Q-COMP®
The Workers' Compensation Regulatory Authority

# Allied health provider guidelines for forms

**Form 032** - Provider Management Plan

**Form 036** - Request for incidental expenses, supportive services or equipment hire

**Form 037** - Job seeking initial consultation report

**Form 038** - Job seeker plan

# Form 032 - Provider Management Plan

## Introduction

The Provider Management Plan (PMP) is designed to provide basic information at a level that keeps the insurer and worker informed on the planned intervention. If the referrer is requesting greater detail or the issues are so significant that the PMP cannot accommodate the required information, then the PMP may not be the appropriate form. A report where outcomes and barriers can be better detailed may be more appropriate.

The PMP is applicable to:
- Chiropractors
- Exercise physiologists
- Occupational therapists
- Oesteopaths
- Physiotherapists
- Podiatrists
- Psychologists
- Speech pathologists
- other providers where prior approval is requested

The PMP is to be completed:
- towards the completion of the pre-approved sessions if further treatment is required
- towards the completion of approved sessions if further treatment is required
- by any provider after initial consultation where prior approval is required before treatment is provided.

Please forward the PMP to the insurer promptly so that their approval or otherwise of future sessions does not interrupt continued treatment. Submitting other PMP should be done in the Insurer's preferred method eg: phone, fax or email.

Provide copies of the PMP to the:
- insurer
- worker—if the worker is to sign the PMP
- referring medical practitioner, if appropriate.

Make sure you keep a copy for your records.

## Guidelines for completing the Provider Management Plan

The following guidelines will assist you in completing the relevant fields in the Provider Management Plan. Examples are provided for a physical injury as well as a psychological injury.

Complete worker's details and Provider Management Plan details.

## Treatment plan and predicted return to work status.

List details of treatment procedures currently being provided (including specifi c modalities) and those that you anticipate will be required in the near future. Use abbreviations like STM (soft tissue mobilisation); HEP (home exercise program); U/S (ultrasound); MOBS (mobilisation); Tx (traction); C/S (cervical spine); T/S (thoracic spine) and L/S (lumbar spine) where possible.

You should design the treatment to achieve the expected outcomes and to be consistent with the expected management of the injury sustained.

| Treatment plan | Treatment plan |
|---|---|
| Gym strengthening program. Recommend work bench modification to suit worker. Commence suitable duties. | Educate on PTSD, teach relaxation techniques, behaviours to address fear & depression, graduate exposure to workplace. |

*Sample treatment plans for a physical injury and a psychological injury.*

## Type and number of consultations being provided

Refer to the appropriate table of costs for the item number services.

## Outcome measures used to assess and monitor worker's progress throughout treatment period

### Outcome measures

The outcome measure must be relevant to the compensated injury as these can guide clinical reasoning and assist in evaluating the worker's progress. The outcome measures identifi ed will assist the insurer to determine the reasonable necessity of proposed management.

Outcome measures should be:

- reliable, valid and sensitive to change
- described in specific terms
- quantifiable or measurable
- time-referenced wherever possible
- relevant to the worker's injury
- relevant to the outcome of intervention.
- The outcome measures are reported as:
- Measures (at initial assessment) – where were they?—provide objective measures relating to outcome measure at the time of initial consultation
- Current measures (at commencement of this plan) – where are they now?—the current objective measures

relating to outcome measure at the date of developing this plan

- Anticipated outcomes (at end of current plan) – where will they be?—detail what you anticipate will be achieved at the conclusion of this plan.

**Outcome measures used to assess and monitor worker's progress throughout treatment period**

| Outcome measures | Measures (at initial assessment) | Current measures (at beginning of plan) | Anticipated outcomes (at end of current plan) |
|---|---|---|---|
| Pain inventory | 9/10 at rest | 5/10 with activity | 1/10 with activity |
| Standing tolerance | 2 minutes | 1 hour | 3 hours |
| DASS | Moderate | Moderate | Mild |

*Sample outcome measures for physical and psychological injuries*

## Identified barriers to return to work and recommended strategies to overcome barriers

### Barriers

Outline any identified barrier/s to return to work that may impact on your proposed treatment— for example, the worker's fear of re-injury, lack of available suitable duties at the workplace or an ergonomic issue.

### Recommended strategies

If you are able, indicate what strategies might overcome the barriers. These may not necessarily refer to your particular discipline—it may be a suggestion to refer to another discipline for assessment/ treatment.

**Physical injury example:** you are treating a factory line worker for a back injury but you are aware that the work heights at their workplace are too low and may be the source of ongoing aggravation to their back. If left unaddressed this may impact on the effectiveness of your treatment of their back condition, therefore it may be appropriate to recommend a worksite assessment to ensure work heights are appropriate.

**Identified barriers to return to work and recommended strategies to overcome barriers**

| Barriers | Recommended strategies |
|---|---|
| Bench height too low | Modify work bench to suit worker |
| | |

**Psychological injury example:** you are treating a worker for workplace bullying and become aware that the supervisor has not addressed the situation with the bully. The worker will be returning to the same work situation, which left unaddressed will impact on the effectiveness of your treatment. It may be appropriate to recommend a workplace meeting with the supervisor to coach/recommend processes to address the situation before your client returns.

**Identified barriers to return to work and recommended strategies to overcome barriers**

| Barriers | Recommended strategies |
|---|---|
| Avoidant behaviours | Hierarchical de-sensitisation |
| | |

## Worker's consent

Ensure that the worker understands their injury, the type of treatment to be undertaken, timeframes and most importantly, the expectations of the treatment. Information assists the worker to understand their injury and its management, make choices, overcome unhelpful beliefs and modify behaviour. It is recommended that the worker sign the form once they understand what is expected of them, however it is not compulsury.

# Form 036 - Request for incidental expenses, supportive devices or equipment hire

**Introduction**

Use form 36 to request approval from the insurer for:

- incidental expenses exceeding $50.00 per claim
- supportive devices exceeding $100.00 per claim
- the hire of equipment to workers

**What is considered a supportive device?**

Reasonable supportive devices are those that can be shown to be necessary for successful treatment of the compensable injure (e.g. splinting material, prefabricated splints and braces).

**What is considered hire equipment?**

Equipment items considered clinically necessary to assist the worker to recover but are not necessary for long term recovery. This can also be used where the loan of the equipment is more cost effective than purchasing the equipment for the worker (e.g. crutches or wheelchair hire).

**Incidental expense / supportive device details**

Detail incidental expenses and/or supportive devices which exceed the pre-approved amount payable for each claim. Check with the individual insurer for the types of incidental/supportive devices they will approve. (Note: this form is not required for any of the podiatry items listed in the *Podiatry services table of costs*).

**Equipment hire details**

Detail the equipment to be hired by the injured worker.

# Form 037 - Job seeking initial consultaiton report

## Introduction

Use this form when you are assisting a worker to identify transferable skills for a new job/career or host placement. It involves the development of a vocational preparation action plan with the worker.

## Aim

The aim of the job seeking initial consultation report is to:

- identify transferable skills
- identify current job market opportunities
- set realistic work goals.

## Guidelines for completing the job seeking initial consultation report

### General Information

An initial job seeking consultation is indicated when the worker:

- cannot return to their pre-injury work and there are no suitable duties or alternative career/job options with their current employer
- needs assistance to identify sustainable alternative work options suited to their functional abilities and skills
- needs to undertake a host employment placement and requires initial guidance and preparation.

### Reason for referral to job seeking initial consultation

Document the reason for the insurer's request here. If you are unclear as to why the insurer requires the consultation, clarify this prior to contact with the worker.

### Sources of medical information relied upon for this report (e.g. medical reports)

Document contact you have had with the treating medical practitioner or allied health provider or any reports you have had access to in formulating your opinion.

### Worker's injury condition

Document any medical restrictions for the worker. This information may come from medical reports or from communication with the medical practitioner or allied health provider. Information may include medical restrictions, impact of injury, functional abilities and tolerances.

### Worker's perspective of factors impacting on return to work

Note any concerns or expectations the worker has about returning to work. This may include:

- how the injury has impacted on the worker—such as their understanding of their current injury/ condition and their perception of their capacity to return to work
- motivation to return to work
- issues related to home and family situation and other pressures
- social impact of the injury
- worker's lifestyle post-injury
- their attitude to their previous employer (at the time of injury) and/or finding a new job.

### Worker's literacy

Where relevant, comment on reading and writing abilities. Make reference to the worker's first language. If their first language is not English, comment on their participation in any English or literacy courses.

### Worker's current education/qualifications

Document the worker's qualifications from formal schooling, any courses attended and any licences obtained such as forklift and truck.

### Worker's employment history

Starting with the most recent job, document the job title, employer/company's name, type of duties (physical and psychological demands of the job as advised by the worker) and employment period (where possible, dates of employment and minimum length of employment with each employer).

### Worker's job interests

List the worker's interests, skills and hobbies. This will assist to clarify other skills and interests the worker may have developed outside of the work situation that can be used in expanding job options.

### Identification of suitable employment options

Recommend suitable employment options after considering the worker's job interests, transferable skills and education level. Base vocational options on objective marketplace analysis—include job opportunities in the worker's residential area and evidence provided via two local options such as the worker's local newspaper and job website. Ensure that the identified work options are realistic and achievable considering the worker's skills, location and access to chosen occupational pathways.

### Worker's access to transport

Consider issues such as the worker's access to transport, travelling time, mode and distance as it assists to identify suitable employment options.

### Occupational details

Following consideration of all available information, nominate the jobs the workers is most suited to under occupational details in order of priority. List why these occupations are achievable and why they match the worker's transferable skills/abilities.

### Labour market analysis

The availability of the jobs listed must be tested through a labour market analysis relevant to the worker and where the worker resides. You must provide a detailed analysis of the labour market demonstrating the availability of suitable jobs in the local area from at least two sources—for example the web, newspapers.

# Form 038 - Job seeker plan

**Introduction**

Use form 38 in consultation with the worker when you are assisting a worker to seek employment

**Aim**

The aim of the job seeker plan is to:
- document a plan of action for seeking employment
- have the worker take responsibility for the plan

## Completing the job seeker plan

**A job seeker plan is used to:**

- outline suitable employment option goals for the worker (these options may have been previously identified in the job seeking initial consultation report).
- outline the actions agreed between the provider and the worker to achieve a return to work

**Details**

Insert worker and provider's contact details.
The date the job seeker plan commenced and the expected completion date.

**Suitable employment option goals**

List the suitable employment option goals that are realistic and have been agreed to by both the worker and the provider.

**The job seeker plan**

List all of the actions required to return to the suitable employment option goals.
Detail who is to complete the actions listed (either the worker or the provider)
Insert the completion date for each action as they are completed

**Worker's agreement**

Ensure that the worker understands the plan and the actions that are required to achieve the employment option goals. It is recommended that the worker sign the form to indicate their understanding and agreement of the plan and the actions they are expected to carry out.