropriate</li> </ul> <p>Name and title of authorised officer giving this notice: .....</p> <p>Signature .....</p>
--

- (1) Name of alleged offender given the infringement notice
- (2) Address of alleged offender

”

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**41. Appendices IV and V inserted**

After Appendix III the following Appendices are inserted —

“

**Appendix IV — Registered agents code of conduct**

[r. 26]

**1. Duties of registered agent**

It is the duty of a registered agent —

- (a) to comply with the provisions of the Act, any subsidiary legislation made under the Act and the conditions of registration;
- (b) not to engage in conduct which is illegal or dishonest or which may otherwise bring registered agents into disrepute or which is prejudicial to the administration of the workers' compensation and injury management system; and
- (c) to be competent as a registered agent.

**2. Integrity and diligence**

- (1) A registered agent must not attempt to further a client's case by unethical or dishonest means.
- (2) A registered agent must not knowingly assist or seek to induce another person to breach this code of conduct.
- (3) A registered agent must treat clients fairly and in good faith, giving due regard to a client's position of dependence upon the agent, and the high degree of trust which a client is entitled to place on the agent.
- (4) A registered agent must always be completely frank and open with a client and with all others so far as the interests of the client permit and must at all times give a client a candid opinion on any matter in which the agent acts for that client.



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- (5) A registered agent must take such action consistent with the agent's retainer as is necessary and reasonably available to protect and advance a client's interests.
- (6) A registered agent must at all times use his or her best endeavours to complete work on behalf of a client as soon as is reasonably possible, and if a registered agent accepts instructions and it is, or becomes, apparent to the agent that the work cannot be done within a reasonable time, the agent must so inform the client.
- (7) A registered agent must not take unnecessary steps or do work in such a manner as to increase proper costs to the client.
- (8) If it is in the best interests of the client of a registered agent to do so, the agent must endeavour to reach a solution by settlement rather than commence or continue proceedings.

**3. Confidentiality**

- (1) A registered agent must strive to establish and maintain a relationship of trust and confidence with clients.
- (2) A registered agent must impress upon a client that the agent cannot adequately serve the client without knowing everything that might be relevant to the client's interests and that the client should not withhold information that the client might think is embarrassing or harmful to the client's interests.
- (3) A registered agent must not, without the client's consent, directly or indirectly reveal a client's confidence, or use the confidence in any way detrimental to the interests of that client, or lend or reveal the contents of the confidence in any brief or instructions to any person except to the extent —
  - (a) required by law, rules of court or court order; or
  - (b) necessary for replying to or defending any charge or complaint of criminal conduct or misconduct contrary to this code brought against the agent.

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- (4) A registered agent's duties under this clause towards a particular client continue after the agent has ceased to act for the client.

**4. Conflict of interest**

- (1) A registered agent must at all times make a full and frank disclosure to a client of any conflict of interest that the registered agent has or may have in any matter concerning that client.
- (2) A registered agent must not act or continue to act on behalf of a client if to do so would or may give rise to a conflict of interest adverse to the client unless the client has been fully informed of the nature and implications of the conflict and consents to the registered agent acting or continuing to act on behalf of the client.
- (3) A registered agent must not give advice or guidance to a person where the registered agent knows that the interests of that person are in conflict or likely to be in conflict with the interests of the agent's client, other than advice to secure the services of another representative.

**5. Proceedings**

- (1) Subject to this code of conduct, a registered agent must provide advice and conduct each case and matter in the manner the agent considers most advantageous to the agent's client.
- (2) A registered agent must not knowingly deceive or mislead the Commissioner, an officer of the DRD or any other officer of WorkCover WA, a client or any other person involved in a matter in respect of which the agent has been retained.
- (3) A registered agent must at all times —
- (a) act with due courtesy to the Commissioner, officers of the DRD and other officers of WorkCover WA, legal practitioners, other registered agents, their own clients and other parties to the dispute;

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- (b) use his or her best endeavours to avoid unnecessary expense and waste of a dispute resolution authority's time;
  - (c) when so requested, inform the Director of the probable length of a proceeding;
  - (d) inform the Director of the possibility of a settlement provided the agent can do so without revealing the existence or content of "without prejudice" communications; and
  - (e) subject to this code of conduct, inform the Director of any development that affects the information already before a dispute resolution authority.
- (4) In cross examination which goes to a matter in issue, a registered agent may put questions suggesting fraud, misconduct or the commission of an offence provided that the agent is satisfied that the matters suggested are part of the case of the agent's client and the agent has no reason to believe that they are only put forward for the purpose of impugning the witness's character.
- (5) Questions which affect the credibility of a witness by attacking the witness's character, but which are otherwise not relevant to the actual inquiry, must not be put in cross examination unless there are reasonable grounds to support the imputation conveyed by such questions.

**6. Advertising**

A registered agent must not engage in promotional conduct or advertising about the agent's skills, experience, fees or results in a manner which is misleading or deceptive, or likely to mislead or deceive.

**7. Withdrawal**

- (1) A registered agent must recognise that a client is entitled to change representative at any time without giving a reason and must take all reasonable steps to facilitate such a change should a client so request.

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- (2) If a client engages another registered agent in a matter and that agent is of the opinion that the conduct of a preceding representative in the matter warrants the making of a complaint, the agent must so advise the client.
- (3) A registered agent may withdraw from representing a client —
  - (a) at any time and for any reason if withdrawal will cause no significant harm to the client's interests and the client is fully informed of the consequences of withdrawal and voluntarily assents to it;
  - (b) if the registered agent reasonably believes that continued engagement in the case or matter would be likely to have a seriously adverse effect upon the agent's health;
  - (c) if the client, without lawful excuse, refuses or fails to comply with a written agreement regarding fees or expenses;
  - (d) if the client made material misrepresentations about the facts of the case or matter to the agent;
  - (e) if the agent has an interest in any case or matter which the agent is concerned may be adverse to that of the client;
  - (f) if such action is necessary to avoid the agent breaching this code of conduct; or
  - (g) if any other good cause exists.
- (4) If a registered agent withdraws from representing a client the agent must take reasonable care to avoid foreseeable harm to the client including —
  - (a) giving due notice to the client;
  - (b) allowing reasonable time for the substitution of a new agent;
  - (c) cooperating with the new agent; and

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- (d) promptly turning over all papers and property and paying to the client any moneys to which the client is entitled.
- (5) If a registered agent withdraws from representing a client the agent must give written notice of the withdrawal to the Director and other parties to the proceeding.

**8. Fees**

- (1) A registered agent must before commencing to act for a client inform the client in writing of the maximum costs the registered agent can charge and the basis for calculation of the costs of the agent.
- (2) Upon receiving the advice the client must sign an acknowledgment of the information.
- (3) During the course of a retainer, a registered agent must promptly advise the client of any circumstances likely to have a substantial effect on the amount, or basis of calculation, of such costs or any disbursements.
- (4) A registered agent must issue appropriate receipts for services provided to a client.
- (5) A registered agent must not charge more than is reasonable for his or her services, having regard to the complexity of the matter, the time and skill involved, and any costs determination published under section 273 of the Act.

**9. Records**

- (1) A registered agent must keep adequate records of —
  - (a) moneys received on behalf of clients;
  - (b) disbursement made on behalf of clients; and
  - (c) time spent on cases.
- (2) Records kept under this clause must be available for inspection by WorkCover WA.

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**10. Trust moneys**

A registered agent must not hold for or on behalf of a client or other party any moneys in trust without the written authorisation of that person.

**11. Costs**

- (1) A registered agent must not, in the course of his or her business give, or agree to give, an allowance in the nature of an introduction fee or spotter's fee to any person for introducing business to him or her and must not receive any similar allowance from any person for introducing or recommending clients to that person.
- (2) A registered agent must, as soon as practicable after being requested by a client, render a bill of costs covering all work performed for the client to which the request relates.

**Appendix V — Prescribed offences and  
modified penalties**

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Item	Section of Act	Description of offence	Modified penalty
1.	57A(3)	Failing to provide notice .....	\$200.00
2.	57A(4)	Failing to cause notification to be accompanied by means for conveying information in machine-readable form ....	\$200.00
3.	57B(2)	Failing to make first weekly payment or give notice .....	\$200.00
4.	57B(2b)	Failing to notify WorkCover WA of having declined to indemnify employer ....	\$200.00
5.	57B(3)	Failing to cause notification to be accompanied by means for conveying information in machine-readable form ....	\$200.00
6.	57C(2)	Failing to notify WorkCover WA after weekly payments commenced .....	\$200.00

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Item	Section of Act	Description of offence	Modified penalty
7.	57C(4)	Failing to notify WorkCover WA of discontinuance of weekly payments .....	\$200.00
8.	61(2a)(a)	Failing to give notice of intention to discontinue or reduce weekly payments ....	\$400.00
9.	61(2a)(b)	Failing to give notice that complies with section 61(2) of the Act.....	\$400.00
10.	70(2)	Failing to furnish worker with copy of report .....	\$400.00
11.	75(2)	Giving notice contrary to section 75(1) of the Act .....	\$200.00
12.	103A(2)	Furnishing WorkCover WA with false information or return .....	\$400.00
13.	109(3)	Failing to pay contribution or instalment ...	\$400.00
14.	109(4b)	Failing to send particulars to WorkCover WA .....	\$400.00
15.	109(6)	Failing to send return or statutory declaration to WorkCover WA .....	\$400.00
16.	152	Charging a premium rate loading of more than 75% without permission .....	\$200.00
17.	155D(3)	Failing to take reasonable action to discharge and comply with employer's obligations .....	\$400.00
18.	160(3)	Failing to insure employer for full amount of liability to pay compensation .....	\$400.00
19.	160(3a)	Failing to notify employer of cancellation of insurance .....	\$200.00
20.	160(5)	Declining to indemnify employer .....	\$400.00
21.	162(1a)	Issuing or renewing policy in respect of certain industrial diseases .....	\$200.00
22.	165(5)	Failing to give securities to State as directed by Minister .....	\$200.00

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<b>Item</b>	<b>Section of Act</b>	<b>Description of offence</b>	<b>Modified penalty</b>
23.	171(1)	Failing to transmit to WorkCover WA statements and means for conveying information in machine-readable form ....	\$200.00
24.	180(5)	Failing to comply with request to provide copy of relevant document .....	\$200.00

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By Command of the Governor,

M. C. WAUCHOPE, Clerk of the Executive Council.



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