

# Allied health treatment request

## Explanatory notes



State Insurance  
Regulatory Authority

### Introduction

This explanatory note provides guidance for allied health practitioners on completing the allied health treatment request. It explains the purpose and requirements of each section of the form.

An allied health treatment request should be initiated and completed in full by you as the treating allied health practitioner to request approval for treatment services for an injured person.

You submit the request to the injured person's insurer.

It is important the injured person is actively involved in the development of their own recovery goals and also that they understand their diagnosis and the likely outcomes and timeframes of their recovery.

### Diagnosis

- Provide your clinical diagnosis of the injury related to your scope of practice and based on your assessment of the person on the day you complete the form.
- Specify the anatomical site involved, e.g.
  - **Use:** 'right cervical musculoligamentous injury'
  - **Do not use:** 'neck pain',
  - **Use:** 'fractured left tibial plateau'
  - **Do not use:** 'knee pain'.
- Your working diagnosis may differ from the certifying doctor's diagnosis. This information will assist the insurer by highlighting the need to clarify the diagnosis.

### Objective Measures

#### Standardised Outcome Measures

Standardised Outcome Measures (SOMs) are tools to assess a person's current or future health status and demonstrate effectiveness of treatment.

- Choose outcome measures that are reliable, valid and sensitive to change. They should relate to the person's injury, the functional goals of your treatment and the functional demands of the person's pre-injury duties and/or activities.
- Your regular measurement of outcomes provides ongoing information about the person's health status and the effectiveness of your intervention.
- Reporting outcome measures is integral to justifying your treatment request.

#### Screening of risk factors to recovery

The **early identification** of risk factors across the biological, psychological and social domains is important during the assessment phase as it informs and guides your treatment.

- You should use the screening tool and/or SOM most relevant to the worker's clinical presentation.
- Use the scores from screening to generate discussion with the injured person about the factors that may increase the risks of delayed recovery and ways to address them.

#### Where to find SOMs and screening tools?

A range of standardised outcome measures and screening tools can be found from the following sources:

- Resources relevant to whiplash associated disorders can be found at SIRA's treatment advice centre at: [www.sira.nsw.gov.au/for-service-providers/treatment-advice-centre](http://www.sira.nsw.gov.au/for-service-providers/treatment-advice-centre)
- WorkSafe Victoria have an outcome measures page that provides a range of screening and SOM tools which can be easily accessed at: [www.worksafe.vic.gov.au/outcome-measures](http://www.worksafe.vic.gov.au/outcome-measures)

## **Issues/Risks**

### **What are they and how can you assist?**

- Please indicate any physical, psychological, social or other factors that may be a current issue or a risk that may impact recovery or return to work. Issues/risks may include noncompliance with self-management or treatment.
- It is important you follow up with strategies to address issues and/or risks when identified.
- Strategies may include specific tailoring of your treatment approach to address the barriers and/or recommendations you may have for ways the insurer or other treating practitioners may be able to assist e.g. referral to other services.
- If you are going to share any personal information not directly related to the compensable injury, you should obtain consent from the injured person.

### **Any other reasons for delays to recovery?**

- You should explain why previous goals were not met for this injury (if applicable). This will help the insurer understand why progress may have been delayed.

### **What about an independent consultant?**

- You can request a discussion with an independent consultant to overcome barriers and progress the persons recovery.
- Independent consultants are only available in the workers compensation scheme.
- The insurer will arrange this referral.

### **What about medication?**

- If you consider the injured person's current medication may be an issue, please document why. You may wish to discuss this with the treating doctor.

## **Your recommended recovery plan**

### **Injured person goals**

- You should undertake early and collaborative goal setting with the injured person to ensure you are focused on common objectives to achieve recovery. Collaborative goal setting also empowers the person to manage their own recovery.
- Goals should focus on measurable improvements in function and activity at home, work and in the community.
- Goals should be specific, measurable, achievable, relevant and timed (SMART). Ensure you estimate timeframes for the person to achieve their goals. E.g. To return to my usual job as a retail assistant by 4 August; To drive for an hour to my parent's home by 6 July; To return to training my kid's soccer team by 3 October; To hang washing on the line by 5 February.

### **Injured person self-management**

- Empowering the person to self-manage their injury is a key treatment strategy and is essential to recovery.
- You should encourage the injured person to use strategies to control their symptoms and learn to function despite their symptoms. E.g. home exercise program, activity scheduling, pacing, establishing a sleep routine.

- As recovery progresses, active strategies that support self-management should increase and passive strategies decrease.

#### **Provider intervention**

- Document the treatment interventions you intend to use to achieve the injured person's work and/or activity goals. Your treatment should be based on the best available evidence.
- Provide start and end dates for this recovery plan.
- Include an anticipated total number of sessions prior to discharge (include *all* consultations from when you first saw the person for this injury and any proposed consultations prior to discharge).
- Include an anticipated discharge date. Establishing a discharge date demonstrates your treatment is focused on the injured person becoming independent in managing their condition.

#### **Services requested**

- State the type of service, number of consultations and frequency/ timeframe for delivery of the services requested. The services requested should reflect the provider intervention in the Recovery plan.
- Explain your rationale for requesting these services. This will help the insurer make a decision.

#### **Insurer decision**

- The insurer will complete this section and return to you and /or the injured person. The insurer will outline any reasons for declining services or approving some services only.
- The insurer will also send more detailed written communication (as required by the legislation) in circumstances where not all requested services have been approved.
- The insurer may also use this section to request more information from you to assist their decision making. They are still required to make a decision within the legislated timeframes for each scheme, even when additional information has been requested.

#### **Want more information?**

Please refer to the *Clinical Framework For the Delivery of Health Services* at <https://www.sira.nsw.gov.au/for-service-providers/treatment-advice-centre/clinical-framework>

Note the principles of the Clinical Framework are demonstrated through completion of specific sections of the Allied Health Treatment Request:

- Principle 1 – Measure and demonstrate the effectiveness of treatment – ‘Objective Measures’
- Principle 2 – Adopt a biopsychosocial approach – ‘Risk screening’ and ‘Issues/risks to progress’
- Principle 3 – Empower the injured person to manage their injury – ‘Your recommended recovery plan’ and ‘Injured person’s self-management’
- Principle 4 – Implement goals focused on optimising function, participation and return to work – ‘Your recommended recovery plan’
- Principle 5 - Base treatment on the best available research evidence – ‘Provider intervention’ and ‘Services you are requestion’ including ‘Rationale for services requested’.