

**FIRST REVIEW OF THE WORKERS COMPENSATION
SCHEME**

Name: Mr Greg Green
Date received: 25 September 2016

Partially
Confidential

1. My name is Greg Green
2. I have had 2 claims under Workers Comp both declined by the insurers.
3. Gallagher Bassett were the original insurers and when they lost the Workers comp gig I was passed over to Allianz.
4. I have available many emails to support what I am saying but have not included them due to the number of pages and the amount of detail included in them . I am more than happy to make them available as evidence of what I am saying if further clarification is required.
5. I will also be putting all the paperwork that I have up on a website which is currently being worked on, so I will inform the committee when this information will be available online.
6. The injury to right knee cartilage occurred at work Nov 5, 2009.
7. Operation was about 10 weeks after injury. Between the injury and operation, the torn cartilage got progressively worse and my knee was totally locked up for the last 3 weeks. During this time the cartilage managed to get caught up and caused a fracture on the bone behind my patella.
8. During the operation the surgeon removed over half of the torn cartilage. The doctor told me this when he gave me an A4 sheet of photographs of the inside of my knee. I have photographic evidence from the operation.

9. The cartilage has been severely compromised because so much has been removed. I have 2 ends of torn cartilage which can now get caught instead of one, and somehow my knee has supposedly healed properly. This situation is not going to get any better. I will at some stage need a knee replacement but this is now done only as a last resort due to restrictions on movement and durability of the joints.
10. My knee continued to have major problems after the operation. My return to work wasn't as smooth and event free as stated in his report, and the insurers would say in letters of declination.
11. These problems were reported to my treating doctor during this time and this is reflected in my medical records.
12. During early 2011 I had another injury at work due to a workbench which was not suitable for the work being done. The bench had a 2 inch , 90 degree angle iron as an edge which supported my arm. This was documented with visits to my doctor.
13. This injury was not reported to my employer and an explanation is included in an Investigator's report which was prepared for Gallagher Bassett by G4S (?) in November 2013, the day after did his appointment with me.
14. In late May 2013 I contacted Gallagher Bassett to get the knee issues resolved. No one returned my call. This is a common response by the Agents.

15. I contacted GB again in early September and made a recurrence claim for my right knee injury.
16. I also made a new claim for injury to my left elbow. This injury was a bursitis caused by sharp hard edge of the propagation table (actually a large flat barrow used to move nursery stock around the nursery). I now have nerve entrapment which gives symptoms ranging from chronic pain to like hitting your funny bone all the time.
17. Gallagher Bassett split my claims between 2 teams.
18. My first claim for the knee saw me sent off to the good ol'
.
19. The second claim saw an investigator from G4S(?) visit me at my home. This appointment was the day after I saw and I detailed to the investigator what had gone down in the appointment with the day before. This is also detailed in emails to Gallagher Bassett about the appointment with .
20. Gallagher Bassett received the report from the investigator and subsequently approved my second claim.
21. This was just before Christmas 2013. I was on Newstart with a medical certificate so I advised Centrelink and was removed from receiving a payment.
22. A few days after being told by my case manager that I had been approved I received a letter from GB saying that after internal legal review I had had my claim declined.

23. The reason given was something like “fresh medical evidence” or equivalent ... during the few days after approval of the claim there was no “new” medical evidence found or discovered.... it was only a way of declining my claim without having to provide me with a copy of the investigator’s report.
24. I was paid about \$7000 as back pay from the date I lodged my claim with GB. I went off Centrelink payment and didn’t get back onto Centrelink until the start of FEB 2014.
25. When I received the letter of declination there were a number of loose sheets included with the letter. I assumed that these were the “new” medical records but rang my case manager to discuss one piece of evidence which I couldn’t understand.
26. The letter of declination did not list the documents as it should have. The documents were not attached to the letter in any way. I asked my case manager what documents had been sent with the letter and she couldn’t tell me ...
27. One document used to decline my claim was an ultrasound for my right elbow some 5 years before. The claim which was approved and then declined by GB was for my LEFT elbow.
28. In a telephone conversation with my case manager, she suggested that I read the letter of declination carefully.
29. She then suggested that I read the letter VERY carefully ...
30. Which I did, and what I found was another example of a False Document and disregard for the rules of the game that is Workers Comp NSW.

31. The letter of declination states that they have included “Documents relevant to their decision” ... The problem the insurers completely ignore is that the Act states something along the lines of “Documents relevant to the CLAIM” .
32. When a letter is created by the insurers and they state that “This notice is given in accordance with Section 74 ...” then it should be in the format which is stipulated in the Section 74 they are referring to ...
33. I believe that Gallagher Bassett

 , and then incorrect wording is used to justify declining the claim.
34. So I leave GB in Dec 2013 with both claims being declined. My recurrence claim was declined using 's False Document and my second claim was declined using new medical evidence which included an ultrasound for the wrong limb.
35. GB claimed that my left elbow injury was a disease, and therefore not claimable .. apparently the “disease” had travelled from my right elbow all the way to my left elbow over a period of about 5 years ... I asked GB whether it was an external contagious disease, or perhaps an internal problem, but they didn't reply (again)...
36. Another point GB used to decline my claim was that, somewhere, my doctor had referred to “horticultural duties” after the time when I had left the first employer. GB took that to mean

that my left elbow problem was due to the “fact” that I had continued doing “horticultural duties” at the subsequent employer.

37. I understand that Workers Compensation is influenced by the award under which workers are employed.

38. I am not employed under the Horticulture Award, I am employed under the Nursery Industry Award. If that is true then “horticultural duties” shouldn’t come into it.

39. I was a plant propagator at the first employer ... I was a nursery hand at the subsequent employer. They are 2 completely different jobs.

40. In Dec 2013 after I had my claim declined I contacted a solicitor from the Ilars list of approved solicitors.

41. I sent the solicitor copies of everything in my file including copies of all emails regarding my matters ...

42. The issues around the legality of _____’s report were well vented in my correspondence to Bourke Love solicitors.

43. There was a delay in getting to see the principal solicitor so after 2 cancelled appointments I had a short 20min meeting with a lady solicitor who told me she was collecting some info because the principal guy was too busy ...

44. The very first thing the solicitor said to me before we had even sat down was “I have to tell you that you and I are (some large distance) apart when it comes to _____’s report”... it was pretty obvious from the discussion we had that she didn’t

understand the Workers Compensation Act or the relevant guidelines.

45. She told me that [redacted] didn't have to list documents that an injured worker took to the appointment because it wasn't part of his brief. This is contrary to the Workcover Guidelines covering IMEs and their reports. This is also contrary to Practice Direction 3 on the WC Commission website.
46. The meeting was tense because for whatever she threw up at me to defend [redacted] and his report, I was able to point out that she was wrong. At one point she reached across the desk and grabbed my folder and proceeded to remove documents she thought were relevant. This was after I pointed out to her that the reports are actually being prepared to assist the WC Commission in a hearing and had to stand up in a court of law.
47. As she walked off after the appointment she said that the problem with me was that I didn't understand how "the game is played".
48. I thought to myself that I may not know how the game is played, but I do know the rules.
49. It is a pity that many people who are involved in playing the game don't know the rules or couldn't give a stuff about them.
50. As I said in my covering letter, all that needs to be done is enforce the rules that are already in place.
51. It took over 2 months to receive a reply after numerous telephone calls to find out what was happening.

52. The solicitor had returned my files by mail, but not as files but as one mixed up pile of sheets of paper.
53. It took so long to send a reply because I believe that after our meeting she may have looked up the guidelines etc which are relevant to Expert Witness Reports and then realized she would look stupid if she now had to agree with what I was saying.
54. The reason she gave for declining to take on my case was because I apparently insisted on holding the wrong employer responsible for my injuries, and she believed that given my determination to hold the wrong employer responsible and ignore her advice then she was unable to act for me...
55. Couple of MINOR issues with all this ... firstly she had not given me any advice about anything until that letter was authored.
56. After the appointment (where I am pretty sure that I demonstrated to her that she was a when it came to knowing the rules of the game), she didn't contact me to discuss her impression about me. I only received a letter because I was chasing her up for a reply.
57. Ironically I was told by the principal solicitor (much later) that they decided not to take my case because I lied to them ... if that were true then the letter should have stated that, but it didn't ... if they were under the impression that I was lying then why no chance to clarify the situation for them ? ... I believe the reason I was dumped by the lady solicitor was because she realized that

what I was saying was correct ... there was no way that she could come back to me and agree with what I was saying. There was no way that she was going to her boss and saying that she got it all wrong...

58. So I was dumped in April 2014 and then got a referral to Sommerville Laundry Lomax to lodge my paperwork with WIRO.
59. I first contacted SLL in May 2014 and and I had an appointment late June (approx).
60. He was to lodge a claim for funding with WIRO for my two claims.
61. In early Sept I contacted WIRO to see if my claim for funding had been lodged and I was informed that it had not been. I rang and he told me that it had been lodged and they were waiting for a reply.
62. 2 weeks later I contacted WIRO again, and I was informed that it still had not been lodged. I contacted SLL again and asked to speak with the first solicitor I had spoken with at SLL. When the call was answered it was instead. He told me again that the application for funding had been lodged and it was all WIROs fault and we had to wait.
63. I have since found out that the application for funding was finally lodged in early Oct 2014.
64. I finally got funding approved in Jan 2015, but only after WIRO had to chase up for more information a few times.

65. SLL made an appointment to see an IME to produce a report for “our side”... after 2 cancellations and many weeks I finally had an appointment with my IME.
66. To be honest it was just as much of a waste of time as going to see .
67. My Ol’ mate was about 3 hours late and was more stressed than me... the report for me was positive but the insurers declined to accept it because even tho my doc was a specialist in giving Expert Witness Reports, he was still only qualified as a general surgeon.
68. I was told by Allianz, then the insurers after FINALLY forwarded it to them, that my doc was only a general surgeon and their ol dude was an expert in ortho matters ... as such my long awaited report was and they were going to stand by their “expert witness” and his flawed and False report , even tho there were many mistakes ... and did jack to address this point.
69. After received the report from my IME he didn’t inform me , even tho I had been chasing his office up to this point.
70. I was informed by that he had the report only during one of my many telephone calls.
71. At this moment of writing I can’t recall the exact order of events because to do so would mean that I would have to go through all my files and then send you all copies. I have many,

many,many emails and documents available if any members of the committee wish to see it all.

72. I am working on an accurate timeline and will make that available to the committee later this week. All these documents will be available on the website currently under construction by some equally injured workers.
73. I would be more than happy to demonstrate to the members of the parliamentary committee just how totally the newly improved, pasteurised, homogenised and mega efficient Workers comp system has been totally abused by Insurance Agents , thanks to some privatising of a government function.
74. I am pretty sure that when a set of impartial eyes examines my case files in total and in context, that same conclusion will be reached.
75. And the with space that my tortured head is in at this moment of writing I would be tempted to include everything and then this CONSISE explanation of how I have been screwed over by the new “system” would be running out to, at a guess, over 30 pages.
76. For some reason best known only to my solicitor, he didn’t apply for a hearing date until just before Christmas 2015. I was told by that he would ask for an expedited hearing date.
77. When I checked with the WC Commission I was told by the person assisting me that an expedited hearing date was not

requested by my solicitor. When I checked with he tells more lies that he did request it.

78. A “hearing date” is allocated and I wait patiently to hear from . The day before the “hearing” I call because he hasn’t bothered to contact me. We had a short discussion and he made the point that “we” (he likes to use the collective “we” when he tries to spread blame) would try “our” hardest to get a good outcome.

79. Come the day of the “hearing” I am waiting patiently by the phone for someone to call me for the teleconference. About 10 mins after the time I was told to be ready for a call, my phone rings and it was the solicitor who was supposed to be representing me to say “Greg, you missed the hearing ... where were you ?”

80. As you may imagine I was mightily that he hadn’t even tried to contact me.

81. Not to worry says ... apparently there was good news on report beamed down to me across the telephony wires ... the arbitrator, I was told, had not accepted their report and they had the time between that hearing and another hearing to be set down on the first possible date, in which to either get a corrected report, a new report or they had to rely on their existing report.

82. There was an appointment made by the other side for me to go back to Ol’ . They also made an appointment with a company called Kontectk or some such ridiculously spelt company, for a work place assessment .

83. The firm instructions to me from my solicitor was to not fill out any of their forms because I had a matter before the Commission. But apparently it was perfectly kosher with for me to go along and submit myself to an interview and a physical assessment.
84. The day before my appointment with I was informed by SLL that the insurers/their solicitors had cancelled my appointment with . So the IME report which was so important and critical in my claim being declined and delayed for 3 years had finally been shown up for this that it is, and now even was avoiding an opportunity to correct his errors and lies.
85. I didn't find out until the final "hearing" that it was who had pulled the plug on the appointment, not the insurers or their solicitors as I was told. solicitor had a laugh with , who apparently was the barrister who was supposed to be representing me, about how had been the one to run away from the False Document he had created and the opportunity to correct his lies with another appointment.
86. I didn't even know that I had a barrister ... didn't tell me that until he was introducing me at the hearing and AFTER they had had already had discussions to resolve the matter before I had arrived for a hearing..
87. Call me old fashioned but you would expect that if a barrister was going to be representing someone they would at least meet or

discuss my claims before the said barrister and said
solicitor had settled my claims.

88. The hearing wasn't a hearing in the traditional sense ... you know, like injured worker gets up and actually has the opportunity to tell the arbitrator my version of events ... it was a done deal before I got there.

89. The appointment at KONEct\$*% or whatever they are called was more and delays. For some reason the second of 2 ladies who was to interview me had to cancel. This was the part of the assessment related to my injury and my mobility. I was told that the second part of the interview could be done because it was more discussion about what sort of work I was or wasn't able to do.

90. I was given the long form to fill out and ignored 's advice because I decided that could write what I wanted on the form and then they couldn't say they didn't know some point or other.

91. Well, the form filling out got me very angry at the seemingly stupid and irrelevant questions being asked ... actually I didn't complete the form after giving totally frank answers to the aforementioned stupid questions. The resultant filled in form would not have been much use to them, and in hindsight the way I filled out the form would have suggested to any reasonable person that I have some mental issues and anger issues due to the way I have been totally screwed around by the "system" and in particular by my mate .

92. So in the few weeks between my “hearing” and my “real” “hearing” I had the opportunity to ask what the was going on with my claim and the False Document being passed off as an independent expert witness report.
93. I had a major disappointment when informed me that he had not included in my claim for funding anything about my second claim for my left elbow, even tho the insurers had originally approved the claim by declined it using a letter of declination which was not prepared in accordance with Section 74 as it should have been.
94. I had a another major disappointment when informed me that he had not included in my claim for funding a copy of a report that I had my treating doctor prepare for me, for just that purpose. My treating doctor provides expert witness reports for patients and has done them for WC.
95. I was told by that it “didn’t offer any options” so he decided , without any discussion with me, that it was not useful for my claim so he ignored it.
96. I believe that the report I obtained was very useful because it gave the truest opinion on the condition of my knees. The single most important inclusion by my treating doctor was the recognition of the amount of cartilage that had been removed during the original operation. He accurately describes where and why the injury is still causing my problems. He acknowledges the photographs from the operation which show the amount of

damage. He states that I have “meniscal klunk” at full extension and flexion. This demonstrates that I have meniscus tears in both knees and in my right knee I have 2 points where I have the “meniscal klunk” ... in other words I may have had an operation but instead of having one torn cartilage I now have 2 ends of an elastic piece of severed cartilage to cause me pain and grief on a continuing basis.

97. The first report by my treating doctor was done in late 2015.

98. In the lead up to the second hearing I asked about the first report and it was then that he told me that he decided to not send my docs’ report for the hearing because it offered no options.

99. I disagreed with ’s assessment of the first report and was that he didn’t discuss this (or anything much really) before canning the report.

100. From my perspective ’s report stated a few major points which confirmed that I still have ongoing major problems with my knee.

101. Coming up to the big “hearing date” I was concerned that the best report for me was being deliberately ignored/avoided by the solicitor who was supposed to be representing me.

102. I returned to see for an update and this report was sent directly to SLL by about 2 weeks before the hearing.

103. I contacted and told him about the new report. He said that he would try and have it admitted as “late evidence” . I

explained to him why I thought it was important evidence because it explained the mechanics of why I was still having problems 5 years after the injury.

104. To the best of my knowledge he did nothing with the second report by .

105. I am not sure but I expect a solicitor has some sort of fiduciary duty to present all relevant reports at a hearing, especially if it is confirming important supporting facts.

106. A week before the “hearing” I received a telephone call from the surgery of my general surgeon. They had received a letter/email from the Konectkyd named company asking for my doctor to fill in a form because they had sort of stuffed up and hadn’t done the physical part of their report.

107. I had an appointment with my doctor the day before the “hearing” and the resultant reply would have been next to useless for their desired objective. He made it perfectly clear on the form that I was unable to do the physical testing because I had 2 torn knee cartilages.

108. The big day arrives ... and I was told by to arrive for a 2pm hearing ... I suggested I would be there at 1.30 ...

109. On my arrival I was met in the street by and ... was introduced as “my” barrister ... his name escapes me because while I was being introduced to “my” barrister I was also being told that they have worked out what I will be entitled to and that is \$25,000.

110. Soooooo ... my hearing date comes and 's report is the same as the day he sent it to Gallagher Bassett ... The arbitrator at the first hearing has already told them their report would not be accepted in that form, yet they go to the final hearing using that report.

111. informs me at the hearing that 's report is "something", and waves his hand about, but doesn't actually say what happened to 's report. At the very least the report has been seen as full of mistakes and useless in a commission hearing. Yet the insurers and their solicitors continue to use it.

112. 's report was included in the final paperwork to the commission

113. But the killer hit was yet to be thrown at me .. according to , there was a report received from Konect which was not good news for me ... remember that I had an appointment with my doctor to fill out a form that was sent to him , and that was the day before the hearing. The report he had received and was using was only half a report compared to what should have been prepared by Konekct or whatever.

114. So my solicitor had at some point received the second part of their report and not even mentioned it to me. There was no discussion about this report and I am still yet to see a copy of it.

115. I have to ask how a report by my treating doctor 2 weeks before the hearing is considered late evidence, yet a half report sent as evidence at the same time is accepted as evidence and not questioned by my .
116. On the basis of their report which said that I could work in a call centre, the “go away” payment figure, as it was referred to by , I received was reduced by half.
117. even got the dates he used to calculate my entitlements wrong, so I was down 10 grand before they even started reducing the amount for this and for that.
118. I also have to question whether the half report would meet the various guidelines that couldn’t adhere to. There were a number of relevant documents given to the person who interviewed me, and I doubt they were dealt with as they should have been.
119. I was assured by my solicitor after the first “hearing” that the many and valid complaints that I had would be dealt with at the next hearing. That never happened because the settlement was a done deal well before I got there ...
120. didn’t advise me that he had received the report before the hearing day, yet he has arranged a settlement on the day using that report.
121. So I go to a hearing with an IME report by which is , and half a work place assessment which says that I can work in a call centre...

122. I was also going to a hearing with my solicitor ignoring 2 reports by my treating doctor which supported my claim ...
123. Nearly finished good members of the Law and Justice committee ... I will be sending this statement off tonight to ensure that I have lodged it in time ... I have probably overlooked some mistakes which I will correct and advise you ... I also have a second statement I will be sending tomorrow as an update to this submission and hopefully that will be accepted for consideration.
124. Last points I wish to make are in a statement as to how this has affected me for the past 5 years or so ... My matter could have been settled years ago if the various players in this game made decisions which were in accordance with the various Acts and Guidelines.
125. I have made over 25 telephone calls to Workcover NSW (or whatever they are called now) about 's report and while emails were sent to Gallagher Bassett they were all ignored and nothing was done.
126. I have spoken with the Workers Compensation Commission and detailed the problems I have had with these reports and the behaviour of the insurers.
127. I have spoken with WIRO many many many times and they have had to chase up to get him to answer emails they had sent to him requesting further information so they could process my claim for funding.

128. The last time I spoke with WIRO they emailed their own solicitor asking him to follow up the previous emails to . They also emailed instructing him (I assume from what I was being told) to get his act together and supply the information that he should have provided initially at least and when WIRO requested it.
129. About 30 mins after I hang up from WIRO I get an excited email from advising me that he is applying for “special funding” so that he can actually do something with the expensive report that WIRO had already funded. It seems pretty daft that WIRO will pay to have a report done, but then the solicitor would have to apply for further special funding so that he could attach it to an email and send it to Alliance (who had taken over from Gallagher Bassett)
130. Anyway, next morning I received an email informing that he has done wonderful things and managed to secure the special funding so my report can be served on the insurers.
131. Since late 2013 I have been under “mortgage stress” and battling with the bank to not to foreclose on my mortgage and property ... this has been explained to everyone along the way including .
132. Everything I was told by was relayed onto the bank and they were very patient until screwed up by not sending me any letter/summary/explanation as to my “settlement” from the final “hearing” ... was told the bank was holding off on foreclosure

and I needed to send them something otherwise my was well
and truly screwed.

133. After 4 days I receive a Notice to vacate my premises and
when I ring SLL to find out where my letter is that was promised 4
days earlier, I was informed that it was still sitting on a desk
awaiting to be typed.

134. I was within 3 days of the bank taking possession of my
property and a family member has saved me by paying out my
mortgage.

135. The Workers Compensation system is being rorted by the
insurance agents and the so called expert witnesses. From my
experience

136. The problems in the system are being ignored by solicitors
you would expect to be working in the injured workers interest. I
think that was only ever working for his interests, not
mine.

137. The end ... for now