Procedural Guideline
Vocational Rehabilitation Services

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1. Overview

Procedural Guidelines outline DVA’s requirements and supporting guidance for Rehabilitation Providers (providers) and their Rehabilitation Consultants (consultants) working with DVA clients. Consultants are expected to follow this guideline when providing vocational rehabilitation services for DVA clients, including the setting, monitoring and reviewing of vocational goals and activities. Providers are responsible for ensuring DVA requirements are followed by their consultants.

The aim of vocational rehabilitation is to return a client to the workforce to at least the level of their pre-injury employment.

The client should return to the workforce in a job that is suitable and sustainable and will not worsen their health. Suitable employment is not necessarily the best or only job to which a client aspires.

There is compelling evidence about the health benefits of good work. Good work is defined as work that is safe, enables the person to be productive and engaged and provides economic stability and personal interaction.

Vocational rehabilitation services provided to DVA clients may include:

- assessments to determine work capacity, such as vocational assessments (refer to the Vocational Assessment Provider Procedural Guideline), functional capacity evaluations (FCE), ergonomic assessments and work environment assessments
- vocational counselling
- work experience, including arranging work trials
- vocational education and training (more details can be found in the Education and Training Provider Procedural Guideline) Note, this guideline is expected to be released in December 2019.
- job seeking and self-employment assistance.

DVA’s whole-of-person approach to rehabilitation recognises that clients may need medical management and psychosocial support in order to remove barriers to their vocational rehabilitation goals. This means in addition to vocational rehabilitation goals, a return to work plan will usually also include psychosocial and medical management goals and activities.

A client whose rehabilitation has any element of vocational rehabilitation, even if it is not the initial focus of the plan, should be placed on a return to work Rehabilitation Plan (plan). The plan must have a vocational goal specified.

2. Vocational rehabilitation requirements

The following table provides summary information about various tools/processes that may be included as part of managing a client’s vocational rehabilitation. More information about all of these topics will be provided further in this document, or in other documents where specified.
<table>
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<th>Topic</th>
<th>Requirement</th>
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| **Return to work Rehabilitation Plans** | Consultant must use the following principles when determining whether a return to work or non-return to work plan is best for their client:  
  • return to work plans should be established where it is reasonable to expect that the client will be able to commence vocational rehabilitation activities and is motivated to work towards a return to work goal/s within 12 months from an approved plan,  
  • medical clearance for work is not needed at the time the plan commences, but there should be a reasonable prospect of medical clearance to work being obtained within two years, and  
  • return to work plans must always include a vocational goal. Activities do not need to commence immediately, but must be proposed in the plan (for example, the first activity might be a vocational assessment to be completed in three months’ time).  
Consultants must submit the draft plan to the delegate for their approval.  
Consultants must ensure that strong communication is maintained to manage client expectation about vocational goals, identify a mutually agreeable vocational goal, and support the client throughout their plan and in achieving their vocational goals. |
| **Vocational Counselling**  | **Vocational counselling must:**  
  • be outlined and approved as an activity in the client’s plan, and not exceed three sessions in total.  
  • be performed prior to, or part of, a vocational assessment to ensure that maximum results can be obtained from the vocational assessment  
  • be performed by a person whose professional code of practice includes vocational counselling.  
  • not be used as a substitute for a psychological treatment. |
| **Functional Capacity Evaluation (FCE)** |  
  • Consultants must obtain approval from the delegate to undertake a FCE prior to it being undertaken.  
  • A Functional Capacity Evaluation (FCE) must:  
    o Be an objective assessment of the client’s physical and cognitive abilities and limitations with regards to work performance or general functioning.  
    o Comprise of a series of standardised tests completed by a suitably qualified and experienced professional.  
    o Be used where the client’s doctor cannot provide clear guidance on the client’s return to work capacity, or where the client reports difficulty with tasks that is inconsistent with the client’s reported medical clearance.  
    o Only be undertaken following clearance from the client’s doctor.  
    o Provide strategies to the client on how to avoid injury or further aggravation of their conditions at home or in the workplace. |
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<td><strong>Work environment assessment</strong></td>
<td>Work environment assessments must:</td>
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<td>* consider the suitability of work duties and gain an understanding of the nature of the client's work</td>
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<td></td>
<td>* assess the physical, psychosocial, cognitive and communication demands of the job, specific to the client.</td>
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<td>* identify the risk factors of a client’s worksite within the context of their capabilities, limitations and condition/s to minimise injury, aggravation of existing conditions and maximise productivity.</td>
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<td></td>
<td>* Include an <em>Ergonomic Assessment</em> of the client’s worksite</td>
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<td>Work environment assessment should assess and report on:</td>
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<td>* Workplace modification – adjustments to the work station or equipment, or the provision of aids, appliances or other materials to allow the client to work in a safe, effective manner.</td>
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<td>* Job redesign – whether the tasks performed as part of the job need to be modified, and how, to allow the client to safely undertake the job.</td>
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<td>* the current obligations, responsibilities and actions undertaken by the employer to provide a safe and inclusive work environment.</td>
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<td>* the client’s capabilities, limitations and condition (functions diagnostic within the context of the work environment).</td>
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<td>* the economic viability and ability to implement proposed modifications, changes and alterations to the work environment for the employer.</td>
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<td><strong>Ergonomic assessment</strong></td>
<td>Consultants must undertake an ergonomic assessment in conjunction with a work environment assessment to assess and report on:</td>
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<td>* the physical organisation and fit out of the work environment.</td>
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<td>* the client’s medical condition, illness and limitations within the context of the existing work environment.</td>
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<td>* the need for aids and appliances to support the client.</td>
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<td>* the nature and economic viability of any proposed minor modifications, changes and alterations to the work environment.</td>
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<td>In some instances an ergonomic assessment can be undertaken in the home environment, such as the home office or a space in the home in which a psychosocial activity is undertaken.</td>
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<td><strong>Education and Training</strong></td>
<td>Please refer to the Education and Training PPG for information on when and how education and training should be used under the DVA Rehabilitation program. <em>Due for release December 2019</em></td>
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<td><strong>Work Trials</strong></td>
<td>Consultants are responsible for organising work trials on behalf of the client.</td>
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<td>Work Trials must be fully documented using the Work Trial Agreement prior to the commencement of the trial. The agreement must be uploaded using the Provider Upload Page (PUP).</td>
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### Topic

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Consultants must ensure that the client completes and submits a *Work Trial Attendance Diary*. This diary is to be signed by the client and their work supervisor and submitted to DVA using the PUP.

Before, throughout and upon conclusion of a Work Trial, consultants must:

- ensure the work trial is appropriate and viable
- inform the client of their work trial and any requirements
- assess if any job redesign, aids, appliances or alterations are needed to support the client
- actively monitor the client while undertaking the work trial, and
- support the client to negotiate ongoing paid employment post-trial, if the opportunity exists.

### Employer Incentive Scheme (EIS)

Consultants, following approval from the delegate, can offer the EIS to the employer as an incentive, where the client is being considered for permanent (full or part time) paid employment.

- The incentive is a percentage of the employed DVA client’s gross wages
- The consultant must discuss offering the EIS with the delegate prior to offering the incentive to the employer.
- The EIS is approved by the delegate and is managed, if approved, between the delegate and the employer. The EIS can be offered/discussed to an employer and then not approved where the eligibility criteria are not met.
- EIS is not available for DVA clients under the VVRS.

### Self-Employment Assistance

Self-employment assistance must:

- facilitate and monitor the client’s engagement with advisory services and specific mentoring and training assistance in relation to preparing a business plan and establishing a business
- be offered following analysis of a formal business plan provided by the client and medical evidence of the client’s ability to do the work
- only be offered where the client is highly motivated to pursue self-employment and understands the inherent risks of self-employment and that they are borne by the client.

### 3. Return to work Rehabilitation Plans

A client should be placed on a return to work plan where it is anticipated they will have capacity and medical clearance to participate in vocational rehabilitation activities, and be working towards the goal of finding suitable work/employment, within the next 12 months. Conversely, non-return to work plans are used where medical evidence indicates there is no capacity in the foreseeable future for the client to participate in vocational activities or employment. A non-return to work plan focuses solely on psychosocial and medical management goals and activities.
Guidance on determining whether a client should be placed on a return to work or non-return to work plan can be found in the Rehabilitation Plan Development Provider Procedural Guideline. As a general rule, a client will be placed on a return to work plan where:

- it is reasonable to expect that the client will be able to commence vocational rehabilitation activities to work towards a return to work goal within the next 12 months,
- the client is motivated to work towards vocational goals,
- there is a reasonable prospect of medical clearance to work being obtained within two years. Medical clearance for work is not needed at the time of creating a return to work plan.

Psychosocial and medical management activities can be recorded under a return to work plan, where they have been identified as assisting the client to overcome barriers that may be impacting their ability to return to work, and therefore enable the client to reach their vocational goal.

It is common with return to work plans that they have an initial focus on medical management and psychosocial activities (e.g. for the first six months). However, a return to work plan must always include a vocational goal which would typically be focussed on finding suitable employment. In such cases, the first activity under the vocational goal may be to undertake vocational counselling or vocational assessment once the client has moved past their initial focus on medical management or psychosocial rehabilitation. Further guidance on vocational assessments can be found in the Vocational Assessments Provider Procedural Guideline.

In the context of DVA rehabilitation, a successful vocational outcome does not necessarily mean the client returns to paid employment. It may also include an outcome where the client enters into a successful work trial placement, or is considered to be 'work ready', which in some cases may involve unpaid (volunteer) work.

3.1. Suitable employment

The intent of vocational rehabilitation provided through DVA is to assist clients to secure suitable employment as legislatively defined in the Veterans’ Voluntary Rehabilitation Services Instrument (VVRS), Section 4 of the Safety Rehabilitation and Compensation Act (Defence Related Claims) 1998 (DRCA) and Section 5 of the Military Rehabilitation and Compensation Act 2004 (MRCA).

Suitable employment is paid work that takes into account the client's individual circumstances including:

- experience and transferrable skills from employment they undertook prior to their injury or disease
- their general employment background including any training and other skills
- suitability to undertake vocational retraining
- the labour market in the location where the client resides
- restrictions or limitations imposed by their medical conditions, including not just those which have been accepted as service related, and
- any other barriers to the client’s capability to undertake employment in their chosen field, such as their ability to pass a security clearance, or work with vulnerable people.
Consultants must ensure the above points have been considered and evaluated as part of a comprehensive vocational assessment. Refer to the Vocational Assessment Provider Procedural Guideline for more information.

3.2. Managing return to work rehabilitation plans

Good communication between the consultant and client is an essential element of effective rehabilitation. This is especially important where a client who has been out of work for some time is working towards a return to work goal as they may be particularly vulnerable to negative messages about their ability to return to employment. For this reason, it is important that the focus remains on what the client can do, rather than what they cannot do.

Consultants must establish and maintain realistic expectations with the client about suitable vocational outcomes. Clients need to be aware that the role of the rehabilitation program is to return them to suitable and sustainable employment, not prepare them for their ‘dream’ job.

Consultants must take a whole-of-person approach to help a client return to sustainable employment as there may be psychosocial or medical barriers to the client returning to employment that need to be overcome. This is particularly important where a client has been out of the workforce for some time as work absence tends to perpetuate itself, with the barriers to a client returning to work increasing the longer that they are disconnected from the workforce. This means in most cases, a return to work plan will also include psychosocial and medical management rehabilitation goals and activities. These activities can assist the client with overcoming barriers to return to work by helping them to develop a sense of hope for the future and to learn to self-manage their conditions as effectively as possible.

3.2.1. Managing concerns with vocational rehabilitation progress

If the client is not achieving progress towards their vocational goal it is the responsibility of the consultant to investigate why this may be the case. In addition to discussion with the client, investigation would involve talking to the client’s treating doctor, or organising further assessments (e.g. Functional capacity evaluation (FCE)) to identify if there are any medical or psychological barriers to their not achieving their vocational goal. In some instances the consultant will need to obtain an independent medical review of the client where the information for the treating doctors differs to other independent assessments, like the FCE.

3.3. Interaction between incapacity payments and rehabilitation

DVA clients who have medical clearance to participate in rehabilitation must be on a rehabilitation plan to access incapacity payments. If a client is considered not medically fit to participate in rehabilitation they can receive incapacity payments without participating in rehabilitation.

Incapacity payments are for economic loss due to the inability (or reduced ability) to work because of an injury or disease that has been accepted as service related under the MRCA or DRCA. Incapacity is calculated as follows:

- DVA clients are entitled to 100% of the difference between their normal (ADF) earnings and actual earnings for the first 45 weeks of incapacity.
- After the first 45 weeks, they will be paid the difference between a percentage of normal (ADF) earnings and actual earnings. The percentage of normal earnings used to calculate their incapacity will vary between 75% and 100%, depending on the number of hours they work (or...
participate in a work trial) each week or if they are studying full-time as part of an approved rehabilitation plan. This is known as the stepdown and has the effect of reducing the amount the client will receive if they are not working or studying full-time.

- Under a pilot running from 1 November 2018 to 30 June 2022, clients are exempt from the stepdown where they are undertaking full-time study as part of their plan. The exemption will cease once the full-time study element of their plan is complete, or on 30 June 2022 where full-time study element continues beyond that date. Please see the Education and Training PPG for further information on the types of study that are included under this pilot.

If a client ceases rehabilitation prior to the completion of their plan, or their rehabilitation plan is suspended or closed due to non-compliance, their incapacity payments may be ceased. Consultants must ensure the client is aware of the link between incapacity payments and rehabilitation. It is also important that the consultant works closely with the delegate regarding issues of client non-compliance. If a client’s plan is being closed due to non-compliance, the delegate (rather than the consultant) will discuss this with the client, and inform them that the plan will be closed, and the consequences of this occurring.

4. Tool and activities utilised to achieve vocational goals

Each client will have different vocational goals based on their medical clearance, accepted conditions, skills and abilities, adjustment to the change in their career and their motivations towards employment.

Different activities and tools will be needed to achieve each client’s goals. Some of the tools that are utilised to achieve vocational goals, and how they are assist with vocational goals, are listed below.

4.1. Vocational counselling

Vocational counselling has a different focus to a vocational assessment. Vocational counselling is used to assist a DVA client to:

- change and transition to alternate employment,
- adjust to employment outside of the military,
- adjust to their new circumstances/disability,
- identify alternative vocational options that take into account the client’s skills and interests, and accepted conditions.

Methods employed during vocational counselling may include relationship building, a motivational interview, active listening and identifying ways to address barriers to the return to work process.

Vocational counselling is often beneficial before a vocational assessment as it helps the client to think about and clarify what kind of job they want to obtain. In some instances a client may not need a vocational assessment as the counselling identifies activities that can be undertaken to obtain the clients identified job.

Vocational counselling:

- must be outlined and approved as an activity in the client’s plan, and must not exceed three sessions in total.
- Can be undertaken prior to a client having medical clearance to work.
must be performed by a DVA registered consultant whose professional scope of practice includes vocational counselling (i.e. a qualified psychologist or rehabilitation counsellor), or a third party, engaged by the consultant, who has the appropriate professional qualifications.

Consultants must ensure that vocational counselling is not used as a substitute to psychological treatment, and clients are referred back to their treating practitioner if there is an apparent need for psychological treatment.

Please see the Vocational Assessment PPG for more information on when a vocational assessment should be used, and what information a vocational assessment must provide.

4.2. Functional capacity evaluation (FCE)

One of the most important aspects of a vocational rehabilitation is determining what a person is capable of in relation to returning to the workforce, particularly in relation to their physical capacity for sitting, standing, lifting and other movements and tasks. A functional capacity evaluation (FCE) is the process that is used to objectively determine the client’s physical capabilities and limitations with regards to work performance and general functioning.

An FCE comprises a series of standardised tests completed by a suitably qualified and experienced professional. It can be tailored to consider specific tasks that are essential to an identified vocation.

Consultants must ensure that the referral to the professional undertaking the FCE is very clear in relation to the purpose of the FCE so that the most relevant information can be obtained.

Consultants must also obtain medical clearance before undertaking a FCE with a client.

A Functional Capacity Evaluation (FCE) is used:

- as an objective measurement of a client’s ability to perform the physical demands of specified work tasks in the vocational rehabilitation setting.
- where a client’s treating Doctor is unable to provide clear and specific return to work medical guidelines.
- where a client reports difficulties with work tasks that are inconsistent with the current return to work medical guidance.
- to develop a work readiness and/or return to work plan for a client.
- to educate the client about how to maximise their functioning and avoid further injury or aggravation of an injury.

A Functional Capacity Evaluation should report on the client’s:

- physical and cognitive functional abilities and limitations, with regard to employment and/or general functioning,
- their capacity for work
- the details of the assessment processes utilised and the findings
- recommendations for strategies moving forward that will assist the client in achieving their vocational or functioning goals.
4.3. **Work environment assessment**

A Work Environment Assessment is undertaken to gain a better understanding of the client’s work tasks and work environment and evaluate the suitability of the work duties in relation to the client’s conditions. The assessment is a process of risk identification and risk reduction based on objective, scientific analysis of the client’s worksite.

The assessment:

- assesses the physical, psychosocial, cognitive and communication demands of the job, specific to the client.
- identifies the risk factors of a client’s worksite within the context of their capabilities, limitations and condition/s to minimise injury, aggravation of existing conditions and maximise productivity.
- the client’s capabilities, limitations and condition (functions diagnostic within the context of the work environment)
- includes an **Ergonomic Assessment** of the client’s worksite (this must be approved as an activity on the plan)
- examines whether workplace modification is required. Workplace modification is adjustments to the work station or equipment, or the provision of aids, appliances or other materials to allow the client to work in a safe, effective manner
- assesses the need for job redesign. Job redesign is looking at the way the work is done and assessing the conditions of the client to determine whether and how the tasks performed as part of the job need to be modified to allow the client to safely undertake the job
- looks at the current obligations, responsibilities and actions undertaken by the employer to provide a safe and inclusive work environment
- considers the economic viability and ability to implement proposed modifications, changes and alterations to the work environment for the employer

Consultants must report on the findings above in the assessment report as well as provide information and education for the client about safe work practices and advice on work restrictions.

The Work Environment Assessment, in conjunction with the functional capacity evaluation, will inform the development of an individualised, work-conditioning program where this is required by the client.

4.4. **Ergonomic assessment**

An ergonomic assessment is the assessment of the physical organisation and fit out of a work or other environment in the context of the client’s medical condition, illness and limitations.

The ergonomic assessment entails a brief on-site review of a workstation / work zone and provision of education, adjustments and advice to specifically target the source of the client’s reported injury to ensure the client can maintain suitable and sustainable employment.

It can be done as part of a work environment assessment or in the home environment. It must be approved as an activity on the client’s plan.

This service is intended to be undertaken only after a client has made use of the employer’s resources provided as part of the employer’s workplace health and safety obligations.
In some instances an ergonomic assessment can be undertaken in the home environment, such as the home office or a space in the home in which a psychosocial activity is undertaken.

Activities that are commonly excluded from an ergonomic assessment include:

- non worksite factors such as travel to work or household services
- educational, training or skills requirements of the work
- major or structural alterations to the immediate work environment
- non-physical or cognitive aspects of the work.

An Ergonomic Assessment should assess and report on:

- how the client’s environment is impacting on their conditions
- what the employer could be providing under their obligations and responsibilities to provide a safe work environment
- the need for aids and appliances to support the client
- the type and economic viability of any proposed minor modifications, changes and alterations to the work environment.

4.5. Job Seeking Assistance

The goal of job seeking assistance is to prepare the client for the job search process and support them to find a job.

This includes working with the client to identify appropriate alternative employment role and ultimately secure meaningful, paid employment. In some instances alternative roles will arise out of the vocational assessment or vocational counselling, however this is not always the case.

Any job seeking assistance activities undertaken must be approved in the client’s plan.

It is important that the client has the following skills prior to undertaking a work trial or approaching an employment agency to ensure that they ready and confident to commence obtaining employment.

Job seeking assistance activities include:

- assistance with resume writing
- assistance with application writing and selection criteria, and building strategies to tailor job applications to the requirements of particular jobs
- assistance with interview preparation, including development of interview skills and mock interviews
- preparing the client for how to disclose and discuss their disability, where this issue may arise
- assistance with developing skills for the workplace, such as workplace etiquette
- development of employer networking and cold canvassing skills
- job seeking through a range of mediums, such as internet, local newspapers, networking
- support and monitoring through the job seeking process
- an introduction between the client and employment agencies
• participating in a work trial to gain experience and confidence to re-enter the workforce or commence in a new type of employment.

4.5.1. Employment consultants

Consultants may utilise employment consultants or similar to assist clients with resume preparation, interview preparation and developing skills for the workplace such as work etiquette.

DVA does not require the employment consultant to be DVA registered, however they may only work under the supervision of a DVA registered consultant (i.e. the client’s allocated consultant must oversee assistance provided to a DVA client by an employment consultant). As employment consultants do not meet Comcare or DVA’s criteria to be registered as a rehabilitation consultant, they must not deliver primary case management services for DVA clients.

4.5.2. Employment agencies

If specifically approved in the client’s plan, consultants may engage an employment placement agency and record this as a third party resource on the plan. This should be undertaken as a short term activity (4-6 weeks) under close monitoring by the consultant.

Engaging an employment agency would be appropriate where:

• The provider does not employ a professional specialising in job placement
• The client has a specific or uncommon vocational goal, such as they want to work in the mining industry – utilising a recruitment agency that specialises in the mining industry would maximise the client’s ability to obtain a role in this industry. Similarly if the client is seeking an apprenticeship or traineeship there are agencies that specialise in placing people in these roles.
• Where the client has complex or severe disabilities – specialist agencies exist to find employment for clients with complex disabilities. For example, Disability Services Australia.
• Where the client lives in a high unemployment area
• Where other job placement options have been attempted unsuccessfully
• Where the client requires special assistance and support to re-enter the workforce, this includes where the client is especially hesitant or lacks confidence about re-entering the workforce.

It is the responsibility of the consultant to maintain knowledge and awareness of the employment services and agencies that operate in their area of operation and utilise these services and agencies appropriately and effectively to support a client’s return to work.

Some employment (recruitment) agencies may charge an employment placement fee where they obtain a client a job. This fee may be charged to the employer, or to the rehabilitation consultant who has engaged the agency. Where it is charged to the consultant this must be listed as a third party resource activity cost.

4.5.3. Where employment is obtained

Where the job seeking activities result in obtaining employment for the client, the consultant must:

• confirm suitability of employment for the client with relevant health professionals and the employer (in relation to work environment)
• ensure the work supervisor is aware of the client’s situation, condition and capabilities, which may involve supporting the client to have these discussions with the employer
• assess if any job redesign, aids, appliances or alterations might be required to support the client, and the viability of implementing any changes to the role or work environment
• arrange and monitor the clients work with the employer
• provide DVA with details of the offer of employment, including gross wages, hours, duties and conditions of employment
• advise the client of the impact on their incapacity payment of commencing employment
• discuss with the DVA delegate whether the Employer Incentive Scheme can be discussed with the employer (see below for further information on the scheme).

4.6. Work trials

Work trials are a temporary, unpaid work placement which provides the client valuable real world exposure to a new role and different workplace. It allows the client to:
• test out their capacity for work, and a particular field of work
• gain new skills and update existing skills
• gain confidence in themselves and their abilities in a work setting
• gain recent civilian work history and referees
• form social relationships and expanded support networks
• become more competitive in the job seeking process.

Consultants need to obtain a medical clearance prior to a client participating in a work trial. The work trial may involve a graduated increase in hours based on medical advice.

Before proceeding, a work trial must be approved as a vocational activity on the client’s plan by the delegate. Once a host employer is sourced for a work trial this must also be approved by the delegate to ensure it is suitable.

The client’s incapacity payments will be stepped up, where they are not on 100% of their earnings, based on how many hours a week they participate in the work trial.

Consultants must liaise with the employer to obtain the work trial. The employer must be made aware:
• they do not need to pay the client as they are paid by DVA
• that the work trial is for a limited time and is with a view to obtaining paid employment for the client with the host employer.

Where the client has limitations that will affect them in the workplace the consultant must confirm with the client that the consultant can discuss these limitations with the host employer. These limitations, and strategies to manage them, should then be discussed with the employer.

Generally a work trial will be for a maximum of 12 weeks. This period may be extended where an offer of employment is a likely, and continuation in the work trial will improve the client’s chances of obtaining a paid position with the work trial host. It is the responsibility of the consultant to ensure that any requests from the employer to extend the work trial are related to likely future employment and not the employer looking to seek further ‘free labour’ that is paid for by DVA.
4.6.1. Arranging a work trial

Consultants are responsible for arranging a work trial for the client, including assessing that the work trial is appropriate given the client’s conditions. The consultant must reference the medical clearance’s approved hours and capabilities in the assessment, as well as any other limitations or modifications highlighted in other professional assessments such as a vocational assessment, functional capacity assessment, work environment assessment or ergonomic assessment.

When arranging a work trial the consultant must also:

- ensure the host employer is aware of the client’s modified capacity due to their conditions, where relevant
- consider and organise any workplace modifications, including aids and appliances, the client may need in the work trial environment
- consider and organise any modification to the duties of the role to accommodate the client’s capability.
- ensure all the required documentation is completed by the host employer and client, and information regarding work trials shared with the employer and client, specifically the work trial agreement and insurance manuals (see below for more information)
- encourage the employer to undertake an on-the-job training program with the client that enables them to acquire the skill and competencies for the job
- consider any requests from the client for specific equipment (e.g. Personal Protective Equipment (PPE)) required for the work trial (see below for further information about these requests).

A Work Trial Agreement must be completed, and signed, by the client, the consultant, the host employer and the DVA delegate prior to the commencement of the trial. This agreement outlines the responsibilities of the host employer, the client, the delegate and the consultant and documents the delegate’s approval of the work trial.

Consultants must provide the DVA Work Trials Insurance Manual to the client. The host employer must also be made aware that DVA has insurances to cover the client during their participation in the work trial. The manual can be provided to the employer on request. Please ask the delegate for this manual. DVA has insurance to cover injury to the client, and insurance to cover injury or damage caused by the client’s negligence.

4.6.2. During the work trial

Consultants must ensure that the client completes and submits a Work Trial Attendance Diary to the consultant. This diary is to be signed by the client and their work supervisor, and must then be provided to the delegate via the PUP.

Once the work trial is in place the consultants must:

- actively monitor the client while undertaking the work trial to ensure that are working within the medical guidelines/clearance the client has been given
- notify DVA immediately of any workplace injury or illness, or aggravation of an existing condition incurred by the client during participation in the work trial
- ensure any issues that arise in the host workplace are addressed promptly
- advise DVA immediately of any injury or incident that may lead to an insurance claim.
4.6.3. At the completion of the work trial

As part of finalising the work trial, the consultant must:
- support the client to negotiate ongoing paid employment post-trial, if the opportunity exists.

If the client is offered employment, the consultant must:
- ensure the offer is in line with legislated pay rates and work conditions
- notify the DVA delegate immediately of the details of the employment, including start date, hours, salary and duties of the role.
- discuss the Employer Incentive Scheme with the employer (see below for further information)
- advise the client of the impact on their incapacity payments due to them commencing employment.

If the client is not offered work from the work trial, the consultant must:
- promptly amend the activities in the client’s rehabilitation plan to identify further activities that can build on skills and experience gained during the trial.
- encourage the client to apply for jobs leveraging off the experience and skills gained during the work trial.

4.6.4. Employer Incentive Scheme

The Employer Incentive Scheme (EIS) provides incentive payments to employers to encourage the engagement of DVA clients who are seeking new employment as part of a DVA rehabilitation plan. The payments are based on a percentage of the employed client’s gross wages (excluding overtime, superannuation, allowances). The percentage that is paid steps down as the employment continues.

- reimbursement of 75% of gross wages for the first three months of employment;
- reimbursement of 40% of gross wages for the second three months of employment; and
- a retention bonus of 10% of annual gross wages (up to a maximum of $2000) if the employment is sustained beyond 12 months.

Consultants must advise the employer that they may be eligible for the incentive if they employ the client on a permanent basis, however the decision about whether the employer can receive the incentive is made by the delegate. The consultant is responsible for putting the employer in touch with the delegate to discuss approval where it seems they may be eligible for the incentive.

Generally EIS is offered where employment is obtained after the completion of a work trial, however it may be offered to an employer where the client has obtained employment through their rehabilitation program. The employment must be likely to be sustainable and ongoing for EIS to be offered.

The following constraints and conditions apply to the EIS:
- the employment must be based within Australia
- the client must be eligible under Safety Rehabilitation and Compensation Act (Defence Related Claims) 1998 (DRCA) and/or the Military Rehabilitation and Compensation Act 2004 (MRCA).
• the client must be unable to return to their previous employer and be in receipt of incapacity payments at the time of their initial engagement by the employer
• the employer must not have previously employed the client, or received an EIS payment in relation to the client
• the employment must be full time, regular part-time paid employment, an apprenticeship or traineeship
• the employer must be paying the client full award wages at a salary rate comparable to other employees doing similar work for the employer, and
• the employment must be safe and suitable, given the client's medical restrictions and the type of work.

The following is excluded from an EIS:
• the position is offered by an Australian Government, state/territory government or local government entity
• the client will be self-employed or subcontracted
• the position offers casual employment or irregular part-time employment
• the employer unreasonably dismisses other staff to create vacancies for workers that are linked to subsidy payments
• the workplace does not meet necessary work health and safety standards, and
• the employer is an immediate family member of the veteran (spouse; partner, child, parent, grandparent, grandchild or sibling).

Where the employer is approved for the EIS they will be issued an approval letter and form by the DVA delegate. The employer must submit this form after three months, 6 months and 12 months of employing the client to access their incentive payment. This form will often be submitted to the consultant. The consultant must send this form to the DVA delegate immediately so they can coordinate payment.

4.6.5. Provision of uniforms and other essential equipment

Where a client obtains a work trial and they require particular clothing or equipment to attend the workplace, DVA may pay for these items. DVA may also pay for these items where the client has secured a job through their rehabilitation plan, and the employer does not provide these items.

The criteria for paying for clothing and equipment differs slightly where it is for a work trial versus permanent employment. The duration of time that the item will be required under a work trial, and the cost of hiring the equipment instead of purchasing it are factors that will be considered when approving requests.

Items that DVA may consider paying for include:
• personal protective equipment required in the workplace, such as high vis clothing and steel cap work boots
• equipment specific to a role such as a belt to carry security equipment or tools
• a specific uniform requirement, this does not include general office wear.
The client should purchase the item and then submit a clearly itemised receipt to DVA, via their consultant. DVA will then consider the appropriateness of the item and reimburse the client where the item is appropriate. Depending on the client’s financial circumstances it may be advisable that the consultant discuss the likeliness of the items being approved prior to the client purchasing them.

DVA may also pay for workplace aids and ergonomic equipment for the workplace. These items must be requested from the employer in the first instance. Where the employer will not supply the aids or equipment they must put in writing why. This explanation from the employer must be provided to the Rehabilitation delegate in conjunction with the request for the item/s. The delegate will then make a decision about whether the item can be provided under the rehabilitation program.

If the client changes employment to a role requiring different uniforms or equipment DVA will not pay for those items. This is because as the client has been in paid employment they now have the financial capacity to purchase the items independently.

4.7. Self-Employment Assistance

There are instances when a client chooses to pursue self-employment in preference to seeking paid employment with a new employer. Consultants must determine the client has a high level of self-motivation regarding this type of employment for it to be considered.

Self-employment assistance includes assistance to determine if self-employment is a viable option, and if so, assisting the client, through access of advisory and specialised services, to be in a position to earn an income from their business.

In order for self-employment to be a viable rehabilitation outcome, the consultant needs to ensure the client:

- is committed to such a venture and originates the idea
- has medical evidence confirming the client’s ability to undertake the work as a self-employed person
- provides a properly prepared business plan detailing their ability to finance and earn in a particular self-employment venture. The client may receive support and guidance in the preparation of this business plan from a suitably experienced accountant or business planner as an activity under their rehab plan.
- understands the inherent risks of self-employment and that they are borne by the client.

Consultants must discuss with the client that self-employment is a high risk type of employment where it is common that the planned and assumed earning does not eventuate. Clients must be made aware that DVA will pay incapacity payment for a reasonable period of time whilst they are establishing themselves in business (see below for more information), but the capital set up costs of the venture must be paid by the client.

A Vocational Assessment or vocational counselling may be valuable where a client is considering self-employment and may need assistance with other ideas and options for employment.

The consultant must analysis the business plan and from that identify which of the following supports should be provided.

In supporting a client to commence self-employment, the consultant must:

- support the client to identify small business advisory centres and services (Job Services Australia, ATO, ACCC) that provide service and information to people starting their own business
• assess the value of, and provide where relevant, business related training such as a business management course where it is likely to improve the viability of the business venture
• investigate and identify, where relevant, mentoring services to identify a business mentor to support the client in the technical aspects of commencing their own business.

Any activities identified in the client’s rehabilitation plan that support self-employment must first be approved by the delegate.

4.7.1. Incapacity payments whilst pursuing self-employment

A client may access incapacity payment for a reasonable period while establishing their business. What is considered a reasonable period will be determined by:

• the client’s progress with their rehabilitation program;
• recommendations received from the client’s rehabilitation service provider and treating practitioners;
• any feedback provided from a business mentor (if a mentor is providing support to the client); and
• income that the business is able to generate.

This enables the client to complete the critical business components of their rehabilitation plan, establish a client base or customer network and generate income.

Consultants need to ensure the client is aware that incapacity payments may be impacted if they are deemed as being ‘able to earn’ once their rehabilitation goal is achieved. A client may be deemed able to earn an amount if they are not earning it. The client must talk to their DVA incapacity delegate about deeming.

4.8. Retraining and further education

Clients will often need some degree of retraining in order to obtain a job, as they will not be returning to the role they have previously performed.

Consultants must take into account a range of retraining and education options available to support a client to obtain suitable and sustainable employment. Consultants should consult the Education and Training Procedural Guideline for further information. Note, this guideline is expected to be released in December 2019.

The most important role of the consultant in relation to retraining and education is managing the expectations of the client with regards to the degree of retraining DVA will approve. Some clients may want to engage in significant retraining where they have existing abilities to obtain suitable and sustainable employment. Alternately, the client could undertake more time and cost effective retraining that would give them the skills to obtain employment. Consultant must ensure DVA’s role is support the client to obtain suitable and sustainable employment, which will most likely not be their dream job.

4.9. Relocation assistance

DVA may provide assistance with the costs of moving where there is a reasonable requirement for the client to relocate because they have secured suitable work and there are no suitable or reasonable employment options available in the area the client is currently living. Consultants must ensure that the client is on a return to work plan before proposing relocation assistance.
It is envisaged that relocation assistance is only provided in limited special circumstances such as a client living in a remote region with very limited labour market prospects and needs to move to a region with stronger suitable employment prospects, or where the client has specialised skills and there are very limited employment opportunities in the region the client is residing.

Consultants are required to manage the client’s expectations on relocation assistance appropriately and ensure the client understands that relocation assistance will only be considered in very specific circumstances. It will not be paid where the client finds a particular job they are keen to obtain in another location where there is suitable and sustainable employment options in their current location.

Before a decision will be considered on granting relocation assistance, the consultant needs to work closely with the client and the delegate to evaluate the reasons why the client has been unsuccessful in securing suitable employment in their current location. Where a client is having difficulty obtaining work in their current location additional job seeking assistance should be provided before considering relocation.

Consultants need to seek delegate approval for relocation assistance prior to the client relocating. Prior to requesting relocation assistance the consultant needs to provide the delegate with:

- a comprehensive labour market analysis for the client’s current location demonstrating very limited employment opportunities for the client
- evidence the client has unsuccessfully applied for a wide range of jobs relevant to their skills and experience in their current location
- evidence that the client as undertaken job application and interview skills courses as appropriate, and
- evidence that the client has been offered and accepted secure and meaningful employment in the new location.

4.9.1. Relocation costs

Requests for relocation assistance are considered by the DVA delegates on a case by case basis. However, it is expected that the following costs would be considered reasonable in most circumstances:

- moving costs for the contents of the client’s home
- reasonable transport costs for the client only
- transport of the client’s vehicle where it is required for their job, and they did not drive it to new location
- one week’s reasonable accommodation, and/or
- a ‘move clean’ if the client is eligible for Household Services

Costs that are not included in relocation assistance incorporate:

- insurance
- losses on sale of house or household items
- packing or unpacking of household contents, and/or
- transport for other family members, vehicles or animals
• Storage costs in the new location.

4.10. Closing of plan goals and activities following vocational outcomes

Where a client has achieved their vocational goal, by obtaining employment, and they have achieved their other plan goals (ie. Medical management and psychosocial goals) their plan does not need to be closed immediately.

The plan is generally left open for a reasonable period of time, determined between the client and consultant, and agreed by the delegate, to allow monitoring of the client in their new employment. This allows the consultant to continue to support the client if issues arise in the client’s new employment.

As a guide, the plan may remain open for the duration of the client’s employment probation period to monitor that the employment is suitable and sustainable. However the client and consultant may agree a lesser time is appropriate. A plan amendment must be submitted by the consultant with the proposed end date, which will be approved by the delegate.

The consultant must also notify the client that even after their plan is closed:

• the delegate will contact the client 6 months after commencing their employment to check in on how they are going
• the client may be eligible for ‘top up’ incapacity payment where the combination of their earnings and their Comsuper is less than their previous ADF wage. The client must liaise with their DVA incapacity delegate about this.
• the client can come back to DVA for further rehabilitation support if their circumstances change.