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Title: The role of the Australian workplace Return to Work Coordinator: Essential qualities and attributes.

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Abstract

Introduction:
In the Australian context, a Return to Work (RTW) Coordinator assists an injured worker with workplace-based support and regulatory guidance for the duration of their injury. Coordinating the return to work (RTW) process has been considered an effective approach for managing workplace injuries, however few studies have described the skills, traits or characteristics required to fulfil the role of workplace RTW Coordinator. This study aims to provide insight as to the skills and attributes needed for the role of the workplace RTW Coordinator from their experience and perception.

Method:
Focus groups were conducted with workplace RTW Coordinators from six major Australian cities. Twenty five participants were recruited through a national RTW Coordinator website, and professional RTW interest groups using a snowballing technique. Participating workplace RTW Coordinators were required to have a minimum two years’ experience and to have been involved with the development and implementation of workplace policies and procedures. Thematic analysis was performed to identify meaningful patterns and themes.

Results:
The data analysed provided clear insight as to the specific role requirements necessary for working as an Australian workplace RTW Coordinator. Three key themes clearly emerged; communication skills, RTW Coordinator characteristics, and managing the RTW process.

Conclusion:
The findings indicate that RTW Coordinators require a wide range of traits, skills, and attributes to successfully perform this role. Effective management by the RTW Coordinator of the complex RTW process is essential to facilitate a smooth transition for the injured worker, alongside maintaining a professional relationship with the employer and external stakeholders. The results of this study can be utilised to further improve the selection of future RTW Coordinators.

Keywords  Workplace based return to work, return to work coordinators, disability managers, qualitative research
INTRODUCTION:

In Australian workplaces the primary responsibility of returning an injured worker to pre-injury duties lies with the employer. Over the past two decades changes to Australian state and territory legislation have required workplaces with a minimum number of employees to nominate a workplace Return to Work (RTW) Coordinator to facilitate the rehabilitation of injured workers at the worksite [1-6]. Australia has a workforce of approximately 11.5 million people [7], with the cost of work-related injuries estimated at $AUD 60.6 billion in 2008-9 [8]. The escalating cost of workplace injuries and the increase in workers’ compensation claims has become concerning to both state and federal governments [8]. Both internationally and within Australia there is a growing awareness that long-term work absence and work disability are harmful to physical and mental health and wellbeing [9]. There is clear evidence that supports the effectiveness of early intervention in the workplace for injured workers with the assistance of a RTW Coordinator, which in turn should reduce associated costs with the backfill of positions and workers’ compensation claims [10, 11].

Internationally, systematic reviews conducted by MacEachen et al. [12] and Franche et al. [10] supported the development of a set of seven key principles for successful RTW. These principles focused on three specific outcomes: duration of work disability, costs associated with work disability, and the overall quality of the worker’s life following a workplace injury [13]. Of the seven principles, the most relevant to the present study is principle number six, ‘Someone has the responsibility to coordinate RTW’ [13]. Franche et al. [10] identified that the commitment and accountability of a RTW Coordinator during the RTW process produces favourable outcomes. Furthermore, an employee or employer of the company could assume the RTW Coordinator role or alternatively, the employer may engage an external stakeholder to coordinate this process. The RTW Coordinator role involves coordination of the RTW process for the injured worker by planning an individualised RTW program, ensuring the injured worker understands the process, and by communicating relevant and important information to the employer, injured worker and other stakeholders to ensure a successful RTW to pre-injury duties.

Specifically, the Australian RTW Coordinator’s duties involve developing and implementing a RTW program, providing information to injured workers on workers’ compensation benefits and return to work practice, and identifying and coordinating the RTW process, in addition to liaising with external stakeholders [1-4]. The RTW Coordinator is considered to require excellent written and verbal communication skills, including negotiation and listening skills, and decision making skills, as
well as organisational and time management skills [1]. For some, the role can be very complex and difficult to balance with their other workplace responsibilities. Internationally, comparisons may be problematic due to differences that exist in the RTW process in different jurisdictions. Australia has a primarily public workers’ compensation system but in some jurisdictions it is operated privately. Whereas internationally some countries have a uniquely private insurance scheme (US) while others may be solely publicly underwritten (Canada) which might lead to some differences in the knowledge and skills required to perform this role [14]. Notably, the title of RTW Coordinator varies between states in Australia [15] (see Table 1) and in the international context, RTW Coordinators are also variously known as disability managers, case managers, disability prevention specialists and disability supervisors [16].

Insert Table 1 here

It is important to acknowledge and recognise the valuable role of the RTW Coordinator in the workplace and to ensure that the most suitable people are being nominated for the position. Shaw et al. [11] recognise the importance of understanding the complexity of the RTW Coordinator role in the effective management of injured workers. Selecting a suitable person to fulfil the role is imperative for a positive RTW experience for injured workers’. Appointment of a RTW Coordinator who does not possess the essential skills, attributes or knowledge to perform the role can have a detrimental impact upon the process which may lead to an increase in workers’ compensation costs and loss of productivity due to lost time [5]. Similarly, the consequences for injured workers can be loss of income, additional personal and familial stress, and an absence from participating in community life. Despite the clear benefits of a RTW Coordinator in the workplace, little effort has been made to systematically describe the role of RTW Coordinator [11, 17]. The present study builds on the work of Shaw et al [11] and their recommendations to further investigate and describe the role of the workplace RTW Coordinator and also responds to a recent Australian review which highlighted the need to investigate the background and role of the RTW Coordinator [15]. This study proposes to explore the perceptions and experiences of currently employed RTW Coordinators with respect to their role, and describe the essential qualities and attributes required by a person to perform the role successfully.
METHOD

A phenomenological qualitative study using focus groups was conducted with workplace RTW Coordinators. A phenomenological approach was chosen as this allows for the exploration of experiences and perceptions of individuals who share a common interest [18]. Focus group methodology was used to allow the participants to interact and consider each other’s opinions, attitudes and beliefs [19]. This group dynamic is thought to provide a mechanism to stimulate discussion and gain insight into the topic at greater depth [18, 20]. The focus groups were facilitated by one of the researchers (JBN) using questions developed and informed by a review of the literature [11, 12, 14, 19]. These questions were designed to elicit information about the knowledge, skills, attributes and behaviours which are required to perform the role of a RTW Coordinator. Ethical approval for the study was granted by the University of Newcastle Human Research Ethics Committee.

Participants
Legislation in most states of Australia (New South Wales, Victoria, Queensland, Tasmania and South Australia) requires workplaces to engage a RTW Coordinator to provide workplace based support and assistance to an injured employee. Purposive sampling was used to recruit RTW Coordinators in these states for the focus groups. The inclusion criteria were as follows: individuals who were proficient in spoken English, had a minimum of two years working as a RTW Coordinator with a large or small organisation, and experience with developing and implementing RTW policies and procedures. The participating RTW Coordinators came from diverse organisations with varying backgrounds (see Table 2). No focus groups were conducted in Western Australia, the Northern Territory or the Australian Capital Territory (ACT) as there are no legislative requirements in these jurisdictions.

Recruitment
Several methods were used for recruitment of RTW Coordinators for the study. Firstly, an advertisement for RTW Coordinators was placed with a national RTW Coordinator website requesting voluntary participation in the study. Limited success was achieved using this method, therefore state-based RTW Coordinator professional interest groups were contacted to advertise the study and the snowball sampling technique used to recruit additional participants [18]. Potential
participants were emailed an invitation to participate in a focus group by their respective interest group, accompanied by an information statement providing an overview of the study. Those interested in potentially participating were asked to contact the researchers.

**Procedure**

Focus groups of approximately 1 – 1.5 hours duration were conducted in Victoria, New South Wales (Sydney and Newcastle) and South Australia. Focus groups were also held via teleconference to capture RTW Coordinators in Tasmania and Queensland. Kruger and Casey (2009) suggest conference call focus groups as a means of allowing participants who are geographically dispersed to contribute without the associated costs of transporting them to one location. The principle disadvantages of the telephone focus groups are that the moderator is unable to observe the nonverbal communication and it could potentially lack the richness of evidence that would naturally occur in an in-person focus group [19]. The size of the focus groups ranged from two to seven participants. Written consent was obtained for all participants prior to commencement of the focus groups, with participants also informed that they could withdraw from the study at any time. All focus groups were recorded for accurate transcription.

**Data analysis:**

All recorded focus group data were transcribed verbatim and imported into NVIVO 10 software (QSR International, Cambridge, MA USA) for analysis [21]. Pseudonyms were used to de-identify the participants and their respective organisations. Following reading of the transcripts, regular meetings occurred between two of the researchers (JBN & CJ) in which data were inductively coded into relevant and meaningful categories [20]. Themes began to emerge from the data and further discourse between the two researchers allowed for intersubjective agreement on the final codes [22]. To ensure validity of the interpretation of the data, key themes were checked for confirming and disconfirming evidence within the dataset [23].

**RESULTS:**

A total of 25 RTW Coordinators participated in the six focus groups held in different locations across Australia. The RTW Coordinators in our study had varying backgrounds and were employed by both large and small organisations. The participants in this study had 11.3 yrs ± 8.2 (mean ± sd) of experience as workplace RTW Coordinators and were employed in the following areas: the insurance industry, workers’ compensation, human resource management, allied health, work, health and
safety. Three key themes emerged from the focus group data. These were communication skills, RTW Coordinator characteristics, and managing the RTW process.

Communication skills

The RTW Coordinators who participated in this study emphasised the need to possess excellent communication skills when dealing with injured workers, management and external stakeholders. As a number of RTW Coordinators expressed,

‘...you need to communicate well, and communication includes documentation and correspondence’ [Participant 14].

‘...communication is the key. Both verbal and written...but communication, phone, email or face to face, all those things are important’ [Participant 9].

The RTW Coordinators also highlighted the significance of active listening. They defined active listening to involve verbal and non-verbal skills, indicating empathy and understanding while trying to gain an insight into the perspective of the injured worker’s genuine needs.

‘Learn to listen very closely to what people are saying or not saying as well’ [Participant 5].

‘Just sit and listen, sit with them for an hour and just listen to them is very, very, very, helpful for them, but you need to listen, to hear what they’re saying, hear what their real problems are’ [Participant 16].

It became clear that the role of the RTW Coordinator involves dealing with many and varied stakeholders during the RTW process. RTW Coordinators noted the need for excellent negotiation skills and equally important, the ability to manage conflict resolution. Remaining non-judgemental and encouraging cooperation between all involved parties was also viewed as important. As one participant stated...‘you need to also have negotiation skills and conflict resolution skills. And you need to have very strong skills in that area’ [Participant 25].

While there is limited discussion in the literature on the need for RTW Coordinators to have complex problem solving and mediation skills [11], RTW Coordinators in our study were in agreement and affirm this as a necessary competency. Other important skills noted were interpersonal (people)
skills and counselling skills. Collectively, the RTW Coordinators also cited organisational skills as crucial to promoting effective coordination;

‘...I think we’ve got to have good organisational skills too’ [Participant 10].

‘...and a must have is people skills ‘[Participant 13].

In the absence of a health professional background, the RTW Coordinators in this study confirmed the importance of having a fundamental understanding of medical terminology which assisted them with interpreting medical reports. This skill also provided the RTW Coordinator with a clearer understanding of the injury which could allow for more appropriate decisions to be made in relation to selecting suitable duties for the injured worker, and most importantly assisted in communicating with the injured workers’ treating doctor.

‘...at least a basic understanding of – um the human body...’[Participant 23].

‘...you need to have an understanding of what their symptoms are...’[Participant 25].

The RTW Coordinators also believed communication with the treating doctor was imperative to ensure the smooth transition of the injured worker to their pre-injury duties. The participants in this study acknowledge the importance of regularly communicating with the injured workers treating doctor, however emphasised they frequently experienced difficulty when seeking additional information on an injured worker. Barriers identified by the workplace RTW Coordinators includes a lack of detail provided by the doctor on the medical certificate regarding suitable duties, and an inability to liaise directly with the doctor. Additionally, the RTW Coordinators found that communication problems with treating doctor often resulted in causing significant delays in the RTW process.

‘...where we get really stuck is obviously the doctors who are quite difficult, who don’t respond to our phone calls or respond to our treaters reports, do not respond to our return to work offers’  [Participant 6].
RTW Coordinator characteristics

RTW Coordinators in our study expressed the importance of inherent interpersonal skills when relating to injured workers and markedly articulated the necessity of having particular essential skills; attributes and knowledge to successfully fulfil the role (see Table 3). The participants clearly stated that the knowledge required for their role is both learned knowledge (in the form of training) and experiential knowledge (knowledge that one can only gain from personal experience).

Several RTW Coordinators in our study believed that enlisting life experiences as necessary to assist with the many challenges encountered during the RTW process. As two participants stated; ‘...You’ve got to relate to them, so life experience’ [Participant 18] and [Participant 25] added ‘I’m 54 and I’m not sure that when I was 21...doing this job...I’m not sure I could have added that...life experience’.

The RTW Coordinators in this study listed many inherent attributes such as being friendly, organised and supportive as essential to facilitate the role. One of the most notable traits identified by the RTW Coordinators was empathy. As one of the RTW Coordinators explained;

‘...someone that has empathy but – and I’m not talking about sympathy but empathy’ [Participant 20].

Other attributes such as assertiveness, gregariousness, adaptability, patience and compassion were commonly proposed as necessary qualities required to successfully perform the role of the RTW Coordinator. Additional important attributes included strong leadership skills and the ability to multi-task. Furthermore, interpersonal behaviours such as genuineness, trust and respectfulness were considered necessary to create a strong relationship with the injured worker and other stakeholders. As noted by two RTW Coordinators; ‘Basically being able to give respect, to be able to earn respect’... [Participant 11].

‘If someone is injured for a while they need genuine support and empathy, they don’t want sympathy, or, they just want people to understand’... [Participant 16].

Coordinating and achieving a safe RTW for an injured worker was often a rewarding experience for RTW Coordinators. However the demands and challenges faced by some RTW Coordinators while...
performing this role could be emotionally challenging. One of the RTW Coordinators explained, ‘...we have to be tough skinned and can’t really take things personally’ [Participant 6].

Almost all of the RTW Coordinators in this study agreed that the vulnerability of a worker following a significant injury often gave them access to the injured workers’ personal and private being. Maintaining an emotional distance and keeping personal sentiments out of these sensitive situations was considered important in order to remain objective and effective. As Participant 4 reflected, ‘If you get emotionally involved then you are less effective’.

Managing the RTW process

The RTW Coordinators generally felt confident in their ability to effectively manage the RTW process while working to achieve the best outcome for the injured worker.

‘I am able to comfortably, and with confidence, speak to any level of director or general manager or team leader and talk on a professional level, ...I am confident – confident with my career to date that I have the skills and knowledge’ [Participant 23].

The RTW Coordinators acknowledged that the RTW process can be challenging and is one of continual learning. Despite this, the RTW Coordinators who participated in this study were confident in their ability to identify suitable duties and to know when to outsource for assistance. As one RTW Coordinator remarked;

‘Because that’s a skill, being able to – being able to help people understand where you are coming from and what you are trying to achieve... I think the ability to do proactive return to work where you can propose programs and obviously there are some other skills and knowledge that is to do with that but, having that goals oriented return to work programs, where we are trying to achieve full pre-entry duties, and that is our commitment, as a business, as a RTW coordinator ’[Participant 15].

Success in the RTW process was considered to occur when collaboration exited between all stakeholders. The RTW Coordinators in this study openly expressed the need to be flexible when dealing with executive management, external stakeholders and the injured worker;
‘It’s about having an individual who has the insight to – to be able to get the right balance between what are the – what’s the injured person’s right and obligations, and what is the – the businesses right and obligations’ [Participant 23].

Several RTW Coordinators in this study firmly believed that organisations with a strong commitment and well established policies contribute significantly to the success of returning the injured worker to their pre-injury duties.

‘If a person came into an organisation with a policy and ground rule that everyone abides by, then that policy outlines the return to work program, who’s got what responsibilities and what happens in the event of, they’re the rules of engagement. If you put a person into that role who has people skills, with that behind them to rely upon, the system will work fine. If you had the people skills but they haven’t got this policy or procedure in place, they’ve got nothing to make a firm decision for backing of the organisation behind them’ [Participant 11].

While some RTW Coordinators in the present study were well resourced and highly supported by their organisations, others struggled due to their part-time status or because their position required them to ‘wear many hats’ [24]. As one RTW Coordinator states; ‘the payroll person just becomes the return to work coordinator, as well, and they have no choice in it, but, you’re it’ [Participant 23].

RTW Coordinators emphasised the importance of the injured workers’ awareness of the RTW Coordinator in the workplace and the key role they have in the RTW process. Additionally, RTW Coordinators believed that understanding their role in the workplace provides the injured worker with faith in the RTW Coordinator’s ability to advocate for them, manage their injury accordingly, and facilitate their RTW.

‘I think one last thing is your presence in the workplace, So, before people get injured how they perceive you and how you conduct yourself in the workplace, I think that’s really important…So, your pre-relationship with your workforce before their injury is important’ [Participant 4].
The RTW process involves many stakeholders and due to the uncertainty and unpredictability surrounding the process, confusion can occur among key stakeholders. RTW Coordinators identified they often encountered obstacles within the RTW process from various stakeholders. Examples given related to claims disputes with the insurance company, or lack of response when requesting clearer direction from the nominated treating doctor about a worker’s suitable duties or ability to RTW. RTW Coordinators in this study acknowledged the complexity of the process, however believed they have the tenacity and the skills to engage external stakeholders when necessary. As one RTW Coordinator stated; ‘It is a continual process of learning’ [Participant 15]. Other RTW Coordinators comments on process included;

‘...You need to be flexible in dealing with your executive management, with the individual managers and with the injured worker as well, and with the external providers whether they’re physios or doctors and so on......each one of these parties need to know you are on their side, they really need to feel that’ [Participant 4].

‘...I think persistence, especially walking into a very sort of hostile environment towards compensation and return to work and that sort of thing’ [Participant 3].

‘...and a little bit of perseverance as well as the ability to keep pushing through’ [Participant 18].

DISCUSSION
The findings of this study provide a unique insight into a range of qualities and traits Australian RTW Coordinators perceive as essential for the successful facilitation of the RTW process. The RTW Coordinators in this study were committed to the RTW process and experienced in the development of RTW programs and implementation of RTW coordination. They highlighted that for success to occur within the RTW process, much relies on the individual RTW Coordinator’s inherent interpersonal traits such as being friendly, organised, and supportive, along with possessing good communication skills. Other attributes highlighted included empathy, assertiveness, gregariousness, adaptability, patience and compassion when dealing with injured workers. The skills and traits described by the RTW Coordinators in this study could be used to inform some of the selection criteria for individuals choosing to enter this field [14].
Until now little has been known about the background of the Australian RTW Coordinator. The legislation in most Australian states requires employers with 20 or more employees to have a designated RTW Coordinator in their workplace. As a result of this legislation the background of RTW Coordinators can vary significantly throughout the states, with many Australian RTW Coordinators often employed in the role in conjunction with other work roles and without any health background or formal training [4, 25, 26]. Although involving only a modest sample, this study reflected the very diverse backgrounds of individuals before they take on the role of workplace RTW Coordinator in Australia. Nearly all workplace RTW Coordinators have been identified as having backgrounds in ergonomics, allied health or nursing [11]. Only nine of the 25 participants in this study had a health background and notably health or ergonomic background was not deemed a criterion for the role, however most of the RTW Coordinators in this study believed that an understanding of medical terminology would be useful for those without health backgrounds, and agreed on the advantages of this knowledge when determining suitable duties or communicating with doctors. A recent study [11] explored the issue of how much medical knowledge is required for workplace RTW Coordinators and proposed that RTW Coordinators be familiar with general disabling medical conditions as an important prerequisite for facilitating RTW. The RTW Coordinators in this study expressed views consistent with this recent study [11] and acknowledged that having some awareness and understanding of relevant medical conditions would be beneficial in discourse with doctors and provide clarity when selecting appropriate suitable duties. Organisations often employ external people to perform the role of workplace RTW Coordinator and sometimes consider a health background a prerequisite for the position [27].

In terms of RTW Coordinator characteristics, the participants in the present study provided some insight into the role requirements of the Australian workplace RTW Coordinator, highlighting the need for inherent personal qualities, along with the essential learned skills and knowledge necessary to facilitate the RTW process. This concurs with previous research which suggests well established individual qualities and personal traits are a necessary foundation for RTW Coordinators [14]. In terms of key skills, those frequently discussed by the RTW Coordinators in this study included both verbal and non-verbal communication skills. The literature similarly supports the requirement for competency in both written and verbal communication when facilitating the RTW process [14]. Additional and further valued skills identified by the participants in this study were active listening and negotiating skills, highlighting these skills as critical components for the role which is consistent with Pransky et al. findings in the study of the ‘Development and validation of competencies for RTW Coordinators’[14]. As the RTW process unfolds, the RTW Coordinators emphasised the importance
of listening to the injured workers primary needs, while negotiating the needs of the employer, as being crucial to the success of the RTW process. Possessing the ability to effectively advocate for both parties, and to mediate any differences experienced between the employers and their employees equitably, is crucial for the RTW Coordinator to assist in the prevention of adversarial relationships and prevent further disputes arising which is consistent with the findings of Shaw et al. [11].

Similarities between international and Australian RTW Coordinators are evident in the results. In this study, necessary specific skills identified in the literature include engaging participation of stakeholders in the RTW process, and the ability to maintain credibility with all stakeholders while effectively coordinating the RTW process [11]. The Australian RTW Coordinators in the present study considered themselves competent in these skills, with the capacity to draw on their personal life experiences to assist them in their role. Other competencies identified in this study by the RTW Coordinators also included their ability to be flexible and to exercise effective organisational skills. These competencies concur with some of the findings and recommendation from Pranksy et al. Gardener et al. [28] consider the expectations of the role of the RTW Coordinator and highlighted the necessity of possessing problem solving skills, conflict resolution skills and effective communication skills to successfully engage and communicate with all stakeholders. Similarly, the RTW Coordinators in the present study are consistent with the findings of Gardener et al and acknowledge these key skills as necessary to achieve the desired goal of RTW for the injured worker.

The RTW Coordinators in this study were committed to facilitating a successful RTW for injured workers despite the reported challenges encountered when communicating with the injured workers’ treating doctor. Given the important role the treating doctor plays in the medical coordination of the RTW process, it is imperative that there good communication between the doctor and the RTW Coordinators to enable the facilitation of the injured workers RTW. This has been highlighted in other studies [24, 29, 30], with the RTW process being negatively impacted by communication difficulties. This study suggests communication, particularly between the RTW Coordinator and the doctor is a common issue across Australia and is an area that needs attention to improve the RTW process for injured workers.

The RTW Coordinators also emphasised the importance of organisational commitment and support for the duration of the RTW process. Often the RTW process can be lengthy and requires managerial, supervisory and employee commitment for a successful transition of the injured worker to pre-injury
duties. In particular, the involvement of a workplace RTW Coordinator needs to be supported, with evidence of greater effectiveness and better outcomes in the RTW process as a result [11]. Similarly, RTW Coordinators from the present study expressed the importance of the injured worker’s awareness of the RTW Coordinator in the workplace and the key role they play in the RTW process. Additionally, RTW Coordinators believed that by understanding the role of the RTW Coordinator in the workplace, the injured worker will have greater confidence in their ability to advocate for them, manage their injury and facilitate their successful RTW.

**Study strengths and limitations**

The qualitative nature of focus groups limits the generalisablity of the findings, as does the modest sample size. However the methodology employed is appropriate to offer insights into the attitudes, qualities and traits of professional groups who rarely have the opportunity for discussion or debate. Thus the focus groups brought together a range of RTW Coordinators from different employment sectors, with different experiences, and provided a unique opportunity to discuss the role and essential characteristics required of the RTW Coordinator. Whilst the authors acknowledge that other stakeholders are involved in the RTW process and may bring differing perspectives, the primary aim of this study was to determine the unique view and experiences of workplace RTW Coordinators due to their pivotal role in the RTW process. Future research to further explore aspects of the RTW Coordinator should involve investigation of the communication between the various stakeholders and how this can be enhanced to improve the RTW process for injured workers.

**CONCLUSION:**

This study identified the importance of an individual’s inherent interpersonal traits such as bring friendly, supportive and organised with the most notable trait being empathy. Other attributes such as assertiveness, gregariousness, adaptability, patience and compassion along with communication skills, and knowledge of the RTW process were all identified as necessary to assist in the RTW process for injured workers. The findings of this study can inform relevant stakeholders and may assist in the recruitment process of RTW Coordinators for employers.

**Acknowledgments**

The authors wish to thank the RTW Coordinators who participated in this study. We also thank the organisations for their support with recruiting RTW Coordinators.
Conflict of Interest

Joanna Bohatko-Naismith, Carole James, Maya Guest and Darren A. Rivett declare that they have no conflict of interest.
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### Table 1 Legislative requirement for Australian RTW Coordinators

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Position title</th>
<th>Worksite appointment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australian Capital Territory [31]</td>
<td>No legislative requirement</td>
<td>Approved insurer and employer</td>
</tr>
<tr>
<td>Comcare, Commonwealth [32]</td>
<td>Case manager</td>
<td>Employer nominated (recommended, not mandatory)</td>
</tr>
<tr>
<td>New South Wales [1]</td>
<td>Return to Work Coordinator</td>
<td>Employer nominated if greater than 20 employees</td>
</tr>
<tr>
<td>Northern Territory [33]</td>
<td>No legislative requirement</td>
<td>Approved insurer and employer</td>
</tr>
<tr>
<td>Queensland [4]</td>
<td>Initially managed by a WorkCover Queensland Customer Advisor unless the company wages are in excess $5.577 million or is a high risk industry with wages in excess $1.63 million. Then they must have a Rehabilitation and Return to Work Coordinator</td>
<td>Employer nominated</td>
</tr>
<tr>
<td>Seafare, Commonwealth [32]</td>
<td>No legislative requirement</td>
<td>Employer or Claims Manager</td>
</tr>
<tr>
<td>South Australia [26]</td>
<td>Rehabilitation and Return to Work Coordinator</td>
<td>Employer nominated if greater than 30 employees</td>
</tr>
<tr>
<td>Tasmania [2]</td>
<td>Return to Work Coordinator</td>
<td>Employer nominated if greater than 50 workers</td>
</tr>
<tr>
<td>Victoria [3]</td>
<td>Return to Work Coordinator</td>
<td>Employer nominated</td>
</tr>
<tr>
<td>Western Australia [34]</td>
<td>No legislative requirement</td>
<td>Only by employer unless he appoints Injury Management Coordinator</td>
</tr>
</tbody>
</table>

### Table 2 Study participants

<table>
<thead>
<tr>
<th>State</th>
<th>No. participants/gender</th>
<th>Background</th>
</tr>
</thead>
<tbody>
<tr>
<td>New South Wales City</td>
<td>4 (1 male, 3 female)</td>
<td>6 x clinical</td>
</tr>
<tr>
<td></td>
<td>7 (1 male, 6 female)</td>
<td>4 x administration</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 x other</td>
</tr>
<tr>
<td>New South Wales Regional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Queensland</td>
<td>2 (2 female)</td>
<td>1 x clinical</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 x other</td>
</tr>
<tr>
<td>South Australia</td>
<td>3 (1 male, 2 female)</td>
<td>3 x administration</td>
</tr>
<tr>
<td>Tasmania</td>
<td>2 (1 male, 1 female)</td>
<td>2 x administration</td>
</tr>
<tr>
<td>Victoria</td>
<td>7 (2 male, 5 female)</td>
<td>2 x clinical</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2 x administration</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 x other</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2 x not specified</td>
</tr>
<tr>
<td>Table 3 Inherent interpersonal traits and attributes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Empathy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leadership</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Multi-task</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perseverance/ persistence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compassionate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friendly</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organised</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supportive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assertive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gregarious</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adaptable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life experience/ skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Learned experience (training)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>