INQUIRY INTO NSW WORKERS COMPENSATION SCHEME

Name: Name suppressed

Date received: 9/05/2012



From:

To: <workerscompinquiry@parliament.nsw.gov.au>

Date:

5/9/2012 7:15 pm

Subject:

Proposed Workcover Reforms

It was with much dismay that I read of the proposed cuts and reforms to the NSW Workers Compensation System, not so much the reforms but cuts. I did note that it has been stated that no injured worker will be worse off or their benefits cut. This remains to be seen.

I have been one of those horrible claimants who have been in the system for over 7 years and 'yes' I have cost the system a fortune, there is not one day that I am not grateful for the system that is in place but it has cost me dearly. At the time of my accident I was only 41 and still looked forward to a future.

Seven years ago I sustained multiple injuries including a head injury at work after falling down a flight of stairs, the policy put in place after my accident was that all employees now have to use the handrail.

After my accident I was treated at the local private hospital scanned etc and sent home 24 hours later. I was followed up by a GP who was not my normal doctor but despite having a persistent headache for nearly 4 weeks was treated like a worker's compensation malingerer and not re-scanned. On the 17 December 2004 I suffered a massive subarachnoid hemorrhage with resulting hydrocephalus. I had been having a slow bleed for the entire four weeks. Westmead Hospital (closest emergency) could not take me issuing a code red, I was transferred to Hawkesbury Hospital, some five hours later the diagnoses was made and I was transferred to Nepean Hospital and placed in Intensive Care. Two days later I was rushed to surgery having to have a burr hole with a drain inserted into my cerebral ventricle. I remained in hospital for nearly two weeks. I returned six weeks later for review still suffering massive headaches, vision loss and was having trouble remembering where or what I was doing. I was dismissed with; Things will settle, you will be fine'. Two years later after many tests, fear and severe financial hardship because I could not return to work due to daily debilitating headaches, it was discovered that I had swelling of the optic nerve caused by a CSF blockage. I eventually received a lumbar shunt, but I have been left me with extreme vision problems and to date I have had around 20 revisions of the shunt (now a VA Shunt) and I now suffer from arachnoiditis which is an inflammation of the nerves at the bottom of my spine, possibly introduced from infection from one of the many operations. This condition is on days extremely debilitating, let alone the constant battle to feel normal despite at the moment having a functioning shunt. I have also had surgery on my neck after injuring this in the fall. I might need surgery for a lumbar disc on my back in the future. My most recent surgeries were in November 2011.

I lost my home due to not being able to pay my mortgage. I went to work in order to pay my bills but due to an injury at work, that would not let me return to work in any capacity I was then left unable to pay my bills being forced to live on only \$310 per week. I was lucky to have enough equity in my home to downsize, without that I would now be on the streets, unable to afford to pay rent or mortgage. I moved on my hands and knees due to the shunt failing within 3 weeks of the operation and the surgeon I was then under, not willing to do a revision until months (2) later. I should not have had to move. It was my home and a home that I loved. I count myself lucky for what I do have but that is through my own hard work and through me being adequately insured (TPD), (compensation and TPD took five years to achieve due to my condition not stabilizing under Workcover Criteria, I asked for Nathan Rees to help of which he did. I can now manage.JUST, and that is without a mortgage, but I do have everyday bills, strata, insurance, registration, (I am still allowed to drive for the time being) rates, electricity (we won't even go there) The statutory rate only covers utilities and a little food but it does not pay for rent or mortgage it also does not allow me the luxury of paying my own treatment. If you take my medical expenses from me, I will be forced to use the medicare system, I will be a burden on that too. I also now do not have any superannuation to fall back on. I have to budget with my

compensation and hopefully it will last until I die. I am hoping that I do not live a long life.

Being on Workers Compensation and not being able to work has taken away any control of my life, I cannot take on any work due to being injured, that means not being able to take on extra work when there is a blow out in the budget, I cannot help my children physically or financially, I am just a burden to most. I do not have a partner. My injury severely limits my social life.

Due to circumstances that forced me to attend Westmead Emergency, I am now under the excellent care of Dr Brian Owler who has been my saving grace. I am now treated with dignity and respect not as a 'Workers Compensation claimant'. My insurance Managers at QBE have been excellent in their care. I am not complaining about any care that I have received.

Changes do have to be made to 'Workcover'. I have worked on the other side too. I have seen the 'malingerers' or people to scared to return to work. The rehabilitation providers do not provide. I know of a person who recently purchased his own business due to his employers unable (unwilling) to find him suitable duties. (He also had a legitimate injury backed up by MRI), his employers fought every step of the way, using the system, knowing that they eventually would get rid of him because he could not afford to live. No-one would retrain him, or help him find work, just gave him a job sheet and told him to apply for 10 jobs per week or he would lose his measly entitlements. He could not tolerate the bullying attitude of his Claims Managers who were self insured. He now works with a back injury to scared to let anyone know that he has a back injury for fear of repercussions and will continue to do so, living on analgesia. He should not have to. Reforms need to be made for self insurers and rehabilitation providers who use the system, get paid for by the system, but fail to provide.

I am concerned that if Workers Compensation is taken away from 'Workers' or too many restraints are placed upon the workers; Employers will not abide by the Workcover guidelines. Most self insurers laugh at them now. Things do have to be change, but please let it be the right change.

I wrote to Mr O'Farrell just before he was elected and Christina Keneally, asking them to re-instate some of the rights of Claimants, Mr O'Farrell chose not to answer. Wayne Merton convinced me that a change of government would see effective and beneficial changes to both employers and claimants. From the veiled secrecy of the reports I fear this is not going to happen. The reports that the finance minister Greg Pearce has used in the media he has taken one of the worse claimants, and stated this is why the need for reform, why oh why was this claimant allowed to continue on benefits, and not sent to a Independent Medical Specialist for review? Was she placed under surveillance?

Apparently Workcover is 4 billion dollars in debt. Is it us existing claimants that are going to pay the price?, Or is there going to be reforms set in place that allows this debt to be paid without penalizing those already in the system?

I understand the need for reform; please let these reforms reflect a fair and positive outcome, not relegating the likes of us severely injured to the emergency waiting rooms and having our already extremely small incomes made smaller. We will still be a burden to the working population and the state, just put in a different basket in a different system.

Yours faithfully