



# Return to Work Rehabilitation Rights and Obligations

*Safety, Rehabilitation & Compensation (Defence-related Claims) Act 1988 (DRCA)*  
*Military Rehabilitation & Compensation Act 2004 (MRCA)*

DVA rehabilitation focuses on all elements of your life which could improve your wellbeing and independence and assist you to return to work. Our rehabilitation approach aims to assist you to recover from, or adapt to an injury or illness that is related to your ADF service.

## Expectations while undertaking a return to work rehabilitation program

### You can expect that your rehabilitation service provider will:

- work with you to develop a rehabilitation plan that is tailored to your individual needs and circumstances;
- outline agreed activities and supports that will help you to reach your rehabilitation goals;
- provide you with the necessary assistance to help you to reach your rehabilitation goals and to help you to find work that is suitable and safe for you to undertake;
- work with you to identify any retraining or further education you may need to help you to find sustainable employment;
- work with you to help you manage any difficulties in your employment; and
- organise assessments to see whether there are any aids or appliances that might assist you to do your job.

### You can also expect that:

- your rehabilitation plan will be amended if your circumstances change, or your goals need to be modified;
- DVA will organise approval and payment for your agreed rehabilitation activities in a timely manner;
- DVA will alert you to any concerns about your participation in your rehabilitation plan or progress towards your rehabilitation goals as quickly as possible;
- your rehabilitation service provider and the DVA rehabilitation coordinator will seek your input before making any changes to, or closing your rehabilitation plan; and
- information about your rehabilitation and compensation will only be shared with other people who may need this information to understand your circumstances and provide you with services and assistance;
- you will be treated in a courteous, non-discriminatory, respectful manner.

## Your rights

The MRCA and the DRCA specify that if you have been referred for a rehabilitation assessment or you are undertaking an approved rehabilitation program you are entitled to:

- be reimbursed for the reasonable costs of travel to attend your rehabilitation assessment;
- ask for a review or reconsideration of a reviewable decision that you disagree with;
- have access to your rehabilitation file upon written request;
- refuse to sign a rehabilitation plan if you are not satisfied with the content and seek further advice from DVA about your rehabilitation plan at any time;
- involve your union or any other nominated representative at any meeting;
- withdraw from the rehabilitation process at any time, understanding that this may result in suspension of your compensation payments; and
- be reimbursed for the reasonable costs of travel to attend any subsequent assessments of your capacity for rehabilitation requested by DVA.

### We expect that you will:

- work towards your agreed rehabilitation goals and fully participate in all activities listed on your rehabilitation plan;
- accept work that is suitable and safe for you to undertake;
- participate in work trials or other work experience that has been organised by your rehabilitation service provider;
- commit to achieving the best results that you can in any training or education that you are undertaking;
- inform your rehabilitation service provider if you start to experience any difficulties in your employment, study or training;
- not cease your employment or studies or retraining without discussing this with your rehabilitation service provider or your DVA rehabilitation coordinator;
- provide medical certificates that specify your work limitations, capacity for work or the status of your health conditions when requested to do so;

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- attend medical or other examinations or assessments as requested by your DVA rehabilitation coordinator or your rehabilitation service provider;
  - notify your DVA rehabilitation coordinator or your rehabilitation service provider if you are unable to attend any appointments they have organised for you; and advise DVA of any changes to your circumstances that may impact on your ability to participate in your agreed rehabilitation activities including:
    - a change in your health;
    - a change in your permanent address;
    - any plans to move interstate or overseas; and
    - any plans to take a holiday that will last more than two weeks;
  - treat all personnel involved in your rehabilitation program in a respectful manner.

### Your Obligations

Under sections 50 and 52 of the MRCA and sections 36 and 37 of the DRCA you are obliged to:

- attend medical or other assessments of your capability to undertake a rehabilitation program when we request that you do so, and
- fully participate and cooperate in your return to work rehabilitation program.

### Consequences of failing to meet your obligations

Under sections 50 and 52 the MRCA and sections 36 and 37 the DRCA, your compensation payments may be suspended if you fail to meet your obligations without reasonable excuse. Failing to accept an offer of suitable employment, or ceasing employment without valid reason is regarded as failing to fully participate or cooperate in your return to work program.

A decision to suspend compensation payments under these sections of the MRCA and the DRCA, is not a reviewable decision. This means that you are not able to request a review or reconsideration of this decision.

Your entitlements to medical treatment will not be affected even if your compensation payments are suspended.

If you have any questions about anything that is included in this form, please talk to your DVA rehabilitation coordinator or your rehabilitation service provider.

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I have read and understood the above information.

Client name

Signature

Date

Save

Print

Clear



DVA rehabilitation focuses on all elements of your life which could improve your wellbeing and independence. Our rehabilitation approach aims to assist you to recover from, or adapt to an injury or illness that is related to your ADF service.

### Expectations while undertaking a Rehabilitation Program

#### You can expect that your rehabilitation service provider will:

- work with you to develop a rehabilitation plan that is tailored to your individual needs and circumstances and outlines agreed activities and supports that will help you to reach your rehabilitation goals;
- provide you with the necessary assistance to help you to reach your rehabilitation goals; and
- organise assessments of your whole of person rehabilitation needs and the services and support that could help you to manage the impact of your accepted conditions and promote independence and quality of life.

#### You can also expect that:

- your rehabilitation plan will be amended if your circumstances change, or your goals need to be modified;
- DVA will organise approval and payment for your agreed rehabilitation activities in a timely manner;
- DVA will alert you to any concerns about your participation in your rehabilitation plan and/or progress towards your rehabilitation goals as quickly as possible;
- your rehabilitation service provider and the DVA rehabilitation coordinator will seek your input before making any changes to, or closing your rehabilitation plan; and
- information about your rehabilitation and compensation will only be shared with other people who may need this information to understand your circumstances and provide you with services and assistance;
- you will be treated in a courteous, non-discriminatory, respectful manner.

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- ask for a review or reconsideration of any reviewable decision that you disagree with;
- have access to your rehabilitation file upon written request;
- refuse to sign a rehabilitation plan if you are not satisfied with the content and seek further advice from DVA about your rehabilitation plan at any time;
- involve any nominated representative at any meeting;
- withdraw from the rehabilitation process at any time, understanding that this may result in suspension of your compensation payments; and
- be reimbursed for the reasonable costs of travel to attend any subsequent assessments of your capacity for rehabilitation requested by DVA.

#### We expect that you will:

- work towards your agreed rehabilitation goals and fully participate in all activities listed on your rehabilitation plan;
- attend medical or other examinations or assessments as requested by your DVA rehabilitation coordinator or your rehabilitation service provider;
- provide medical certificates that specify your capacity for rehabilitation, or the status of your health conditions when requested to do so;
- notify your DVA rehabilitation coordinator or your rehabilitation service provider if you are unable to attend any appointments they have organised for you; and
- advise DVA of any changes to your circumstances that may impact on your ability to participate in your agreed rehabilitation activities including:
  - a change in your health;
  - a change in your permanent address;
  - any plans to move interstate or overseas; and
  - any plans to take a holiday that will last more than two weeks;
- treat all personnel involved in your rehabilitation program in a respectful manner.



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## Your Obligations

Under sections 50 and 52 of the of the MRCA and sections 36 and 37 the DRCA you are obliged to:

- attend medical or other assessments of your capacity to undertake a rehabilitation program when we request that you do so; and

fully participate and cooperate in your rehabilitation program. **Consequences of failing to meet your obligations**

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If you have any questions about anything that is included in this form, please talk to your DVA rehabilitation coordinator or your rehabilitation service provider.

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I have read and understood the above information

Client name

Signature

Date

Save

Print

Clear



## Privacy notice

Your personal information is protected by law, including the *Privacy Act 1988*. Your personal information may be collected by DVA for the delivery of government programmes for war veterans, members of the Australian Defence Force, members of the Australian Federal Police and their dependants.

[Read more: How DVA manages personal information.](#)

### 1. Claimant title

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

### 2. Client surname

### 3. Client given name(s)

### 4. Client home address

POSTCODE

I hereby authorise the following doctors, hospitals, health professionals and/or rehabilitation providers to discuss and furnish my DVA Rehabilitation Co-ordinator and/or the nominated Rehabilitation Provider organisation with medical information relating to my condition(s) of *(state compensable condition(s))*:


as required to assist in my rehabilitation.

### 1 Name of practitioner

Phone

Fax

Address

POSTCODE

### 2 Name of practitioner

Phone

Fax

Address

POSTCODE

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3	Name of practitioner	<input type="text"/>	
	Phone	<input type="text" value="[ ]"/>	Fax <input type="text" value="[ ]"/>
	Address	<input type="text"/>	
		<input type="text" value="POSTCODE"/>	

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4	Name of practitioner	<input type="text"/>	
	Phone	<input type="text" value="[ ]"/>	Fax <input type="text" value="[ ]"/>
	Address	<input type="text"/>	
		<input type="text" value="POSTCODE"/>	

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5	Name of practitioner	<input type="text"/>	
	Phone	<input type="text" value="[ ]"/>	Fax <input type="text" value="[ ]"/>
	Address	<input type="text"/>	
		<input type="text" value="POSTCODE"/>	

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6	Name of practitioner	<input type="text"/>	
	Phone	<input type="text" value="[ ]"/>	Fax <input type="text" value="[ ]"/>
	Address	<input type="text"/>	
		<input type="text" value="POSTCODE"/>	

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7	Name of practitioner	<input type="text"/>	
	Phone	<input type="text" value="[ ]"/>	Fax <input type="text" value="[ ]"/>
	Address	<input type="text"/>	
		<input type="text" value="POSTCODE"/>	

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I understand that any information obtained will be treated confidentially and used solely for the purpose of considering my rehabilitation and compensation entitlements.

**5. Signature**

<div></div>	Date
	<input type="text" value="/ /"/>

**Save**

**Print**

**Clear**