

# **Feedback on the Return to Work Services fee schedule**

**5 February 2014**

**Presented to WorkCover SA**

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Dear Marcia

Thank you for the opportunity to respond further to the *WorkCoverSA Return to work services fee schedule*.

On behalf of the Australian Physiotherapy Association (APA) SA Branch, we acknowledge that WorkCoverSA have already received our initial feedback verbally on the proposed model and also provided the APA with an opportunity to present an alternative model. We acknowledge your response to our submission, dated 28 Jan 2014, advising that WorkCoverSA has chosen not to adopt the model presented by the APA.

On the understanding that WorkCoverSA is now proceeding to implement the model as presented in the *Return to work services fee schedule Draft 7*, the APA restates its position that we do not support the new model. Our concerns include:

- The success fee model has potential to conflict with ethical obligations of physiotherapists
- Complex or difficult cases may be disadvantaged by service caps and outcome fees.

Notwithstanding, we wish to provide feedback on specific parts of the proposed draft 7 model and make the following comments:

**WorkCoverSA Return to work services fee schedule:**

**1. PIE referral criteria:**

The 2nd criterion that must be met to permit a referral states: "*the worker is not expected to return to pre-injury duties and/or pre-injury hours within 4 weeks without workplace rehab provider assistance*". The double negative in this criterion has already caused problems. If a claims manager determines that a worker does need rehabilitation but that return to pre injury duties/hours will take more than 4 weeks, they are not permitted to refer. The APA would suggest a change to this wording to permit referrals to occur in this situation.

**2. Return to work assessment services:**

The APA strongly believes that Return to work assessment services, at any stage of a return to work, must be provided by medical experts – i.e. physiotherapists, occupational therapists or psychologists. These assessments require the consultant to assess the worker's capacity and match this to the demands of the proposed job/s.

Physiotherapists and occupational therapists are the only medical experts who have the knowledge and skills to complete this process when the primary injury is a physical one. This evaluation requires an understanding of normal physiology and biomechanics, the effect pathology has on physiology and biomechanics, the impact of these changes on function, and the link between function and work tasks. Even when the return to work assessment is completed as part of a PIE service, that part of the service must be conducted by a medical expert.

### 3. RTW assessment services capped times:

The APA believes that the service descriptors for these services should include a statement indicating that the capped time frames are guides, and can be increased in consultation with the case manager.

### 4. Ownership of files:

Given WorkCoverSA's response that Return to Work Assessment Services will be provided under the workplace rehab provider system, we seek to clarify who owns, and is therefore responsible for maintenance/archiving of the files for these services. As files contain confidential medical information as medical records, we seek to clarify how physiotherapists will continue to comply with *The Physiotherapy Board of Australia's Code of Conduct for Registered Health Practitioners* specifically *Section 3.4 Confidentiality and Privacy*, in addition to the legal requirements for medical record storage and management (including confidentiality) that are required by the practitioners' medico-legal insurers. The APA asserts that registered practitioners own all their files, and are therefore responsible for the maintenance/archiving of all files for these services. We seek confirmation of this under the new arrangements.

### 5. Registration process:

The APA is awaiting further information on how WorkCoverSA is streamlining the registration process to ensure physiotherapists, occupational therapists and psychologists can continue to provide RTW services.

### 6. Service descriptors

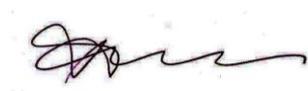
The APA requests that WorkCoverSA develops clear service descriptors and guidelines for each item to ensure consistency of services and practitioner compliance with the proposed new service delivery model. Previous service descriptors (Physiotherapy) have served both as guidelines for expected levels of service for practitioners and for compliance reference standards for case managers and WorkCoverSA.

### 7. Education on changes

The APA request that WorkCoverSA develops and delivers an education program to advise physiotherapists of the changes and what they need to do to operate in the new model and comply with WorkCoverSA requirements. Given the magnitude of the proposed changes and the effects their implementation will have on many physiotherapy businesses, we see this as essential.

We understand that some of the proposals the APA presented under its alternative model may yet be included in this Schedule. Should WorkCoverSA wish to discuss any of these items in greater detail, we would be happy to meet.

Yours sincerely



Paul Wilcock  
APA(SA President)