



MINDFUL WELL-RECOVERY™

# Program overview

For employers, case managers and WorkCover Queensland

A ten-week, evidence-based early intervention program for injured workers, measured with the Mindful Capacity Index. There are three pathways, matched to each worker's main barriers. This document contains the full overview for each one.

## Pathway A · Mental & Emotional Adjustment

page 2

For people whose main challenges after injury are stress, worry, low mood, sleep and confidence.

## Pathway B · Physical Recovery Adjustment

page 11

For people adjusting to pain, reduced physical capacity and the changes a physical injury brings.

## Pathway C · Combined Adjustment to Injury

page 20

For people managing both physical and emotional effects of injury together.

(07) 3608 1355 · [referrals@eclosia.au](mailto:referrals@eclosia.au) · [eclosia.au](http://eclosia.au)



**ECLOSIA**  
COUNSELLING & REHABILITATION



MINDFUL WELL-RECOVERY

## Program overview

For employers, case managers and WorkCover Queensland

Pathway A · Mental & Emotional Adjustment

A ten-week, evidence-based early intervention program for injured workers



**ECLOSIA**  
COUNSELLING & REHABILITATION

# Proactive, measured, coordinated

Mindful Well-Recovery™ is a structured ten-week biopsychosocial early intervention program for injured workers at risk of delayed recovery: those with psychosocial barriers, limited functional capacity, or emerging secondary psychological injury. It integrates work-focused Cognitive Behavioural Therapy (CBT), Acceptance and Commitment Therapy (ACT) and Pain Neuroscience Education (PNE), and complements, never replaces, the worker's medical and psychological treatment.

**Pathway A: Mental & Emotional Adjustment.** For people whose main challenges after injury are stress, worry, low mood, sleep and confidence.

4,110

accepted mental injury claims in Queensland last financial year, more than double five years earlier\*

123 days

average time off work for a mental injury claim, compared with 47 days for a physical injury\*

## What makes it different

- **Not open-ended talk therapy.** Every session has a defined clinical focus, a practical tool for the week and measurable aims.
- **Objective measurement.** The Mindful Capacity Index (MCI) tracks five recovery domains at weeks 1, 5 and 10, with a green, amber and red traffic-light summary.
- **The treating team is updated after every session.** With consent, GPs and treating practitioners receive a written update on the session focus, engagement, MCI results and resources provided.
- **Resources that work alongside the claim.** Each week the worker receives a session guide and a support toolkit of free government and community services, so supports continue between sessions at no cost to the scheme.
- **Work-focused throughout.** Goals, suitable duties, employer engagement and return-to-work planning are built into the curriculum.

## Delivery

Ten weekly one-to-one sessions, in person at North Lakes or by telehealth across Queensland. Initial contact with the worker within 24 to 48 hours of referral. Delivered and clinically overseen by Davina Williams, Rehabilitation Counsellor, from intake to closure.

\* WorkCover Queensland annual report figures, reported by ABC News, 10 October 2026.

# How progress is measured and shared

## The Mindful Capacity Index (MCI)

A 33-item self-report biopsychosocial assessment (0 to 3 scale) completed by the worker on a secure digital form, reviewed with the clinician. Results feed a clinician dashboard hosted onshore in Australia.

**Five domains**, named as they appear on the dashboard: Psychological distress · Pain and physical function · Fear and catastrophising · Work and social environment · Recovery confidence and engagement. Resilience and confidence items are reverse-scored.

### Green

Good progress, low risk, positive trajectory.

### Amber

Moderate risk or emerging barriers: increased focus.

### Red

High risk or significant barriers: urgent attention and escalation.



**Try the MCI yourself.** Scan to complete a practice assessment with made-up details, then open the demo dashboard to see how traffic lights and progress across weeks 1, 5 and 10 are reported. Demo data only, kept completely separate from client records.  
[apps.knack.com/eclosiaau/mci-demo/mci-demo-form](https://apps.knack.com/eclosiaau/mci-demo/mci-demo-form)

## Reporting schedule

| When                             | Who receives it                                               | What it includes                                                                                                                                     |
|----------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>After every session</b>       | Treating GP and psychologist or other treaters (with consent) | Session focus and intervention, engagement, any MCI results, resources provided, home practice, risks or concerns, next session focus                |
| <b>Fortnightly, or as agreed</b> | WorkCover case manager (Injury Partner)                       | Engagement and adherence, MCI traffic-light status, psychosocial risk factors, functional and return-to-work readiness observations, recommendations |
| <b>Week 1</b>                    | Case manager and treating team                                | MCI baseline, goals and initial barriers                                                                                                             |
| <b>Week 5</b>                    | Case manager and treating team                                | Mid-program MCI comparison and plan adjustments                                                                                                      |
| <b>Week 10</b>                   | Case manager, employer (as consented) and treating team       | Completion report: MCI weeks 1, 5 and 10, outcomes, return-to-work milestones, relapse-prevention plan and handover                                  |
| <b>Any time</b>                  | Treating GP and case manager                                  | Prompt escalation of red-flag risk, with crisis pathways activated where needed                                                                      |

## Employers

With the worker's consent, employers are engaged on suitable duties, workplace planning and manager coaching (week 9 focus, or earlier where appropriate). Employers receive only what the worker agrees to, never the private content of sessions.

## Curriculum, rationale and evidence (weeks 1 to 3)

### 01 Getting started: your first session and goals

|                     |                                                                                                                                                                                                                                                                                                                                                           |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Engagement and rapport; MCI biopsychosocial baseline (33 items, five domains); functional, psychosocial and work-focused assessment; goal setting; consent to share updates with the treating team.                                                                                                                                                       |
| WHY IT SUPPORTS RTW | Early engagement reduces uncertainty and disengagement. A work-focused baseline identifies psychosocial and functional barriers early and sets realistic expectations before unhelpful beliefs take hold.                                                                                                                                                 |
| MCI DOMAINS         | Psychological distress, Pain and physical function, Fear and catastrophising, Work and social environment, Recovery confidence and engagement · <b>MCI check-in</b>                                                                                                                                                                                       |
| WORKER RECEIVES     | Session guide, 'Your recovery 'why' tool, and support toolkit: WorkSafe Queensland: Your return to work roadmap, WorkSafe Queensland: Rehabilitation roles and responsibilities, WorkCover Queensland, Workers' Psychological Support Service, Medicare Mental Health, healthdirect, WorkSafe Queensland: Recovering from injury or illness, 1300 MH CALL |
| EVIDENCE            | <i>Ponsford J, et al. (2025), Ann Phys Rehabil Med: early vocational rehabilitation and early intervention after injury improve employment outcomes and reduce long-term disability risk.</i>                                                                                                                                                             |

### 02 Understanding stress and mental load

|                     |                                                                                                                                                                                                                               |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Psychoeducation on the stress response; work-focused CBT: identifying triggers and early warning signs; relaxation training (paced breathing); activity scheduling to reduce load.                                            |
| WHY IT SUPPORTS RTW | Stress and anxiety are significant psychological barriers that prolong time off work. Work-focused CBT builds coping and reduces avoidance, supporting earlier return.                                                        |
| MCI DOMAINS         | Psychological distress                                                                                                                                                                                                        |
| WORKER RECEIVES     | Session guide, '4-6 breathing' tool, and support toolkit: healthdirect: Stress, MindSpot, Beyond Blue, Medicare Mental Health, Medicare Mental Health Centres, Workers' Psychological Support Service, Lifeline, 1300 MH CALL |
| EVIDENCE            | <i>Slater D, et al. (2023), Health Psychol Open: work-focused CBT reduces sick leave and improves return-to-work outcomes compared with usual care.</i>                                                                       |

### 03 Managing worry and overthinking

|                     |                                                                                                                                                                                                                                              |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Work-focused CBT: cognitive restructuring of catastrophic thinking about pain, work and finances; worry postponement; grounding; problem-solving versus rumination.                                                                          |
| WHY IT SUPPORTS RTW | Catastrophising about work loss and future uncertainty predicts prolonged absence. Targeting it reduces avoidance and supports engagement with return-to-work planning.                                                                      |
| MCI DOMAINS         | Fear and catastrophising, Psychological distress                                                                                                                                                                                             |
| WORKER RECEIVES     | Session guide, 'Worry time' tool, and support toolkit: healthdirect: Anxiety, MindSpot, Beyond Blue, Medicare Mental Health, 1300 MH CALL, Workers' Psychological Support Service, Medicare Mental Health Centres, Suicide Call Back Service |
| EVIDENCE            | <i>Slater D, et al. (2023), Health Psychol Open: work-focused CBT reduces sick leave and improves RTW outcomes.</i>                                                                                                                          |

## Curriculum, rationale and evidence (weeks 4 to 6)

**04 Sleep: resetting your routine**

|                     |                                                                                                                                                                                                                                                                            |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Insomnia screening; sleep psychoeducation; behavioural strategies (stimulus control, sleep scheduling, wind-down, relaxation); referral to CBT-I where indicated.                                                                                                          |
| WHY IT SUPPORTS RTW | Poor sleep worsens pain perception, mood and concentration, all of which impede rehabilitation and work. Improving sleep early supports engagement and adherence.                                                                                                          |
| MCI DOMAINS         | Psychological distress                                                                                                                                                                                                                                                     |
| WORKER RECEIVES     | Session guide, 'Anchor your wake time' tool, and support toolkit: healthdirect: Sleep, Better Health Channel: Sleep hygiene, Sleep Health Foundation, THIS WAY UP Insomnia Program, healthdirect, Medicare Mental Health, MindSpot, Workers' Psychological Support Service |
| EVIDENCE            | <i>Redeker NS, et al. (2019), J Clin Sleep Med: improving sleep is associated with better worker functioning and reduced productivity loss.</i>                                                                                                                            |

**05 Progress check: what's working, what's in the way**

|                     |                                                                                                                                                                                                                                   |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | MCI re-administration and comparison with baseline; review of goals and barriers; relapse and setback planning; plan adjustment; stakeholder update with traffic-light status.                                                    |
| WHY IT SUPPORTS RTW | Mid-point measurement identifies emerging risk early (amber or red domains) so the plan and treating-team input can be adjusted before setbacks become entrenched.                                                                |
| MCI DOMAINS         | Psychological distress, Pain and physical function, Fear and catastrophising, Work and social environment, Recovery confidence and engagement · <b>MCI check-in</b>                                                               |
| WORKER RECEIVES     | Session guide, 'Three good things' tool, and support toolkit: Beyond Blue, Medicare Mental Health, Medicare Mental Health Centres, Lifeline, Workers' Psychological Support Service, WorkCover Queensland, MindSpot, 1300 MH CALL |
| EVIDENCE            | <i>MCI outcome measurement plan: data at weeks 1, 5 and 10 tracks progress and guides intervention; Tingulstad A, et al. (2022), Syst Rev: self-efficacy predicts RTW.</i>                                                        |

**06 Financial stress and uncertainty**

|                     |                                                                                                                                                                                                                                                                                                            |
|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Assessment of secondary stressors; problem-solving for financial strain; budgeting and hardship planning; linkage to free financial counselling and government supports.                                                                                                                                   |
| WHY IT SUPPORTS RTW | Unaddressed financial strain is a secondary stressor that increases distress and disengagement. Linking workers to practical supports reduces barriers to participation and recovery.                                                                                                                      |
| MCI DOMAINS         | Work and social environment, Psychological distress                                                                                                                                                                                                                                                        |
| WORKER RECEIVES     | Session guide, 'Call before you're behind' tool, and support toolkit: National Debt Helpline, Moneysmart: Budgeting, WorkSafe Queensland: Weekly compensation, Services Australia, The Salvation Army Emergency Relief, WorkCover Queensland, Legal Aid Queensland, Workers' Psychological Support Service |
| EVIDENCE            | <i>White C, et al. (2019), J Occup Rehabil: addressing social and practical barriers supports reintegration and RTW.</i>                                                                                                                                                                                   |

## Curriculum, rationale and evidence (weeks 7 to 9)

### 07 Confidence and self-belief

|                     |                                                                                                                                                                                                                                    |
|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Self-efficacy building; behavioural experiments and graded approach to avoided situations; cognitive restructuring of self-critical beliefs; strengths-based goal setting.                                                         |
| WHY IT SUPPORTS RTW | Return-to-work self-efficacy is one of the most consistent predictors of successful and sustained return to work.                                                                                                                  |
| MCI DOMAINS         | Recovery confidence and engagement                                                                                                                                                                                                 |
| WORKER RECEIVES     | Session guide, 'Evidence bank' tool, and support toolkit: healthdirect: Self-esteem, Beyond Blue, MindSpot, Medicare Mental Health, Medicare Mental Health Centres, Workers' Psychological Support Service, Lifeline, healthdirect |
| EVIDENCE            | <i>Tingulstad A, et al. (2022), Syst Rev; Slater D, et al. (2023), Health Psychol Open: self-efficacy predicts RTW; CBT and acceptance approaches improve functioning.</i>                                                         |

### 08 Communication and support systems

|                     |                                                                                                                                                                                                                                                 |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Social support mapping; assertive communication skills and rehearsal; family and systems engagement with consent; linkage to community supports.                                                                                                |
| WHY IT SUPPORTS RTW | Social support and integration significantly influence recovery. Addressing family and social barriers reduces disengagement and supports sustained participation.                                                                              |
| MCI DOMAINS         | Work and social environment, Recovery confidence and engagement                                                                                                                                                                                 |
| WORKER RECEIVES     | Session guide, 'Three-line script' tool, and support toolkit: Relationships Australia, Carer Gateway, MensLine Australia, Medicare Mental Health, Lifeline, Workers' Psychological Support Service, QLife, Translating and Interpreting Service |
| EVIDENCE            | <i>White C, et al. (2019), J Occup Rehabil: social support plays a crucial role in RTW.</i>                                                                                                                                                     |

### 09 Coping with work impact and preparing to return

|                     |                                                                                                                                                                                                                                                                                                                                                                           |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Work-focused CBT for return-to-work fears; capacity and suitable duties planning; communication rehearsal; employer engagement and workplace planning with consent.                                                                                                                                                                                                       |
| WHY IT SUPPORTS RTW | Active employer involvement and collaboratively negotiated suitable duties are among the most consistent moderators of successful, durable return to work.                                                                                                                                                                                                                |
| MCI DOMAINS         | Work and social environment, Fear and catastrophising                                                                                                                                                                                                                                                                                                                     |
| WORKER RECEIVES     | Session guide, 'First-week plan' tool, and support toolkit: WorkSafe Queensland: Getting back to work, WorkSafe Queensland: Suitable duties, WorkSafe Queensland: Your return to work roadmap, WorkCover Queensland, Workers' Psychological Support Service, Medicare Mental Health, WorkSafe Queensland: Rehabilitation roles and responsibilities, Legal Aid Queensland |
| EVIDENCE            | <i>Tingulstad A, et al. (2022), Syst Rev: work-directed interventions with workplace involvement reduce sick leave and improve RTW; Eklund A, et al. (2024), BMC Public Health: problem-solving with workplace involvement reduces sick leave.</i>                                                                                                                        |

## Curriculum, rationale and evidence (week 10)

### 10 Maintaining progress: your forward plan

|                     |                                                                                                                                                                                                                      |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Consolidation of gains; relapse-prevention and setback planning; final MCI and outcomes review; staged return-to-work milestones; handover to ongoing supports; completion report.                                   |
| WHY IT SUPPORTS RTW | Structured transition planning reduces post-return setbacks, clarifies responsibilities and provides measurable closure criteria, improving durability of outcomes.                                                  |
| MCI DOMAINS         | Psychological distress, Pain and physical function, Fear and catastrophising, Work and social environment, Recovery confidence and engagement · <b>MCI check-in</b>                                                  |
| WORKER RECEIVES     | Session guide, 'If-then plan' tool, and support toolkit: Medicare Mental Health, Medicare Mental Health Centres, Beyond Blue, MindSpot, healthdirect, Workers' Psychological Support Service, Lifeline, 1300 MH CALL |
| EVIDENCE            | <i>Tingulstad A, et al. (2022), Syst Rev: planned transitions, follow-up and measurable closure criteria are associated with sustained RTW and fewer relapses.</i>                                                   |

### Key references

Eklund A, et al. (2024). Problem-solving interventions with workplace involvement and sick leave. BMC Public Health.

Hlobil H, et al. (2005). Graded activity for sick-listed workers with low back pain. Journal of Occupational Rehabilitation.

Louw A, et al. (2024). Pain neuroscience education in rehabilitation. International Journal of Sports Physical Therapy.

Ponsford J, et al. (2025). Early vocational rehabilitation after injury. Annals of Physical and Rehabilitation Medicine.

Redeker NS, et al. (2019). Workplace interventions to promote sleep health. Journal of Clinical Sleep Medicine.

Slater D, et al. (2023). Work-focused cognitive behavioural therapy and return to work. Health Psychology Open.

Tingulstad A, et al. (2022). Work-directed interventions and return to work: systematic review. Systematic Reviews.

White C, et al. (2019). Social support and return to work. Journal of Occupational Rehabilitation.

## Free services provided to the worker across the program

Every service below is free or government-funded and can run alongside the claim, extending support between sessions and promoting early help-seeking at no cost to the scheme. Checked October 2026.

### WorkSafe Queensland: Your return to work roadmap

The five steps of recovery and return to work, and who does what.

### WorkSafe Queensland: Rehabilitation roles and responsibilities

What you, your employer, your doctor and the insurer each do.

### WorkCover Queensland 1300 927 928

Questions about your claim, payments or entitlements: ask for your case manager.

### Workers' Psychological Support Service (WPSS) 1800 370 732

Free, independent social work support for Queensland workers with a work-related psychological injury, and their families. A call-back service, not a crisis line.

### Medicare Mental Health 1800 595 212

Free advice and connection to local mental health services. Mon to Fri, 8:30am to 5pm.

### healthdirect 1800 022 222

Trusted health information and a 24/7 nurse helpline.

### WorkSafe Queensland: Recovering from injury or illness

What to expect early in your recovery and rehabilitation.

### 1300 MH CALL 1300 642 255

Queensland's 24/7 mental health line: advice, triage and referral to public mental health services.

### healthdirect: Stress

What stress does to the body and how to manage it.

### MindSpot 1800 61 44 34

Free online assessment and treatment courses, including the Wellbeing Course for stress, anxiety and low mood.

### Beyond Blue 1300 22 4636

Information, strategies and 24/7 counselling by phone or chat.

### Medicare Mental Health Centres (Strathpine and Caboolture) 1800 595 212

Free walk-in mental health support. No appointment, referral or plan needed. Strathpine: 7/327 Gympie Rd. Caboolture: Level 1, 21 Pettigrew St.

### Lifeline 13 11 14

24/7 crisis support by phone, text (0477 13 11 14) or chat.

### healthdirect: Anxiety

Understanding worry and anxiety, and when to seek help.

### Suicide Call Back Service 1300 659 467

Free 24/7 phone and online counselling.

### healthdirect: Sleep

How sleep works and healthy sleep habits.

### Better Health Channel: Sleep hygiene

Step-by-step healthy sleep habits (Victorian Government).

### Sleep Health Foundation

Fact sheets on sleep problems, fatigue and practical solutions.

### THIS WAY UP Insomnia Program

Online CBT for insomnia, developed by St Vincent's Hospital Sydney. Free when prescribed by a clinician; ask your GP or counsellor.

### National Debt Helpline 1800 007 007

Free, confidential financial counselling.

### Moneysmart: Budgeting

The Australian Government's free budgeting guides and tools.

### WorkSafe Queensland: Weekly compensation

How weekly payments are worked out while you can't work.

### Services Australia

Check payments you may be eligible for, including crisis payments.

### The Salvation Army Emergency Relief 1300 371 288

Practical help with food, bills and essentials when money is tight.

### Legal Aid Queensland 1300 65 11 88

Free legal information and advice, including about workers' compensation.

### healthdirect: Self-esteem

Practical ways to rebuild confidence.

### Relationships Australia 1300 364 277

Counselling and support for relationship and family strain.

### Carer Gateway 1800 422 737

Free support, counselling and respite for family members who help care for you.

### MensLine Australia 1300 78 99 78

24/7 phone and online counselling for men.

### QLife 1800 184 527

LGBTIQ+ peer support, 3pm to midnight every day.

### Translating and Interpreting Service (TIS National) 131 450

Free interpreter to help you talk with services in your language.

### WorkSafe Queensland: Getting back to work

How a safe, staged return to work is planned in Queensland.

### WorkSafe Queensland: Suitable duties

How modified or reduced duties work while you recover.

### 13YARN 13 92 76

24/7 crisis support by and for Aboriginal and Torres Strait Islander people.

### Open Arms 1800 011 046

Free counselling for veterans and their families.

### MATES in Construction 1300 642 111

Support line for construction, mining and energy workers.

### 1800RESPECT 1800 737 732

Support for domestic, family and sexual violence.

# Roles, consent and quality

## Who does what

**Worker:** attends sessions, completes the MCI and home practice.

**Treating GP and practitioners:** lead medical and psychological treatment and certify capacity; receive session updates.

**WorkCover case manager:** manages the claim; receives progress and completion reports.

**Employer:** provides suitable duties and workplace support, with consent.

**Eclosia:** delivers the program, measures progress and coordinates communication across the team.

## Consent and privacy

Information is shared only with the worker's informed consent and handled in line with the Information Privacy Act 2009 (Qld). Records and MCI data are stored in secure, cloud-based systems hosted onshore in Australia, with encryption and role-based access. Stakeholders receive what they need to coordinate care, never the private detail of what the worker discusses.

## Clinical governance and quality

- Delivered in line with the HWCA Principles of Practice for Workplace Rehabilitation Providers and the Clinical Framework for the Delivery of Health Services.
- Program fidelity through structured curriculum, clinical supervision, monthly internal case review and peer review of complex files.
- Worker and referrer feedback at mid-program and completion, feeding continuous improvement.
- Non-diagnostic and non-crisis: urgent risk is escalated to the treating GP and case manager, and crisis services engaged as needed.



### Davina Williams, Principal Rehabilitation Counsellor

Master of Counselling (Rehabilitation & Mental Health); Full Member, Australian Society of Rehabilitation Counsellors; ACA Level 3 Registered Clinical Supervisor; PACFA Clinical Member. Appointed to the WorkCover Queensland Rehabilitation Services Provider Panel. 2026 ARPA Queensland finalist, Innovation in Return to Work. Creator of Eclosia's Mindful Capacity Index.

## HOW TO REFER

Call **(07) 3608 1355** or email [referrals@eclosia.au](mailto:referrals@eclosia.au) with:

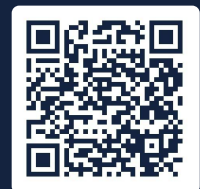
- Worker's name, contact details and claim number
- Treating GP and any other treating practitioners
- Injury type, current capacity and suitable duties (if known)
- Preferred pathway (A, B or C), or ask us to recommend one

We contact the worker within 24 to 48 hours, confirm consent and book the first session. Week 1 includes the MCI baseline, with a summary to you and the treating team.

T08, Serviced Office 7, 23 Discovery Drive, North Lakes QLD 4509 · in person or telehealth across Queensland



Make a referral



Try the MCI demo



MINDFUL WELL-RECOVERY

## Program overview

For employers, case managers and WorkCover Queensland

Pathway B · Physical Recovery Adjustment

A ten-week, evidence-based early intervention program for injured workers



**ECLOSIA**  
COUNSELLING & REHABILITATION

# Proactive, measured, coordinated

Mindful Well-Recovery™ is a structured ten-week biopsychosocial early intervention program for injured workers at risk of delayed recovery: those with psychosocial barriers, limited functional capacity, or emerging secondary psychological injury. It integrates work-focused Cognitive Behavioural Therapy (CBT), Acceptance and Commitment Therapy (ACT) and Pain Neuroscience Education (PNE), and complements, never replaces, the worker's medical and psychological treatment.

**Pathway B: Physical Recovery Adjustment.** For people adjusting to pain, reduced physical capacity and the changes a physical injury brings.

4,110

accepted mental injury claims in Queensland last financial year, more than double five years earlier\*

123 days

average time off work for a mental injury claim, compared with 47 days for a physical injury\*

## What makes it different

- **Not open-ended talk therapy.** Every session has a defined clinical focus, a practical tool for the week and measurable aims.
- **Objective measurement.** The Mindful Capacity Index (MCI) tracks five recovery domains at weeks 1, 5 and 10, with a green, amber and red traffic-light summary.
- **The treating team is updated after every session.** With consent, GPs and treating practitioners receive a written update on the session focus, engagement, MCI results and resources provided.
- **Resources that work alongside the claim.** Each week the worker receives a session guide and a support toolkit of free government and community services, so supports continue between sessions at no cost to the scheme.
- **Work-focused throughout.** Goals, suitable duties, employer engagement and return-to-work planning are built into the curriculum.

## Delivery

Ten weekly one-to-one sessions, in person at North Lakes or by telehealth across Queensland. Initial contact with the worker within 24 to 48 hours of referral. Delivered and clinically overseen by Davina Williams, Rehabilitation Counsellor, from intake to closure.

\* WorkCover Queensland annual report figures, reported by ABC News, 10 October 2026.

# How progress is measured and shared

## The Mindful Capacity Index (MCI)

A 33-item self-report biopsychosocial assessment (0 to 3 scale) completed by the worker on a secure digital form, reviewed with the clinician. Results feed a clinician dashboard hosted onshore in Australia.

**Five domains**, named as they appear on the dashboard: Psychological distress · Pain and physical function · Fear and catastrophising · Work and social environment · Recovery confidence and engagement. Resilience and confidence items are reverse-scored.

### Green

Good progress, low risk, positive trajectory.

### Amber

Moderate risk or emerging barriers: increased focus.

### Red

High risk or significant barriers: urgent attention and escalation.



**Try the MCI yourself.** Scan to complete a practice assessment with made-up details, then open the demo dashboard to see how traffic lights and progress across weeks 1, 5 and 10 are reported. Demo data only, kept completely separate from client records.  
[apps.knack.com/eclosiaau/mci-demo/mci-demo-form](https://apps.knack.com/eclosiaau/mci-demo/mci-demo-form)

## Reporting schedule

| When                             | Who receives it                                               | What it includes                                                                                                                                     |
|----------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>After every session</b>       | Treating GP and psychologist or other treaters (with consent) | Session focus and intervention, engagement, any MCI results, resources provided, home practice, risks or concerns, next session focus                |
| <b>Fortnightly, or as agreed</b> | WorkCover case manager (Injury Partner)                       | Engagement and adherence, MCI traffic-light status, psychosocial risk factors, functional and return-to-work readiness observations, recommendations |
| <b>Week 1</b>                    | Case manager and treating team                                | MCI baseline, goals and initial barriers                                                                                                             |
| <b>Week 5</b>                    | Case manager and treating team                                | Mid-program MCI comparison and plan adjustments                                                                                                      |
| <b>Week 10</b>                   | Case manager, employer (as consented) and treating team       | Completion report: MCI weeks 1, 5 and 10, outcomes, return-to-work milestones, relapse-prevention plan and handover                                  |
| <b>Any time</b>                  | Treating GP and case manager                                  | Prompt escalation of red-flag risk, with crisis pathways activated where needed                                                                      |

## Employers

With the worker's consent, employers are engaged on suitable duties, workplace planning and manager coaching (week 9 focus, or earlier where appropriate). Employers receive only what the worker agrees to, never the private content of sessions.

## Curriculum, rationale and evidence (weeks 1 to 3)

### 01 Getting started: your first session and goals

|                     |                                                                                                                                                                                                                                                                                                                                                           |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Engagement and rapport; MCI biopsychosocial baseline (33 items, five domains); functional, psychosocial and work-focused assessment; goal setting; consent to share updates with the treating team.                                                                                                                                                       |
| WHY IT SUPPORTS RTW | Early engagement reduces uncertainty and disengagement. A work-focused baseline identifies psychosocial and functional barriers early and sets realistic expectations before unhelpful beliefs take hold.                                                                                                                                                 |
| MCI DOMAINS         | Psychological distress, Pain and physical function, Fear and catastrophising, Work and social environment, Recovery confidence and engagement · <b>MCI check-in</b>                                                                                                                                                                                       |
| WORKER RECEIVES     | Session guide, 'Your recovery 'why' tool, and support toolkit: WorkSafe Queensland: Your return to work roadmap, WorkSafe Queensland: Rehabilitation roles and responsibilities, WorkCover Queensland, Workers' Psychological Support Service, Medicare Mental Health, healthdirect, WorkSafe Queensland: Recovering from injury or illness, 1300 MH CALL |
| EVIDENCE            | <i>Ponsford J, et al. (2025), Ann Phys Rehabil Med: early vocational rehabilitation and early intervention after injury improve employment outcomes and reduce long-term disability risk.</i>                                                                                                                                                             |

### 02 Understanding stress and mental load

|                     |                                                                                                                                                                                                                               |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Psychoeducation on the stress response; work-focused CBT: identifying triggers and early warning signs; relaxation training (paced breathing); activity scheduling to reduce load.                                            |
| WHY IT SUPPORTS RTW | Stress and anxiety are significant psychological barriers that prolong time off work. Work-focused CBT builds coping and reduces avoidance, supporting earlier return.                                                        |
| MCI DOMAINS         | Psychological distress                                                                                                                                                                                                        |
| WORKER RECEIVES     | Session guide, '4-6 breathing' tool, and support toolkit: healthdirect: Stress, MindSpot, Beyond Blue, Medicare Mental Health, Medicare Mental Health Centres, Workers' Psychological Support Service, Lifeline, 1300 MH CALL |
| EVIDENCE            | <i>Slater D, et al. (2023), Health Psychol Open: work-focused CBT reduces sick leave and improves return-to-work outcomes compared with usual care.</i>                                                                       |

### 03 Pain, pacing and energy

|                     |                                                                                                                                                                                                                                                                                                               |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Pain neuroscience education; activity pacing and baselining; graded activity planning tied to work-relevant tasks, within treating-team restrictions.                                                                                                                                                         |
| WHY IT SUPPORTS RTW | Reducing threat beliefs about pain decreases fear-avoidance. Graded activity rebuilds tolerance and confidence for work tasks, and has been shown to shorten time to return to work.                                                                                                                          |
| MCI DOMAINS         | Pain and physical function, Fear and catastrophising                                                                                                                                                                                                                                                          |
| WORKER RECEIVES     | Session guide, 'Find your baseline' tool, and support toolkit: Queensland Health: Understanding pain, healthdirect: Chronic pain, MindSpot Chronic Pain Course, Queensland Health Persistent Pain Management Services, healthdirect, Medicare Mental Health, MindSpot, Workers' Psychological Support Service |
| EVIDENCE            | <i>Louw A, et al. (2024), Int J Sports Phys Ther (PNE); Hlobil H, et al. (2005), J Occup Rehabil: graded activity led to faster RTW than usual care.</i>                                                                                                                                                      |

## Curriculum, rationale and evidence (weeks 4 to 6)

### 04 Sleep: resetting your routine

|                     |                                                                                                                                                                                                                                                                            |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Insomnia screening; sleep psychoeducation; behavioural strategies (stimulus control, sleep scheduling, wind-down, relaxation); referral to CBT-I where indicated.                                                                                                          |
| WHY IT SUPPORTS RTW | Poor sleep worsens pain perception, mood and concentration, all of which impede rehabilitation and work. Improving sleep early supports engagement and adherence.                                                                                                          |
| MCI DOMAINS         | Psychological distress                                                                                                                                                                                                                                                     |
| WORKER RECEIVES     | Session guide, 'Anchor your wake time' tool, and support toolkit: healthdirect: Sleep, Better Health Channel: Sleep hygiene, Sleep Health Foundation, THIS WAY UP Insomnia Program, healthdirect, Medicare Mental Health, MindSpot, Workers' Psychological Support Service |
| EVIDENCE            | <i>Redeker NS, et al. (2019), J Clin Sleep Med: improving sleep is associated with better worker functioning and reduced productivity loss.</i>                                                                                                                            |

### 05 Progress check: what's working, what's in the way

|                     |                                                                                                                                                                                                                                   |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | MCI re-administration and comparison with baseline; review of goals and barriers; relapse and setback planning; plan adjustment; stakeholder update with traffic-light status.                                                    |
| WHY IT SUPPORTS RTW | Mid-point measurement identifies emerging risk early (amber or red domains) so the plan and treating-team input can be adjusted before setbacks become entrenched.                                                                |
| MCI DOMAINS         | Psychological distress, Pain and physical function, Fear and catastrophising, Work and social environment, Recovery confidence and engagement · <b>MCI check-in</b>                                                               |
| WORKER RECEIVES     | Session guide, 'Three good things' tool, and support toolkit: Beyond Blue, Medicare Mental Health, Medicare Mental Health Centres, Lifeline, Workers' Psychological Support Service, WorkCover Queensland, MindSpot, 1300 MH CALL |
| EVIDENCE            | <i>MCI outcome measurement plan: data at weeks 1, 5 and 10 tracks progress and guides intervention; Tingulstad A, et al. (2022), Syst Rev: self-efficacy predicts RTW.</i>                                                        |

### 06 Financial stress and uncertainty

|                     |                                                                                                                                                                                                                                                                                                            |
|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Assessment of secondary stressors; problem-solving for financial strain; budgeting and hardship planning; linkage to free financial counselling and government supports.                                                                                                                                   |
| WHY IT SUPPORTS RTW | Unaddressed financial strain is a secondary stressor that increases distress and disengagement. Linking workers to practical supports reduces barriers to participation and recovery.                                                                                                                      |
| MCI DOMAINS         | Work and social environment, Psychological distress                                                                                                                                                                                                                                                        |
| WORKER RECEIVES     | Session guide, 'Call before you're behind' tool, and support toolkit: National Debt Helpline, Moneysmart: Budgeting, WorkSafe Queensland: Weekly compensation, Services Australia, The Salvation Army Emergency Relief, WorkCover Queensland, Legal Aid Queensland, Workers' Psychological Support Service |
| EVIDENCE            | <i>White C, et al. (2019), J Occup Rehabil: addressing social and practical barriers supports reintegration and RTW.</i>                                                                                                                                                                                   |

## Curriculum, rationale and evidence (weeks 7 to 9)

### 07 Confidence and self-belief

|                     |                                                                                                                                                                                                                                    |
|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Self-efficacy building; behavioural experiments and graded approach to avoided situations; cognitive restructuring of self-critical beliefs; strengths-based goal setting.                                                         |
| WHY IT SUPPORTS RTW | Return-to-work self-efficacy is one of the most consistent predictors of successful and sustained return to work.                                                                                                                  |
| MCI DOMAINS         | Recovery confidence and engagement                                                                                                                                                                                                 |
| WORKER RECEIVES     | Session guide, 'Evidence bank' tool, and support toolkit: healthdirect: Self-esteem, Beyond Blue, MindSpot, Medicare Mental Health, Medicare Mental Health Centres, Workers' Psychological Support Service, Lifeline, healthdirect |
| EVIDENCE            | <i>Tingulstad A, et al. (2022), Syst Rev; Slater D, et al. (2023), Health Psychol Open: self-efficacy predicts RTW; CBT and acceptance approaches improve functioning.</i>                                                         |

### 08 Identity and life changes

|                     |                                                                                                                                                                                                                                  |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Adjustment-to-injury counselling; ACT values clarification and committed action; grief and loss processing; routine and role rebuilding.                                                                                         |
| WHY IT SUPPORTS RTW | Values-based activation sustains engagement when usual roles are disrupted, and reduces disengagement during long recoveries.                                                                                                    |
| MCI DOMAINS         | Recovery confidence and engagement, Work and social environment                                                                                                                                                                  |
| WORKER RECEIVES     | Session guide, 'Values compass' tool, and support toolkit: healthdirect: Grief and loss, Beyond Blue, Lifeline, Medicare Mental Health, Relationships Australia, Workers' Psychological Support Service, MindSpot, Carer Gateway |
| EVIDENCE            | <i>Slater D, et al. (2023), Health Psychol Open; Tingulstad A, et al. (2022), Syst Rev: acceptance-based approaches improve functioning and durability of RTW.</i>                                                               |

### 09 Coping with work impact and preparing to return

|                     |                                                                                                                                                                                                                                                                                                                                                                           |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Work-focused CBT for return-to-work fears; capacity and suitable duties planning; communication rehearsal; employer engagement and workplace planning with consent.                                                                                                                                                                                                       |
| WHY IT SUPPORTS RTW | Active employer involvement and collaboratively negotiated suitable duties are among the most consistent moderators of successful, durable return to work.                                                                                                                                                                                                                |
| MCI DOMAINS         | Work and social environment, Fear and catastrophising                                                                                                                                                                                                                                                                                                                     |
| WORKER RECEIVES     | Session guide, 'First-week plan' tool, and support toolkit: WorkSafe Queensland: Getting back to work, WorkSafe Queensland: Suitable duties, WorkSafe Queensland: Your return to work roadmap, WorkCover Queensland, Workers' Psychological Support Service, Medicare Mental Health, WorkSafe Queensland: Rehabilitation roles and responsibilities, Legal Aid Queensland |
| EVIDENCE            | <i>Tingulstad A, et al. (2022), Syst Rev: work-directed interventions with workplace involvement reduce sick leave and improve RTW; Eklund A, et al. (2024), BMC Public Health: problem-solving with workplace involvement reduces sick leave.</i>                                                                                                                        |

## Curriculum, rationale and evidence (week 10)

### 10 Maintaining progress: your forward plan

|                     |                                                                                                                                                                                                                      |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Consolidation of gains; relapse-prevention and setback planning; final MCI and outcomes review; staged return-to-work milestones; handover to ongoing supports; completion report.                                   |
| WHY IT SUPPORTS RTW | Structured transition planning reduces post-return setbacks, clarifies responsibilities and provides measurable closure criteria, improving durability of outcomes.                                                  |
| MCI DOMAINS         | Psychological distress, Pain and physical function, Fear and catastrophising, Work and social environment, Recovery confidence and engagement · <b>MCI check-in</b>                                                  |
| WORKER RECEIVES     | Session guide, 'If-then plan' tool, and support toolkit: Medicare Mental Health, Medicare Mental Health Centres, Beyond Blue, MindSpot, healthdirect, Workers' Psychological Support Service, Lifeline, 1300 MH CALL |
| EVIDENCE            | <i>Tingulstad A, et al. (2022), Syst Rev: planned transitions, follow-up and measurable closure criteria are associated with sustained RTW and fewer relapses.</i>                                                   |

### Key references

Eklund A, et al. (2024). Problem-solving interventions with workplace involvement and sick leave. BMC Public Health.

Hlobil H, et al. (2005). Graded activity for sick-listed workers with low back pain. Journal of Occupational Rehabilitation.

Louw A, et al. (2024). Pain neuroscience education in rehabilitation. International Journal of Sports Physical Therapy.

Ponsford J, et al. (2025). Early vocational rehabilitation after injury. Annals of Physical and Rehabilitation Medicine.

Redeker NS, et al. (2019). Workplace interventions to promote sleep health. Journal of Clinical Sleep Medicine.

Slater D, et al. (2023). Work-focused cognitive behavioural therapy and return to work. Health Psychology Open.

Tingulstad A, et al. (2022). Work-directed interventions and return to work: systematic review. Systematic Reviews.

White C, et al. (2019). Social support and return to work. Journal of Occupational Rehabilitation.

## Free services provided to the worker across the program

Every service below is free or government-funded and can run alongside the claim, extending support between sessions and promoting early help-seeking at no cost to the scheme. Checked October 2026.

### **WorkSafe Queensland: Your return to work roadmap**

The five steps of recovery and return to work, and who does what.

### **WorkSafe Queensland: Rehabilitation roles and responsibilities**

What you, your employer, your doctor and the insurer each do.

### **WorkCover Queensland 1300 927 928**

Questions about your claim, payments or entitlements: ask for your case manager.

### **Workers' Psychological Support Service (WPSS) 1800 370 732**

Free, independent social work support for Queensland workers with a work-related psychological injury, and their families. A call-back service, not a crisis line.

### **Medicare Mental Health 1800 595 212**

Free advice and connection to local mental health services. Mon to Fri, 8:30am to 5pm.

### **healthdirect 1800 022 222**

Trusted health information and a 24/7 nurse helpline.

### **WorkSafe Queensland: Recovering from injury or illness**

What to expect early in your recovery and rehabilitation.

### **1300 MH CALL 1300 642 255**

Queensland's 24/7 mental health line: advice, triage and referral to public mental health services.

### **healthdirect: Stress**

What stress does to the body and how to manage it.

### **MindSpot 1800 61 44 34**

Free online assessment and treatment courses, including the Wellbeing Course for stress, anxiety and low mood.

### **Beyond Blue 1300 22 4636**

Information, strategies and 24/7 counselling by phone or chat.

### **Medicare Mental Health Centres (Strathpine and Caboolture) 1800 595 212**

Free walk-in mental health support. No appointment, referral or plan needed. Strathpine: 7/327 Gympie Rd. Caboolture: Level 1, 21 Pettigrew St.

### **Lifeline 13 11 14**

24/7 crisis support by phone, text (0477 13 11 14) or chat.

### **Queensland Health: Understanding pain**

Plain-language guides to how pain works and how to manage it.

### **healthdirect: Chronic pain**

How ongoing pain works and what helps.

### **MindSpot Chronic Pain Course 1800 61 44 34**

Free, clinician-supported online course for adults living with ongoing pain.

### **Queensland Health Persistent Pain Management Services**

Six public, team-based pain services across Queensland. Ask your GP about a referral.

### **healthdirect: Sleep**

How sleep works and healthy sleep habits.

### **Better Health Channel: Sleep hygiene**

Step-by-step healthy sleep habits (Victorian Government).

### **Sleep Health Foundation**

Fact sheets on sleep problems, fatigue and practical solutions.

### **THIS WAY UP Insomnia Program**

Online CBT for insomnia, developed by St Vincent's Hospital Sydney. Free when prescribed by a clinician; ask your GP or counsellor.

### **National Debt Helpline 1800 007 007**

Free, confidential financial counselling.

### **Moneysmart: Budgeting**

The Australian Government's free budgeting guides and tools.

### **WorkSafe Queensland: Weekly compensation**

How weekly payments are worked out while you can't work.

### **Services Australia**

Check payments you may be eligible for, including crisis payments.

### **The Salvation Army Emergency Relief 1300 371 288**

Practical help with food, bills and essentials when money is tight.

### **Legal Aid Queensland 1300 65 11 88**

Free legal information and advice, including about workers' compensation.

### **healthdirect: Self-esteem**

Practical ways to rebuild confidence.

### **healthdirect: Grief and loss**

Adjusting to loss and change: what's normal and what helps.

### **Relationships Australia 1300 364 277**

Counselling and support for relationship and family strain.

### **Carer Gateway 1800 422 737**

Free support, counselling and respite for family members who help care for you.

### **WorkSafe Queensland: Getting back to work**

How a safe, staged return to work is planned in Queensland.

### **WorkSafe Queensland: Suitable duties**

How modified or reduced duties work while you recover.

### **MensLine Australia 1300 78 99 78**

24/7 phone and online counselling for men.

### **QLife 1800 184 527**

LGBTIQ+ peer support, 3pm to midnight every day.

### **13YARN 13 92 76**

24/7 crisis support by and for Aboriginal and Torres Strait Islander people.

### **Open Arms 1800 011 046**

Free counselling for veterans and their families.

### **MATES in Construction 1300 642 111**

Support line for construction, mining and energy workers.

### **1800RESPECT 1800 737 732**

Support for domestic, family and sexual violence.

### **Translating and Interpreting Service (TIS National) 131 450**

Free interpreter to help you talk with services in your language.

# Roles, consent and quality

## Who does what

**Worker:** attends sessions, completes the MCI and home practice.

**Treating GP and practitioners:** lead medical and psychological treatment and certify capacity; receive session updates.

**WorkCover case manager:** manages the claim; receives progress and completion reports.

**Employer:** provides suitable duties and workplace support, with consent.

**Eclosia:** delivers the program, measures progress and coordinates communication across the team.

## Consent and privacy

Information is shared only with the worker's informed consent and handled in line with the Information Privacy Act 2009 (Qld). Records and MCI data are stored in secure, cloud-based systems hosted onshore in Australia, with encryption and role-based access. Stakeholders receive what they need to coordinate care, never the private detail of what the worker discusses.

## Clinical governance and quality

- Delivered in line with the HWCA Principles of Practice for Workplace Rehabilitation Providers and the Clinical Framework for the Delivery of Health Services.
- Program fidelity through structured curriculum, clinical supervision, monthly internal case review and peer review of complex files.
- Worker and referrer feedback at mid-program and completion, feeding continuous improvement.
- Non-diagnostic and non-crisis: urgent risk is escalated to the treating GP and case manager, and crisis services engaged as needed.



### Davina Williams, Principal Rehabilitation Counsellor

Master of Counselling (Rehabilitation & Mental Health); Full Member, Australian Society of Rehabilitation Counsellors; ACA Level 3 Registered Clinical Supervisor; PACFA Clinical Member. Appointed to the WorkCover Queensland Rehabilitation Services Provider Panel. 2026 ARPA Queensland finalist, Innovation in Return to Work. Creator of Eclosia's Mindful Capacity Index.

## HOW TO REFER

Call **(07) 3608 1355** or email **referrals@eclosia.au** with:

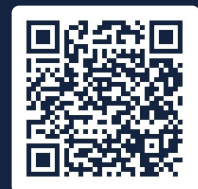
- Worker's name, contact details and claim number
- Treating GP and any other treating practitioners
- Injury type, current capacity and suitable duties (if known)
- Preferred pathway (A, B or C), or ask us to recommend one

We contact the worker within 24 to 48 hours, confirm consent and book the first session. Week 1 includes the MCI baseline, with a summary to you and the treating team.

T08, Serviced Office 7, 23 Discovery Drive, North Lakes QLD 4509 · in person or telehealth across Queensland



Make a referral



Try the MCI demo



MINDFUL WELL-BEING

## Program overview

For employers, case managers and WorkCover Queensland

Pathway C · Combined Adjustment to Injury

A ten-week, evidence-based early intervention program for injured workers



**ECLOSIA**  
COUNSELLING & REHABILITATION

# Proactive, measured, coordinated

Mindful Well-Recovery™ is a structured ten-week biopsychosocial early intervention program for injured workers at risk of delayed recovery: those with psychosocial barriers, limited functional capacity, or emerging secondary psychological injury. It integrates work-focused Cognitive Behavioural Therapy (CBT), Acceptance and Commitment Therapy (ACT) and Pain Neuroscience Education (PNE), and complements, never replaces, the worker's medical and psychological treatment.

**Pathway C: Combined Adjustment to Injury.** For people managing both physical and emotional effects of injury together.

4,110

accepted mental injury claims in Queensland last financial year, more than double five years earlier\*

123 days

average time off work for a mental injury claim, compared with 47 days for a physical injury\*

## What makes it different

- **Not open-ended talk therapy.** Every session has a defined clinical focus, a practical tool for the week and measurable aims.
- **Objective measurement.** The Mindful Capacity Index (MCI) tracks five recovery domains at weeks 1, 5 and 10, with a green, amber and red traffic-light summary.
- **The treating team is updated after every session.** With consent, GPs and treating practitioners receive a written update on the session focus, engagement, MCI results and resources provided.
- **Resources that work alongside the claim.** Each week the worker receives a session guide and a support toolkit of free government and community services, so supports continue between sessions at no cost to the scheme.
- **Work-focused throughout.** Goals, suitable duties, employer engagement and return-to-work planning are built into the curriculum.

## Delivery

Ten weekly one-to-one sessions, in person at North Lakes or by telehealth across Queensland. Initial contact with the worker within 24 to 48 hours of referral. Delivered and clinically overseen by Davina Williams, Rehabilitation Counsellor, from intake to closure.

\* WorkCover Queensland annual report figures, reported by ABC News, 10 October 2026.

# How progress is measured and shared

## The Mindful Capacity Index (MCI)

A 33-item self-report biopsychosocial assessment (0 to 3 scale) completed by the worker on a secure digital form, reviewed with the clinician. Results feed a clinician dashboard hosted onshore in Australia.

**Five domains**, named as they appear on the dashboard: Psychological distress · Pain and physical function · Fear and catastrophising · Work and social environment · Recovery confidence and engagement. Resilience and confidence items are reverse-scored.

### Green

Good progress, low risk, positive trajectory.

### Amber

Moderate risk or emerging barriers: increased focus.

### Red

High risk or significant barriers: urgent attention and escalation.



**Try the MCI yourself.** Scan to complete a practice assessment with made-up details, then open the demo dashboard to see how traffic lights and progress across weeks 1, 5 and 10 are reported. Demo data only, kept completely separate from client records.  
[apps.knack.com/eclosiaau/mci-demo/mci-demo-form](https://apps.knack.com/eclosiaau/mci-demo/mci-demo-form)

## Reporting schedule

| When                             | Who receives it                                               | What it includes                                                                                                                                     |
|----------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>After every session</b>       | Treating GP and psychologist or other treaters (with consent) | Session focus and intervention, engagement, any MCI results, resources provided, home practice, risks or concerns, next session focus                |
| <b>Fortnightly, or as agreed</b> | WorkCover case manager (Injury Partner)                       | Engagement and adherence, MCI traffic-light status, psychosocial risk factors, functional and return-to-work readiness observations, recommendations |
| <b>Week 1</b>                    | Case manager and treating team                                | MCI baseline, goals and initial barriers                                                                                                             |
| <b>Week 5</b>                    | Case manager and treating team                                | Mid-program MCI comparison and plan adjustments                                                                                                      |
| <b>Week 10</b>                   | Case manager, employer (as consented) and treating team       | Completion report: MCI weeks 1, 5 and 10, outcomes, return-to-work milestones, relapse-prevention plan and handover                                  |
| <b>Any time</b>                  | Treating GP and case manager                                  | Prompt escalation of red-flag risk, with crisis pathways activated where needed                                                                      |

## Employers

With the worker's consent, employers are engaged on suitable duties, workplace planning and manager coaching (week 9 focus, or earlier where appropriate). Employers receive only what the worker agrees to, never the private content of sessions.

## Curriculum, rationale and evidence (weeks 1 to 3)

### 01 Starting point: the whole picture

|                     |                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Holistic biopsychosocial intake; MCI baseline; mapping physical, psychological, social and occupational impacts; treating-team mapping; collaborative goal setting; consent for information sharing.                                                                                                                                                                |
| WHY IT SUPPORTS RTW | Combined physical and psychological presentations have the highest risk of delayed return to work. Mapping all barriers at intake allows targeted, coordinated intervention from week one.                                                                                                                                                                          |
| MCI DOMAINS         | Psychological distress, Pain and physical function, Fear and catastrophising, Work and social environment, Recovery confidence and engagement · <b>MCI check-in</b>                                                                                                                                                                                                 |
| WORKER RECEIVES     | Session guide, 'Life wheel' tool, and support toolkit: WorkSafe Queensland: Your return to work roadmap, WorkSafe Queensland: Rehabilitation roles and responsibilities, WorkSafe Queensland: Recovering from injury or illness, WorkCover Queensland, Workers' Psychological Support Service, Medicare Mental Health, Medicare Mental Health Centres, healthdirect |
| EVIDENCE            | <i>Ponsford J, et al. (2025), Ann Phys Rehabil Med: early intervention after injury improves employment outcomes and reduces long-term disability risk.</i>                                                                                                                                                                                                         |

### 02 The stress and pain connection

|                     |                                                                                                                                                                                                                                                                                                                |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Pain neuroscience education focused on stress-pain interaction; CBT trigger mapping; relaxation and down-regulation training; daily stress-pain monitoring.                                                                                                                                                    |
| WHY IT SUPPORTS RTW | Reducing threat appraisals and physiological arousal lowers pain intensity and fear-avoidance, increasing willingness to re-engage in activity and work tasks.                                                                                                                                                 |
| MCI DOMAINS         | Psychological distress, Pain and physical function                                                                                                                                                                                                                                                             |
| WORKER RECEIVES     | Session guide, 'Volume dial' tool, and support toolkit: Queensland Health: Understanding pain, healthdirect: Stress, MindSpot Chronic Pain Course, Queensland Health Persistent Pain Management Services, Medicare Mental Health, Workers' Psychological Support Service, healthdirect: Chronic pain, MindSpot |
| EVIDENCE            | <i>Louw A, et al. (2024), Int J Sports Phys Ther: pain neuroscience education reduces unhelpful pain beliefs and short-term disability; Slater D, et al. (2023): work-focused CBT improves RTW.</i>                                                                                                            |

### 03 Managing tough days

|                     |                                                                                                                                                                                                                                                                                |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Flare-up management planning; grounding and self-soothing skills; acceptance-based strategies (ACT); self-compassion; minimum-viable routines to maintain activation.                                                                                                          |
| WHY IT SUPPORTS RTW | Workers who have a plan for flare-ups are less likely to disengage from rehabilitation after setbacks, protecting the durability of return-to-work progress.                                                                                                                   |
| MCI DOMAINS         | Psychological distress, Pain and physical function                                                                                                                                                                                                                             |
| WORKER RECEIVES     | Session guide, 'Tough-day card' tool, and support toolkit: healthdirect: Chronic pain, Queensland Health: Understanding pain, MindSpot Chronic Pain Course, Beyond Blue, Lifeline, Medicare Mental Health, Queensland Health Persistent Pain Management Services, 1300 MH CALL |
| EVIDENCE            | <i>Slater D, et al. (2023), Health Psychol Open; Tingulstad A, et al. (2022), Syst Rev: acceptance-based approaches improve functioning and self-efficacy predicts RTW.</i>                                                                                                    |

## Curriculum, rationale and evidence (weeks 4 to 6)

**04 Sleep, fatigue and energy**

|                     |                                                                                                                                                                                                                                                                    |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Sleep and fatigue screening; sleep hygiene and stimulus control; energy pacing; activity scheduling; GP liaison where fatigue is unexplained.                                                                                                                      |
| WHY IT SUPPORTS RTW | Fatigue and poor sleep reduce tolerance for activity and concentration at work. Addressing both supports participation in graded activity and suitable duties.                                                                                                     |
| MCI DOMAINS         | Psychological distress, Pain and physical function                                                                                                                                                                                                                 |
| WORKER RECEIVES     | Session guide, 'Energy budget' tool, and support toolkit: healthdirect: Sleep, Sleep Health Foundation, THIS WAY UP Insomnia Program, Better Health Channel: Sleep hygiene, healthdirect, Medicare Mental Health, MindSpot, Workers' Psychological Support Service |
| EVIDENCE            | <i>Redeker NS, et al. (2019), J Clin Sleep Med: sleep is an important, modifiable early target for worker functioning.</i>                                                                                                                                         |

**05 Progress check: what's working, what's in the way**

|                     |                                                                                                                                                                                                                                   |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | MCI re-administration and comparison with baseline; review of goals and barriers; relapse and setback planning; plan adjustment; stakeholder update with traffic-light status.                                                    |
| WHY IT SUPPORTS RTW | Mid-point measurement identifies emerging risk early (amber or red domains) so the plan and treating-team input can be adjusted before setbacks become entrenched.                                                                |
| MCI DOMAINS         | Psychological distress, Pain and physical function, Fear and catastrophising, Work and social environment, Recovery confidence and engagement · <b>MCI check-in</b>                                                               |
| WORKER RECEIVES     | Session guide, 'Three good things' tool, and support toolkit: Beyond Blue, Medicare Mental Health, Medicare Mental Health Centres, Lifeline, Workers' Psychological Support Service, WorkCover Queensland, MindSpot, 1300 MH CALL |
| EVIDENCE            | <i>MCI outcome measurement plan: data at weeks 1, 5 and 10 tracks progress and guides intervention; Tingulstad A, et al. (2022), Syst Rev: self-efficacy predicts RTW.</i>                                                        |

**06 Navigating your claim and financial pressure**

|                     |                                                                                                                                                                                                                                                                                                                       |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Psychoeducation on scheme processes and roles; problem-solving for administrative and financial stressors; communication rehearsal; linkage to financial counselling and legal information.                                                                                                                           |
| WHY IT SUPPORTS RTW | System-related stress and financial strain are recognised barriers to recovery. Clarity about roles and processes reduces conflict, uncertainty and disengagement.                                                                                                                                                    |
| MCI DOMAINS         | Work and social environment, Psychological distress                                                                                                                                                                                                                                                                   |
| WORKER RECEIVES     | Session guide, 'Claim log' tool, and support toolkit: WorkSafe Queensland: Rehabilitation roles and responsibilities, WorkSafe Queensland: Weekly compensation, WorkCover Queensland, National Debt Helpline, Legal Aid Queensland, Workers' Psychological Support Service, Moneysmart: Budgeting, Services Australia |
| EVIDENCE            | <i>White C, et al. (2019), J Occup Rehabil: addressing social and practical barriers supports reintegration and RTW.</i>                                                                                                                                                                                              |

## Curriculum, rationale and evidence (weeks 7 to 9)

**07 Adjusting expectations and identity**

|                     |                                                                                                                                                                                                                                                   |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Adjustment-to-injury counselling; ACT acceptance and values work; cognitive work on unrealistic recovery expectations; self-compassion strategies.                                                                                                |
| WHY IT SUPPORTS RTW | Unrealistic expectations and frustration with slow progress drive disengagement. Acceptance and values-based action sustain participation and resilience.                                                                                         |
| MCI DOMAINS         | Recovery confidence and engagement, Psychological distress                                                                                                                                                                                        |
| WORKER RECEIVES     | Session guide, 'Values compass' tool, and support toolkit: healthdirect: Grief and loss, Beyond Blue, Medicare Mental Health, Relationships Australia, Lifeline, Workers' Psychological Support Service, MindSpot, Medicare Mental Health Centres |
| EVIDENCE            | <i>Slater D, et al. (2023), Health Psychol Open; Tingulstad A, et al. (2022), Syst Rev: acceptance-based approaches can reduce relapse and improve functioning.</i>                                                                               |

**08 Confidence across life areas**

|                     |                                                                                                                                                                                                                                                           |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Graded exposure to avoided activities; cognitive restructuring; self-efficacy building across life domains; integration with graded activity plan.                                                                                                        |
| WHY IT SUPPORTS RTW | Reduced fear-avoidance and higher self-efficacy increase willingness to attempt suitable duties and sustain return to work.                                                                                                                               |
| MCI DOMAINS         | Recovery confidence and engagement, Fear and catastrophising                                                                                                                                                                                              |
| WORKER RECEIVES     | Session guide, 'Step ladder' tool, and support toolkit: healthdirect: Self-esteem, Beyond Blue, MindSpot, Queensland Health: Understanding pain, Medicare Mental Health, Workers' Psychological Support Service, Medicare Mental Health Centres, Lifeline |
| EVIDENCE            | <i>Tingulstad A, et al. (2022), Syst Rev: self-efficacy predicts RTW; Hlobil H, et al. (2005), J Occup Rehabil: graded activity supports faster RTW.</i>                                                                                                  |

**09 Talking with your employer and returning to work**

|                     |                                                                                                                                                                                                                                                                                                                                                                             |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Assertive communication and rehearsal; structured problem-solving for work barriers; suitable duties planning; employer engagement and workplace planning with consent.                                                                                                                                                                                                     |
| WHY IT SUPPORTS RTW | Workplace involvement and problem-solving with employers are associated with reduced sick leave and improved, durable return to work.                                                                                                                                                                                                                                       |
| MCI DOMAINS         | Work and social environment, Fear and catastrophising                                                                                                                                                                                                                                                                                                                       |
| WORKER RECEIVES     | Session guide, 'Three-line script' tool, and support toolkit: WorkSafe Queensland: Getting back to work, WorkSafe Queensland: Suitable duties, WorkSafe Queensland: Your return to work roadmap, WorkCover Queensland, Workers' Psychological Support Service, Legal Aid Queensland, WorkSafe Queensland: Rehabilitation roles and responsibilities, Medicare Mental Health |
| EVIDENCE            | <i>Eklund A, et al. (2024), BMC Public Health; Tingulstad A, et al. (2022), Syst Rev: work-directed interventions with workplace involvement improve RTW.</i>                                                                                                                                                                                                               |

## Curriculum, rationale and evidence (week 10)

### 10 Maintaining progress: your forward plan

|                     |                                                                                                                                                                                                                      |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CLINICAL APPROACH   | Consolidation of gains; relapse-prevention and setback planning; final MCI and outcomes review; staged return-to-work milestones; handover to ongoing supports; completion report.                                   |
| WHY IT SUPPORTS RTW | Structured transition planning reduces post-return setbacks, clarifies responsibilities and provides measurable closure criteria, improving durability of outcomes.                                                  |
| MCI DOMAINS         | Psychological distress, Pain and physical function, Fear and catastrophising, Work and social environment, Recovery confidence and engagement · <b>MCI check-in</b>                                                  |
| WORKER RECEIVES     | Session guide, 'If-then plan' tool, and support toolkit: Medicare Mental Health, Medicare Mental Health Centres, Beyond Blue, MindSpot, healthdirect, Workers' Psychological Support Service, Lifeline, 1300 MH CALL |
| EVIDENCE            | <i>Tingulstad A, et al. (2022), Syst Rev: planned transitions, follow-up and measurable closure criteria are associated with sustained RTW and fewer relapses.</i>                                                   |

### Key references

Eklund A, et al. (2024). Problem-solving interventions with workplace involvement and sick leave. BMC Public Health.

Hlobil H, et al. (2005). Graded activity for sick-listed workers with low back pain. Journal of Occupational Rehabilitation.

Louw A, et al. (2024). Pain neuroscience education in rehabilitation. International Journal of Sports Physical Therapy.

Ponsford J, et al. (2025). Early vocational rehabilitation after injury. Annals of Physical and Rehabilitation Medicine.

Redeker NS, et al. (2019). Workplace interventions to promote sleep health. Journal of Clinical Sleep Medicine.

Slater D, et al. (2023). Work-focused cognitive behavioural therapy and return to work. Health Psychology Open.

Tingulstad A, et al. (2022). Work-directed interventions and return to work: systematic review. Systematic Reviews.

White C, et al. (2019). Social support and return to work. Journal of Occupational Rehabilitation.

## Free services provided to the worker across the program

Every service below is free or government-funded and can run alongside the claim, extending support between sessions and promoting early help-seeking at no cost to the scheme. Checked October 2026.

### **WorkSafe Queensland: Your return to work roadmap**

The five steps of recovery and return to work, and who does what.

### **WorkSafe Queensland: Rehabilitation roles and responsibilities**

What you, your employer, your doctor and the insurer each do.

### **WorkSafe Queensland: Recovering from injury or illness**

What to expect early in your recovery and rehabilitation.

### **WorkCover Queensland 1300 927 928**

Questions about your claim, payments or entitlements: ask for your case manager.

### **Workers' Psychological Support Service (WPSS) 1800 370 732**

Free, independent social work support for Queensland workers with a work-related psychological injury, and their families. A call-back service, not a crisis line.

### **Medicare Mental Health 1800 595 212**

Free advice and connection to local mental health services. Mon to Fri, 8:30am to 5pm.

### **Medicare Mental Health Centres (Strathpine and Caboolture) 1800 595 212**

Free walk-in mental health support. No appointment, referral or plan needed. Strathpine: 7/327 Gympie Rd. Caboolture: Level 1, 21 Pettigrew St.

### **healthdirect 1800 022 222**

Trusted health information and a 24/7 nurse helpline.

### **Queensland Health: Understanding pain**

Plain-language guides to how pain works and how to manage it.

### **healthdirect: Stress**

What stress does to the body and how to manage it.

### **MindSpot Chronic Pain Course 1800 61 44 34**

Free, clinician-supported online course for adults living with ongoing pain.

### **Queensland Health Persistent Pain Management Services**

Six public, team-based pain services across Queensland. Ask your GP about a referral.

### **healthdirect: Chronic pain**

How ongoing pain works and what helps.

### **MindSpot 1800 61 44 34**

Free online assessment and treatment courses, including the Wellbeing Course for stress, anxiety and low mood.

### **Beyond Blue 1300 22 4636**

Information, strategies and 24/7 counselling by phone or chat.

### **Lifeline 13 11 14**

24/7 crisis support by phone, text (0477 13 11 14) or chat.

### **1300 MH CALL 1300 642 255**

Queensland's 24/7 mental health line: advice, triage and referral to public mental health services.

### **healthdirect: Sleep**

How sleep works and healthy sleep habits.

### **Sleep Health Foundation**

Fact sheets on sleep problems, fatigue and practical solutions.

### **THIS WAY UP Insomnia Program**

Online CBT for insomnia, developed by St Vincent's Hospital Sydney. Free when prescribed by a clinician; ask your GP or counsellor.

### **Better Health Channel: Sleep hygiene**

Step-by-step healthy sleep habits (Victorian Government).

### **WorkSafe Queensland: Weekly compensation**

How weekly payments are worked out while you can't work.

### **National Debt Helpline 1800 007 007**

Free, confidential financial counselling.

### **Legal Aid Queensland 1300 65 11 88**

Free legal information and advice, including about workers' compensation.

### **Moneysmart: Budgeting**

The Australian Government's free budgeting guides and tools.

### **Services Australia**

Check payments you may be eligible for, including crisis payments.

### **healthdirect: Grief and loss**

Adjusting to loss and change: what's normal and what helps.

### **Relationships Australia 1300 364 277**

Counselling and support for relationship and family strain.

### **healthdirect: Self-esteem**

Practical ways to rebuild confidence.

### **WorkSafe Queensland: Getting back to work**

How a safe, staged return to work is planned in Queensland.

### **WorkSafe Queensland: Suitable duties**

How modified or reduced duties work while you recover.

### **MensLine Australia 1300 78 99 78**

24/7 phone and online counselling for men.

### **QLife 1800 184 527**

LGBTIQ+ peer support, 3pm to midnight every day.

### **13YARN 13 92 76**

24/7 crisis support by and for Aboriginal and Torres Strait Islander people.

### **Open Arms 1800 011 046**

Free counselling for veterans and their families.

### **MATES in Construction 1300 642 111**

Support line for construction, mining and energy workers.

### **Carer Gateway 1800 422 737**

Free support, counselling and respite for family members who help care for you.

### **1800RESPECT 1800 737 732**

Support for domestic, family and sexual violence.

### **Translating and Interpreting Service (TIS National) 131 450**

Free interpreter to help you talk with services in your language.

# Roles, consent and quality

## Who does what

**Worker:** attends sessions, completes the MCI and home practice.

**Treating GP and practitioners:** lead medical and psychological treatment and certify capacity; receive session updates.

**WorkCover case manager:** manages the claim; receives progress and completion reports.

**Employer:** provides suitable duties and workplace support, with consent.

**Eclosia:** delivers the program, measures progress and coordinates communication across the team.

## Consent and privacy

Information is shared only with the worker's informed consent and handled in line with the Information Privacy Act 2009 (Qld). Records and MCI data are stored in secure, cloud-based systems hosted onshore in Australia, with encryption and role-based access. Stakeholders receive what they need to coordinate care, never the private detail of what the worker discusses.

## Clinical governance and quality

- Delivered in line with the HWCA Principles of Practice for Workplace Rehabilitation Providers and the Clinical Framework for the Delivery of Health Services.
- Program fidelity through structured curriculum, clinical supervision, monthly internal case review and peer review of complex files.
- Worker and referrer feedback at mid-program and completion, feeding continuous improvement.
- Non-diagnostic and non-crisis: urgent risk is escalated to the treating GP and case manager, and crisis services engaged as needed.



### Davina Williams, Principal Rehabilitation Counsellor

Master of Counselling (Rehabilitation & Mental Health); Full Member, Australian Society of Rehabilitation Counsellors; ACA Level 3 Registered Clinical Supervisor; PACFA Clinical Member. Appointed to the WorkCover Queensland Rehabilitation Services Provider Panel. 2026 ARPA Queensland finalist, Innovation in Return to Work. Creator of Eclosia's Mindful Capacity Index.

## HOW TO REFER

Call **(07) 3608 1355** or email [referrals@eclosia.au](mailto:referrals@eclosia.au) with:

- Worker's name, contact details and claim number
- Treating GP and any other treating practitioners
- Injury type, current capacity and suitable duties (if known)
- Preferred pathway (A, B or C), or ask us to recommend one

We contact the worker within 24 to 48 hours, confirm consent and book the first session. Week 1 includes the MCI baseline, with a summary to you and the treating team.

T08, Serviced Office 7, 23 Discovery Drive, North Lakes QLD 4509 · in person or telehealth across Queensland



Make a referral



Try the MCI demo



**ECLOSIA**  
COUNSELLING & REHABILITATION

(07) 3608 1355

[referrals@eclosia.au](mailto:referrals@eclosia.au) · [eclosia.au](http://eclosia.au)

T08, Serviced Office 7, 23 Discovery Drive, North Lakes QLD 4509

In person at North Lakes and by telehealth across Queensland

RECOVER · REBUILD · RETURN

Mindful Well-Recovery™ is delivered by Eclosia Counselling & Rehabilitation, a trading name of Mindful Building Solutions Pty Ltd, ABN 87 676 783 172. Eclosia is not a crisis service: in an emergency call 000, or Lifeline 13 11 14 (24/7).