Information about determining a claim for compensation

This form should be completed when you receive a claim for workers’ compensation, under the Seafarers Rehabilitation and Compensation Act 1992 (Seafarers Act). This form is approved by the Seafarers Safety, Rehabilitation and Compensation Authority (Seacare Authority) in accordance with subsection 63(2) of the Seafarers Act.

The Seacare Authority produces guidance material to assist claimants and employers understand their rights and obligations regarding workers’ compensation and rehabilitation. Copies of these information brochures and booklets are available from the Seacare Authority website at www.seacare.gov.au.

Pursuant to section 73 of the Seafarers Act, you must determine claims relating to incapacity for work, loss or damage to property or cost of medical treatment within 12 days of receipt.

This period can only be extended by a written request to the employee pursuant to section 67 for additional information relevant to a claim (within the relevant time period) or by a written request to the Seacare Authority for an extension of time (also within the relevant time period).

Privacy information

Personal information on this form is collected under sections 63, 105 and 106 of the Seafarers Rehabilitation and Compensation Act 1992 to help the employer determine your eligibility for workers’ compensation and to allow the Seacare Authority to perform its functions under the Seafarers Act. If you do not provide the personal information requested in this form, it may not be possible to assess or manage your claim for compensation.

This form is used to collect information on behalf of the Seacare Authority, your employer and the insurance company. Your employer and the insurance company are subject to their own obligations under Privacy legislation. Please contact your employer or the insurance company if you require further information on how they will manage your personal information under their privacy policies.

Your privacy is important to us. The Seacare Authority will only collect, use, store or disclose your personal information in accordance with the Privacy Act 1988. The Seacare Authority collects information from the employer about workers’ compensation claims made under the Seafarers Act in order to maintain a database of Seacare scheme workers’ compensation statistics. In addition, in some cases the Seacare Authority manages claims against the Seafarers Safety Net Fund. For these purposes, and for other purposes related to the Seacare Authority’s functions under the Seafarers Act, the Seacare Authority may use or disclose your personal information to bodies and agencies including (but not limited to):

- the employer
- the employer’s insurer
- an approved rehabilitation program provider
- government agencies including Centrelink, the Australian Taxation Office, the Department of Employment, Comcare and Safe Work Australia
- any external third party that the Seacare Authority contacts to carry out statutory functions
- courts and tribunals
- any other person where there is an obligation under law to do so.

We want to ensure that your personal information that is collected, used, stored or disclosed is accurate, up-to-date and complete. The Seacare Authority’s Privacy Policy contains information on how you can request access to personal information held about you and how to seek correction of that information.

You may make a complaint if you consider that the Seacare Authority has interfered with your privacy or otherwise breached its obligations under the Privacy Act 1988. Our Privacy Policy contains more information about how to make a complaint and how we will respond.

The Seacare Authority is not likely to disclose personal information to a person who is not in Australia or an external Territory, unless the information relates to an incident, investigation, injury or illness sustained while overseas, or treatment provided by an overseas practitioner. If disclosure of personal information is made to an overseas recipient, the Seacare Authority will comply with APP 8.

The Seacare Authority’s Privacy Policy is available at www.seacare.gov.au/Privacy and is administered on the Seacare Authority’s behalf by Comcare. For further information about our information handling practices, for a copy of our Privacy Policy, to request an amendment of your personal information or to make a privacy complaint, please telephone 1300 366 979 or email privacy@comcare.gov.au.
What you need to do

Step 1—Register the claim
Register or record receipt of the claim
Check the claim form to ensure:
• it is fully completed, signed and dated by the claimant
• that all necessary attachments are included
Check the prescribed ship and voyage details to confirm this is a Seafarers Act claim and note them on this form.
If any of the required details and/or documents have not been provided, contact the claimant to obtain the necessary information.
Notify the insurer of the claim in accordance with the conditions of your insurance policy.

Step 2—Notify the claimant
When the form has been completed and a determination made, notify the claimant in writing in accordance with section 77 of the Seafarers Act.

Step 3—Assess capacity to undertake a rehabilitation program
If the injury results in an impairment or an incapacity for work, and the impairment or incapacity is expected to last 28 days or more (or has lasted 28 days or more), arrange for the assessment of the employee’s capability to undertake a rehabilitation program.

Step 4—Fill in this form
Please use a black or blue pen to answer the questions in this form.
Answer all questions. Where you are required to make a choice, please tick the appropriate box.

Step 5—Lodge this form and the claim form
On the day this is signed, send a copy of this form and a copy of the Claim for Workers’ Compensation form to:
Seacare Authority
GPO Box 9905
Canberra ACT 2601.
Keep the original copy for your records.

Step 6—Provide a Claim Update Report
Provide a Claim Update Report in respect of each claim to the Seacare Authority on a six monthly basis while the claim remains active.
## Workers' compensation benefits

1. Full name of employer responsible for determining the claim

2. Australian Business Number (ABN)

3. When was this claim received by the employer?

4. Full name of claimant

5. Did the claimant provide a medical certificate with this claim?

   - No
   - Yes

   Date of medical certificate

   Diagnosis as stated on the medical certificate

6. Did the injury arise from a notifiable incident under the OHS(MI) Act?

   - No
   - Yes

   Was the Incident Report lodged with AMSA?

   - No
   - Yes

   Date of lodgement

7. When the injury or illness happened, what were the claimant’s:

   - (a) normal on-duty weekly hours
   - (b) normal weekly earnings (as defined in s13 of the Seafarers Act)?

8. Is the claimant eligible for weekly compensation payments (as at today)?

   - No
   - Yes

   Date they became eligible

9. Ship and voyage details

   - Name of ship
   - IMO No

   (a) Prescribed ship

   - Australian registered
   - Coastal trading licence
   - Majority Australian crew
   - Ministerial declaration

   (b) Voyage

   - Interstate
   - Intra-territory
   - Places outside Australian 12 NM limit
   - Seacare Authority declaration

   From

   To

   Via

10. Decision

   This claim is: Accepted

   Rejected

   Determination date

11. Was the time period extended?

   - No
   - Yes

   Date stopped

   Date restarted

   Explanation

12. Employer representative statement

   I am satisfied that the information provided on this form is true and correct.

   Signature

   Date

   Name

   Position in company