

OPERATIONAL STANDARDS FOR REHABILITATION PROGRAM PROVIDERS

In this determination:

“employee” has the same meaning as in section 5 of the *Safety, Rehabilitation and Compensation Act 1988*

“provider” means a person (including a partnership or company) who has been approved as a rehabilitation program provider under subsection 34F(1) of the *Safety, Rehabilitation and Compensation Act 1988* or has had such approval renewed under subsection 34L(1) of the Act

“rehabilitation authority” has the same meaning as in section 4 of the *Safety, Rehabilitation and Compensation Act 1988*

“relevant authority” has the same meaning as in section 4 of the *Safety, Rehabilitation and Compensation Act 1988*

“approval period” means the interval between renewal dates as determined by the Minister under section 34 of the *Safety, Rehabilitation and Compensation Act 1988*. These operational standards are applicable during the approval period commencing on 1 July 2004 and ending on 30 June 2007.

Explanatory Note

Comcare has developed a model of occupational rehabilitation to assist employers to meet their responsibilities under the Act. Effective occupational rehabilitation is a managed process combining early intervention with appropriate, adequate and timely services based on the assessed needs of the individual. In determining the operational standards to be complied with by all persons who are approved as rehabilitation program providers Comcare has established outcome and service standards. These standards relate to the effectiveness, availability and cost measures that an approved rehabilitation program provider is required to meet. These standards are designed to balance a range of performance indicators, both qualitative and quantitative, that consider issues of efficiency, effectiveness and quality.

Outcome Standards

These Outcome Standards apply in relation to all rehabilitation programs completed by the provider in the approval period.

Outcome Standard 1 – Return to Work Rate

1. The provider shall achieve a return to work rate of 90%.

Outcome Standard 2 – Duration of Return to Work Plans

2. The provider's median duration of return to work plans shall not exceed eighteen weeks.

Outcome Standard 3 – Cost of Return to Work Plans

3. The provider's median cost of return to work plans shall not exceed \$1590.

Service Standards

Service Standard 1 - Service Philosophy

- 1.1 A provider must develop and maintain a service philosophy that:
 - (a) reflects the requirements and intent of the Safety, Rehabilitation and Compensation Act 1988 and the policy guidelines and procedures that may be issued by the Commission or Comcare from time to time; and
 - (b) incorporates the key principles of occupational rehabilitation.
- 1.2 In providing rehabilitation services, a provider must focus on the following objectives:
 - (a) early intervention and assessment;
 - (b) employee involvement in the development of the return to work plan;
 - (c) returning the employee to the same, modified or a different job with the original employer;
 - (d) coordination of the return to work plan with all key stakeholders;
 - (e) an assessment and planning process which is workplace focussed; and
 - (f) return to work plans that are outcome based.
- 1.3 A provider must ensure that no conflict of interest arises when providing rehabilitation services. Specifically, treatment and occupational rehabilitation services must not be provided to the same individual.
- 1.4 A provider must ensure that the provider:
 - (a) complies with the Commonwealth *Privacy Act 1988*;
 - (b) abides by the *Information Privacy Principles, National Privacy Principles* or any Approved Privacy Code under that Act as applicable; and

- (c) where necessary, maintains registration on the *Register of Businesses That Have Opted into Coverage by the National Privacy Principles* maintained by the Privacy Commissioner.

Service Standard 2 – Return to Work Management

Early Intervention

- 2.1 A provider must ensure the timely acknowledgment, acceptance and recording of referrals for assessment of an employee’s capability of undertaking a rehabilitation program.
- 2.2 A provider must ensure contact with all key parties (employee, supervisor, case manager, medical practitioner) is made where possible no later than three working days after receipt of a referral for assessment.
- 2.3 A provider must ensure that within ten working days of a referral for assessment:
 - (a) a workplace visit has been completed;
 - (b) the initial assessment of the employee’s capability of undertaking a rehabilitation program is complete; and
 - (c) the referring rehabilitation authority has been advised of the outcome of the initial assessment.
- 2.4 When requested to do so, a provider must ensure that as soon as possible after an assessment is completed, a return to work plan is developed and negotiated with, and approved by, the referring rehabilitation authority.

Return to Work Plans

- 2.5 A provider must ensure the employee’s return to work plan details the goals, nature of interventions, costs and expected duration of the plan.
- 2.6 A provider must ensure that key stakeholders (the employee, case manager, supervisor, medical experts) are involved in planning and monitoring the return to work plan as needed.
- 2.7 A provider must ensure the close management and monitoring of return to work plans in consultation with treating health professionals

and any other relevant medical provider. The return to work plan must be consistent with appropriate medical advice regarding the medical condition of the employee and any relevant medical restrictions as a result of the injury.

- 2.8 A provider must ensure that the return to work plan is workplace based. Worksite program monitoring and review meetings with key parties should be included in the plan.
- 2.9 A provider must ensure that in the planning and implementation of a return to work plan, the provider will be sensitive to the cultural and social requirements of the employee.
- 2.10 A provider must ensure that in the planning and implementation of a return to work plan, the provider will be sensitive to personnel management issues and employee relations at the employee's workplace.
- 2.11 As soon as a provider becomes aware that an employee has failed to begin to undertake a return to work plan or has discontinued undertaking a plan, the provider must contact the rehabilitation authority and relevant authority immediately.

Plan Closure

- 2.12 A provider must contact the employee prior to any decision to recommend that the return to work plan be closed. When closure of the return to work plan is not agreed to by the employee, the provider must communicate this to the referring rehabilitation authority, treating medical practitioner and relevant authority.
- 2.13 A provider must seek feedback from the referring rehabilitation authority regarding the level of satisfaction with the outcome of the return to work plan and the nature of the services provided.

Service Standard 3 - Suitable and Durable Employment

- 3.1 A provider must, wherever possible, approach the return to work of an employee in the following sequence:
 - a) Same job/Same employer
 - b) Similar job/ Same employer
 - c) New job/Same employer
 - d) Same job/New employer
 - e) Similar job/New employer

f) New job/New employer

- 3.2 A provider must consider whether the employee can return to work in the employee's pre-injury employment or whether the employee should return to modified or alternative duties with the original employer prior to exploring other vocational options.
- 3.3 Where return to work with the original employer is not possible, the provider may then assist the employer and the employee to identify suitable alternative vocational options for the employee and facilitate placement into suitable and ongoing alternative employment.
- 3.4 A provider must only consider vocational retraining after all other return to work options have been pursued (taking into account the employee's age, education and existing skills) and where it is considered that such options are unlikely to achieve desired outcomes. Where retraining is considered, it must be linked to future employment outcomes.

Service Standard 4 - Staff and Subcontractors

- 4.1 A provider must ensure that individuals employed or engaged by the provider to manage return to work plans under the SRC Act have met the competency requirements of Criterion 1 in force under Section 34D of the SRC Act.
- 4.2 A provider must ensure that individuals employed or engaged by the provider to manage return to work plans under the SRC Act complete the Comcare training course for approved rehabilitation providers as soon as possible.
- 4.3 A provider must ensure that individuals employed or engaged by the provider to provide return to work services under the SRC Act have the qualifications and experience appropriate to the service delivery required for the particular task.
- 4.4 A provider must ensure all rehabilitation services provided under an SRC Act return to work plan on behalf of the provider are consistent with these operational standards.

Service Standard 5 – Administrative / Financial Responsibilities

- 5.1 A provider must ensure that its financial affairs are managed in accordance with accepted financial practices and applicable

Commonwealth, State and Territory laws, including keeping correct accounts and full details of all receipts and expenditure.

- 5.2 A provider must ensure that all individuals employed or engaged by the provider to provide return to work services under the SRC Act hold current coverage for professional indemnity. The provider must hold current public liability insurance and, if it employs staff, workers' compensation insurance.
- 5.3 A provider must have appropriate record keeping systems that provide for the adequate handling, security and storage of case records, and the tracking and billing of services provided.
- 5.4 A provider must invoice according to the requirements of the relevant authority.
- 5.5 Where a provider uses a subcontractor to provide services under the SRC Act, the provider remains liable for reimbursing the subcontractor for any costs or expenses incurred by the subcontractor and must allow for this on the plan.
- 5.6 A provider must advise Comcare immediately it becomes apparent that it is no longer able to continue trading, is placed into administration, becomes insolvent or is the subject of bankruptcy proceedings.
- 5.7 A provider must advise Comcare within seven days of being notified of any professional misconduct proceeding being taken against the provider or any individuals employed or engaged by the provider.

Service Standard 6 – Evidence of Compliance with Operational Standards

- 6.1 A provider must ensure that documentation is on file to demonstrate ongoing compliance with these standards and must make such information available to Comcare on request.