

SAPS Injury Management Practice Note

Claim Determination

Objectives, Targets & Performance Indicators

Objective	Target	Performance Indicator
Workers are advised promptly of the determination of their claim	100% of determination letters are sent within 3 business days of the decision being made	Length of time between date of determination as noted on file and date of notice to worker. The date of determination is recorded on SIMS in a timely manner.
Legislative requirements are met	100% of determination letters contain sufficient information to meet legislative requirements	Contents of determination letters and any attachments are recorded on SIMS and/or claim file.

Purpose

- To ensure that the decision to accept or reject a worker's compensation claims are evidenced based, appropriately consider legislative requirements and consistent;
- To ensure determination notices comply with legislative requirements and recorded on SIMS and/or claim file.

Context

The Return to Work Act 2014 (RTW Act) relevantly provides as follows:

<i>On receipt of a claim, SAPS Agencies may make such investigations as are necessary to achieve an evidence based decision, including requiring the worker to be examined by a recognized health practitioner nominated by the Agency</i>	<i>Section 31(1) & (2)</i>
<i>Claims must be determined as expeditiously as reasonably practicable and endeavour to determine the claim within 10 business days after the date of receipt of the claim.</i>	<i>Section 31(4)</i>
<i>As soon as practicable after determining a claim the Agency must give notice in writing of the determination to the claimant</i>	<i>Section 31(7)</i>
<i>Where any part of a claim is rejected, the determination must include:</i> <ul style="list-style-type: none">• <i>a statement of the decision that has been made;</i>• <i>a reference to the provision of the Act and, if relevant, the regulations made under the Act, on which the Corporation has relied in making the decision, and the text of that provision;</i>• <i>the reasons for the decision (including information about the evidence on which the decision is based).</i>• <i>a statement of the claimant's rights to have the determination reviewed.</i>	<i>Section 31(8); Regulation 20</i>
<i>The power and discretions with respect to investigation / determination of claims are delegated to SAPS agencies as self-insured employers</i>	<i>Section 134</i>

Building Safety Excellence in the Public Sector

Target 7: Claim determination within 10 business days

Expeditious claim determination ensures workers are not financially disadvantaged and minimises disruption to the return to work process.

SAPS Practice

A suite of standard determination letters have been developed for SAPS agencies, including letters relevant to claim determination that comply with legislative requirements. There is a strong preference for agencies to utilise these letters when making determinations on new claims.

All determination letters should contain the following information:

- reference to the particular claim for compensation (including the date of the Claim Form) and a description of the injury;
- the date of occurrence of the injury;
- the rate of weekly payments determined (if applicable);
- the worker's right to lodge a notice with the SA Employment Tribunal should they disagree with the decision; and
- the name and telephone number of a contact person should the worker wish to discuss the determination.

Additionally, if any part of the claim is rejected, the determination must include the following:

- a statement of the decision that has been made
- the sections of the Act / Regulation relied upon in reaching the decision
-
- the reasons for the decision (including information about the evidence on which the decision is based)
- a statement of the claimant's rights to have the determination reviewed