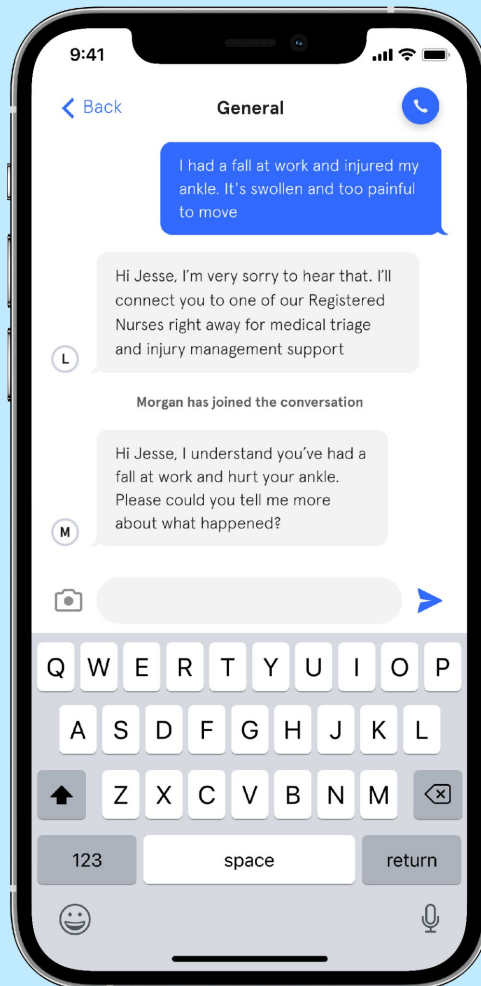
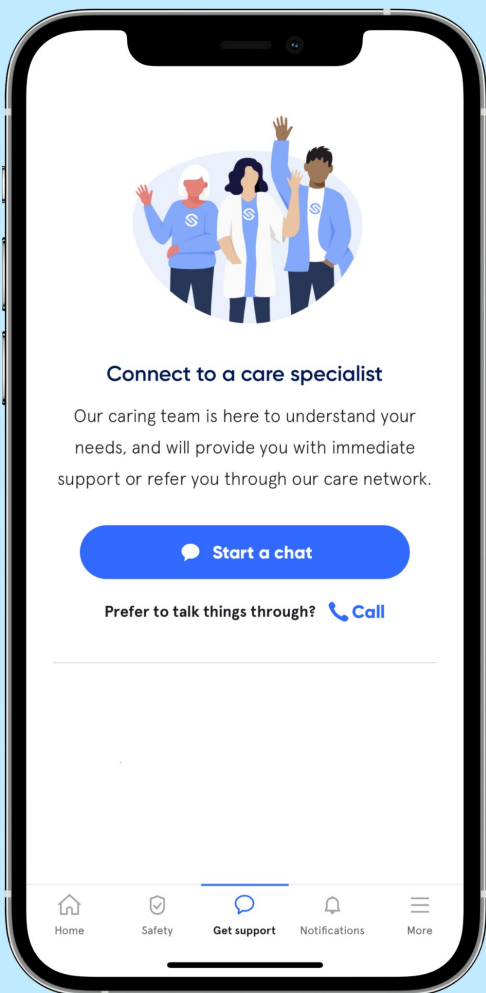


# Early intervention injury management program

Technical information guide



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# Purpose

The **purpose** of this document is to outline the program Sonder delivers to customers and members regarding injuries occurring in the workplace. Sonder's key goal is to provide *right care at the right time*. In turn, this provides a structured approach aimed at promptly addressing **member** injuries or potential injuries as soon as they are identified and to facilitate a quicker and more effective recovery. Sonder currently provides injury management support within Australia only.

## Glossary

<b>Member</b>	refers to the employee, eligible contractor who has experienced the injury.
<b>Manager</b>	is the member's immediate leader, site manager or person who is responsible for the wellbeing and safety of the individual employee.
<b>Customer</b>	refers to the employer of the member and manager.
<b>Provider</b>	refers to the network partner that Sonder has partnered with to facilitate care across different capabilities in Australia.
<b>Practice</b>	refers to the individual clinic or medical centre that forms part of the providers network.
<b>SSC</b>	is the Sonder Support Centre consisting of registered nurses, care specialists and physicians.

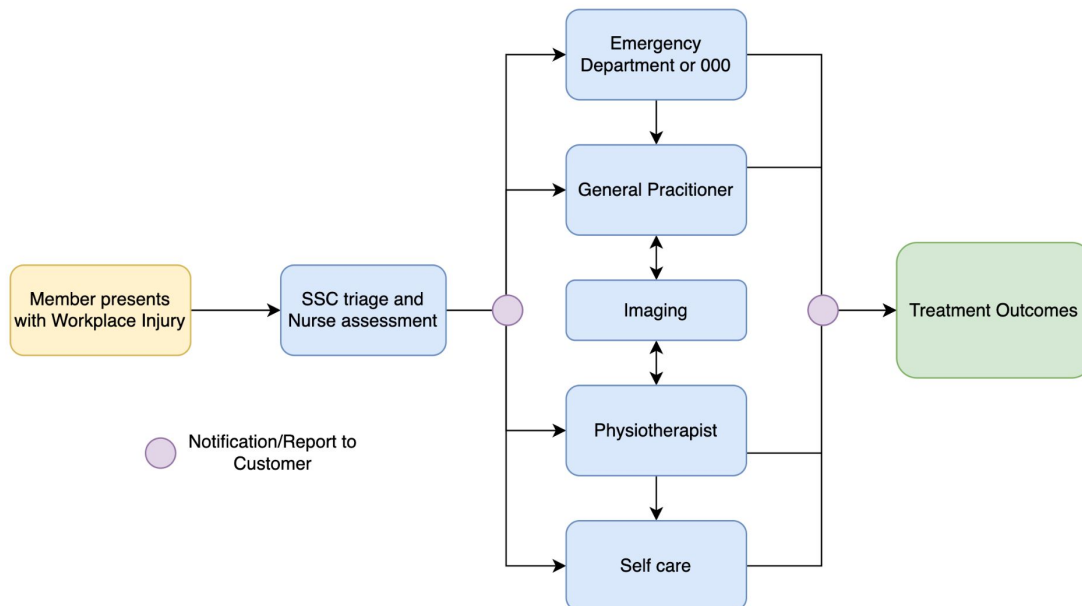
# Key Principles

Sonder's early intervention injury management program employs the following key principles, which inform the approach to delivering appropriate and effective treatment to members:

1. **Clinician-led:** In order to ensure that members receive the most effective care, the decisions that centre on the most appropriate care will always be determined by an appropriately qualified clinician. Clinicians will coordinate care across various available healthcare disciplines, ensuring communication and collaboration among different providers involved in the members treatment. This multidisciplinary approach promotes continuity of care and optimises treatment effectiveness.
2. **Individualised treatment:** Every injury and member is unique, so treatment plans must be tailored to the individual's specific needs, taking into account factors like age, health status, lifestyle, and severity of the injury. Treatment decisions should be based on the best available evidence from in accordance the clinical assessment and relevant guidelines. This ensures that members receive the most effective and appropriate care.
3. **Customer-supported care:** Employers should be enabled to support their injured members throughout the program. This is facilitated through open medical reporting that informs managers and customers as to the progress of member treatment. Empowering members and customer with knowledge helps them participate actively in their recovery and make informed decisions about their health.

# Support Model

## Initial stage: Triage



**Member presents with workplace injury** – The team member can report the injury to Sonder via in-app chat or phone, which is available 24/7 for all registered team members. Although it is preferable to access support directly with the affected member, managers can also facilitate the team member to obtain support at any time. Sonder can conduct a reach-out call to a member on request of their respective manager within an hour of the managers call. Sonder will attempt 1 call and if unsuccessful leave a message for the member to re-engage with support at a time of their own choosing.

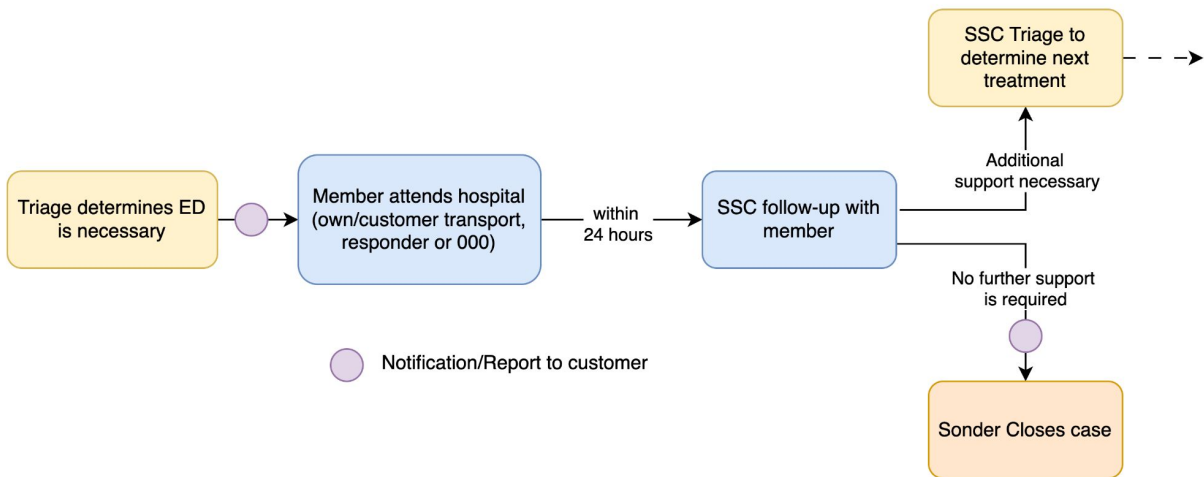
Sonder is not a mechanism for 'reporting' and will only provide support and the associated reports back to customer with the members explicit consent to do so (outlined in 'supporting concepts' below).

**Nurse assessment** – Upon identification that the presentation is a workplace injury, the member will be transferred (via phone or chat) to a registered nurse for assessment. In an emergency scenario, the care specialist may escalate to 000 without connecting the member to a registered nurse if the triage determines this to be necessary. The registered nurse will conduct a clinical assessment utilising the Manchester Triage System to determine the appropriate requirement for the member. The outcome of this assessment is the result of the clinical assessment and relevant guidelines.

Triage outcome report is sent at the completion of each triage and contains the following:

- Member Name
- Presenting complaint/description of event
- The assessment of injury
- The triage outcome
- The referred provider (if sent)
- Employer
- Location
- Nominated manager details
- Bespoke requirements

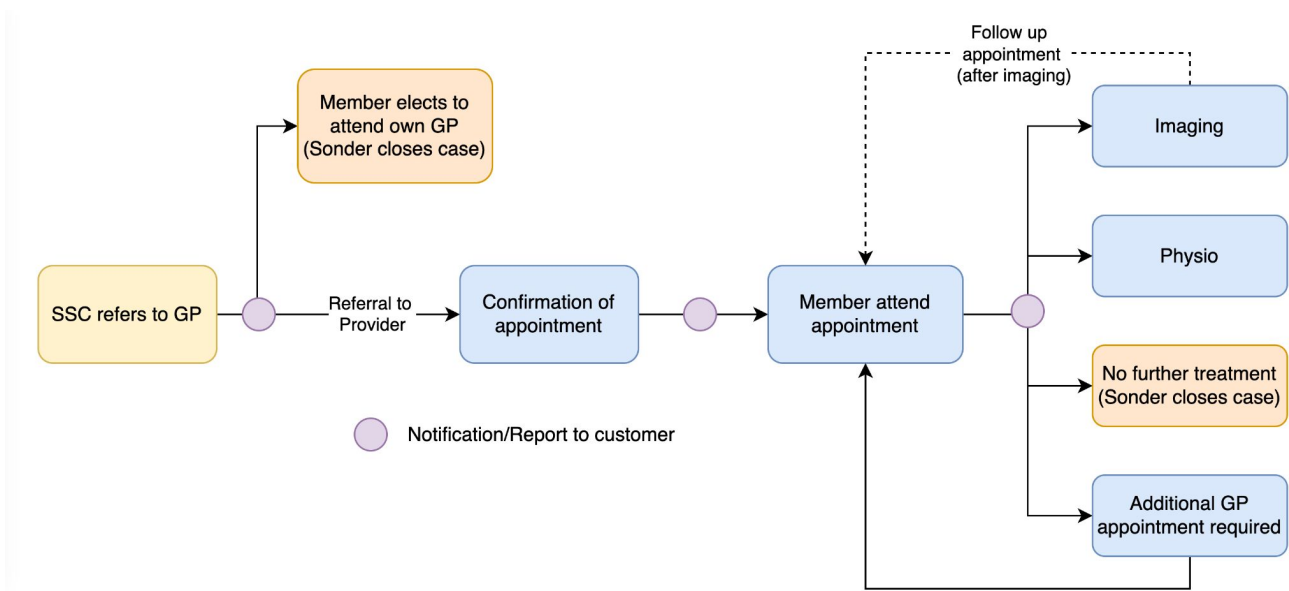
# Outcome 1: Emergency Department or Services



Where the nurse recommends immediate face to face assessment, the member will be advised to attend the closest hospital emergency department. The Sonder nurse will confirm the members location and advice of the closest suitable hospital. If required, the Sonder nurse can coordinate emergency services (ambulance) response to support the member in attending hospital. A Sonder network responder may be deployed to assist the member in attending the hospital in these instances. A follow-up will be conducted within 24 hours of the members attendance to hospital to ensure that further support can be facilitated if required.

During the SSC follow-up with the member, the member should be prompted to provide their discharge summary, by photo, so that the clinical team can include this in Sonders medical records platform and potentially inform ongoing care or referrals.

## Outcome 2: General Practitioner



Sonder will utilise its GP provider network to support injuries that require a face to face or telehealth assessment which is not urgent in nature. The member will attend the GP session and Sonder will be provided with a report confirming the members capability and any treatment recommendations. This report will be provided to the customer to inform the manager how to best support the members recovery.

A member may elect to attend their own GP instead of Sonder's nominated network provider. If the member choose this option then Sonder will no longer manage the case and notify the customer.

In the event that Sonder is unable to obtain a GP appointment within the next business day, and the reported injury is unsuitable for a telehealth consultation, th nurse may recommend that the member attend the closest hospital emergency department for assessment and a notification to the customer that this has occurred will be sent.

If an appointment confirmation has not been received within 24 hours of the referral occurring then the SSC will follow up with the member and/or provider to confirm if there had been any issues since the triage and seek to remedy as soon as possible.

If the GP recommends physiotherapy or imaging then the SSC will proceed to follow the specific process outlined. If a GP refers the member to a specialist or surgeon then the customers injury management team will be notified and Sonder will close its management of the case.

**Booking confirmation report** will be sent upon confirmation of an appointment being made. This will consist of:

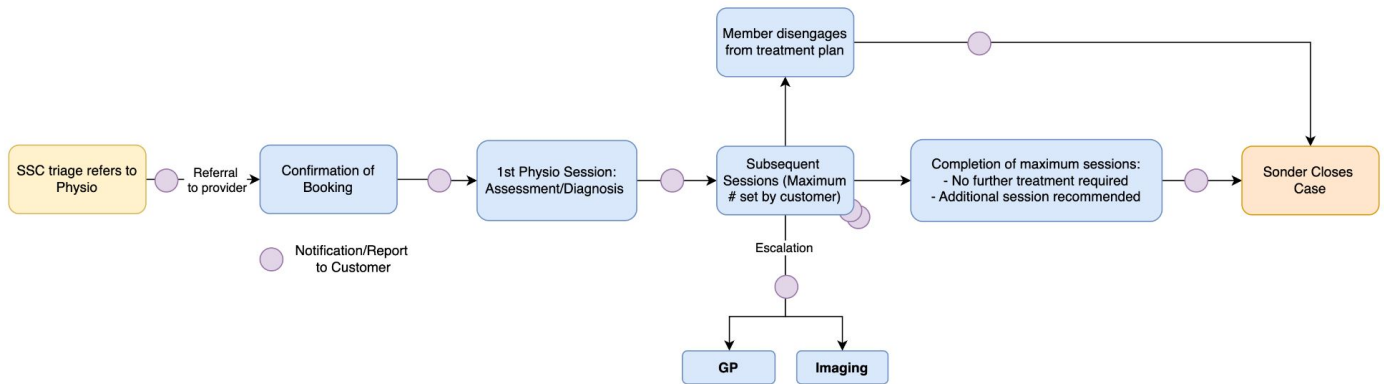
- Date & time of appointment
- Appointment Location (If F2F)
- Practice Name
- Employer
- Member name
- Date of Injury

**Outcome report** will be sent after the initial appointment provided by the GP. This will consist of:

- Date of Injury
- The diagnosis of injury
- Treatment plan
- Capacity Assessment
- Employer
- Member name
- Referral to other services (if required)



## Outcome 3: Physiotherapy Referral



Sonder will utilise its physiotherapy provider network to treat injuries that do not require General Practitioner support. The number of sessions that members are automatically eligible for is determined by the customer.

If an appointment confirmation has not been received within 24 hours of the referral occurring then the SSC will follow up with the member and/or provider to confirm if there had been any issues since the triage and seek to remedy as soon as possible.

If a physiotherapist determines that the member injury can no longer be treated within their scope of practice, the physiotherapy provider will refer the case back to Sonder. Sonder will refer the case to a GP or imaging (see respective process').

If the physiotherapy provider recommends that treatment extends beyond the session limit that has been pre-approved by the customer, then Sonder will defer the case to the customer and close the case.

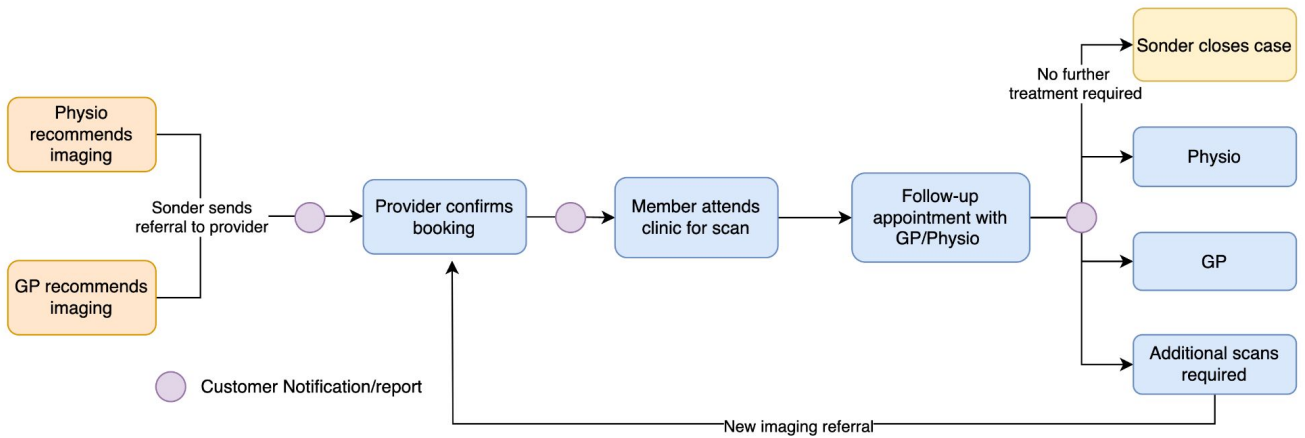
**Booking confirmation report** will be sent upon confirmation of an appointment being made. This will consist of:

- Date time of appointment
- Location

**An assessment report** will be sent after the every appointment provided by the physiotherapy practice. This will consist of:

- The body area of injury
- Mechanism of Injury
- Relatedness to work
- Indicated treatment plan
- Ongoing functional activity restrictions (permitted/restricted/not permitted)
- Additional notes and advice to manager
- Member name
- Date of injury
- Employer
- The clinic and therapist providing support
- Sessions required & sessions completed

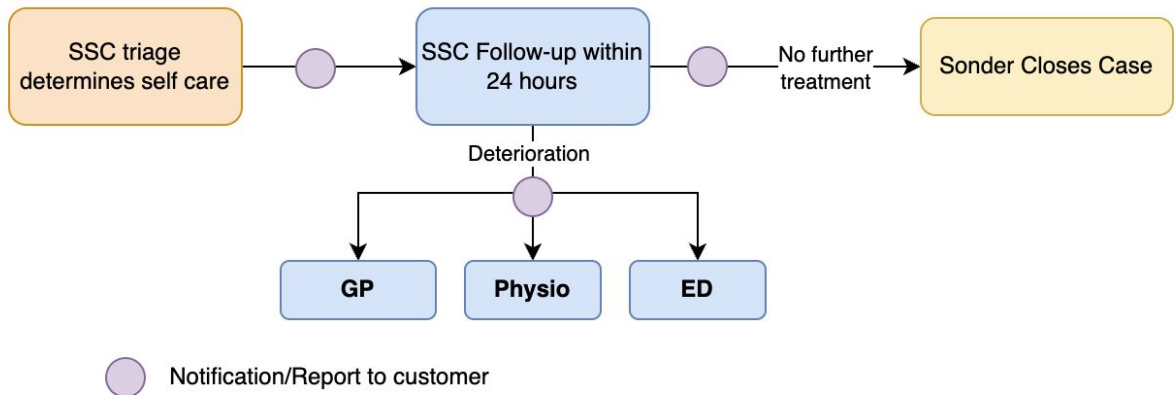
## Outcome 4: Imaging



Imaging can be provided only upon recommendation of a GP or physiotherapist, and directly from an SSC triage. CT scans, x-rays and ultrasounds are the most commonly utilised scans and will be automatically approved. If a clinician recommends an MRI to occur, then Sonder will refer the case back to the customer for ongoing management due to the likelihood of the case escalating to a workers compensation claim.

A follow-up appointment with a GP is required in any instance of imaging taking place to determine treatment based on the results of the imaging.

## Outcome 5: Self Care



In instances that do not require immediate or urgent medical attention, the SSC may recommend self treatment such as RICE (Raise, Ice, Compress, Elevate), pain relief medication, anti-inflammation treatment, and various other self help methods. This will include advice to monitor for symptoms and instructions for requesting further clinical support if required. A follow-up to ensure no deterioration of symptoms has occurred will be conducted by the SSC within 24 hours.

The initial triage report (previously outlined) will be provided if self care is determined to be the most effective form of treatment by the SSC.

# Supporting Concepts

## Consent

In order to access the Sonder injury management program,, the member must consent to their entire treatment plan, records and communication pertaining to this injury being communicated back to their respective manager and employer. If the member does not consent to this information being shared, a regular triage, advice and referral to a public service can be provided – but any injury management Providers pathways are excluded.

## Reporting

Notifications and treatment reports are crucial to ensure that the customer and manager are actively informed of the ongoing treatment of a member and can support as required. The distribution list for each report is determined by the customer and can be customised to account for different locations and teams. The specific points within the injury management program when a report is sent is outlined in the respective flowcharts.

## Network Providers

Sonder provides the option for GP, imaging, and physiotherapy to be provided through our health network providers.

Should a member opt to proceed with their own treatment provider, Sonder will no longer manage the case and provide a report back to the customer notifying of the closure of the case. If a member has chosen to engage in treatment outside of Sonders network, such as their own GP or Physio, then they would not be able to opt back-into Sonders provider network for further treatment. In this instance, we would encourage the member to continue treatment with their current providers or engage with their respective WHS team for further support.

Sonder only provides its full injury management program with its contracted providers and cannot collaborate in a similar fashion with providers or networks in which no such partnership exists.

Customers may choose not to opt-into a particular network provider such as imaging or physio as part of their commercial agreement with Sonder. If a case progresses to a stage in which that particular pathway is required for a member, then Sonder will cease management of the case and notify the customer. If a member requires multiple treatments and one element of that treatment is out-of-scope for Sonder's program or the customer, then Sonder will close management of the case as Sonder will not deliver partial components of treatment.

As an example, if a member requires an MRI [out of scope] and physio [in scope] , Sonder will close management of the case, not refer for physio and refer the member back to the customer injury management team.

## Workers Compensation

Sonder will not provide management or oversight to cases that have resulted in a workers compensation claim. If the member communicates an intent to make a claim, or is in the current process of making a claim, the matter will be referred to the respective injury management team within the customers organisation and be closed. The specific Provider should also be notified to ensure that any further treatment and subsequent invoices will be determined by the customers insurer and injury management team.

## Case Collaboration

All communication regarding any case that remains within the Sonder Injury management program can be directed through the SSC (in-app or phone) or [caseinfo@sonder.io](mailto:caseinfo@sonder.io). Sonder's providers will not collaborate directly with any customer and will defer all requests for changes in support to members to Sonder. Customers may communicate with the individual practice in order to clarify appointments and workplace capacity assessments.

If a case is no longer managed by Sonder due to a workers claim being established, treatment ending or any other reason – then Sonder and the provider will defer any ongoing treatment to the customer and individual practice. Sonder and the provider will not manage the case after its closure. If a case has been closed by Sonder (and the provider), a customer may choose to continue to utilise the same practice for ongoing support and engage directly with any practice they choose.

## Invoicing

For all cases being managed by Sonder under the injury management program, customers will only receive invoices directly from Sonder. Sonder will collate the costs of all cases and provide to customer on an agreed-upon schedule (Monthly/Quarterly). In the event a team member does not attend a physiotherapy or GP session and Sonder incurs costs for this, this cost will be included in the final invoicing to customer.

If a case has been closed by Sonder and the provider, a customer may choose to continue to utilise the same practice for ongoing support. The commercial arrangement will not involve Sonder or the provider and is up to the respective customer, practice and/or insurer.

# Mental Health Support

The Sonder injury management program does not include issues or concerns relating to mental health in the workplace. Sonder's core offering and associated support pathways provides comprehensive support to members mental health concerns. However, this is not reported to customers with the same comprehensive case updates as the physical injury management program and information is only provided in a de-identified manner during regular customer reporting. This approach lowers barriers to care for members and helps de-stigmatise mental health support, ultimately driving better outcomes for members and de-escalating concerns as early as possible.

# Security

Transmission of personal information to destinations external to Sonder should be done on the assumption that the email address is not secure, and should be password-protected or encrypted prior to transmission.

In order to balance usability for customers with the needs to maintain security of members health information, password protected documents are utilised for this procedure.

The following controls are in place:

- Recorded member consent to share information back to customer.
- Specific validated email address between Sonder and respective providers & customers.
- Temporary link to health information which expires 7 days after generation.
- Role-based access is implemented so only defined roles (ie nurses) can share information to providers and customers.