



Communication Workers' Union

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**SUBMISSION
TO
SENATE INQUIRY
INTO AUSTRALIA POST'S TREATMENT OF
INJURED AND ILL WORKERS
CEPU – POSTAL & TELECOMMUNICATIONS
BRANCH VICTORIA**

**THIS IS OUR SUBMISSION IN RELATION TO EMPLOYEES WHO HAVE
HAD WORK-RELATED INJURIES**

(WE DEAL WITH AUSTRALIA POST'S TREATMENT OF EMPLOYEES WHO APPLY FOR SICK LEAVE IN
A SECOND SUBMISSION.)

AUSTRALIA POST & INJURED WORKERS

Postal workers are arguably under the worst compensation regime in Australia as Australia Post is a self-insurer under Comcare.

1. Australia Post has been a Comcare self-insurer since 1988. Post have Tier 3 status which means that they provide executive summaries of their own yearly audits on performance to Comcare, and are subject to external audit only for the last year of their license which is 2010.

POSTAL WORKERS DO NOT HAVE SAFE WORKPLACES

2. In 2006/2007 there were **3,935 incident reports, and 1,056 new compensation claims** made by postal workers in Victoria / Tasmania alone (Australia-wide figures – 13,535 incident reports and 2,898 claims). (See Attachment 1.) Manual handling injuries and motorcycle accidents are particularly common.
3. In the 12 months 1 July 2008 – 30 June 2009 in Victoria / Tasmania alone there have been 718 incident reports of motorcycle accidents, while there were 1197 reports of muscle stress. (Attachment 2.) (For comparison 9,012 people – 5,899 full-time & 3,113 part-time were employed directly by Australia Post in Vic/Tas. in 2008/2009)

AUSTRALIA POST USES THEIR COMPANY DOCTOR SYSTEM TO DISADVANTAGE INJURED WORKERS

4. Australia Post has 139 company doctors in Vic/Tas alone. These doctors are contracted to Injury Net, a company owned by Dr Milecki. Australia Post made 1558 referrals to company doctors on a yearly basis in Victoria / Tasmania alone (4,295 Australia – wide).
5. These company doctors are under pressure to return injured workers to the workplace straight away even if it is not safe to do so. The union has many case-studies of employees with serious injuries including broken bones being returned to work the next day. In determining compensation liability and return to work restrictions, Australia Post favour their doctors' opinion over that of the employees' family / treating doctor in our experience.
6. In comparison to the number of accidents reported and compensation claims made, the number of Lost Time Injuries in Victoria / Tasmania is only 103. These figures tell us there is something seriously wrong with Australia Post's system. Note Vic/Tas has 29%

of the incident reports but 36% of referrals to company doctors. Vic/Tas has 20% lower Lost Time Injuries than the State with the next lowest figure. InjuryNet's head office is in Victoria in Australia Post headquarters.

AUSTRALIA POST MANAGERS GET PAID BONUSES ON LOST TIME INJURY RESULTS.

7. The money spent on management bonuses, on doctors, lawyers and administration far exceeds that paid out to injured workers. (Sources: Senate Estimates Committee & SRCC Annual Report)
8. The union maintains that many injured workers employed by Australia Post are:
 - forced back to work on inappropriate duties before they have recovered.
 - denied compensation entitlements unjustly.
 - forced out of their jobs because of denied / ceased compensation entitlements.
 - forced out of their jobs even when they have accepted compensation claims by Australia Post's failure to provide meaningful and suitable work, retraining or redeployment.
9. This submission examines the role of the managers and the company doctors known as FNDs.
10. Summaries of 26 Australia Post employees' case-studies are submitted as a means of illustrating employees' concerns. A range of cases have been submitted; these include members and non-members, long-term and short-term injuries, and employees from different Business Units.
11. The submission contains recommendations to improve Australia Post's treatment of injured workers.

Recommendation 1.

Australia Post should not be granted a self-insurance license under Comcare.

Recommendation 2.

Managers should not be paid salary bonuses based on the Key Performance Indicator of Lost Time Injuries.

12. Employees and the union believe that a strong driver of the poor treatment of injured workers is the salary bonus policy for managers. There is also a firm expectation by senior managers that Lost Time Injuries are to be avoided at all cost and lower level managers are held to account on this issue. (See: Crawford, Lien, Stewart, Rae for example of how much pressure is placed on injured workers not to take leave.)
13. It is our experience that managers systematically try to undermine employees' legitimate claims. They look for loop-holes so liability can be denied thus avoiding Lost

Time Injuries. It is hard to be convinced that these managers and the compensation delegates are guided by “equity, good conscience and the substantial merits of the individual cases” in many cases. (See Burke, Casella, Tsotros, Wingard, Cunningham, Lestin)

Recommendation 3

- 14. Managers and Compensation Delegates whose decisions are regularly overturned at Reconsideration or on Review at the Administrative Appeals Tribunal should be reviewed and retrained.**

Recommendation 4

- 15. Employees need to be better informed of their rights and responsibilities**

It is quite clear from the case-studies and our experience that there is an enormous amount of ignorance amongst employees, supervisors and managers about the rights and responsibilities of the parties under the Safety Rehabilitation and Compensation Act. (See: Cunningham, Grundy, Leslie, Rae.)

16. The case-studies show that in some cases injured employees are not even provided with Compensation Claim Forms in a timely fashion. (See: Cunningham, Grundy, Metaxas, Papaioannou.)
17. Managers do not brief injured workers on their rights before and after they are injured. Currently some information is provided in writing, but many people do not read this and this information is regularly and directly contradicted by management ‘directions’.
18. Our case-studies show that workers are seldom told that you can go to your own doctor. There are many instances where workers are told “*you must go to company doctor or you will be disciplined*” or “*your compensation claim will not be accepted.*” (See for example: Chlebowczyk)
19. Workers are told that they must attend FND appointments even though the union would maintain that Australia Post has no legal authority to force people to Fitness for Duty Assessments in compensation cases. Comcare policy states that Fitness for Duty assessments should not be undertaken for the purposes of determining liability for compensation purposes.
20. Workers are not told that the Early Intervention Program (whereby employees can obtain 4 free doctor and physiotherapist visits) is totally voluntary. For examples of pressure to attend FNDs see Lazarus, & Peak.
21. Workers are told that they must abide by the pace of the Return to Work program developed by the FND and are not told that they have the right to follow their own treating doctor’s advice. (See: Stewart) Rehab providers very rarely consult about the

RTW programs with the treating doctors (other than FNDs) or the employee. (See Ranasinghe.)

22. Recommendation 5

Australia Post should apply this Early Intervention Program by extending payment to doctors and physiotherapists chosen by the employee instead of to InjuryNet.

23. It is a very common outcome for injured workers to be taken straight to an FND who does not provide a WorkCover Certificate of Incapacity but sends the worker back to work immediately albeit it on restrictions. Sometimes the record-taking of the history of the injury leaves a lot to be desired. (See Kanapathippillai.) There is often a lack of appropriate investigation and diagnosis. (See Halverson, Leslie, Quinan, Wingard.)
24. We have been told that InjuryNet require their doctors who decide to give an injured worker time off work, must ring their head office before they do so. We have also heard that they have been told not to order MRI or CT Scans until the worker has had the injury for 6 weeks.
25. The Inquiry should ask Australia Post and InjuryNet about whether these are their policies and if so, why such policies exist.
26. The service provided by FNDs varies as to who the doctor is, some are notorious for doing whatever Australia Post management request, others are very professional and supportive.
27. Workers are encouraged by this Early Intervention Program not to fill in a Compensation Claim until the expiry of the 4 free visits. It is not uncommon for Australia Post employees to find themselves after the Early Intervention Program has expired with their claim denied and without medical evidence with which to attach to a Request for a Reconsideration if they have attended an FND for treatment.
28. There are many examples of a RTW before it is safe for the injured worker to be back at work. (See: Crawford, Lazarus, Rea, Stewart.)
29. Once workers' claims have been denied or ceased, the Non-Work Related Medical Restrictions Policy is implemented. We would like to see this policy abolished or at least applied only to workers whose injury is clearly unrelated to their work. It should not be applied against employees with claims that are contested at the Reconsideration or Review stages (See: Halverson)
30. Many employees find it is ironical that when you are compensable, all efforts are made to force you to work (even if only for 45 minutes a day with a 15 minute break in the case of Trevor Crawford), but when you are placed on the Non-Work Related policy

management attempt to direct you onto sick leave as soon as they possibly can and you are left at home and actively discouraged from returning to work.

Recommendation 6

The Non-Work Related Medical Restrictions Policy should not be applied to contested compensation claims.

31. Contested compensation claims are very lengthy, very expensive (even if arranged on a No Win No Fee basis) and stressful especially when injured workers are threatened with being directed off onto sick leave (paid or unpaid). (See Nguyen) Treatment usually stops because postal workers cannot afford to pay for it themselves given their low wages.

Recommendation 7

That the Inquiry investigate ways and means for speeding up the AAT Review process.

Recommendation 8

Australia Post set up programs to re-train and redeploy injured workers with chronic conditions who will only be further injured if they are returned to their own position.

32. The Inquiry or Comcare should conduct research on the outcomes for injured workers. Perhaps they could be followed up after they have been returned to work after a 6 month period. It is our experience that they are often still carrying injuries.
33. The Inquiry should research the rate of retention among injured workers (those who have made Compensation claims) in comparison with the general population of postal workers.
34. Many employees with long-term or permanent injuries are not returned to suitable duties but are returned to duties that will simply re-injure them (Hall, Halverson, Quinan, Wingard.) It is common for managers to push workers on compensation to breach their Return To Work programs simply because they need to get the work completed and there is insufficient relief staff.

Recommendation 9

Australia Post should divert resources from trying to suppress compensation claims to spending more resources on investigating the causes and prevention of common injuries .

35. From a review of even this small number of case-files and from two Body-mapping exercises the union has completed (Attachment 3) it is obvious that there are a range of injuries that postal workers risk because of the nature of their jobs. Australia Post's fixation on reducing Lost Time Injuries works against pro-active risk assessment and preventative action. Incident report figures or compensation claim numbers are a much better measure of the safety of the workplaces in Australia Post than Lost Time Injuries.

36. The current compensation process has poor consequences for the health of injured workers. **We need urgent positive action to improve the outcomes for these most vulnerable of workers.**

Joan Doyle

Secretary

CEPU: Postal and Telecommunications Branch Victoria

20 November 2009

ATTACHMENT 1

**Senate Standing Committee on the
Environment, Communications and the Arts**
ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

Broadband, Communications and the Digital Economy portfolio

Australia Post

Budget Estimates Hearings May 2008

The authority/program under which these appointments were made, by State and nationally, for 2006/2007 and year to date for 2007/2008 were as follows:

2006/2007				
	Injury (Early Intervention) Management Program	Fitness for Duty Assessments under Clause 10 of Principal Determination	Section 57 under Safety, Rehabilitation and Compensation Act	YEAR TOTAL
HEADQUARTERS	49	11	-	60
NSW/ACT	1134	129	3	1266
VIC/TAS	1275	283	-	1558
QLD	849	1	1	851
SA/NT	232	1	3	236
WA	312	9	3	324
NATIONAL TOTAL	3851	434	10	4295
2007/2008 (to 31 May 2008)				
	Injury (Early Intervention) Management Program	Fitness for Duty Assessments under Clause 10 of Principal Determination	Section 57 under Safety, Rehabilitation and Compensation Act	YEAR TOTAL
HEADQUARTERS	38	5	-	43
NSW/ACT	1011	138	1	1150
VIC/TAS	1071	212	-	1283
QLD	974	6	-	980
SA/NT	287	-	3	290
WA	430	29	1	460
NATIONAL TOTAL	3811	390	5	4206

**Senate Standing Committee on the
Environment, Communications and the Arts**
ANSWERS TO ESTIMATES QUESTIONS ON NOTICE
Broadband, Communications and the Digital Economy portfolio
Australia Post
Budget Estimates Hearings May 2008

Question: 45

Topic: Injured Workers

Senator Lundy asked:

Please specify the number of incident reports (known as P 400s) submitted by employees in 2006 / 2007 by State and for the whole of Australia.

Please specify the number of new and active compensation claims made by Australia Post employees in 2006 / 2007 by State and for the whole of Australia.

Please specify the number of Lost Time Injuries in Australia Post in 2006 / 2007 by State and for the whole of Australia.

Answer:

The number of incident reports submitted in 2006/2007 was as follows:

State	Incident Reports
New South Wales	4,692
Victoria/Tasmania	3,935
Queensland	2,556
Western Australia	1,221
South Australia/Northern Territory	1,131
TOTAL	13,535

The number of new and active compensation claims in 2006/2007 was as follows:

State	New Claims	Active Claims (at end of 06/07)
New South Wales	1,032	444
Victoria/Tasmania	1,056	420
Queensland	396	107
Western Australia	178	151
South Australia/Northern Territory	236	144
TOTAL*	2,898	1,266

[* 2,489 claims were settled in the period, of which 409 remained open and are included in the total active claims figure.]

**Senate Standing Committee on the
Environment, Communications and the Arts**
ANSWERS TO ESTIMATES QUESTIONS ON NOTICE
Broadband, Communications and the Digital Economy portfolio
Australia Post
Budget Estimates Hearings May 2008

Question:44

Topic: Number of Employees Directed to Examinations by Company Doctors

Senator Lundy asked:

Please specify the number of appointments booked for employees to attend Australia Post company doctors (known as Facility Nominated Doctors or FNDs) for all purposes by State and for Australia as a whole in the last financial year and to date for 2007/2008.

Please specify the authority used or program under which these appointments were made – i.e. under section 57 of the Safety, Rehabilitation and Compensation Act, under Clause 10 of the Principal Determination, or under the Injury (Early Intervention) Management Programme – by State and for Australia as a whole in the last financial year and to date for 2007 / 2008.

Answer:

The numbers of appointments booked for employees to attend Facility Nominated Doctors for all purposes, by State and nationally, for 2006/2007 and year to date for 2007/2008 were as follows:

	2006/2007	2007/2008 (to 31 May 2008)
HEADQUARTERS	60	43
NSW/ACT	1266	1150
VIC/TAS	1558	1283
QLD	851	980
SA/NT	236	290
WA	324	460
NATIONAL TOTAL	4295	4206

ATTACHMENT 2

SOHSEC Meeting

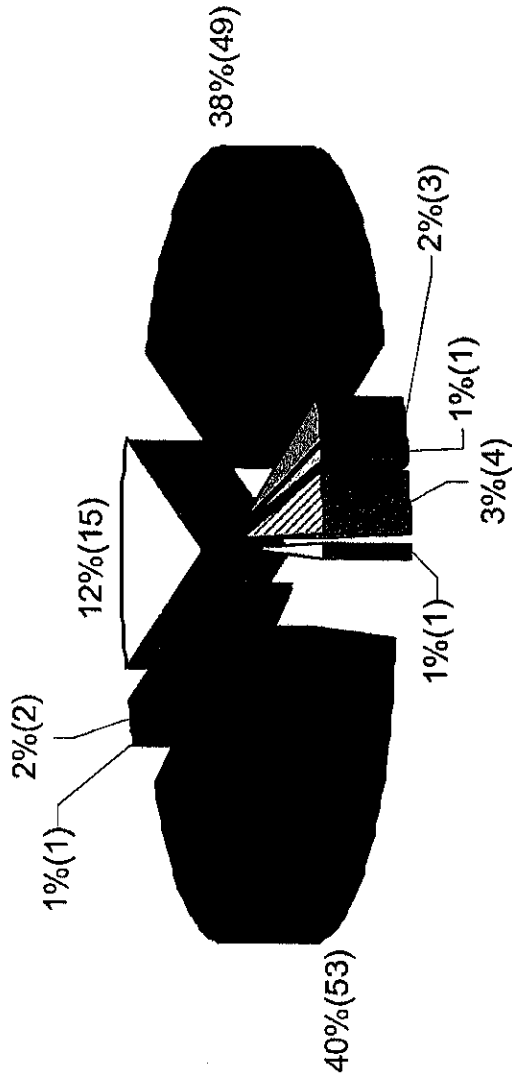
August 2009

Vic/Tas MND YTD LTIFR Comparisons to Prior Year 08/09

	No. of LTI's At end of June 2008	LTI Target for full year 2008/09	No. of LTI's At end of June 2009	LTIFR At end of June 2008	LTIFR Target 2008/09	LTIFR At end of June 2009
Delivery Metro	30	34	67	5.7		12.9
Country Ops	18	14	21	11.6		13.8
Transport	14	12	14	9.7	7	9.7
MPF	6	4	3	12.7		6.2
MGF	4	3	3	7.2		5.5
DLC	14	12	13	7.0		6.6
Tas M&ND	6	5	8	7.1		9.9
Total M&ND	92	84	129	7.6		10.8

MND Vic/Tas ~ LTI's

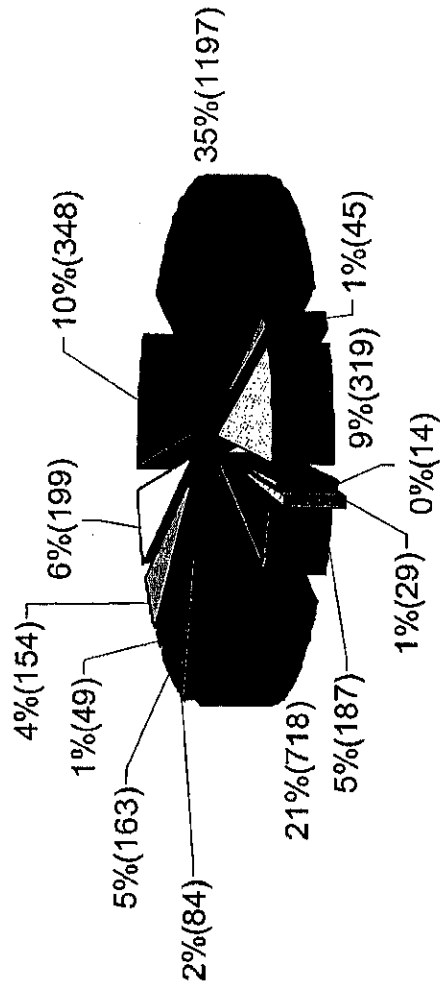
MND Vic/Tas LTI's by Mechanism
 YTD 1 July 2008 - 30 June 2009



- Bitten by
- Muscular stress
- ▨ Bicycle Accident
- Hit by
- ▨ Trap by
- Vehicle accident-car
- Fall/Trip
- Other
- Motorcycle Accident

MND Vic/Tas ~ P400's

MND Vic/Tas P400's by Mechanism
 YTD 1 July 2008 - 30 June 2009



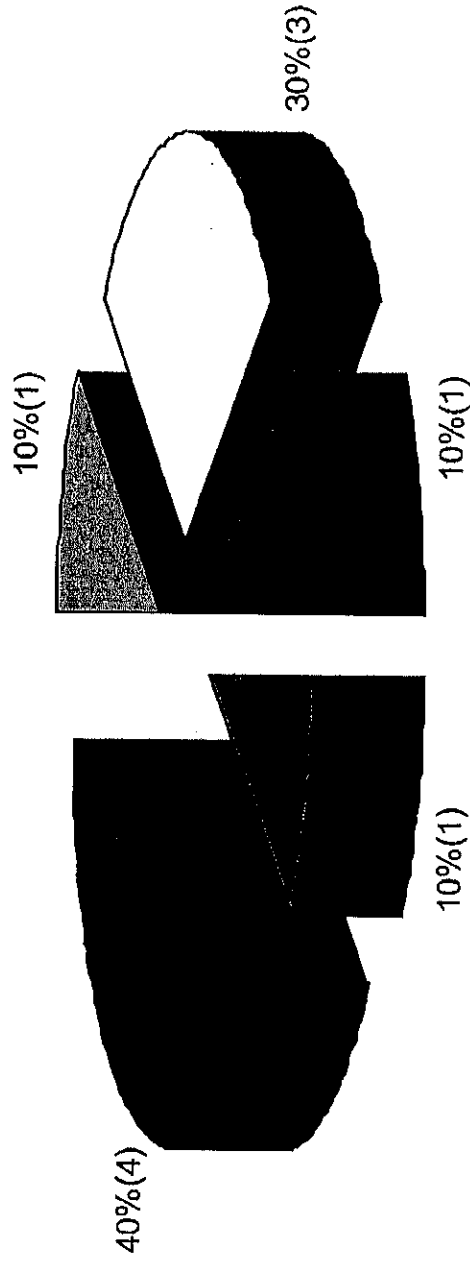
- | | |
|---|--|
| <input checked="" type="checkbox"/> Bitten by animal-on cust property | <input type="checkbox"/> Fall/trip |
| <input checked="" type="checkbox"/> Hit by | <input checked="" type="checkbox"/> Trap by |
| <input type="checkbox"/> Other | <input type="checkbox"/> Bicycle Accident |
| <input checked="" type="checkbox"/> Vehicle Accident-car | <input checked="" type="checkbox"/> Vehicle accident-other |
| <input checked="" type="checkbox"/> Vehicle accident-truck | |
| <input checked="" type="checkbox"/> Contact/exposure | |
| <input checked="" type="checkbox"/> Muscular stress | |
| <input type="checkbox"/> Rubbing/chafing | |
| <input checked="" type="checkbox"/> Motorcycle Accident | |

Commercial Division Vic/Tas

	No. of LTI's At end of June 2008	No. of LTI's At end of June 2009	LTIFR At end of June 2008	LTIFR At end of June 2009
Consumer	4	8	1.3	2.7
Commercial Tasmania	3	1	9.3	2.1
Rest of Commercial	1	1	2.4	3.1
Commercial Total	8	10	2.1	2.7

Commercial Division ~ LTI's

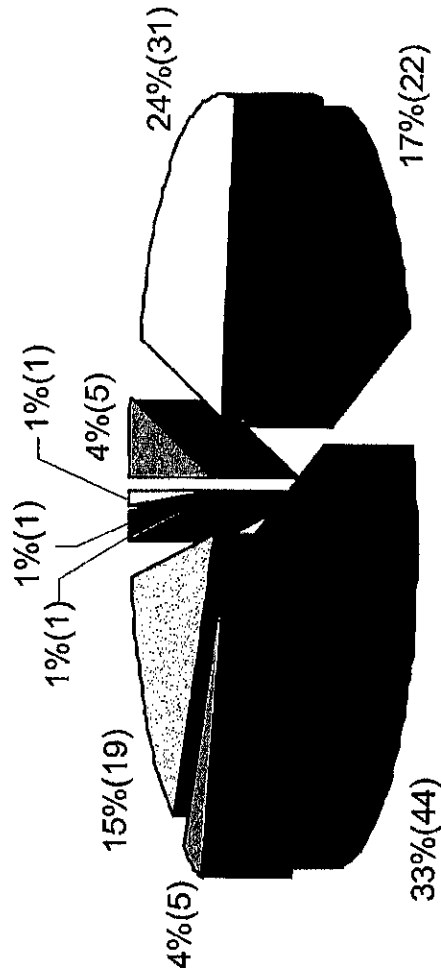
Commercial Division Vic/Tas LTI's by Mechanism
YTD 1 July 2008 - 30 June 2009



■ Contact/Exposure □ Fall/trip ■ Hit by Car ■ Vehicle accident - Car ■ Muscular stress

Commercial Division ~ P400's

Commercial Division Vic/Tas P400's by Mechanism
 YTD 1 July 2008 - 30 June 2009



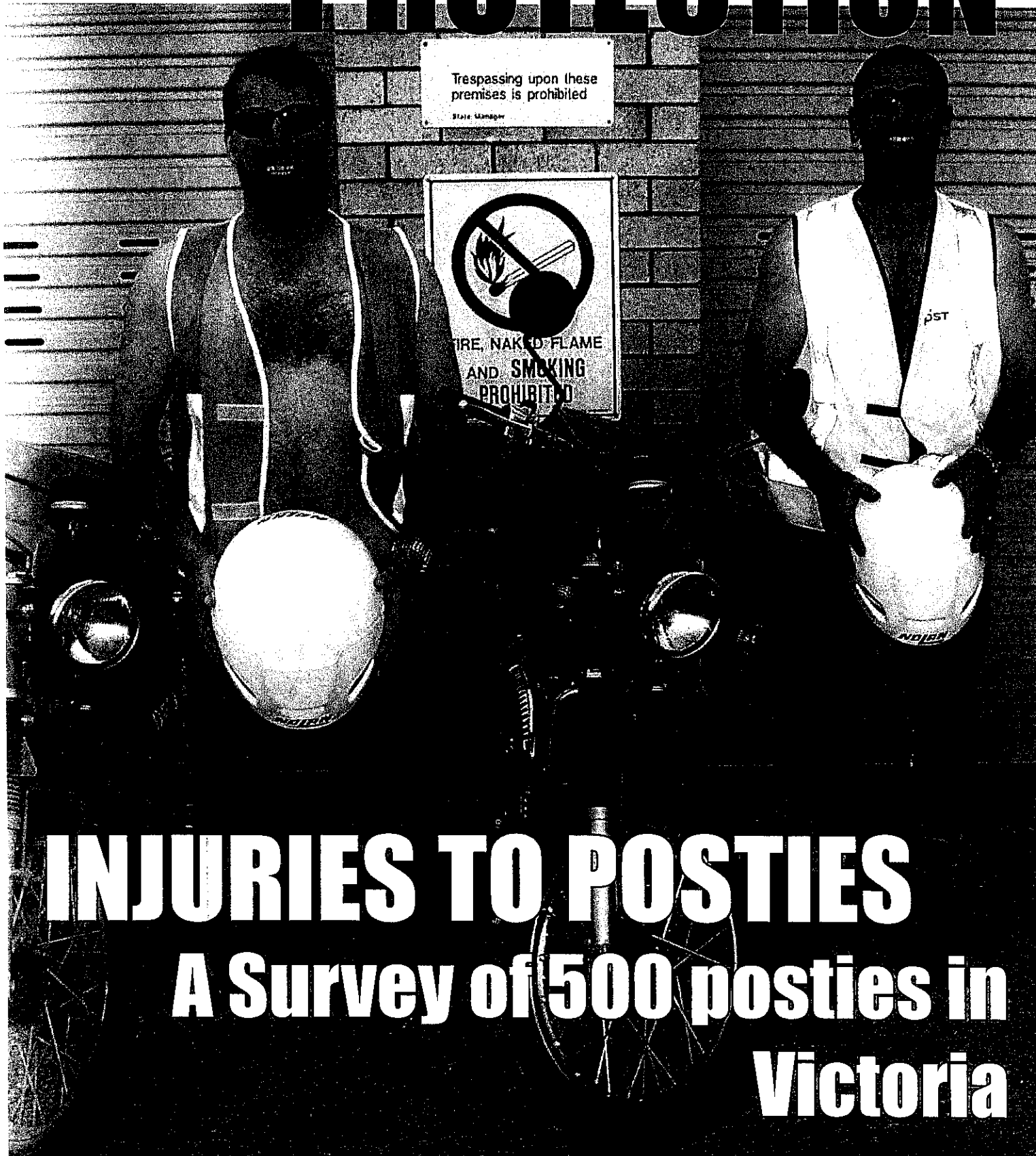
- ▣ Contact/exposure
- ▣ Muscular stress
- ▣ Vehicle accident-car
- ▣ Fall/trip
- ▣ Trap by
- ▣ Motorcycle Accident
- ▣ Hit by
- ▣ Other
- ▣ Vehicle accident-other

ATTACHMENT 3

Aussie Post

We NEED more

PROTECTION



INJURIES TO POSTIES

A Survey of 500 posties in Victoria

INJURIES TO POSTIES

Results of a Body-Mapping Exercise
500 posties from 42 Delivery Centres in Victoria

SUMMARY

Over 80% of the 500 posties surveyed were suffering pain currently.

This means, even if the survey had reached all of the currently injured, that at least 16% of posties employed in Victoria are currently suffering from a work-related injury. Commonsense would suggest that this proportion is significantly higher.

Injuries are common amongst posties and stem from two major causes – occupational over-use injuries and motorbike accidents. The injuries suffered are serious, often multiple, and longlasting.

There are a large number of posties reporting significant pain in their shoulders, and lower backs, arms / elbows, hands / thumbs and wrists as well as knees.

- 47% of the 500 posties surveyed had either one or both shoulders injured.
- 39% of posties surveyed had lower back problems.
- 24% had had serious motorbike accidents.

Averaging the current injuries across the numbers of posties reporting injuries, there was an average of 3 current injuries per person.

Australia Post has both a legal and moral responsibility to investigate these findings and as a matter of priority act to reduce the number of injuries suffered.

BACKGROUND

For several years, the union has been concerned about the injury rate among Postal Delivery Officers (posties). We have become increasingly frustrated about the lack of action taken on this OH&S problem.

We believe that the true injury rate to posties (and other postal workers) is being masked by the measurement of injury by Lost Time Injury figures (LTIs). Australia Post management claim that LTIs or LTIFRs (Lost Time Injury Frequency Rates) have reduced dramatically over recent years.

The union would maintain that this is only because of the aggressive use of the Australia Post company doctor scheme which has led to 80% of injured workers attending company doctors when they are injured, and to these doctors sending injured workers back to work (albeit on restricted duties) immediately after their injury.

The incorporation of LTIs as one of the principal criteria in the payment of management bonuses also encourages this practice. LTIs need to be looked at in conjunction with incident reports (P400s) and compensation claims.

Below are some of the statistical comparisons that have lead to the union's concern about injuries to posties. These statistics (provided by Australia Post) are quite difficult to obtain, so they provide only clues about what is really happening at workplaces.

- Metro Delivery (Vic/Tas) had 323 incidents reported in June quarter 2005 but only 7 Lost Time Injuries.
- In January 2007 in Victoria / Tasmania there were 90 rehabilitation total cases (statutory & non-statutory) and in February 2007 there were 89, yet this survey reports that there are at least 408 injured posties in the survey period.
- An estimated 4,000 postal workers across Australia are being sent to company doctors each year. Why would this be necessary if there is such a good safety regime in Australia Post? Why does Victoria/ Tasmania alone have 139 company doctors on the Australia Post panel?
- How is it that there were a total of 1036 new compensation claims in 2005/2006 from 6,541 full and 2,408 part-time staff in Victoria/Tas and yet there were only 7.6 lost time injuries per million work hours across the whole of Australia?

In an attempt to expose the extent and seriousness of injuries suffered by posties the union has conducted this survey. We do not make any grand claims about the survey. It simply highlights that there are serious problems that deserve greater in depth study and further resources allocated to them.

METHODOLOGY

The survey was distributed to posties, relievers and team leaders during their 10 minutes morning tea break at 42 Delivery centres visited as part of a normal organising program.

The organiser visiting the particular Delivery Centre would give a short explanation of the survey and then ask staff to complete and return it at the end of the break. Returns were received from 500 posties from 42 Delivery Centres.

The survey was conducted in the months of August and September, and compiled in October 2007. Four different organisers from the Communication Workers Union conducted the body-mapping exercise.

The survey asked staff to indicate whether they had any current work-related aches, pains, strains or injuries. If they marked "Yes", they were then asked to not only identify the parts of the body that hurt but to also place a number from 1 to 10 indicating the severity of the pain.

They were then asked whether they had had any previous work related injuries since working at Australia Post and if they could mark these on the Body Map on the other side of the page.

Finally they were asked:

Have you ever had a serious motorbike accident at work? If they answered "Yes", they were asked to describe their injuries.

A copy of the survey is attached as Appendix 1.

FINDINGS

500 Surveys were returned.

This equates to approximately 20% of all the 2,500 Postal Delivery Officers in Victoria. The following table shows returned surveys by Delivery Centre.

TABLE 1

Delivery Centre	No. of surveys collected
Bacchus Marsh	1
Bayswater	7
Belgrave	9
Bentleigh East	7
Box Hill	1
Braeside	12
Brighton	11
Bundoora	17
Burwood	17
Cranbourne	12
Dandenong	5
Deepdene	17
Diamond Creek	4
Epping	13
Footscray West	11
Hawthorn	5
Heidelberg West	15
Hoppers Crossing	21
Melbourne City St. Delivery Centre	33
Moonee Pond	7
Moorabbin	20
Mooroolbark	21
Mornington	11
Mount Waverley	23
Narre Warren	6
Newport	12
Niddrie	11
Nunawading	13
Preston	16
Richmond	20
Seaford	13
Shepparton	11
Somerton	8
South Melbourne	8
St Albans	20
St Kilda	10
Sunbury	10
Sunshine	14
Templestowe	15
Wangaratta	1
Wendouree	12

TOTAL

500

INJURY RATE

There are approximately 2,500 posties in Victoria. Only 31 or 6.2% of the 500 respondents indicated that they had never had a work place injury, either current or past. Four hundred and eight posties or 81.6% indicated that they had a current injury. Ninety-two respondents (18.4%) said they had no current work aches, pains, strains or injuries.

Three hundred and two posties or 60.4% indicated that they had had a work-related injury in the past. One hundred and ninety-eight (39.6%) said that they had not had a past work-related injury.

It is open to Australia Post to claim that the 80% of Victorian posties who did not take part in the survey may be injury free.

Taking the most conservative interpretation of these statistics, (i.e. these 408 posties are the only posties in Victoria with current injuries) this survey finding means that at least 16.3% of all posties have current injuries.

Because this survey only reached 42 Centres or a maximum of 75% of the postie population, it can be extrapolated that it is likely that a minimum of 20.3% of posties are injured. (It is estimated that there are another 61 Delivery Centres that have not been surveyed. These are mostly small country Centres with the exception of Centres such as North Geelong / Corio, Grovedale, Bendigo, Rosebud, Mildura. These 61 Centres contain at least another 25% of the postie population.)

The survey numbers constitute a significant sample of posties so it is more probable that the proportion of injured posties is much higher than 20.3% of all posties.

TYPE & SEVERITY OF INJURIES

The injuries reported ranged widely in severity. 30% of injuries where a severity level was noted had a severity level of over 7 out of 10. 61% of injuries were in the range from 5 -10. 88% of injuries had a pain threshold of over 3.

The data suggests that overall the injuries are serious, multiple, long-lasting and common amongst posties.

Many of the respondents indicated to the organisers that they had not made compensation claims, and there were a number of critical comments about Australia Post's company doctors and rehabilitation system.

The respondents were asked to mark on the Body Map where they were injured.

Very clear patterns of injuries emerged. The injuries in order of prevalence are listed below. The injuries predominantly are occupational over-use injuries and injuries caused by motorbike accidents.

TABLE 2

LOCATION OF CURRENT INJURY

Shoulders	287
Lower Back	193
Arm / Elbow	168
Knee	144
Wrist	101
Hand/Thumb	90
Neck	90
Ankle / Foot	50
Upper Back	46
Leg	28
Hip	16
Buttocks	8
Head	8
Other - Hernia	6
Groin	6
Ribs	3
Post Traumatic Stress	1

This was a total of 1245 injuries among 408 posties. Forty-seven percent of the 500 posties surveyed had either one or both shoulders injured. 38.6% of posties surveyed had lower back problems.

Averaging the current injuries across the numbers of posties reporting injuries, there is an average of 3 current injuries per person.

Anecdotal evidence from the organisers conducting the survey indicates that over-use injuries compound with length of service, although it was quite surprising the number of newer starters who were already reporting injuries.

Again, anecdotal evidence seemed to indicate that shoulder, knee injuries and lower back problems are problems that had become more major issues with the introduction of new work practices - namely, the introduction of V-Sort Frames and the advent of motorbikes as the overwhelmingly predominant mode of delivery.

PAST INJURIES - TABLE 3

LOCATION OF PAST INJURIES

Shoulders	122
Lower Back	113
Knee	100
Arm / Elbow	73
Hand / Thumb	55
Ankle / Foot	55
Wrist	43
Neck	38
Leg	33
Upper Back	23
Hip	14
Head	12
Other:	
- Ribs	10
- Hernia	8
- Groin	6
- Eyes	5
- Buttocks	2

A total of 290 posties had a total of 712 past injuries between them, an average of 2.5 injuries per injured worker. You could expect there to be more past injuries accumulated than current injuries. The fact that this wasn't the case seems to be because many of the past injuries had never totally healed and so show up again as current injuries. It was apparent from the survey forms that it was common that while the severity of the injuries had somewhat decreased over time, many of them still persisted.

Table 2 indicates that a similar range of injuries were predominant, with ankle, foot and leg injuries being more common as past injuries than current injuries.

A more exhaustive analysis of the data is not warranted because many respondents ran out of time to fully answer question 2.

MOTOR-BIKE ACCIDENTS

The survey also contained a question specifically asking whether the respondent had ever had a serious motorbike accident at work? If the answer was "Yes", they were asked to describe their injuries. 119 respondents replied "Yes", while 224 replied "No." 127 posties did not answer the question. There were 30 answers "Not applicable" as they did not deliver by motorbike. This would indicate that between 24 - 34% of posties have had serious motorbike accidents.

Again, it was clear that many respondents did not have sufficient time to fully answer this question. The absence of a clear definition of "serious" obviously confused many respondents. One respondent asked: "What do you class as serious?" Another stated: "Every motorbike accident is serious." Another answered "No" and then went on to describe receiving a tear in his muscle. Several circled and then crossed out "Yes" and finally circled No; and vice versa. A better approach in a future survey would have been to document the history and consequences of each motorbike accident.

To provide an understanding however of the experience of being a postie, comments provided by respondents under Question 3 are listed next.

TABLE 4 - COMMENTS ON MOTOR-BIKE ACCIDENTS

- Injury happened after collision on the road with a dog
- Broken clavicle
- Broken arm, torn tendon
- Broken leg, sprained ankles
- Strained leg
- Came out of it with sore hip & knee
- Broken bone in my foot
- Knee from motor-bike accident
- Double hernia – from falling motor-bike
- Snapped anterior cruciate ligament in left knee, stitches in right hand, dog bite left leg
- Bruising & grazing injuries
- Hit by car, bruised shoulder / broken clavicle
- Back & leg strain
- Torn anterior cruciate ligament
- Knee reconstruction 2 x arthroscopy
- Currently on comp, car ran me over, rang work 3 times couldn't get through so I rang ambulance, that got work's attention – head injury, left leg, right shoulder, elbow.
- Fell into a prickly bush for 2 hours in Belgrave.
- Fractures & bruises
- Hernia, motorcycle smash, hit by car 3 times – back & neck
- Back (pain level 8) – motor-bike accident
- Sacro-iliac (pelvis)
- Broken leg, whip lash, ongoing post traumatic stress. Total 7 months off work
- Collar bone broken & 3 bruised ribs
- Knee operation, off work for 3 months
- Fractured ankle, shoulder injury
- Taken out by a dog causing medial knee strain & rupture to ACL
- Broken left hand
- Soft tissue injury – lower back, broken leg
- My right leg has an indentation of a couple of centimetres in it, my left leg around my knee is aching regularly since accident
- Strained neck, left knee, shoulders & foot. Slid for 10 – 15 metres on road, lucky still had leather jacket (Editorial note – This is a reference to the fact AP is no longer providing leather jackets for motor-bike posties.)
- Bulging disc in neck
- Torn cartilage in left knee
- No injury Came off in heavy traffic (Lucky)
- Severe concussion
- Torn tendons right ankle
- Neck whip-lashed, Deep tissue bruising, left side shoulder to chest, elbow bruised
- Burns, injured foot
- Shoulder, neck, back, hip
- Broken leg, posterior cruciate, ligament re-attached to the bone, 1 screw in leg
- Hit curb, injured my wrist
- Mechanic didn't place oil in motorbike on scheduled service day. The motor died (blew a piston) on my dead-ride to the start of the round and I crashed onto the road – luckily I only suffered shock & bruising
- Still working with these niggling injuries – just a fact of life
- Prolapsed disc
- Chest (ribs) and both knees
- Hit by 2 cars, Australia Post doctor wrongly diagnosed. Sought own advice which fixed problem.
- Bruising, cuts, scrapes, etc.
- Broke shoulder & foot
- Broken left clavicle & acromion requiring surgery x 2
- Torn ligament in left knee
- Broken rib, brain haemorrhage, concussion, middle ear injury affecting balance
- Injury to shoulder & knee
- Ankle reconstruction
- Broken leg, knee
- Damage to right knee (torn medial ligament) Arthroscopic surgery
- Car reversed into bike on path both wrists broken, shoulder & neck, right forearm and elbow when delivering.
- Reversing car, fractured left patella several operations, knee replacement in future.
- Fractured hip
- Metal plate in wrist
- Broken scaphoid – wrist bone, FND said it was just a sprain when really broken,
- Fractured foot
- Torn meniscus left knee
- Broken leg, tendonitis
- Left tibia, smashed knee socket
- Broken scaphoid
- 3 cm muscle tear from minor motorcycle accident
- Broken wrists, cuts & bruises
- Shoulder will require surgery
- Strained shoulder, bruised knee, stitches in knee, chipped teeth, strained knee (couldn't walk or raise arm. Told to go to work next day for 1 hour. Just to sit down and do nothing.)
- Shoulder stiffness
- Bruising to my left side
- Fractured left clavicle
- Face, 2 knees, left shoulder, left ankle, back strain
- Very bad bruising, arms, ribs
- A car ran over my right foot and stayed on it for several minutes causing extreme pain.
- I receive a minor bump / injury approximately once a week. I have fallen off my bike a number of times incurring pain, but have been reluctant to go through the Aussie Post rehab program
- Came off bike on 2 occasions, emergency treatment for one.
- Broken collar bone
- Broken and fractured wrist (3 separate breaks & one fracture), severe whiplash, numerous abrasions
- Grazing and stiffness on right arm and shoulder, neck kinking and stiffness
- Run over by a car while waiting to turn right. Slid off bike numerous times. Hit by reversing cars. Severely bruised legs, broken ribs, cuts and abrasions.
- Knee injuries
- Fractured leg
- Ankle surgery
- Came off, done right knee
- Hip, knee, shoulder, wrist
- 4 shoulder operations as a result of a motorbike accident, RSI elbow & forearm, knees and left ankle injured whilst delivering.
- Left knee, right calf muscle, lower back
- Bad grazing of left leg, twisted knee
- Lost finger
- Knocked off bike landing on wrist and knee
- Broken ankle
- 3 accidents. Hit by car – knee injury most serious
- Grazed elbows, knees, back pain
- Dirt all over road, bike slid & hit curb. Also a reversing car hit me.

OTHER COMMENTS

- Repetitive work looking down all the time
- Couldn't sleep last night – hand completely numb
- Both shoulders periodically hurt and pain keeps returning especially after big weeks.
- Just getting over colds and flu for the past 2 months due to bad wet weather gear.
- Carpal Tunnel, two stomach hernias
- Dog bite
- Carpal Tunnel Syndrome
- Pushbike ran into car as it drove out of driveway, two middle fingers broken
- Wasp sting
- Injuries have just never got better.
- Bad back – gets worse the longer the delivery day, caused by riding motorbike.
- Lower back soreness

LIMITATIONS OF THE STUDY

This was a quick and subjective study. Body-mapping surveys however are held to be a good indication of underlying problems. While there is no scientific or medical evidence to back up the individuals reported "aches, pains, sprains and injuries", such an exercise overcomes recognised problems of under-reporting of incidents and accidents through official channels.

The exercise of having to quickly indicate where on the body map the person is suffering pain is conducive to producing honest answers.

Obviously thresholds of pain are also subjective.

A more detailed survey asking questions about the length of service as a postie and about the history of the injuries would have been useful in quantifying the accident rate. Such a survey was not possible given the limited access the union has for face to face contact with the posties.

It was impossible to survey all the posties in the facilities visited as several did not take breaks or did not come into the lunch-room for their breaks.

Overall, it was clear that a longer period of time to conduct the survey would have been of benefit. Many posties did not have time to do more than indicate their injuries on the Body-Map and many people did not get to answer more than the first question fully.

It is not possible to draw conclusions about injury rates between Delivery Centres. The rate of return from each Centre was influenced largely by extraneous factors i.e. how many posties came into the lunch-room, or whether the organiser had other matters to discuss with union members.

We need Australia Post management to sponsor an academic organisation to conduct a longer and more detailed survey, now that we have clearly established the OH&S Risks of being a postie.

CONCLUSIONS

While this study has obvious limitations it is a stark indication that there are serious problems with over-use injuries and motorbike accidents in this particular occupation. Certain types of injuries are predominant. There are a large number of persons reporting significant pain in their shoulders, and lower backs, arms / elbows, hands, thumbs and wrists as well as knees.

These deserve serious investigation and action.

There needs to be an investigation about the pace of work, and rest and recovery time. The postal delivery officers need work practices designed to give genuine relief to the muscle groups affected in employees engaged in repetitive work processes.

Much needs to be done to make delivery by motorbike safer. Reducing the pressure on posties to meet unrealistic times given to complete their work would be a good start.

It is clear that many injuries persist for a lengthy period and that many posties are working in constant or intermittent pain. Posties suffer multiple, serious, and long-lasting injuries. And being injured is a common experience for many posties.

What is of great concern is that while these injuries are going on, Australia Post is reporting a decrease in Lost Time Injuries. How does an organisation have so many P400s or incident reports, so many compensation claims and yet so few Lost Time Injuries and accepted compensation claims.

Despite the problems already mentioned with LTIs as an indicator of safety performance Australia Post's own figures over the last two reporting periods have shown a deteriorated performance of LTIs in Delivery. This is largely due to an increase in motorcycle accidents.

We are asking Australia Post Delivery management and the State OH&S Committee to address these issues as a matter of urgency. To begin, they should engage an academic body to conduct a complete and in depth survey of the entire postal delivery staff. This should be compared with a full analysis of compensation claims from this group of workers.



Communication Workers Union
Postal and Telecommunications Branch Victoria
Phone: (03) 9600 9100
October, 2007



UNION DELIVERY OH&S SURVEY 2007

Please fill in and return to your shop steward or organiser or fax back to the union office 9600 9133.

SHIFT: DAY / NIGHT (Please circle which applies)

QUESTION 1: HAVE YOU ANY CURRENT WORK ACHES, PAINS, STRAINS OR INJURIES?

YES / NO (Please circle)

If you answered YES, please mark with a cross on the body map below where you have these aches, pains, strains or injuries. Using a number between 1 and 10 please indicate the severity of the pain (with 1 being very minor pain and 10 being unbearable pain).

QUESTION 2: HAVE YOU HAD ANY PREVIOUS WORK RELATED INJURIES SINCE WORKING FOR AUSTRALIA POST?

YES / NO (Please circle)

If you answered YES, please mark on the body map ON THE OTHER SIDE OF THE PAGE to show where you were injured and the severity of the pain scale of 1 - 10.

IF YOU HAVE NEVER HAD A WORK-RELATED INJURY LEAVE BOTH BODY MAPS UN-MARKED.

QUESTION 3: HAVE YOU EVER HAD A SERIOUS MOTOR-BIKE AT WORK?

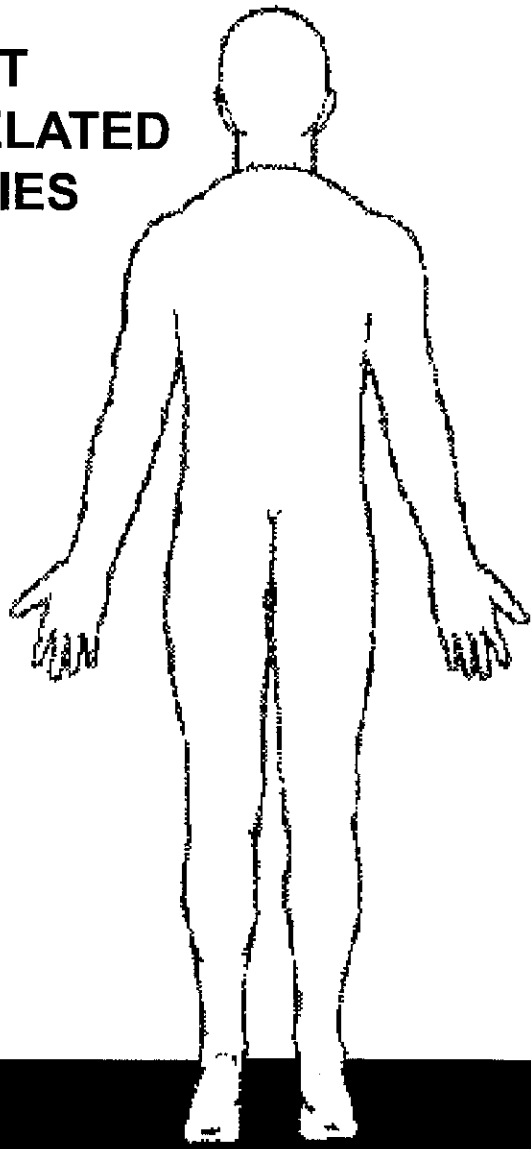
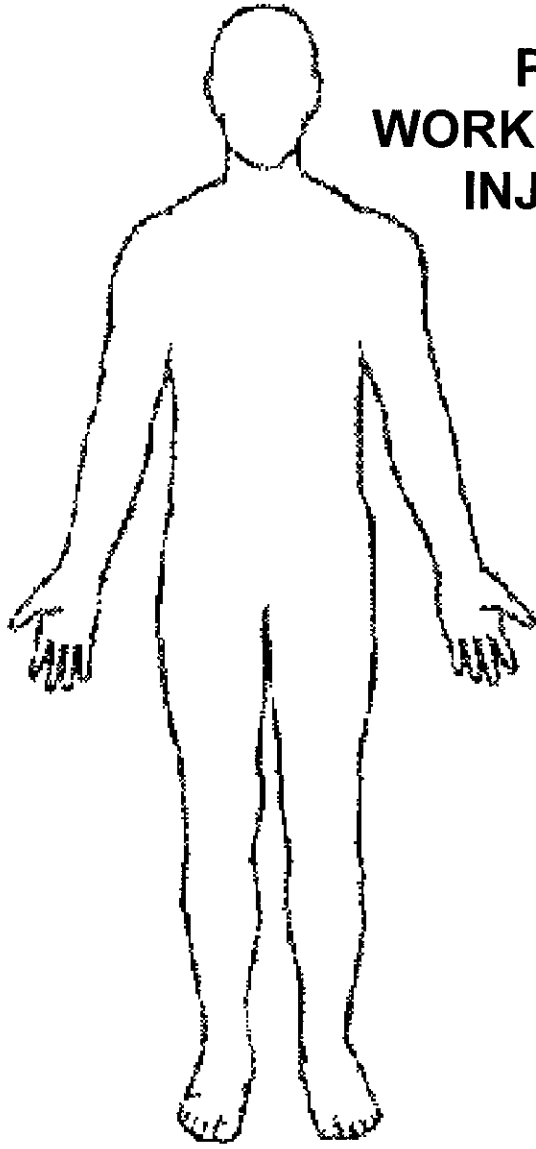
YES / NO (Please circle) PLEASE DESCRIBE YOUR INJURIES

CURRENT

Front

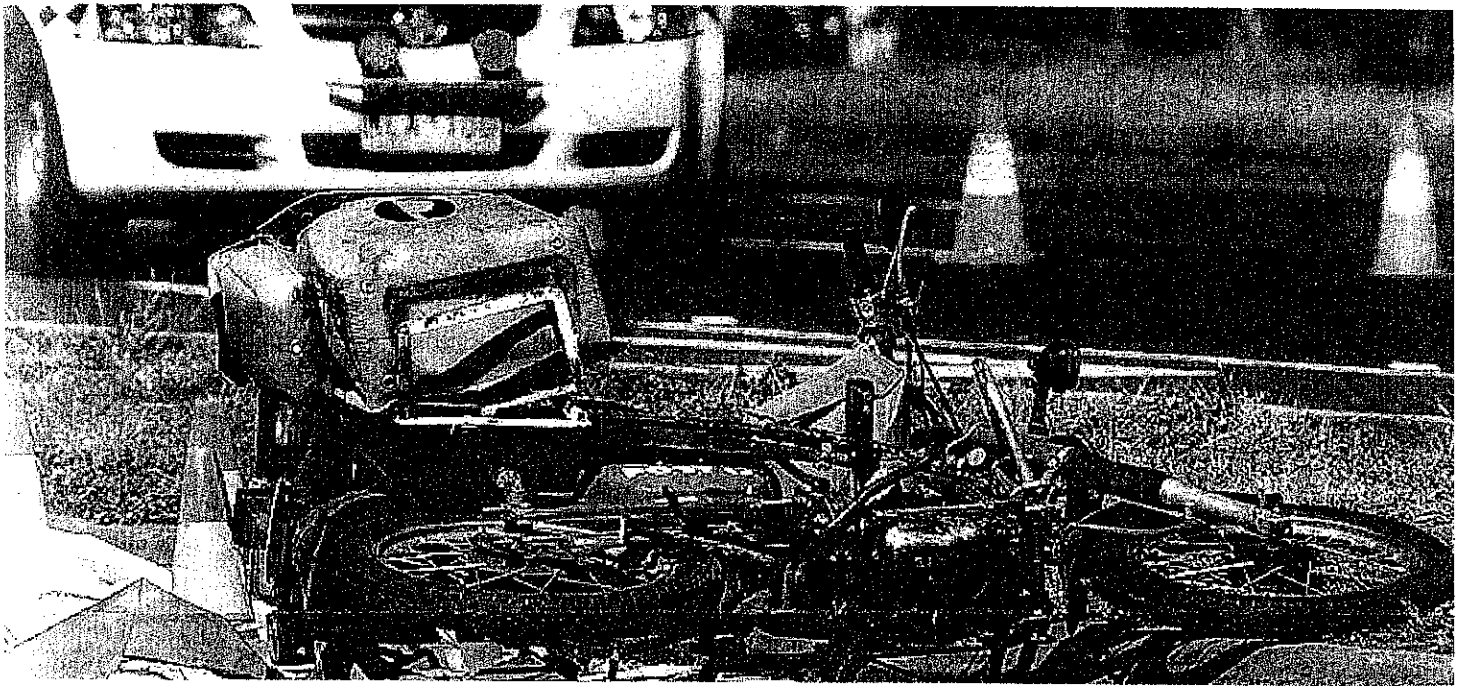
Back

**PAST
WORK-RELATED
INJURIES**



Front

Back



SURVEY & BODY-MAPPING EXERCISE AT DANDENONG LETTERS CENTRE MAY/JUNE 2007

SUMMARY

1. A survey seeking information about current and previous work-related 'aches, pains, strains and injuries' was conducted at DLC in May / June 2007. The background to the survey was that management were proposing a rotation plan known as "block processing" which involved less variety of work.
2. Three hundred and seventy-one (371) surveys were returned. **67% of respondents reported current injuries.** These staff had 927 problems between them. **Sore shoulders were the most reported problem, followed closely by wrists and hands, feet problems, sore backs and elbows. 43% reported having one or more injuries with a pain threshold of 5 out of 10 or more.** These added up to 466 'more serious' injuries in same areas of the body as above.
3. **Another 14.5% staff reported that they had been injured in the past at DLC but were not in current pain.** These previous injuries totalled 119 separate problems. Hand and wrists injuries were the most numerous followed by back, feet, shoulders and elbows. When the reported severity was taken into account there were 59 'more serious' injuries with a pain threshold of 5 out of ten or above. Hands and wrists were the most reported of these 'more serious' injuries, followed by shoulders, feet, backs and elbows.
4. **Less than 18% of staff maintained that they had never suffered any "aches, pains, strains or injuries."**
5. **In response to a question as to whether they believed they would suffer more injuries if management's plans to implement block processing and reduce rotation go ahead, the verdict was a definite "Yes". 79% responded in the affirmative.** Less than 5% said "No". Another 15% did not answer the question or responded that they did not know.

METHODOLOGY

6. The survey was distributed to staff including mail officers, administration staff, dock staff and technicians at DLC.
7. The survey asked staff to answer if they had any current work aches, pains, strains or injuries. If they answered "Yes", they were asked to not only identify the parts of the body that hurt but also to mark a number between 1 and 10 indicating the severity of the pain. They were asked if they answered "NO", whether they had any previous injuries since working at DLC and if they had could they mark these on the Body Map provided. Finally they were asked: "If management go

ahead with BLOCK PROCESSING AND REDUCE ROTATION, do you think you will suffer from more aches, pains, strains or injuries.

- This survey was conducted during tea-breaks and lunch-breaks in the canteen at DLC over the week Monday 28 May – Friday June 1 2007. Three different officials of the Communication Workers Union attended the facility to give out the surveys to people in the canteen. Most surveys were completed during the first 2 days. A brief explanation was given about the survey and the surveys were largely filled in on the spot. The officials answered questions and assisted anyone asking for help with the survey. Union delegates also took the surveys to people having their breaks in other areas of the Mail Centre. A handful of people declined to participate. A copy of the survey is attached as Appendix 1.

FINDINGS

- Three hundred and seventy-one (371) surveys were returned. This probably equates to about 40% of the operational staff.
- A table showing respondents by shift start time is provided below. It can be seen that the coverage was not complete and one shift (9 am) was missed completely. It would not be valid to make assumptions about injury rates by shift on the basis of this survey. It was clear, however, from the returns, that injuries were not confined to older staff with long service records. Many young people with only a few years service reported serious injuries.

TABLE 1.

SHIFT START TIME	NO. OF STAFF RESPONSES
6AM	18
10.30AM	1
11AM	18
1PM	47
2.45PM	43
4PM	42
6PM	59
7PM	6
7.30PM	83
8.30PM	1
8.50PM	4
9PM	27
9.39PM	2
11PM	2
11.30PM	4
ROTATING	8
NOT SPECIFIED	3
INFORMAL	3
TOTAL	371

CURRENT INJURIES

11. Two hundred and forty-nine staff (249) reported current injuries. This is 67% of the survey respondents. These staff had 927 problems between them. Sore shoulders were the most reported problem, followed closely by wrists and hands, feet problems, sore backs and elbows. When severity of pain was taken into account – 159 people (43% of respondents) reported having one or more injuries with a pain threshold of 5 out of 10, or more. These added up to 466 'more serious' injuries. Again, sore shoulders were the most reported problem, followed by hands & wrists, feet, backs and elbows.

FREE OF CURRENT PAIN BUT WITH PAST INJURIES

12. Another fifty-four (54) staff (14.5% of respondents) reported that they had been injured in the past at DLC but were not in current pain. These previous injuries totalled 119 separate problems. Hand and wrists injuries were the most numerous followed by back, feet, shoulders and elbows. When reported severity was taken into account there were 59 more serious injuries with a pain threshold of 5 out of ten or over. Hands and wrists were the most reported of these more serious injuries, followed by shoulders, feet and backs and elbows.

STAFF WITH NEITHER CURRENT OR PAST INJURIES

13. There were only sixty-six staff (18% of respondents) who maintained that they had never suffered any 'aches, pains, strains or injuries'.

STAFF VIEWS ON BLOCK PROCESSING

14. In response to a question as to whether they believed they would suffer more injuries if management's plans to implement block processing and reduce rotation go ahead, the verdict was a definite "Yes". Two hundred and ninety three (293) staff responded in the affirmative. This is 79% of all respondents. Only seventeen (17) said "No". Fifty-five (55) did not answer the question or responded that they did not know.
15. While a higher proportion of injured workers responded in the affirmative (83%), this view was also held by a comfortable majority of the non-injured workers (62%).

LIMITATIONS OF THE STUDY

16. This was a quick and subjective study. Body-mapping surveys however are held to be a good indication of underlying problems. While there is no scientific or medical evidence to back up the individuals reported "aches, pains, sprains and injuries", such an exercise overcomes recognised problems of under-reporting of incidents and accidents through official channels.

17. There are a large number of different languages spoken and different cultural groups at DLC. There was some suggestion that certain groups did not feel comfortable with complaining. Similarly there may have been an element of a protest against reduced rotation. The exercise of having to indicate where on the body map the person is suffering pain however is conducive to producing honest answers.
18. Obviously thresholds of pain are also subjective. Some of the high figures may have to be viewed with some scepticism. But when a mail officer who has had 3 back operations rates these as a 5 on the threshold level it is clear that any exaggeration could be balanced by the more stoic mail officers.

CONCLUSIONS

19. While this study has obvious limitations it is a fairly stark indication that there are serious problems with over-use injuries in this particular workplace. There are a high number of persons particularly reporting pain in their shoulders, wrists, hands and elbows. These are classical indicators of exposure to risks of over-use strain injury. There are also an unsettling number of reports of soreness in the back, especially the lower back and many reports about feet problems.
20. These deserve serious investigation and action. There needs to be an investigation about the pace of work, and rest and recovery time. The mail officers need job rotation designed to give genuine relief to the muscle groups affected in employees engaged in repetitive work processes. It would seem that task rotation or merely moving people between tasks does not provide the necessary physical relief.
21. The issue of so much standing up on reinforced concrete floors and the need for seated duties needs to be addressed.
22. This survey lends weight to the contention that a reduction in rotation will further add to the risk of injury at DLC. The indications are that there is a need for greater not reduced rotation. We would ask the DLC OH&S Committee to take up these issues as a matter of urgency

**Communication Workers Union
Postal and Telecommunications Branch Victoria
June 1, 2007**

APPENDIX 1

Committee Secretary

Senate Standing Committee on Environment, Communications and the Arts

**Communication Workers Union Submission for the Senate Inquiry
into Australia Post's treatment of injured and ill workers**

Case Studies for Submission:

- BURKE, Robyn
- CUNNINGHAM, Daryl
- CASELLA, Angela
- CHLEBOWCZYK, Kevin
- CRAWFORD, Trevor
- GOODCHILD, Scott
- GRUNDY, Dianne
- HALL, Mark
- HALVERSON, Cameron
- KANAPATHIPPILLAI, Thirunavukkarasu
- LAZARUS, Jamie
- LESLIE, William
- LESTIN, Anne
- LIEN, Lang
- LUCIGNANI, Paul
- METAXAS, Debbi
- NGUYEN, Thao Phuong
- O'KEEFE, Sean
- PAPAIOANNOU, John
- PEAK, Gerard
- QUINAN, Wendy
- RANASINGHE, Stanley
- REA, Noel
- STEWART, Catherine
- TSOTROS, Vaios
- WINGARD, Christine