

# THE PEER REVIEW

PRACTICE-BASED EVIDENCE FOR  
EFFECTIVE REHABILITATION

## The Hopkins Centre

Research for  
Rehabilitation  
and Resilience

## A PLACE FOR SHARING IDEAS AND EVIDENCE

Every year, practitioners are exposed to hundreds of demands for evidence-based practice. They could spend most of their time reading systematic reviews and still not be much wiser about what to do differently. And who has the time for that in their busy working life? As a keen rehabilitation practitioner or researcher, the challenge of keeping up with the evidence can be daunting. The challenge of applying evidence can be even more overwhelming.

Evidence-based practice (EBP) had its origins in medicine but has now been translated to most clinical disciplines and even into policy and community practice. It dates back to the 1800s, but gained popularity in the mid-1970s through the Cochrane Collaboration. It is a widely misunderstood concept. It's not just about using interventions with "gold-standard" evidence. It is really about complex decision-making through which practitioners integrate high-quality research (both quantitative and qualitative) with "proven" practice knowledge and information about consumer circumstances, preferences or values. The importance of knowledge from practitioners and consumers is often overlooked.

In this issue of PEER we have focused on the theme of returning to work after injury. We have featured the award winning B2W project, which is a partnership between Spinal Life Australia, Griffith University and Metro South Health. We hear from an award winning employer, Carter Newell, on their tips for implementing a Disability Support Program in the workplace and we review an employment initiative at Nundah that will entice you want to head out there for a coffee. Read responses to employment frameworks and practices from educators, hospital therapists, policy-makers and practitioners in the community.

In each issue of PEER, we will bring together evidence, opinions, examples, ideas and tools that can help make sense of a specific area. We hope you enjoy this issue and help us to make PEER a success in future!



Photo courtesy of Metro South Health

### Quarter 4, 2018

#### In this issue

Cutting edge early  
intervention program

Supporting people with  
ABI to return to work

Improving  
communication

DES Reform

Embrace diversity: a free  
online course

Spotlight: 20 years of  
making a difference

Carter Newell: Award  
winning employer

Gold Coast Hospital  
leads the way in diversity

Anti-Discrimination  
Legislation

Vocational rehabilitation  
competencies

Pathways to work

## The Hopkins Centre

Research for Rehabilitation and Resilience

**Bold ideas. Better solutions.**

# Bold ideas. Better solutions.

# Back2Work at the Cutting Edge



Photo courtesy of Metro South Health

**Spinal Life Australia rehabilitation counsellor, Tania Goossen, knows that every day she is creating Queensland history at the Princess Alexandra Hospital Spinal Injuries Unit (SIU) .**

Tania delivers the Back2Work pilot vocational rehabilitation program which is a Queensland first. The senior researcher working on this program, Dr Pat Dorsett from The Hopkins Centre, Griffith University, describes the New Zealand and Australian early intervention initiative as "a world-changing approach that isn't happening anywhere else". She noted that excellent results are already emerging from similar programs in New Zealand and New South Wales and this trial at the SIU is likely to be equally successful.

*"This is a New Zealand and Australian initiative and we are taking it to the world,"  
- Dr Pat Dorsett -*

From 2017 to 2019, vocational rehabilitation services will be offered to all new patients at the SIU. Tania Goossen said that although the primary goal of Back2Work might be to help people with SCI return to work sooner, the program also aims to foster positive expectations and provide hope for the future. "Our message is that everything doesn't have to be perfect before you start thinking about returning to work," she said. "The time immediately post-injury is so important for nurturing the bond with employers and co-workers, giving people some hope and positive progress they can see."

For decades, we have known that early return to work is critical if jobs are to be saved after minor injury. However, when injuries are serious and involve long periods of hospitalisation, the opportunity for early intervention is often lost. It is tempting to think that people need time to adjust to their injury before considering a return to work, but we are integrating vocational rehabilitation counsellors into the acute setting.

"Individualised conversations and planning around work begins soon after injury, which can be empowering as it adds deeper purpose to their rehabilitation" said Hopkins Centre researcher and vocational rehabilitation counsellor, Dr Vanette McLennan. The researchers are following participants' experiences and vocational outcomes up to three years after their injury to examine the effectiveness of the Back2Work model.

Since 2017, 70 people have joined the study. According to Dr. McLennan, "our data is already showing people's readiness to engage in the return to work process earlier than is traditionally expected. We expect these emerging benefits of the program to be consolidated during the next 12 months".

The feedback from participants so far has been overwhelmingly positive. "In addition to high return to work rates, we are seeing personal benefits including improved coping, self-efficacy, motivation, and financial benefit". There is a strong desire in participants to return to their pre-injury employment, but readiness for return to work requires ongoing support at and beyond discharge. Working with current and prospective employers is therefore fundamental to the process and the positive engagement of rehabilitation staff in the Spinal Injury Unit has been critical.

*Back2Work is a partnership involving Spinal Life Australia, The Hopkins Centre, Griffith University and Metro South Health. It is funded by the Motor Accident Insurance Commission*

BEST ARTICLE 2017

Bloom, J., Dorsett, P., & McLennan, V. (2017). Early intervention in the voc rehab. Spinal Cord Series And Cases, 3, 16042. doi:10.1038/scsandc.2016.42

Bloom, J., Dorsett, P., & McLennan, V., (2018). Employment following SCI. Dis & Rehab, 1-10. doi:10.1080/09638288.2018.1467968

Dorsett, P., McLennan, V., (2018). Voc Rehab and employment outcomes: 'Status quo' in voc rehab. J of Voc Rehab (in press)

**A 2016 survey of people with SCI showed that:**

**35.5%**

were employed compared to 79.5% prior to injury

**9%**

were in full time employment compared to 62% prior to injury

**85.5%**

of those employed returned to their pre-injury employer

Employment rates are low following SCI but early intervention with an existing employer is important for good outcomes

*'Queensland's first evidence-based early intervention vocational rehabilitation model for people with spinal cord injury'*

**Spinal Life**  
AUSTRALIA

**Read more online at**  
[www.hopkinscentre.edu.au/project/back2work-project-80](http://www.hopkinscentre.edu.au/project/back2work-project-80) or  
[www.spinal.com.au/news/back2work](http://www.spinal.com.au/news/back2work)

## Kaleidoscope program snapshot

The Back2Work program mirrors the long-term work of passionate and committed medical professional, Professor Alan Clark. After sustaining a spinal cord injury (SCI), his groundbreaking work resulted in the formation of New Zealand's Kaleidoscope program in 2003 at Burwood Spinal Unit and in 2006 at Auckland Spinal Rehabilitation Unit.

Kaleidoscope is a not for profit organisation focused on an early intervention restorative vocational rehabilitation after SCI.

The name 'Kaleidoscope' symbolises the variety of opportunities that are available to people with disabilities if all the supports are lined up the right way. Kaleidoscope aims to remove barriers and reduce fear around returning to work by providing people with educational support, career advice and planning.

The not-for-profit organisation is dedicated to finding meaningful and sustainable employment for people with SCI or acquired illnesses. They state that '80 percent of patients are engaged [in vocational

rehabilitation] within three weeks post SCI'. The program aims to empower people through vocational rehabilitation rather than creating dependant behaviour. Engaging employers and encouraging them to be available is extremely important to the success of the program.

Read more about this project at: [www.nzspinaltrust.org.nz/support/rehabilitation/rehab-contact/](http://www.nzspinaltrust.org.nz/support/rehabilitation/rehab-contact/)

Connect with Kaleidoscope socially [www.facebook.com/NZSpinalTrust/](https://www.facebook.com/NZSpinalTrust/)



**New Zealand Spinal Trust**  
Te Taratihu Manaaki Tuanui

**'The other key aspect of the program and crucial to the success, is engaging employers early and being available post placement for support.'**  
- Kaleidoscope program team

## READ MORE

Stay up to date with experts on vocational rehabilitation and return to work interventions....

### Early Access to Vocational Rehabilitation for Inpatients with Spinal Cord Injury: A Qualitative Study of Patients' Perceptions

Authors: Kumaran Ramakrishnan, MD, Deborah Johnston, MBMSc, Belinda Garth, PhD, Gregory Murphy, PhD, James Middleton, PhD, and Ian Cameron, PhD

[www.researchgate.net/publication/306049030](http://www.researchgate.net/publication/306049030)

### IN VOC: Vocational rehabilitation for spinal cord injury in-patients

Authors: Johnston D, Middleton J, Cameron I, from John Walsh Centre for Rehabilitation Research, Northern Clinical School, Medicine, Uni of Sydney. Author Murphy G from Biosciences, Public Health, Health Sciences, Latrobe University

[www.researchgate.net/publication/277306582](http://www.researchgate.net/publication/277306582)

### Optimising return to work practices following catastrophic injury

Authors: Dr Loretta Piccenna, Mr Loyal Pattuwage, Ms Lorena Romero, Assoc. Prof. Virginia Lewis, Prof. Russell Gruen, Dr Peter Bragge. All authors are from the NTRI, The Alfred & Monash University, with the exception of Assoc. Prof. V Lewis who is from the La Trobe University, Melbourne.

[www.researchgate.net/publication/273696562](http://www.researchgate.net/publication/273696562)

# Get involved

## Be a pioneer, contribute to PEER!

We would love to share your feedback and opinions. If you'd like to get involved go to [www.hopkinscentre.edu.au/peer](http://www.hopkinscentre.edu.au/peer)

Connect with THC and stay up to date with our research for positive outcomes  
Follow us on twitter @hopkins\_centre

**The Hopkins Centre**  
Research for Rehabilitation and Resilience



Metro South Health





Photographs courtesy of NIISQ

According to the recent systematic review conducted in the Netherlands (see right), failure to return to work after ABI is a major public health issue. At least 75% of people with ABI are of working age, yet successful return to work varies between 11 and 85%. Only 40% of those with ABI under 65 years of age who were previously employed are likely to return to work within two years.

However, work remains an important element of life for people with ABI. Work provides a social environment, a sense of purpose, a source of satisfaction and self-esteem and motivation for recovery.

It is important that people with ABI are supported to return to work and set strong vocational goals. However, the focus of rehabilitation is, by necessity, on functional recovery.

Uncertainty exists around the best way to support people to set realistic vocational goals early in their rehabilitation process. Even once people leave rehabilitation centres, there is limited evidence about which vocational interventions are most successful. The purpose of this systematic review was to identify the most effective components of vocational rehabilitation.

## BRAIN INJURY

<http://tandfonline.com/ibij>  
 ISSN: 0269-9052 (print), 1362-301X (electronic)  
 Brain Inj, 2016; 30(2): 113-131  
 © 2016 Taylor & Francis Group, LLC. DOI: 10.3109/02699052.2015.1090014



### REVIEW ARTICLE

## Effective return-to-work interventions after acquired brain injury: A systematic review

Birgit H. P. M. Donker-Cools<sup>1,2</sup>, Joost G. Daams<sup>1</sup>, Haije Wind<sup>1,2</sup>, & Monique H. W. Frings-Dresen<sup>1,2</sup>

<sup>1</sup>Academic Medical Center, University of Amsterdam, Coronel Institute of Occupational Health, Amsterdam, the Netherlands, and <sup>2</sup>Research Center for Insurance Medicine, Amsterdam, the Netherlands

The review involved a search of five major databases (PubMed, EMBASE, PsycINFO, CINAHL and the Cochrane Library using keywords and Medical Subject headings). Studies were included if they focused on adults with non-progressive ABI, who were working prior to their injuries and received an intervention designed to improve return-to-work. Only twelve studies met these criteria; five randomized controlled trials and seven cohort studies. Nine of the studies had sufficient methodological quality to be included.

The review found strong evidence that work-directed interventions in combination with education and coaching were effective in promoting return to work for this group of participants. Components of the most effective interventions included:

- Early intervention
- A tailored individualised approach
- Active involvement of both client and employer
- Work or workplace accommodations
- Training and practice of social and work-related skills
- Coping and emotional support

Request a copy of this article from the authors via [hopkinscentre@griffith.edu.au](mailto:hopkinscentre@griffith.edu.au)

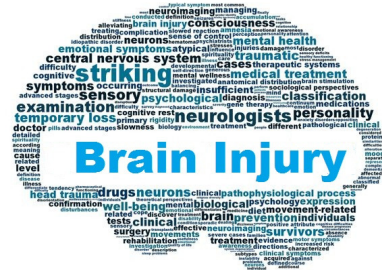
Images above (Left to Right): Hopkins Ambassador Dr Michelle Owens and husband Nick Owens; Hopkins Ambassador, Tim McCallum with the team, Shane Daley's award-winning photograph Kintsugi, Hopkins Ambassador Stephen Dale, and NIISQ Participant, Izak and his NIISQ planner

Other information on vocational rehabilitation:

[www.apo.org.au/system/files/53304/apo-nid53304-82566.pdf](http://www.apo.org.au/system/files/53304/apo-nid53304-82566.pdf)

[http://www.campbellcollaboration.org/media/k2/attachments/Graham\\_Employment\\_Interventions\\_Review.pdf](http://www.campbellcollaboration.org/media/k2/attachments/Graham_Employment_Interventions_Review.pdf)

Check out our website [www.hopkinscentre.edu.au](http://www.hopkinscentre.edu.au)



Useful resources

# Improving the ability of employers to communicate with brain injured workers

*Imagine if we could educate employers and co-workers to better understand and form more effective partnerships with employees who have sustained a brain injury?*

This would make an already challenging process of returning to work so much easier for everyone. Acquired Brain Injury Outreach Service (ABIOS) Speech Pathologist and Hopkins Centre researcher Clare Morgan is currently working with a program that could improve the ability of many employers in Queensland to understand and support their employees who have brain injury. Difficulty with effective communication following a brain injury is quite common and can be an enormous challenge to overcome, particularly within the demands of the work context. Communication encompasses a complex interplay of speaking, understanding, writing and reading information. On a daily basis, Clare confronts the negative impact of poor communication & misunderstandings between people with brain injury and their communication partner(s). A person's difficulty communicating often stands in the way of many social activities, but particularly returning to work.

On the other hand, the ability to engage in positive social interactions is often what makes the difference

between successful & unsuccessful employment. It seemed obvious to Clare that increasing the capacity of employers (and employees) in the workplace to have a better understanding of practical communication strategies should lead to more supportive and effective communicative interactions, and lead to more sustainable vocational outcomes for people with brain injury.

Clare is currently collaborating with a team of Speech Pathologists to investigate ways to increase the social participation of people with impaired communication following a brain injury. Clare's research project is underway and is based around the TBI Express program. This program has been developed by Prof Leanne Togher, Dr Emma Power and colleagues, directly addressing the communication challenges that often occur between people who have experienced a brain injury and their conversation partners. TBI Express is a unique program that provides a simple set of strategies for increasing the likelihood of positive interactions with people who have communication challenges following a brain injury. The program has been evaluated across a range of contexts and has shown a significant positive impact on the ability of family members, therapists, police officers, and paid carers to effectively communicate with and support someone with a brain injury.



Leanne will be visiting Brisbane in November when she and Clare will be trialling a version of the TBI Express tailored to STEPS program leaders. The data collected from the communication training aims to inform the future feasibility of delivering communication partner training to other populations, such as planners, employers, case managers and co-workers to enhance the likelihood of successful participation and social inclusion of people who have experienced a brain injury.

**Check out more about TBI Express and Professor Leanne Togher at [www.sydney.edu.au/healthsciences/tbi-express/](http://www.sydney.edu.au/healthsciences/tbi-express/)**

## MHIQ Program Seminar Series

Disability & Rehabilitation

*Professor Leanne Togher*

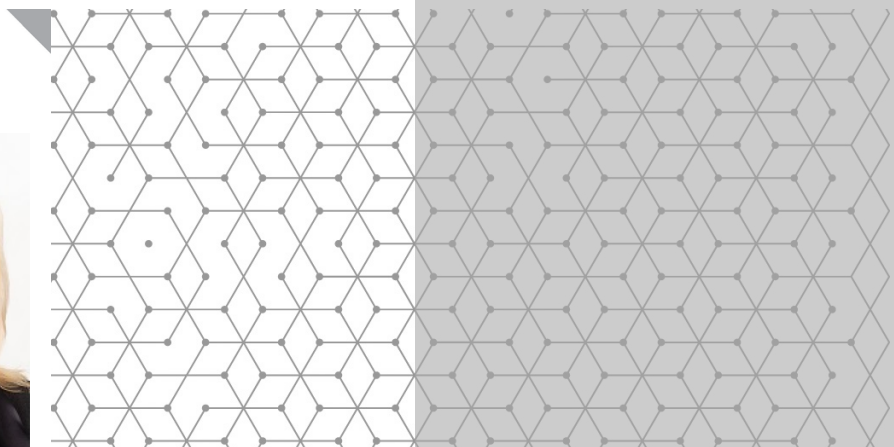
Professor of Communication Disorders Following Traumatic Brain Injury  
Senior NHMRC Elizabeth Blackburn Research Fellow  
The University of Sydney

**Translating research findings so that they matter in the lives of people with brain injury**

Wednesday 7 November 10.00–11.00 am

Host Venue:

- Princess Alexandra Hospital, Russell Strong Auditorium
- Videoconference to Griffith University:
- Gold Coast campus G40\_B.29
- Nathan campus N78\_2.30



# Did DES reform go far enough?

Comments from Janelle Griffin, OT

In response to the National Disability Employment Framework Issues Paper released in May 2015, Occupational Therapy Australia (OTA) responded with key issues that required more attention. OTA emphasised the importance of a 'whole of community' approach to education and raising awareness to improve employment outcomes for people with disability. The response specifically highlighted the importance of reducing barriers for employers to hire people with disability and promoting the benefits of employing people with disability. Finally, it focused on ways of reducing barriers for individuals with a disability to seek employment.

In June 2017, the Disability Employment Services (DES) Reform 2018 Industry Information Paper was released. From 1 July 2018, four key changes were made to the National Disability Employment Framework. These changes include increased control and choice for participants, a new risk-adjusted funding model for providers, more contestability and competition between providers and indexed DES payments to preserve their real value.

So will the new reforms provide accessible avenues for people with disabilities to be supported and assisted into employment? According to Hopkins Centre researcher and OT, Janelle Griffin, these changes are hopeful, but some important recommendations were overlooked.



- Training for all parties
- Adaptations to improve access to work
- Funding for allied health case management
- Access to subsidies, incentives, and grants for aids and workplace modifications
- Accessible transport and buildings
- Employer networks, coaching, mentoring and encouragement
- Strategies to reduce barriers to employment
- Flexible use of the Disability Support Pension to reward work.
- Reducing barriers for employers to hire people with disability
- Flexible industrial relations policies, subsidies, tax incentives, particularly for small enterprises
- Promoting the benefits of employing people with disability advertising, rewards and good news stories.

Janelle sees promise in the reforms in that they will provide funding for all parties; the service providers, the clients and the employers. Participants should have choice and control over the supports they receive through DES and who they receive support from. But she cautioned that there has been a lack of confidence in existing employment services because they don't guarantee specialist allied health assessment or case management. This has placed a burden on existing health services to provide these functions and this is not sustainable in our already stretched healthcare budgets. Case management requires individualised assessment and alignment of needs, work skills and capacity for work. We cannot underestimate the value of allied health in these processes. We are experts in activity and environmental analysis, and tailoring plans to suit individual strengths and needs. We are a powerful resource for harnessing people's potential to add value to a workplace. But there is a lack of awareness about the supports available to promote employment. To truly integrate people with disabilities in the workplace we need to address both push and pull factors. Employers need to know about, and believe in, avenues for employing people with disabilities and the value that they can bring. OTA certainly got this right!

<https://engage.dss.gov.au/wp-content/uploads/2016/11/DES-Reform-Discussion-Paper-November-2016.pdf>

[https://www.otaus.com.au/sitebuilder/advocacy/knowledge/asset/files/100/disability\\_employmentservicesreform-occupationaltherapyaustraliasubmission.pdf](https://www.otaus.com.au/sitebuilder/advocacy/knowledge/asset/files/100/disability_employmentservicesreform-occupationaltherapyaustraliasubmission.pdf)

More information at [www.dss.gov.au](http://www.dss.gov.au)

**"Many in the field believe the government took a backwards step with the closure of federally funded, specialist employment services" says Janelle Griffin.**

# Stay up to date on chronic pain...

ISSN 2526-8910  
Cad. Bras. Ter. Ocup., São Carlos, v. 25, n. 4, p. 825-837, 2017  
<http://dx.doi.org/10.4322/2526-8910.ctoAR2063>

## Successful return to work of individuals with chronic pain according to health care providers: a meta-synthesis

Lilian Magalhães<sup>a</sup>, Crystal Chan<sup>b</sup>, Audrey Colleen Chapman<sup>c</sup>, Lorna Majed<sup>d</sup>,  
Renata Samigullina<sup>d</sup>, Dejana Trninic<sup>e</sup>, Lynn Shaw<sup>e</sup>

<sup>a</sup>Departamento de Terapia Ocupacional, Universidade Federal de São Carlos – UFSCar, São Carlos, SP, Brazil.

<sup>b</sup>VHA Rehab Solutions, Canada.

<sup>c</sup>Western University of Ontario, Canada.

<sup>d</sup>Red Deer Regional Hospital, Alberta, Canada.

<sup>e</sup>Dalhousie University, Halifax, Canada.

**Abstract:** Introduction: Chronic pain is a persistent disease that causes personal and social economic problems when individuals are unable to return to work. Objective: This meta-synthesis investigated the perspectives of health professionals on the best mechanisms (triggering change) and approaches to support people with chronic pain on return to work. Method: Peer-reviewed articles published until October 2017 were searched in databases such as PsycINFO, EMBASE, CINAHL and Pubmed. The search was based on three concepts: “chronic pain”, “return to work” and “therapist”. Six articles were analyzed. Meta-ethnography was used to synthesize data extracted from qualitative studies. Results: Five second-order interpretations were revealed: social interactions contribute to rehabilitation and can interrupt the return to work; inadequate coordination and excessive bureaucracy complicates the return to work; communication between worker and other stakeholders is critical for return to work; health professionals are not clear about their roles; the congruence between health professionals and the workers’ perspectives and goals on return to work impacts the treatment and its outcomes. A posterior analysis produced two third-order syntheses: 1. the need for assertive communication to lay the groundwork for best practices; and 2. inadequate coordination in the current system complicates return to work in cases of chronic pain. Conclusion: Stakeholders and health professionals need to understand their roles and responsibilities to consistently set goals and action plans for return to work.

**Keywords:** *Chronic Pain, Return to Work, Health Personnel.*

<http://www.cadernosdeterapiaocupacional.ufscar.br/index.php/cadernos/article/viewFile/2063/918>

Request a copy of this article from the authors via [hopkinscentre@griffith.edu.au](mailto:hopkinscentre@griffith.edu.au)

## Embrace diversity and rethink disability: a free online course

Enrolments will open again in 2019 for a free Massive Online Open Course (MOOC) called Realising Career Potential: Rethinking Disability. The MOOC has been run twice in 2018 and exposes learners to the way rehabilitation counsellors help people with a disability or disadvantage realise their vocational potential. Griffith University Rehabilitation and Case Management experts, Dr Vanette McLennan and Dr Christine Randall, showcase the benefits of enabling people with disability to participate fully in society.

Dr McLennan said discrimination and stigmatisation are still rife in the workplace and community, particularly when it comes to people with disability. “People don’t realise how much workplaces and communities benefit when everyone has the opportunity to participate fully in our society,” she said. “Too often, misconceptions about disability get in the way. “Workplace attitudes, flexibility and technologies can make a real difference.”

Visit [www.futurelearn.com/courses/rehabilitation-counselling](http://www.futurelearn.com/courses/rehabilitation-counselling) to enrol



## Rethinking disability



Vanette McLennan

Vanette is a Rehabilitation Counsellor and Case Management Program Director at Griffith University. Vanette is passionate about social justice particularly in relation to work.

Christine Randall

Christine is the Rehabilitation Counselling Program Director at Griffith University. Her dream is for everyone to reach their potential and have a chance to participate in the workplace.



Julia Bloom

Julia is a Rehabilitation Counsellor and PhD student with Griffith University. Julia believes that a fulfilling career is a human right and that employment is essential to address inequity.



Hear from more of our expert disability advocates & researchers at [www.hopkinscentre.edu.au](http://www.hopkinscentre.edu.au)



The MOOC is available on FutureLearn, a platform that will connect individuals from around the world enabling them to discuss key issues in disability today. Dr McLennan and Dr Randall will lead the discussions and provide tools to help people become part of this global movement. “It’s all about raising awareness of the importance of participation for all.”

# SPOTLIGHT

## Celebrating 20 years of making a difference in the Nundah Community

The Espresso Train cafe is a thriving business, as seen first hand by The Hopkins Centre Translation Officer, Macarla Kerr last week. When Macarla stopped for a quick coffee, she ended up staying all afternoon. She was amazed by the welcoming and fun atmosphere of this unique café. The award-winning Espresso Train café recently celebrated a significant milestone as Australia's longest running Social Enterprise Café. Organic coffee and ethical breakfasts make this one of the highest rated cafés on Brisbane's Northside. But that's not all that makes Espresso Train special. The café is run by the Nundah Community Enterprises Co-operative (NCEC), which began life in 1998 as a job club of 15 individuals with disabilities who were struggling to find employment. They began doing small jobs like catering and yard maintenance, but over time, they have grown and created other businesses through this important community cooperative enterprise.

Co-op Manager, Richard Warner, said that for each customer who walks through the door, lives are changed, a difference is made and the community is benefiting. "We don't employ people to make coffee, we make coffee so we can employ people," Mr Warner said.

Over 20 people are currently engaged in meaningful work opportunities through Espresso Train Cafe, Catering and NCEC Parks and Maintenance. The parks crew maintains 25 local parks in Nundah and surrounding areas.

Employers are often unwilling to engage people who face complex challenges, but annually NCEC creates and supports over 8,000 hours of long-term employment for people who struggle to find their place in society. It provides social enterprise training to community start-ups and transforms the local economy to create lasting job opportunities for those who have been excluded. "It's not about what our employees can't do, but what they can do," Mr. Warner said. "They want to be here. They get excited when they come to work and they are contributing to a team." NCEC are an employer with a difference. They have a successful track record of empowering, training and supporting people who would otherwise have few opportunities for work. They are providing a new version of job security as one employee described to Macarla, "you can't get sacked, it's in your employment contract, but if you misbehave, you get two weeks off". He told Macarla everyone wants to come to work, so its a great incentive to work hard.

### Winner of Australia's best social enterprise award

NCEC has a strong ethos and respect for their members by looking at their needs and creating jobs around the individual, instead of asking them to fit into the job. They are committed to social impact, sustainable employment and training opportunities for people with mental illness, learning difficulties and intellectual disability.

They are making a recognisable difference and, not surprisingly, they have won several awards. Most recently, they received Australia's best social enterprise award.

NCEC turns over half a million dollars annually, proving that social enterprise is becoming big business. The people at the heart of the café aren't just helped by entrepreneurs, they become entrepreneurs in their own right.

**Help the community, get involved and support this great initiative by visiting Espresso Train cafe for the best coffee in town- what are you waiting for?**

If you're not sold yet, listen to Griffith University Journalist-In-Residence and award-winning ABC reporter Nance Haxton as she enjoys the ambience of Espresso Train [www.abc.net.au/pm/content/2015/s4\\_271602.htm](http://www.abc.net.au/pm/content/2015/s4_271602.htm).

Follow [online.facebook.com/nundahcoop](https://online.facebook.com/nundahcoop)

Follow Nance on Twitter for more interesting stories! @NanceHaxton



**ESPRESSO TRAIN**  
cafe and catering

#### Here we are!

Espresso Train cafe  
46 Station Street,  
Nundah, Brisbane  
(opposite Nundah  
Train Station on the  
Sandgate Road side)



# Carter Newell

## Award winning employer of choice in diversity & equality

Carter Newell isn't just an average law firm. They provide employment opportunities for people with a range of disabilities through their Disability Support Program (DSP), which has now been running for 19 years. Today, Carter Newell employs 5 people with disability who provide excellent and reliable support to the legal team in a variety of administrative duties.

The program began in 1999, when the organisation recognised that the time constraints on legal secretaries prevented them from providing quality client services as well as performing the necessary administrative functions of a legal office. It quickly became apparent that several tasks, such as hard copy filing, could become a distinct role for junior employees. These tasks were routine and structured in nature. Senior Partner, Paul Hopkins, discussed the role with a south-east Queensland based not-for-profit Disability Employment Service, Job Placement, which led to the first filing clerk, who joined the firm full-time in 1999. Over the years, each filing clerk has been supported by a legal secretary. The program has been highly successful boasting recognisable ethos, tenure and sustainability.

*Carter Newell is doing everything they can to create longevity to jobs*

- Paul Hopkins, Managing Partner -



Over 19 years, the program has allowed each filing clerk to learn and develop distinct skills in a supportive environment. The firm's filing clerks have grown in confidence, making a valuable contribution to their teams, the firm and the broader community. Being engaged in productive work has broadened their social horizons as they make friends and interact with new people.

Carter Newell has provided a progressive workplace with a strong focus on looking after staff and retaining them. They are industry leaders in this way of thinking, with the average tenure of the program at eight years. With a program based on individual diverse circumstances, 'not a one size fits all approach', but one that promotes a culture of value, support, and respect, whilst creating a productive workplace for staff to achieve their full potential and take pride in their work.

One extraordinary example of the program's success is the recent return of a filing clerk who sustained a physical disability in an accident, commenced in the DSP and after a number of years has regained the confidence and capacity to work in a similar role as that prior to the accident.

With the industry evolving, roles are transforming and technology is changing the way things are done. Carter Newell is moving with these changes and adapting the DSP to incorporate the future. Moving towards a paperless office is just one of the sustainable practices they are looking to incorporate. "Change is difficult for anyone, but particularly for people with disability" said Belinda Parish, Human resource Manager.

Technology has changed the role of the legal secretary, but our dedicated filing clerks have many new opportunities ahead of them, and we will support them through the changes.

Carter Newell is a great example of employers engaging with people with disability, supporting and empowering them in meaningful work and really making a difference in their lives. They have been celebrated in the public arena on a state and national stage for their commitment to diversity and equity in the workplace.

**Find out more about this great program and Carter Newell employer of choice at [www.carternewell.com](http://www.carternewell.com)**



### DSP Job Redesign Process



engaging legal teams



brainstorming task ideas together



individuals redesign meetings

in-house training

support

# Diversity Improves Health Services

## The Board Chair with passion for disability employment

Gold Coast Hospital and Health Board chairman, Mr. Ian Langdon, is passionate about employment opportunities for people with disabilities. He is determined to make Gold Coast Health one of the biggest equal opportunity employers in Queensland and he's well on the way. According to Ms Ebru Dogan, Diversity and Inclusion Advisor at Gold Coast University Hospital, employers need to have courage to really make a difference and Mr. Langdon's passion is infectious. Ebru spends her time influencing recruitment practices to promote disability employment. "We currently have more than 130 employees who identify as having a disability. Of course, not all employees who have experience of chronic illness or disability will make a full disclosure to their employer, but we hope that if they required any assistance, they would let us know". With more than 8000 staff, Gold Coast Health is the largest employer on the Coast, so this could really make a difference.

Ebru has recently been joined by Junior House Officer Dr Dinesh Palipana, Griffith University medical graduate and Hopkins Centre Ambassador. Together they are driving a powerful disability employment campaign in Gold Coast Health. Dinesh has a law degree, and is working as a Resident in Emergency Medicine. He is also the first doctor with quadriplegia in Queensland, and the second in Australia. After his car accident in 2010, Professor Harry McConnell from Griffith University supported Dinesh to return to his studies. Dinesh graduated and waited through a tense delay while his employment was determined. Luckily, people with vision such as Ebru Dogan and Ian Langdon were there to help.

Dinesh loves his work and his colleagues, but he has commented that, "Unfortunately we still have a fair way to go in Australia before we see a totally level playing field for people with disabilities, but things are progressing." He co-founded Doctors with Disabilities Australia to address the concerns of health professionals who have disabling conditions. The organisation focuses on changing attitudes and giving support when needed.



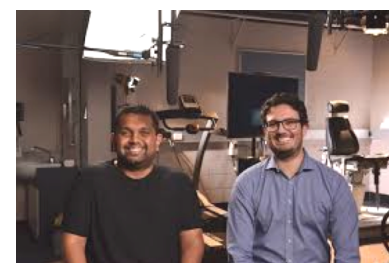
Ian Langdon

Dinesh is now working with Dr. Claudio Pizzolato and Professor David Lloyd from Griffith University on breakthrough techniques to restore function for people with spinal cord injury. They are the focus of Griffith's new high-profile Remarkable advertising campaign and are supported by the Advanced Design and Prototype Technologies Institute (ADaPT), which sits within the Gold Coast Health and Knowledge Precinct.

## Read more on this story.....

<https://app.secure.griffith.edu.au/news/2018/09/03/researchers-double-up-for-breakthrough-spinal-cord-trauma-research/>  
<https://www.goldcoast.health.qld.gov.au/about-us/news/health-service-champions-diversity-and-inclusion>  
<https://www.goldcoast.health.qld.gov.au/about-us/news/langdons-mission-board-chair-wants-hope-grandson>  
<https://magazine.griffith.edu.au/no-barriers-ahead-dinesh/>

Photographs courtesy of Gold Coast Health and Griffith University



Dr. Dinesh Palipana and Dr. Claudio Pizzolato



Check out Gold Coast Health Diversity and Inclusion Strategy (2017-2022)  
<https://publications.qld.gov.au/dataset/gold-coast-hospital-and-health-service-plans/resource/bcdee0fc-7c43-4e4c-8a81-64c60a1aca78>

# Anti-Discrimination Policy in Queensland: Rules for Employers



## KEVIN COCKS PATRON

Former Queensland Anti-Discrimination Commissioner, Mr. Kevin Cocks AM, has accepted the role of Patron of the Hopkins Centre and Dignity Ambassador.

Kevin is a well-respected champion of human rights and until recently was the Queensland Anti-Discrimination Commissioner. After sustaining a spinal injury as a young person, Kevin has made it his business to ensure no one is left behind, particularly in terms of employment. He has dedicated his life to fighting for an inclusive, accessible and diverse Queensland through legislative policy reform and State-wide advocacy.

Amongst his copious awards, standouts include, the Order of Australia (AM) 2010, Australian Human Rights Medal 2005 and the Centenary Medal 'for distinguished service to disability services in Queensland' in 2003.

In Queensland it is unlawful to treat a worker less favourably because of a physical or mental illness or condition, or to make a requirement that is more difficult for the person because of an illness or condition. When incapacity affects the job, it is necessary to comply with the Anti-Discrimination Act 1991.

Clear and open communication is essential. When a person is having trouble doing the job because of an illness, injury or condition seek a medical report to help work out what to do. This is required for public servants, lawyers, and health practitioners who have a disability. Otherwise imposing a requirement to undergo a medical assessment might be unlawful discrimination. The assessment must relate specifically to the essential requirements of the job rather than any generic implications.

Reasonable adjustments are changes that can be made to help the employee do the job. This might include physical aids or modifications to the work environment; changes to the hours of work or number of hours worked; incorporating breaks; changes to the duties to be performed.

There are cases where employers may experience unjustifiable hardship caused by the nature of the special services or facilities required to accommodate the incapacity, the cost of supplying these services, the financial circumstances of the employer; any disruption that making the adjustment might cause to the business, the nature of any benefit or detriment to all of the parties.

Disability is only relevant if it affects an essential job requirement. To determine whether a requirement of a job is essential, it is necessary to focus on the factual circumstances. Would the job be the same with or without that particular requirement. It is not enough to simply 'label' aspects of the job as genuine occupational requirements because it is preferred by the employer.

Take care in differentiating between the essential requirements and different ways the task might be achieved by someone with a disability. For example, the job may require good eyesight, but glasses could enable someone with low vision to perform that task.

## A BLOCKER OR AN ENABLER?

"Before and after my impairment, I encountered people who I have identified as 'enablers' and 'blockers'. Enablers are those people who share your vision to be simply treated with dignity and live life free from discrimination. People who are enablers will work with you to eliminate all the barriers that you encounter because of structural discrimination based on mythology and stereotypes. Blockers are those who actively see their role in life as reinforcing every stereotype and mythology that is out there about people who are perceived as different or undeserving, thus upholding systems that reject and exclude people based on their race or impairment."

Kevin Cocks, Why disability is not an 'issue': Towards an inclusive workplace. Proctor, February, 2013 p. 38-39



Need more information

Phone: 1300 130 670

TTY: 1300 130 680

Fax: (07) 3247 0960

[www.adcq.qld.gov.au](http://www.adcq.qld.gov.au)

[info@adcq.qld.gov.au](mailto:info@adcq.qld.gov.au)

# Is Australian vocational rehabilitation keeping pace with the changing employment landscape?

Nick has published over 180 journal articles, book chapters and books in a range of areas including vocational rehabilitation. In this paper, he argues that there is an ongoing need to identify and update core competencies for the profession. Without competency education and standards, people with more complex needs, such as brain and spinal injury, may not be receiving the services they require. Nick has spent many years analysing competencies for vocational rehabilitation and embedding these into training programs. He was instrumental in developing the first international collaboration of vocational rehabilitation researchers and practitioners in 2002 and the global standards on return to work and disability management.

## Disability and Rehabilitation

An international, multidisciplinary journal

<http://informahealthcare.com/dre>  
ISSN 0963-8288 print/ISSN 1464-5165 online

Disabil Rehabil, 2015; 37(9): 820-824  
© 2014 Informa UK Ltd. DOI: 10.3109/09638288.2014.942001



PROFESSOR  
NICHOLAS BUYS  
GRIFFITH HEALTH  
EXECUTIVE &  
HOPKINS CENTRE  
RESEARCHER

### PERSPECTIVES IN REHABILITATION

## Contemporary vocational rehabilitation in Australia

Nicholas Buys<sup>1</sup>, Lynda R. Matthews<sup>2</sup>, and Christine Randall<sup>1</sup>

<sup>1</sup>Griffith Health Institute, Griffith University, Gold Coast, Australia and  
The University of Sydney, Lidcombe, Australia

#### Abstract

**Purpose:** There is a strong connection between disability and decreased participation rates in the Australian labour market. Australian government policy recognises vocational rehabilitation as a key strategy to increase employment rates of people with disabilities. **Methods:** This paper examines current Australian disability employment policies and practices. It also reviews vocational rehabilitation competency research to identify knowledge and skill domains central to quality service provision, and explores the delivery of tertiary level vocational rehabilitation education. **Results:** Policy changes in Australia over the last decade have been aimed at addressing the unsustainable increase in disability benefits. In this context vocational rehabilitation services continue to be viewed as crucial in assisting people with disabilities to maintain employment and reduce disengagement. Competencies research has consistently identified vocational counselling, personal counselling, professional practice and case management as central to quality vocational rehabilitation service provision. Two competencies identified in recent research, workplace disability case management and workplace interventions and program management, reflect the centrality of vocational rehabilitation to disability management. **Conclusions:** Changes in the policy environment to reduce the number of disability pension recipients will inevitably lead to an increased demand for trained vocational rehabilitation personnel. Given the development of strong accreditation standards for vocational rehabilitation education and practice that underpin the provision of tertiary level rehabilitation counselling training programs, professionally qualified rehabilitation counsellors are ideally placed to address the complex employment needs of people with a disability.

#### ► Implications for Rehabilitation

- It is important to understand changes that may occur in policy environments in terms of their impact on vocational rehabilitation service delivery for people with disabilities.
- Variable levels of training in the vocational rehabilitation sector result in people with complex needs not consistently receiving the services they need to access and maintain employment.
- Practitioners need to focus increasingly on individualized service delivery where the client has significant control over decisions about their rehabilitation program.

Professor Nicholas Buys completed his Masters and PhD in the USA. He is currently the Dean, Learning & Teaching of the Health Faculty at Griffith University, but in a previous phase of his career, he was the driving force behind the introduction of the extremely successful vocational rehabilitation counselling degree at Griffith, one of the founders of the Rehabilitation Counselling Association of Australasia and Director of the Research Centre for Strategic Human Services. He has collaborated and researched with vocational rehabilitation experts in the USA, China, Canada, Switzerland, Hong Kong, Sweden and the Netherlands.

Request a copy of this and other articles from the authors  
hopkinscentre@griffith.edu.au

  
**Master of Rehabilitation Counselling**  
Study online part-time or full time  
"A world class degree reflecting current workplace issues."  
Bron Taylor, Group Workers Compensation Manager, Virgin Australia Airlines  
Find out more at [griffith.edu.au/rehab-counselling](http://griffith.edu.au/rehab-counselling)

ABI TRS staff and Hopkins Centre Researchers share their approach to vocational rehabilitation

# VOCATIONAL PATHWAYS

ABI TRS is Funded by MAIC. Research grant from The Hopkins Centre

Following acquired brain injury (ABI), productive roles (paid/voluntary work or study) are often disrupted. Return to work (RTW) rates globally at two years post injury are 39.3% for nontraumatic ABI and 40.8% for traumatic brain injury. A sense of productivity is related to better health status, greater social integration and better quality of life. The importance of appropriate, coordinated vocational programs for adults with disability (including ABI) is recognized in Queensland and beyond. However, no current vocational rehabilitation (VR) service exists within Queensland Health, meaning that vocational rehabilitation is often delayed. The Acquired Brain Injury Transitional Rehabilitation Service (ABI TRS) is a pilot project in the statewide Brain Injury Rehabilitation Service (BIRS). ABI TRS commenced clinical service in January 2017 and provides 12 weeks of specialist interdisciplinary ABI rehabilitation to clients in the working age range, i.e 16-70 years, using a client-focused, goal-directed approach. Of the first 120 clients seen by ABI TRS, 74 expressed vocational goals (paid or voluntary work, supported employment or study). It's only early yet, but where do they end up?



ABOUT 11 PERCENT

## BACK TO WORK

Likely to return to vocational role soon

- Liaise with employer/tertiary education providers
- Interdisciplinary therapy targeting requirements of specific workplace
- Communication with medical team and neuropsychology assessment
- Worksite assessment based on client need
- Return to work plan with handover to next service (e.g., GP, ABIOS private or NGO)



ABOUT 67 PERCENT

## DELAYED

Likely to return to vocational role over 12 months

- Liaison with employer/tertiary education for opportunities
- Education regarding process of returning to work
- Interdisciplinary therapy targeting requirements of vocational role
- Building endurance for workplace activities
- Structured activities to build workplace readiness
- Referrals with clear plan to ensure progress of goals



ABOUT 22 PERCENT

## LONG-TERM

Vocational goals remain a long-term goal

- Liaison with employer or tertiary education for ideas
- Interdisciplinary therapy may target self-care skills, community access and communicating with others outside the home
- Structured activities to build endurance and routine

for more information contact any of the team:  
Alena Murray | Kerrin Watter  
Sarah Jeffery | Shelley Ehlers | Mandy Nielsen  
Areti Kennedy | Vanette McLennan



**Bold ideas,  
better solutions**  
2018 > The Hopkins Centre  
Symposium

**Thursday 15 November 2018**

Translational Research Institute  
Princess Alexandra Hospital | Brisbane



## Contact us:

The Hopkins Centre: Research for  
Rehabilitation and Resilience

A collaboration between Division of  
Rehabilitation, Metro South Hospital  
and Health Service and Menzies  
Health Institute Queensland, Griffith  
University.

Phone: +617 338 21295

Fax: +617 338 21414

[hopkinscentre@griffith.edu.au](mailto:hopkinscentre@griffith.edu.au)

[https://twitter.com/hopkins\\_centre](https://twitter.com/hopkins_centre)

Menzies Health Institute Queensland  
Griffith University  
Meadowbrook QLD 4131

Division of Rehabilitation  
Princess Alexandra Hospital  
199 Ipswich Road  
Woolloongabba QLD 4102



**The Hopkins Centre**  
Research for Rehabilitation and Resilience

**Bold Ideas. Better solutions.**



Metro South Health



A joint initiative of the  
Division of Rehabilitation, Metro South Health, and  
Menzies Health Institute Queensland, Griffith University