

# NSW WC Reforms Webinar

Preparing your Agency for go-live of the Reforms

NSW Workers Compensation & Return to Work Peer Connect event

28 May 2026

In collaboration with



## Acknowledgement of Country

I acknowledge the Traditional Owners of the land on which I am hosting this program from today.

I also acknowledge the Traditional Custodians of the various lands on which you all work today and the Aboriginal and Torres Strait Islander people participating today.

I pay my respects to Elders past, present and emerging and celebrate the diversity of Aboriginal peoples and their ongoing cultures and connections to the lands and waters of NSW.

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# Welcome to the webinar!

Join icare, Allianz and EML for this second webinar in our REX NSW Workers Compensation Reform Series designed to guide and support NSW Government Agencies to prepare for, implement, and operationalise the Reform changes.

The webinar will focus on preparing for the **changes in the management of psychological claims, highlighting the roles of the Agency and the worker**. We will explore actionable steps your Agency can take now to ensure readiness for the go-live of these changes.

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**01** Introduction

**02** Psychological injuries

**03** Claim notifications

**04** Agency documentation & timeliness

**05** Changes to payments

**06** Keeping people at the heart of the process

**07** Resources

**08** Q&A

# Agenda

# Presenters



**Renee Harley**

Technical Manager, icare  
NSW



**Dave Feltscheer**

Senior Manager, EML



**Patrick Murch**

Senior Agency  
Engagement Manager,  
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**Adam Brown**

Technical Claims  
Manager, Allianz

# 01

## Introduction

Nathan Lakajev  
Head of Agency Engagement, icare NSW

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# Quick recap on the WC Reforms

What do the changes mean for NSW Government Agencies?

Non-exempt workers:	Exempt workers*:
✓ New rules & payments for <b>primary psychological</b> claims incl. <b>mutual obligations, broadened reasonable management action</b> defence, and the new <b>IRC bullying &amp; harassment</b> jurisdiction	✗ No change to rules & payments for <b>primary psychological</b> claims incl. mutual obligations, reasonable management action defence, and the new IRC jurisdiction does not apply
✓ <b>New single WPI assessment</b> process	✗ No change to WPI assessment process
✓ Higher <b>reasonable and necessary</b> test to access treatment and services	✓ Higher <b>reasonable and necessary</b> test to access treatment and services
✓ <b>Broader access to commutations</b>	✓ <b>Broader access to commutations</b>

*\*Police officers, paramedics and firefighters are considered exempt workers within the NSW Workers Compensation Scheme.*

On a scale of 1-5 , how prepared do you feel your Agency is for the changes?



# 02

## Psychological injury claims

Renee Harley

Technical Manager, Return to work , icare NSW

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# What is changing - eligibility:

## New tests and time frames for psychological injury

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Workers entitled to compensation of psychological injury in **limited circumstances:**

1. The psychological injury results from **one or more relevant events.**
2. There must a **real and direct connection with employment.**
3. Employment is the **main contributing factor to the injury.**
4. The Agency must **not be able to rely on the “reasonable management action” defence.**

### **If the claim is accepted:**

**Staggered entitlement** for primary psychological claim benefits greater than 2.5 years based on Whole Person Impairment and date of claim being notified / made.

### **Important Note:**

Changes for psychological injury apply to new claims notified to the **employer (Agency)** on or after the commencement date for a primary psychological injury

# What is changing - reasonable management action:



Defence has been expanded and clarified to better define what actions may be considered reasonable in psychological injury claims.

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**Wider range of employer actions** can now be considered reasonable management action:



# What is changing - reasonable management action (cont.)



The **defence can now apply** when **reasonable management action** was the **significant cause of the injury**, even if it was not the only or predominant cause.

It is important to note that:

- The **defence does not interfere with a worker's right to make psychological injury claim**; it only determines whether compensation is payable.
- A **preexisting mental health condition does not automatically exclude a worker from compensation** for a psychological injury. The focus is on how the agency acted, not the worker's medical history.
- Agencies should **only provide evidence directly related to the specific events** the worker claims caused their psychological injury.

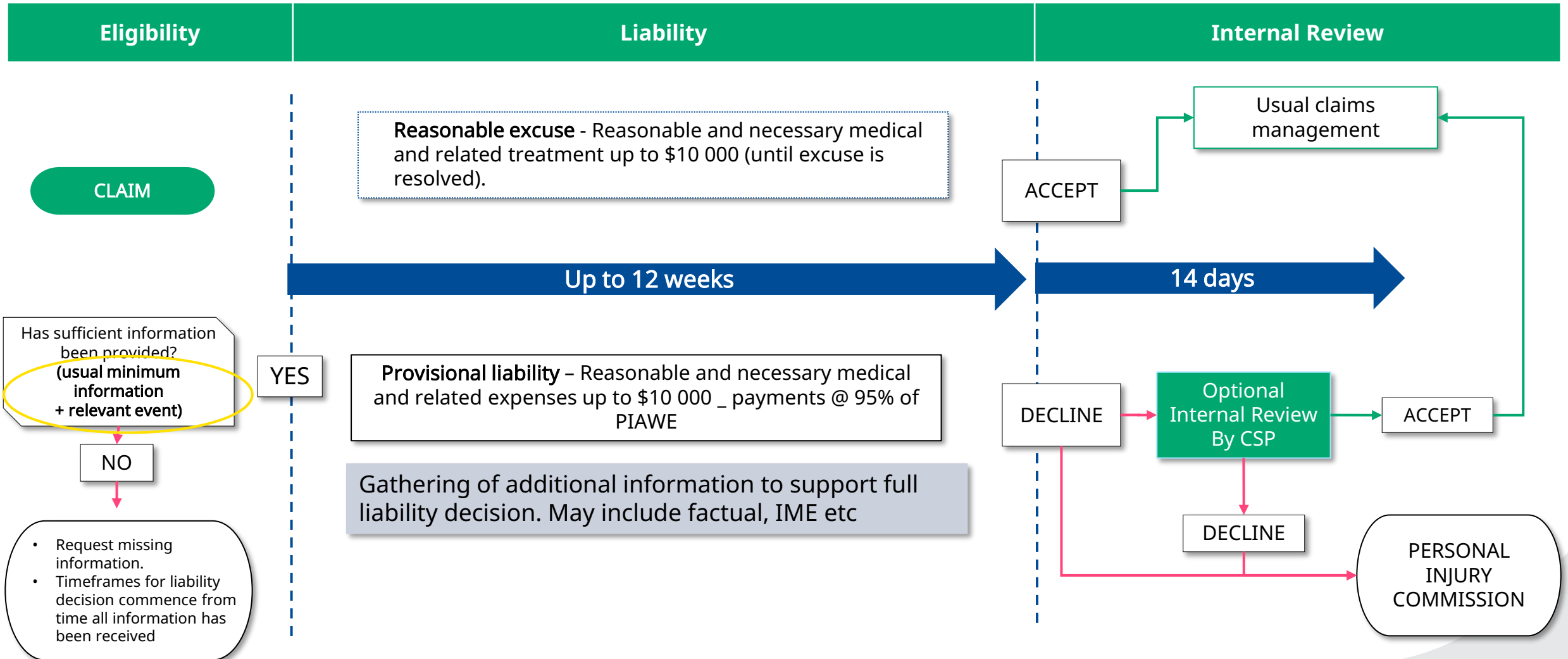
# What is changing – overview of entitlements:

## Injuries arising from relevant TRAUMA vs relevant CONDUCT

Injury caused by Trauma follows the existing liability and dispute pathway	Injury caused by conduct follows an alternate liability and dispute pathway
Start provisional reasonable and necessary medical and treatment related support within 7 calendar days capped at <b>\$10,000</b> and	Start interim reasonable and necessary medical, treatment and vocational related support payments capped at <b>\$7,500</b> , and
Start provisional weekly payments at <b>95% of PIAWE*</b> less any current weekly earnings within 7 calendar days unless there is a reasonable excuse not to, or	Start interim weekly payments at <b>75% of PIAWE*</b> less current weekly earnings capped at 56 calendar days from when the claim was made
Delay starting provisional weekly payments by issuing a reasonable excuse within 7 calendar days, or	Interim weekly payments cannot be delayed by issuing a reasonable excuse
Accept or dispute liability outright or before provisional weekly payments are exhausted (up to 12 weeks)	Accept or dispute liability outright or within 42 calendar days (up to 6 weeks) from when the claim was made (and if a decision is not made within 42 days, the claim will be deemed accepted)
<p><b>If Disputed:</b></p> <p>Issue a Section 78 notice advising the worker they may seek an internal review before they lodge the dispute for determination by the <b>Personal Injury Commission</b> or lodge a dispute for determination by the Personal Injury Commission.</p>	<p><b>If Disputed:</b></p> <p>Issue a Section 78 notice and if denying that the injury was caused by the relevant event, advise the worker they must seek an internal review before lodging a dispute about whether the conduct did in fact happen for determination by the <b>Industrial Relations Commission</b>.</p>

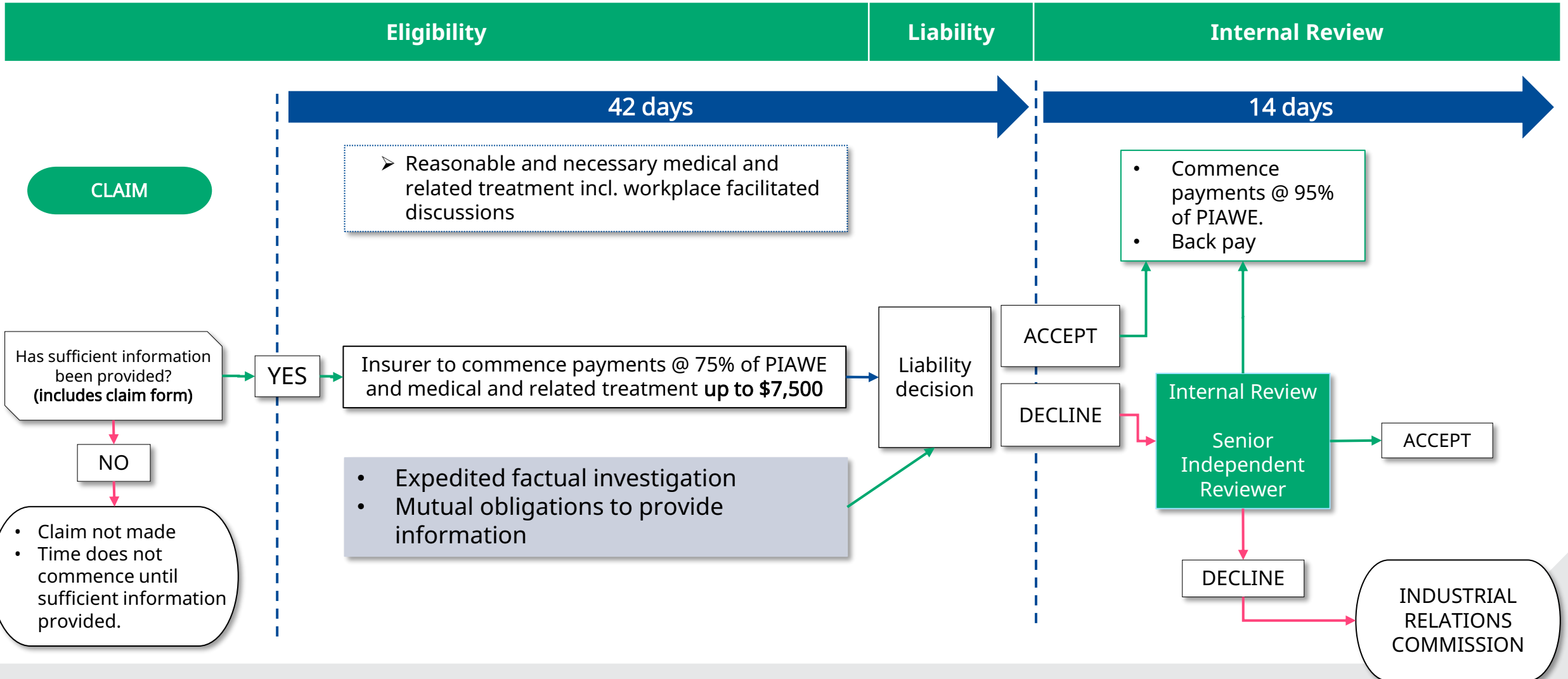
# Liability Assessment – TRAUMA Claims

Violence/ threat of violence, serious criminal conduct, witnessing a traumatic incident or a dead or seriously injured person at the scene, death of a person in the worker’s care



# Interim Entitlements – CONDUCT Claims

Bullying, sexual and racial harassment, excessive work demands



# What's changing - mutual obligations



## Worker and Agency participation in information gathering

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Both the worker and the Agency must **help the insurer verify the facts of the claim within required timeframes. How the claim is decided depends on the information each party provides.**

For example:

- If the worker doesn't identify a relevant event or doesn't provide enough information to show the injury was caused by a defined traumatic or conduct event, the claim will be rejected.
- If the worker provides enough information to show the injury was caused by a defined traumatic or conduct event, and the Agency doesn't provide sufficient information in time to show the significant cause was reasonable management action taken in a reasonable way, the claim will need to be accepted.

The interim period for conduct claims allows time for the insurer to request further information to verify and make an objective information on whether there is sufficient evidence to indicate that event (s) did or did not occur before determining liability and employers must respond quickly to provide any other information, such as that relating to whether reasonable management action is applicable.

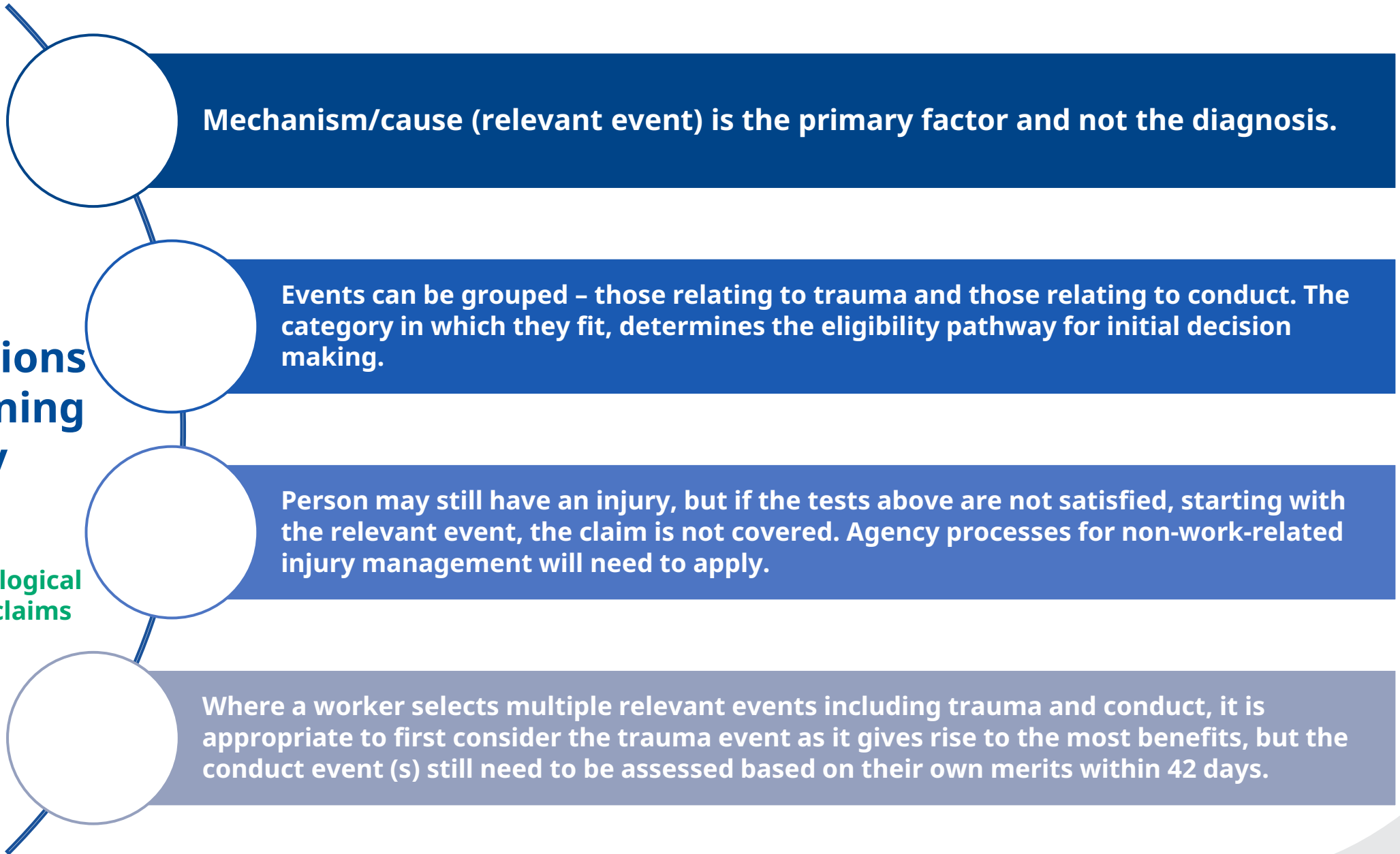
**Failure to issue a decision within the 42 timeframes will result in a deemed acceptance.**



# Considerations in determining liability



Psychological injury claims



# 03

## Claims notification

Dave Feltscheer,  
Senior Manager, EML

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# Claim notification

## What's changing?

- Notification requirements for psychological injury claims
- Requirement for the worker to select a relevant event or events through notification process
- New SIRA Claim Form
- Claim form required for CONDUCT claims
- CONDUCT claims eligibility pathway and timeframes

## What's staying the same?

- Notification requirements for PHYSICAL claims
- Liability options for PHYSICAL and TRAUMA claims



# Conduct vs trauma relevant events

## Relevant CONDUCT events

- Bullying
- Sexual harassment
- Racial harassment
- Excessive work demands

**Claim Form required, as well as relevant event must be nominated**



## Relevant TRAUMA events

- Being subjected to an act of violence or the threat of violence
- Being subjected to indictable criminal conduct
- Witnessing a traumatic incident happen
- Witnessing a dead or seriously injured person at the scene of a traumatic incident
- Death of a person in the worker's care from a traumatic incident
- Experiencing vicarious trauma

**Claim Form not mandatory, but relevant event must be nominated**

# NEW SIRA Claim Form

## 3A. Psychological injury

Only complete this section if your injury is a psychological injury. Leave section blank if your injury is physical.

**Which relevant event or series of relevant events caused your psychological injury? You can select more than one if applicable.**

Note: For a psychological injury to be eligible for compensation after DAY MONTH YEAR it must have been caused by a relevant event or series of relevant events. Further details about each relevant event can be found on page 11.

- Being subjected to an act of violence or a threat of violence
- Witnessing a traumatic incident happen
- Death of a person in the worker's care from a traumatic incident
- Being subjected to bullying
- Being subjected to racial harrassment
- Being subjected to indictable criminal conduct
- Witnessing a dead or seriously injured person at the scene of a traumatic incident
- Experiencing vicarious trauma
- Being subjected to sexual harrassment
- Being subjected to excessive work demands

# NEW SIRA Claim Form

## Addendum

Under section 8G of the 1987 Act, relevant events that a psychological injury may be compensable for are:

- **violence or the threat of violence**, such as an assault or threatening harm
- **serious criminal conduct** such as robbery or arson.
- **witnessing a traumatic incident or witnessing a dead or seriously injured person at the scene** following a traumatic incident. A traumatic incident means:
  - a violent act
  - serious criminal conduct
  - a natural disaster, fire or explosion
  - a motor crash or other accident, or
  - a suicide or attempted suicide

where serious injury or death occurs or is likely to occur.

- under clause 3A of the 2016 Regulation, **death of a person in the worker's care**, where:
  - the death is the result of a traumatic incident, and
  - there is a real and direct connection between the traumatic incident and the worker's employment, and
  - the person who dies is under the immediate and primary care of the worker, at the workplace, at the time of the traumatic incident, and

- the relationship between the worker and the person who dies is pre-existing, ongoing and close, and
- the relationship is a requirement of the worker's employment
- **vicarious trauma** where a worker is repeatedly exposed to the traumatic experiences of others as part of their employment
- **bullying** where an individual or a group of individuals repeatedly behave unreasonably towards the worker or a group of workers
- **sexual harassment** where a person makes an unwelcome sexual advance, or an unwelcome request for sexual favours, to the worker or engages in other unwelcome conduct of a sexual nature towards the worker
- **racial harassment** where an act is reasonably likely in all the circumstances to offend, insult, humiliate or intimidate the worker, and done because of the race, colour or national or ethnic origin of the worker.
- **excessive work demands** which are demands beyond the requirements expected of the worker's role, repeated or persistent, and not reasonable in all the circumstances.

# NEW SIRA Claim Form

## 3A. Psychological injury (continued)

**Describe the event that caused your psychological injury?**

If possible, include details of:

- the incident or conduct that caused the injury,
- how many times the incident/conduct occurred and dates of the occurrence/s,
- any individuals who witnessed or were involved in the incident/conduct, and
- whether the incident/conduct was reported to your employer.

**Note:** If your injury was caused by bullying, sexual harassment, racial harassment or excessive work demands you must provide date(s), time(s), location(s), any person(s) involved and how the incident(s) occurred. You may attach supporting statements or documents if available.

**If your injury arose due to bullying, sexual harassment or racial harassment, have you commenced proceedings related to this at the Industrial Relations Commission?**

If yes, please provide the matter number and details of your legal representative (if you have one).

# Incomplete Information

## TRAUMA claims:

- If no relevant event is nominated, the claim will not meet the minimum requirements for initial notification of an injury
- Claims with no relevant event nominated need to be contacted within 3 days to confirm they do not meet the minimum notification requirements
- These claims will be placed under a new liability status *13 Psychological injury notification— relevant event or conduct not identified\**
- Claim timeframes for liability will not commence until the relevant event is nominated by the worker

## Relevant CONDUCT claims – additional requirements

- If no claim form is received for relevant conduct claims, payments and timeframes for liability cannot commence
- CSP are required to contact worker within 3 days to advise what is required for claim to be "complete"
- These claims will be placed under a new liability status *14 Relevant conduct claim form requested\** then move to *15 Relevant conduct claim under assessment\**
- Workers cannot be back paid to the date of their incapacity. Workers will only be paid from the date the claim is made i.e. the date the completed claim form is received.

# Agency considerations

- Review of notification of injury processes and systems to allow worker to select relevant event(s) for psychological claims and/or obtain claim form for conduct claims
- Clear definitions of the relevant events to assist workers in determining which (if any) to select
- Delays in payments and not being able to back pay for conduct claims
- s.44 requirement to notify injuries within 48 hours remains for all claims
- Employee support: information gathering scripts, education, expectation setting and review of policies and procedures



# 04

## Agency documentation & timeliness

Patrick Murch

Senior Agency Engagement Manager, Allianz

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# Post 1-July claim documentation & timeliness

## What is changing

- A formal obligation to identify and **respond to incomplete information**, quickly – for both CSPs and agencies
  - CSPs must **notify a worker** when a claim is incomplete **within the first 3 days** of receipt, and what is needed to complete the notification
  - Agencies will receive **earlier**, and **more frequent requests** for information from their CSP to determine eligibility pathways
- Significantly **higher evidentiary threshold** for psychological injury claims
- Increased importance of contemporaneous records, particularly with regards to conduct-based events and **reasonable management action**. These records will become **principal evidence** in any potential IRC dispute

**From 1 July 2026, initial claim documentation is no longer purely administrative, in some cases, it becomes determinative**

# Post 1-July claim documentation & timeliness

## What is **not** changing

- The core legislative framework of the scheme remains – the WCA 1987 (NSW) and 1998 Act (NSW) still underpin employer obligations. These reforms are an **evolution of this legislation, not a replacement of it**
- The need for good claim documentation and evidence gathering to support a sound decision – the **standard, scrutiny, and consequence** of this documentation has **increased significantly**.

**It's not about doing more - it's about having processes that consistently **capture the right information, early, and sharing this with your CSP****

- Your **core employer obligations remain** – agencies must still;
- Notify injuries / incidents promptly to your CSP (**still within 48 hours**)
  - Engage with your employee and **maintain ongoing communication**
  - Support employees with return to work – even where eligibility is still being determined. This includes the **provision of suitable work** as far as reasonably practicable, **develop and implement return to work plans** for workers
  - Actively **participate in the evidence-gathering process**
  - Provide information to your CSP to support claim assessment **as quickly as possible**
  - Ensure the **accuracy and completeness of information** used in support of the claim assessment process
  - Engage with other internal stakeholders to assist in gathering information relevant to the claim – incl. **witnesses, supervisors, or IR / HR** teams supporting other internal investigations and people-management processes

# Documentation for eligibility assessment

**Information required to assess eligibility for CONDUCT claims, or liability for TRAUMA claims, will be based on the relevant event the worker has nominated when making the claim.**

- Agencies must capture key information at incident notification to help insurers quickly determine if a claim is a primary psychological injury and route it to the correct assessment pathway
- If the worker nominates a relevant event at notification, this must be promptly shared with the CSP to allow sufficient time for investigation
- New objective tests require broader evidence – *e.g. a claim of 'excessive work demand' now requires an assessment of the 'norm' for the role / industry, agency staffing levels, operational demands of the role or agency, compensation arrangements, and what role expectations had been set with the employee*

**The broadened definition of reasonable management action under s11A reinforces that the employer bears the burden of proof and manager / supervisor capability and any or all documentation related to people management is now a legal risk control.**

# What does this mean for CSPs

- Processes and system updates to be able to capture notification of primary psychological claims, and determine the relevant event(s)
  - This may include updates to claim management systems, employer-facing incident notification or claim lodgement portals, and ability to attach or receive the new claim form to accompany all primary psychological notifications
- Documentation provided by the worker / employer will determine the claim assessment pathway – either Conduct, Trauma, or both – and what further information is required to support the full assessment of the claim

CSPs and agencies will need to clearly establish when either party was first notified of the claim to:

- Identify whether the 'old' or 'new' legislation applies to the claim in the early phase post-1 July
- Establish when to commence the 42-day eligibility assessment period for relevant conduct claims

**Failure to decide within the 42-day timeframe = deemed acceptance**

# What does this mean for agencies

## Review your incident notification / injury management systems

To allow additional information capture, if required

## Build 42-day liability decision controls

Provide all evidence to your CSP well before the 42-day decision deadline

## Review your current information-gathering processes

Add or change steps as required

## Practice swift reporting

Do not delay reporting claims. The clock starts running from the day the claim is notified\*

Educate managers about the need to promptly assist with investigations and provide evidence

Send information to your CSP quickly, and often

Review your employee assistance programs that can be used during the claim determination process

# Providing evidence to support claim assessment

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## Checklist

### New test for compensation for psychological injuries – specified relevant event(s)

This checklist has been developed to assist eligibility specialists to assess whether an event nominated by the worker as the cause of their psychological injury meets the statutory requirements under the *Workers Compensation Act 1987 (NSW)*. All required elements must be satisfied for a nominated event to qualify as a relevant event.

**Disclaimer:** This checklist is provided for general information only and does not constitute legal advice. It is based on the *Workers Compensation Act 1987 (NSW)* as enacted but not yet commenced. This information will be reviewed and updated following the release of the final supporting regulations and guidelines.

#### Subjected to an Act or Threat of Violence

**Legislation:** Sections 3 and 8G(a) of the *Workers Compensation Act 1987 (NSW)*

**Elements to be assessed:** All elements must be satisfied.

- An act or series of related acts
- The act(s) involved violent conduct
- The conduct occurred during the commission of an offence
- The conduct was directed against one or more people
- The conduct resulted in injury or death to any of those people

**Evidence considerations:**

- Worker statement detailing the incident(s)
- Employer incident reports or risk registers
- Police reports or event numbers
- Witness statements or CCTV (if available)
- Medical evidence confirming injury or death

**Notes:**

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Page 1 of 12

Checklist | ID# | v1

Your CSP will request a **wider array of evidence** to assist in the determination of the claim, based on the relevant event nominated by the worker – this *may* include;

- Worker **statements** detailing the incident(s)
- Workplace **incident reports** or risk register documentation / safety notifications
- Workplace **policies** and **procedures**
- Internal **emails, messages, performance documentation, rosters** or other records
- Event numbers, **police reports** or related indictable conduct or **offense correspondence**
- Witness statements or **corroborating accounts**
- Relevant **CCTV footage**
- Evidence that **confirms serious injury or death** of a person relevant to the claim
- Relevant **court documents** or **coronial records**
- Logs or other records that **confirms a worker’s presence** at a specific incident or event
- Role or **position descriptions** / requirements relevant to the worker’s employment or duties

# What does this mean for agencies

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## Checklist

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Notes:

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Page 1 of 12

Checklist | ID# | v1

**Targeted evidence** — a **narrower focus** for evidence based on the relevant event and the applicable tests. The **onus is on the worker** to detail the event(s) that led to their claim injury and evidence provided by the agency should be based principally on what, and / or who, has been **nominated in the claim form**.

- Identify what info your agency can / cannot release
  - Consider how information for workers compensation matters is **currently gathered**, and **from who**
  - Review **internal privacy guidelines** and assess whether these enable you to collect and / or share the information required to assess claims under the new legislation
  - Be **clear with your CSP(s) on what you are unable to provide** to ensure this is built into the claim assessment process / pathway for your agency
- Involve HR / IR teams in evidence-gathering activities and **understand what artefacts can be accessed** when providing information to support claim assessment
- Reassess existing processes for gathering factual evidence and / or legal advice to **ensure new, stricter assessment timeframes can be met**

# Support available for agencies

- Your **CSP will assist you** in understanding what information is required to determine the outcome of the claim based on what the worker has nominated in their claim form
- For some claims, **there may be no change to what is needed** to determine if the claim can be accepted, for others there may be significantly more that is required after 1 July - you won't be guessing what documentation is required – **your CSP will actively guide you through what's needed and what's missing**
- Additional **resources are being developed** - agencies are not solely responsible for building the evidence. **CSPs will support with formal investigation processes where required**
- icare, in partnership with CSPs, have developed **case studies that will step our common claim scenarios** and illustrate what information may be needed to assist in the determination of these cases. You can also reach out to your CSP to **provide insight or information on claim scenarios**, including what you as an agency may need to provide to accurately assess claims of a similar type or nature

While the reforms increase expectations around documentation and timeliness, **agencies are not expected to navigate this alone** – there is structured support available from CSPs, icare, and the scheme to help agencies meet these requirements effectively.

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## Worked examples

These worked examples are intended to illustrate for eligibility specialists how to use the checklist to assess whether an event nominated by the worker as the cause of their psychological injury meets the statutory requirements under the *Workers Compensation Act 1987 (NSW)*.

**Disclaimer:** The worked examples are provided for general information only and do not constitute legal advice. It is based on the *Workers Compensation Act 1987 (NSW)* as enacted but not yet commenced. This information will be reviewed and updated following the release of the final supporting regulations and guidelines.

### Subjected to an Act or Threat of Violence

**Legislation:** Sections 3 and 8G(a) of the *Workers Compensation Act 1987 (NSW)*

**Scenario:**  
An emergency department nurse was yelled at and confronted by a patient's family over a long wait time. He later experienced panic attacks and nominated a threat of violence as the cause of the psychological injury.

**Checklist (all elements must be met):**

Statutory element	Assessment
Act or series of related acts	✓
Involved violent conduct	Unclear
Occurred during the commission of an offence	✗
Directed against a person	✓
Resulted in injury or death	✗

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Page 1 of 4 Worked examples | ID# | v1

# 05

## Changes to payments

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# Changes to payments – CONDUCT claims

- Once accepted in the interim period change to 75% of PIAWE or MAX (**whatever is the lesser**) less any actual earnings
- Payments will only be payable from the date claim is deemed complete **regardless of Date of Injury or Notification** and must **commence within 7 days**.
- Week start will need to align to Counter Active Date which **cannot be prior to date claim is deemed complete**
- Max timeframe in the interim period is 42 days from date claim is deemed complete. Payments made **will count towards Section 36** (first 13 weeks)
- There is an additional 2 weeks “notice pay” at the 75% rate if the claim is disputed at day 42, **therefore absolute maximum of 56 days**

- If claim goes onto be fully accepted, back payments must be made to the 95% rate **within 21 days of the decision**
- New SIRA payment codes: **WPT009** total incapacity and **WPP009** partial incapacity for the 75% payment
- Maintain **WPP005** code for adjustment payments
- Medical and related expenses **capped at \$7,500**

**75% <> 42 days <> \$7.5k**

# Changes to payments – **TRAUMA** claims

- No changes to **current process, payment codes or rates**
- Trauma claims can still utilise **Reasonable Excuse and Provisional / Full Liability Provisions**
- Remain at 95% of PIAWE or MAX (**whatever is lesser**), less any earnings for the first 13 weeks
- Medical and related expenses **remain capped at \$10,000**



**95% <> 13 weeks <> \$10k**

# Claims for TRAUMA & CONDUCT

- Follows path of the **greater entitlement**
- Each component (Trauma and Conduct) needs to be **determined separately**
- If Trauma component accepted >> Trauma pathway  
i.e. **current claims assessment process**
- Conduct component must still be determined via Conduct pathway/timeframes but **will receive Trauma provisions if that component is accepted**
- If Trauma component is declined but Conduct accepted, Conduct pathway is followed so **Conduct entitlements apply**

# Changes to payments – other payments

- Indexation Reduced to once per year – April only
- Indexation rounding rules simplified and same for all claims will round to the nearest dollar (not nearest \$10 when PIAWE is >\$1000)
- If wages are ceased because of Section 39 and then later assessed at or above required WPI, back payments will only need to be paid from the date of the last main assessment and not from date of original cessation
- Primary Psychological claims lodged or notified from 01/07/2026 will have a maximum entitlement of 130 weeks of wages unless meet new thresholds
- Primary psychological claims lodged or notified from 01/07/2026 that hit 130 weeks and are assessed at 21% or over but below the new staged thresholds will have access to a further 52 weeks of payments at 60% of PIAWE or MAX (whatever is lesser), less any actual earnings
- New SIRA payment codes WPP010 and WPT010 for the 60% payment

**60% <> 131-182 weeks <> Indexation Nearest Dollar**

# 06

## Keeping people at the heart of the process

Nathan Lakajev

Head of Agency Engagement, icare NSW

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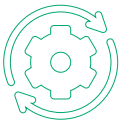


# Keeping people at the heart of the process

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**Build your team** - RTW/IM, HR, IR, WHS, executives & people leaders all need to be involved and understand their roles.



**Come from a place of care and understanding** - understand the injured worker's perspective. The process and changes could be overwhelming, especially for psychological injuries.



**Keep the worker connected** with the workplace and **provide timely information** to assist the worker to understand and navigate the process.



Understand that worker has the right to **see all information gathered** as part of determining claim.



**The NSW Workers Compensation reforms represent a major overhaul of the system, fundamentally shifting expectations for claims management, return-to-work (RTW) pathways, and employer WHS obligations.**

**With people at the heart of the scheme, the primary focus is on early intervention, structured support, maintaining compassionate, transparent communication, and aligning workplace processes and cultures.**

# 07

## Resources

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Head of Agency Engagement, icare NSW

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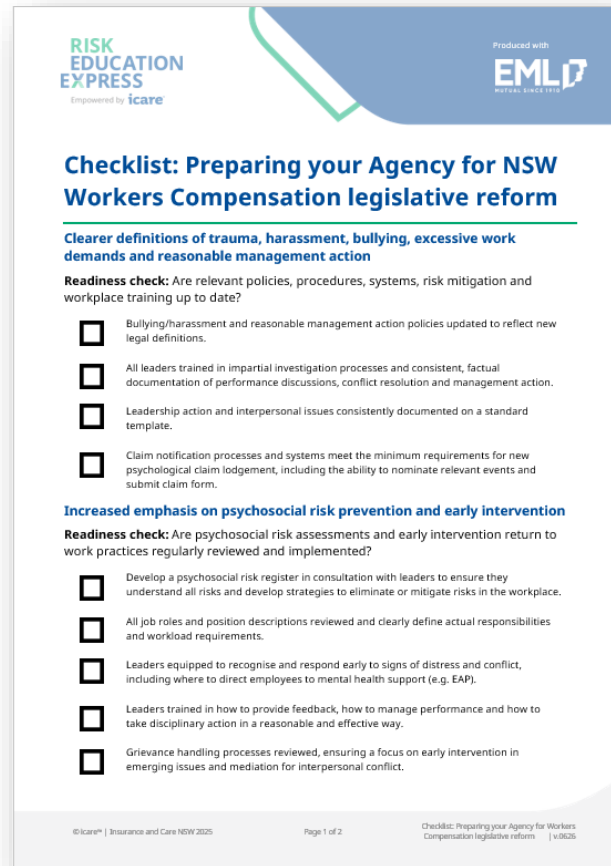
# Resources



[FAQs](#) available via the icare public website



[SIRA website](#)



EML Checklist, copy of slidepack & recording from today's session (Post event email and uploaded via REX Peer Connect)

## TMF Workers Compensation & Return to Work Peer Connect

This online community is available to any NSW Government Agency representative who is responsible for workers compensation and RTW related activities in their agency.

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# Question & Answer

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