

20 November 2020

Regulatory requirements for workplace rehabilitation service provision in NSW personal injury schemes consultation
SIRA
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2-24 Rawson Place Sydney NSW 2001

Via email: consultation@sira.nsw.gov.au

Thank you for the opportunity to respond to SIRA's consultation on the Regulatory requirements for workplace rehabilitation service provision in NSW personal injury schemes. Suncorp provides workers compensation under the GIO brand, and compulsory third party (CTP) insurance under the Suncorp, GIO and AAMI brands across different states in Australia.

We believe that effective workplace rehabilitation practices are essential in assisting people return to work and return to life after an injury. We look forward to collaborating with SIRA and scheme participants to develop the service provisions further, and have addressed the consultation's questions as per below.

Question 1: In the current landscape, are there aspects of the WC or CTP schemes that should be extended to the other scheme to optimise WR service provision?

The Heads of Workers Compensation Authorities (HWCA) Principles of Practice for Workplace Rehabilitation Providers¹ and subsequent NSW Supplement to the Guide² provide strong guidance for the role of WR in the WC scheme. In the WC scheme rehabilitation providers have an understanding of their role, provide quality stakeholder engagement and support outcomes³ with their active engagement in returning people safely to the workplace post injury.

Extending the HWCA Principles and the NSW Supplement to the CTP scheme would align the role of rehabilitation providers across personal injury recovery schemes, define role expectations and encourage strategic pathways with a strong focus on return to work/life to assist people in the recovery from injury.

Works trials could also benefit injured road users' recovery, as has been proven in WC schemes. Work trials provide a safety net to employers who elect to take on employees recovering from injury, supporting the role of rehabilitation providers on a trial basis.

Question 2: Do we have the breadth of WR services, interventions and supports required for optimal recovery and RTW outcomes for injured people in NSW?

Yes. Generally, NSW has excellent medical, psychology, physiotherapy, exercise physiology and rehabilitation resources available to support recover of injured workers and road users. WR providers understand the needs of individualised treatment and the intricacies of recovery and through face to face contact with injured parties gain an understanding of where the current gaps are in assisting people with recovery.

Extending the Principles and the Supplement would provide greater clarity and policy direction from the Regulator on their expectations and stronger partnership to manage this moving forward.

¹ Principles of Practice for Workplace Rehabilitation Providers (2019), Heads of Workers' Compensation Authorities

² <u>NSW Supplement to the Guide: Nationally consistent approval framework for workplace rehabilitation providers</u> (2019) State Insurance Regulatory Authority

³ See Realising the Health Benefits of Good Work Consensus Statement

Question 3: What would be the best approach to building capability in WR service provision?

New rehabilitation providers in WC are supported by formal qualifications, internal training programs and specific on the job training prior to taking on WR duties. For example, to deliver a Workplace Assessment a WR provider must be either a registered occupational therapist, a registered physiotherapist or an exercise physiologist accredited with Exercise & Sports Science Australia (ESSA). Further, the rehabilitation consultant must have at least 12 months experience delivering workplace and/or functional assessments, or work under the supervision of a consultant who meets these requirements.

For CTP WR providers, these measures could supported by extension of the Principles and Supplement for CTP. A scheme for ongoing accreditation to stay up to date with best practice and demonstrated competencies could be developed for a defined period.

Question 4: How do we promote best practice and continued innovation in WR service provision in NSW?

Recognising that workers compensation and CTP injuries are different, WR providers in the CTP scheme will need a period of adjustment as it is not always apparent to providers the differences between the schemes. One way to support continual improvement, would be the recognition of innovation for the cooperation of insurers and WR providers to pilot and test new recovery propositions with a view implementing successful initiatives across personal injury schemes.

Question 5: How do we most effectively measure outcomes associated with WR?

Standard measurements such as claims' cost, duration and closure outcomes continue to be important and effective measurements and should be standardised across WR in personal injury schemes. It is also important to note that the CTP scheme is a privately underwritten scheme with participation of 5 separate insurers. As such it may be beneficial for SIRA to clarify its expectations (policy or otherwise) in this area to promote consistency across the industry, and to avoid individual insurer having different measured outcomes.

As discussed in SIRA's consultation on Health Outcomes Framework, in addition to these standard measurements the voice of the customer collected through Patient Reported Outcome Measures (PROMS) are equally valuable. Standardising PROMs across schemes would give further insight into incremental changes and improvements to an injured person's life while giving a unique insight into the state of personal recovery that may otherwise not be captured elsewhere.

Question 6: How can we drive value – as articulated in the SIRA Health Outcomes Framework – for WR in NSW personal injury schemes?

As articulated in the SIRA Health Outcome Framework ('the Framework') consultation, value-based care is the best approach for the claimant receiving high standards of care that is both evidence-based and person-centric thus providing value for the customer. SIRA could focus on the following activities:

- 1) **Determine which outcomes the scheme will focus on:** Initially, SIRA should nominate defined areas of impact to measure the effectiveness of the Framework's implementation. This could be high-incidence injuries such as musculoskeletal or whiplash. This will give participants the change to refine the PROMs model before extending to other injuries or cohorts of interest.
- 2) **Design for value-based payments:** SIRA should engage with insurers and industry bodies such as the Australian Rehabilitation Providers Association (ARPA) to design the appropriate value-based payment model defining treatment episodes and the costs associated with treatments. Priority should be given to the 'high volume low complexity' claims for value-based payment models where treatment requirements are more predictable.
- 3) **Organisational change:** SIRA should not underestimate the extensive change management that will be required for scheme participants to introduce the Framework. Against the backdrop of COVID-19 and the impact



it has had on health delivery, the change management process will be more complex than normal. An open dialogue and safe environment for all scheme participants to discuss potential change processes and practices will promote a test and learn approach, which will ultimately drive a better model.

- 4) **Consumer engagement:** SIRA's support of value-based care through communication to CTP stakeholders will support the adoption. Informed end-users will enable the value-based care models and providing transparency to claimants and their providers. Communicating the Framework and its health philosophy should engender greater trust between the injured and the participants managing the episode of care.
- 5) **IT provider partnerships**: An agnostic approach to the software platforms and technologies for the value-based care model should lower the barriers of entry for participants. Once data-standards are defined, the participants should be free to seek technologies that meet these objectives.
- 6) **Ongoing evaluation** Ongoing research and evaluation programs must evaluate the implementation of a value-based care initiative.

Question 7: What elements does a policy framework need to drive quality, innovation, capability and outcomes in WR in NSW?

A policy framework could extend the Principles and redesign SIRA's Supplement for WR providers to include CTP claims. This extension and redesign would implement clear rules and accountabilities, to provide certainty. By defining the role of WR's and insurers across CTP and WC the policy framework would reduce any confusion of duties or unclear WR pathways and strengthen quality of service.

The extension could also be used as an opportunity to strengthen capability by reinforcing the current formal qualifications, and specific on-the-job training WR providers receive as well as ongoing accreditation to stay up to date with best practice. An innovation pathway built into the extended Supplement would allow WR providers to partner with insurers to workshop, pilot and test innovative recovery propositions.

Introducing a PROMs framework that complements existing performance metrics would create further insight into the quality of service being offered by WR providers. For example, while measuring personal recovery and incremental but important outcomes such as increased sleep quality or a decrease in fear avoidance that is otherwise not measured.

Further Collaboration

We would welcome the opportunity for further discussion, facilitated by SIRA, with other stakeholders about the design and adoption of the policy framework or the extension and redesign of the Principles and the Supplement.

Thank you for the opportunity to contribute to this consultation. If you have any questions, or would discuss any issue further, please feel free to contact me by email	I like to or by phone
Kind regards	
Suncorp Group	

