

**APA Submission on Revised workers compensation
guidelines for allied health treatment and hearing
service provision**

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Authorised by:

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Introduction

The Australian Physiotherapy Association (APA) is pleased to provide this submission to the review of regulatory requirements for healthcare arrangements in the NSW Workers Compensation and CTP Schemes.

The APA has taken into account the draft consultation paper, “Workers compensation guidelines for allied health treatment and hearing service provision” and compliment SIRA is the open approach to engagement and submissions.

APA recognises that sensible reform is required to deliver favourable return to work and recovery outcomes.

Physiotherapy has further potential, as yet unused within NSW CTP insurance and Workers Compensation schemes, to achieve this. Physiotherapists are key personnel in managing the physical needs of compensable clients and are well positioned to certify and facilitate return to work¹.

Research shows that physiotherapists:

- Are well placed to facilitate return to work because they have a good understanding of worker’s functional status and requirements of work roles and set goals to increase functional capabilities;
- Influence recovery and self-management strategies;
- Have a high level of evidence-based medicine; and
- Have an improved ability to implement a biopsychosocial approach.

The following is the data provided by SIRA on medical spend:

- Health care costs are rising. Medical spend represents more than 30% of the cost of NSW CTP and WC schemes, and continued growth could pose a risk to workers compensation scheme sustainability
- Current data collections do not contain sufficient information to analyse health outcomes within the schemes
- The WC scheme is undergoing faster medical spend growth, particularly in recent years, than either Private Health Insurers in NSW, or Medicare.
Percentage change in costs year on year

¹ Gosling C, Keating J, Iles R, Morgan P, Hopmans R. Strategies to enable physiotherapists to promote timely return to work following injury. Melbourne: ISCRR and Monash University; 2015. p.1-170.

Executive Summary

The following summary points would be the summary of the recommendations from the APA:

- The APA is supportive of the proposed establishment of a consistent framework for transition of currently approved providers and the appointment of new providers for a three year term of approval
- The APA is equally supportive of the proposed framework to address provider non-compliance
- The APA encourages SIRA to think beyond their role of just 'policing' the approving and non-approving of Allied Health Practitioners (AHPs) and rather be actively involved in encouraging, supporting and mentoring of all AHP's to assist with positive behavioural change which drive positive scheme outcomes across both schemes.
- The APA believes that significant merit would exist for the coalescing of continued AHP approval with evidence from the AHP of progressive increase of competencies associated with scheme and health outcomes. Central to this would be general training in line with best practice within compensable environments (see Recommendation 1)
- The APA additionally believes that beyond generalised standards, individualised training/mentoring of AHP's to establish greater consistencies amongst all AHP's (similar to the RTW SA model) would be highly beneficial. This would be seen as paramount where evidence of outlier behaviour exists (see Recommendation 2)

The APA is supportive of models of care which incentivise optimal, patient centred and outcome focused care and support. Currently, the incentives to provide a high level of service and hence, provide high quality do not exist.

Terms of reference

The APA has noted the discussion paper of July 2020 and compliments SIRA for taking a broad collaborative approach to a wide range of topics with stakeholders.

The APA has structured the response around the discussion paper and provided input for future considerations around improving impacts of health care providers on clients covered under the SIRA schemes.

Recommendation 1- Broad based training approaches

The APA recommend that SIRA commence a broader education strategy and engage with the Allied Health practitioners to deliver a range of training and educational materials that help provide awareness and knowledge of the scheme and working to best assist the injured person.

This approach could be used to build on base competencies developed in the initial SIRA/ PIEF training and assist with a cumulative development of understanding of more contemporary issues relevant to the schemes, recovery at work initiatives and strategies, and developing an injured person-centered care model. SIRA could consider that as part of ongoing renewal of the approval, the AHP must show continued development of competencies during each 3 year approval period. Consideration could additionally be given that the attainment of higher standards by AHP's and the potential drawing in of an advanced caliber of AHP's to both schemes who are delivering high value care would be commensurately rewarded. SIRA may consider the role the APA could play in self-regulation of this.

Associating AHP approval with the next level or educational training, offers some excellent opportunities for SIRA to work collaboratively with healthcare providers. It also helps to provide some much needed education and awareness on the scheme for stakeholders. There currently exists a number of training modules which have been designed to help provide an understanding of what best practice service delivery looks like. The APA recommends the following aspects of training modules be considered:

- A refresh on the clinical framework as a model of treatment planning.
- The use of risk stratification and outcome measures and how to put these into practice.
- Return to work conversations and communications around this.
- Complex patient management
- Case Studies

The ability to engage with Peak bodies will maximize the impact of these training modules. The ability to be able to associate training modules with a variety of incentives, such as CPD points and access to a wider range of fee schedules could also be considered in the behavioral economic considerations.

Recommendation 2- Individual practitioner approaches

The APA would also recommend consideration by SIRA to associate AHP approval where necessary with more individualised upskilling of allied health practitioners to ensure greater consistency across all providers. This would be seen as paramount when deficiencies are identified or outlier behaviour is present. Equally it would be important for SIRA to be acknowledging exemplary allied health practitioner behaviour when identified.

The APA could see that this would create a better brand awareness and a more positive image between SIRA and allied health practitioners and move on from SIRA being regarded solely as the 'regulator' of the scheme.

Central to this could be the engagement of an Allied Health Practitioner 'liaison' person such as utilised in the RTW SA model to provide individualised education, assistance and mentoring to AHP's to further develop skills to assist with the management of injured persons in both the WC and CTP schemes.

Conclusion

The APA is committed to improving the value of the health system. Physiotherapists constitute a valuable resource which is being utilised in many countries to streamline services and make them more efficient and cost-effective.

We would welcome the opportunity to provide evidence to the Committee and to work with the Committee and other stakeholders on the reforms that emerge.

About the APA

The APA vision is that all Australians will have access to quality physiotherapy, when and where required, to optimise health and wellbeing.

The APA is the peak body representing the interests of Australian physiotherapists and their patients. It is a national organisation with state and territory branches and specialty subgroups. The APA represents more than 23,000 members who conduct more than 23 million consultations each year.

The APA corporate structure is one of a company limited by guarantee. The APA is governed by a Board of Directors elected by representatives of all stakeholder groups within the Association.