



WORKPLACE REHABILITATION PROVIDER Performance Monitoring Framework

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INTRODUCTION

This document outlines Comcare's performance requirements and approach to monitoring approved Workplace Rehabilitation Providers (WRPs).

Comcare expects that WRPs will:

- > comply with operational standards and conditions of approval
- > use contemporary and evidence-based practices including a focus on the health benefits of work
- > deliver effective and efficient services that achieve the best outcomes for employees and employers

Comcare will monitor the compliance and performance of WRPs to confirm that these expectations are met. This monitoring will be done in collaboration with WRPs, rehabilitation authorities¹ (the employer responsible for a person's rehabilitation and return to work) and employees.

BACKGROUND

WRPs play an important role in the return to work process and support Comcare's objective of improving recovery and return to work for employees and promoting the health benefits of work.

Comcare approves WRPs in accordance with the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act). Should a rehabilitation authority choose to engage a WRP, they must use a Comcare approved WRP. The Department of Veteran's Affairs (DVA), Australian Defence Force Joint Health Command and the Seacare authority also use Comcare approved WRPs for workplace rehabilitation services.

As part of this approval, WRPs are required to comply with the [Operational Standards](#) (Standards), [Criteria for Approval](#) (Criteria) and [Conditions of Approval](#) (Conditions) set by Comcare. WRPs are also required to comply with this Performance Monitoring Framework [see Condition 7(1)].

COMPLIANCE WITH OPERATIONAL STANDARDS AND CONDITIONS

It is important that approved WRPs read and understand their obligations under the Criteria, Standards and Conditions. The following is a summary of key requirements (please refer to the Standards and Conditions for detailed information):

Reference to Standards or Conditions	What the WRP must do
Standard 6 <i>Effectiveness, availability and cost</i>	Ensure effective delivery of rehabilitation services, the availability of services and reasonable costs.
Standard 7 <i>Other standards – general</i>	Ensure good governance, financial solvency and appropriately qualified and trained staff Maintain workers compensation, public liability and indemnity insurance.
Condition 4 <i>Notification of change in identity</i>	Notify Comcare in advance, or as soon as practical, of any change in the WRP identity, including the identity of the principals and employees of the WRP who provide services, or a change in ownership, business structure or name.
Condition 5 and 6 <i>Notification of matters concerning the Criteria and Standards</i>	Notify Comcare, as soon as practical, of any matter that would affect the WRPs capacity to meet the Criteria or the Standards.

¹ For a person who suffers an injury as an employee of the Commonwealth, a Commonwealth authority or licensee, the rehabilitation authority is the principal officer of the entity currently employing the employee; or if there is no current employer, the entity that most recently employed the employee.

Reference to Standards or Conditions	What the WRP must do
Condition 7(1)	Comply with this Performance Monitoring Framework
Condition 7(2) <i>Senior management qualifications</i>	Ensure that staff are relevantly qualified
Condition 7(3) <i>Minimum number of cases</i>	Manage at least five rehabilitation program cases across the Comcare, DVA, Australian Defence Force Joint Health Command and the Seacare authority schemes over a 12-month period.
Condition 7(5) <i>Appropriate return to work (RTW) rate</i>	Achieve appropriate RTW rates (90% RTW for same employer and 60% for new employer services – see below)
Condition 7(7) <i>Probity matters</i>	Notify Comcare, as soon as practical, of any probity issues including conflicts of interest or misconduct proceedings

COMCARE'S APPROACH TO MONITORING COMPLIANCE WITH THE STANDARDS AND CONDITIONS

Comcare may require a WRP to demonstrate compliance with the Standards and Conditions at any time. Without limiting Comcare's ability to require a WRP to demonstrate compliance, Comcare may request information relating to identified performance concerns, scheme or industry trends and stakeholder feedback or complaints.

WRP SERVICE DELIVERY AND PERFORMANCE REQUIREMENTS

Comcare expects that WRPs will deliver outcome driven workplace-based services that result in measurable benefits for the employee.

Expectations in relation to service delivery requirements for WRPs are outlined in **Attachment A**.

Performance measures

Comcare will monitor performance using a range of performance measures. These measures combine to monitor the effectiveness and cost of rehabilitation services², as well as the extent to which WRPs are achieving an appropriate return to work rate.

WRPs will be monitored against the following measures:

Comcare Return to Work rate requirements

Comcare defines an appropriate return to work rate as:

- > 90% for same employer services
- > 60% for new employer services

² Comcare publishes Fee Guidance for WRP services. This Fee Guidance is updated annually.

Performance Measure	What the measures does	Data definition
1. Work status at commencement and completion of service	Confirms whether an improvement in work status outcomes has occurred following service delivery (for claims where there is a goal of return of work)	Assesses relevant work status codes* at rehabilitation plan determination date (i.e. commencement date) and the final rehabilitation plan closure date (i.e. completion date) ³ for each rehabilitation program. Outcomes are presented as 'improvement', 'deterioration' or 'no change' for each program. *The National Data Set Work Status codes ⁴ are used to record work status
2. Return to work rate	Confirms whether a return to work outcome was achieved following service delivery	Measured using rehabilitation plan closure date (i.e. completion date) and assessing relevant work status code at completion. Outcomes are presented as 'return to work' or 'no return to work'. Relevant exclusions (for example, retirement) will also apply.
3. Duration of service (closed and open plans)	Confirms the time taken from commencement of service to completion of service for RTW services	Measured by comparing rehabilitation plan determination date to the final rehabilitation closure date for each program.
4. Cost of service (closed and open plans)	Confirms that costs are reasonable relative to service delivery outcomes	Measured using rehabilitation plan cost-to-date for open cases or those with a final rehabilitation plan closure date. Results presented in dollars.
5. Durability of service	Confirms that service delivery has produced a durable return to work outcome	Measured by assessing relevant work status code at rehabilitation plan closure date compared to the work status code 13 weeks after the rehabilitation plan closure date. Outcomes presented as 'durable return to work' or 'no durable return to work'.
6. Employee Experience of service delivery	Confirms whether the WRPs service has met the service delivery indicators (see Appendix A)	To be determined.
7. Employer Experience of service delivery	Confirms whether the WRPs service has met the service delivery indicators (see Appendix A)	To be determined.
8. Minimum number of cases (Rehabilitation Programs)	Confirms the number of cases the WRP is managing	Measured by calculating the number of rehabilitation plan determination dates (one per claim) assigned to the WRP.

VARYING THE PERFORMANCE MEASURES

It is a condition of approval that WRPs comply with the Performance Monitoring Framework as published by Comcare and in existence at the time the conditions of approval were imposed. If Comcare varies the performance measures, it will inform all approved WRPs in writing and provide a 30-day notice period of effect. The WRPs conditions of approval will be updated to reflect any revised performance measures.

³ references to final rehabilitation plan closure date refers to the completion of the WRP's service on the workers' compensation claim. For example, the final rehabilitation plan closure date will capture all rehabilitation programs associated with a claim, including those where rehabilitation plan alterations have occurred.

⁴ Safe Work Australia, *National Data Set for Compensation-based Statistics* 3rd Edition (Revision 1) October 2012 - Work Status Page 12

MONITORING COMPLIANCE AND ASSESSING PERFORMANCE

Comcare monitors WRP compliance and performance as part of its operations and provider management reporting. The monitoring is based on data Comcare holds and information Comcare receives from other stakeholders (including employers and employees). Comcare will base any compliance and performance activities on evidence and risk analysis.

ADDRESSING COMPLIANCE AND PERFORMANCE ISSUES

Where Comcare identifies compliance and performance issues, Comcare will liaise with the WRP to verify the result or performance concerns.⁵ Comcare will require the WRP to resolve any identified issues in a timely manner. The specific timeframe for a response or action will be set by Comcare according to the identified issue.

Comcare will be open with affected WRPs and inform them, in writing, of decisions that impact them.

Where Comcare considers that a response is necessary, the following set of staged responses will be considered

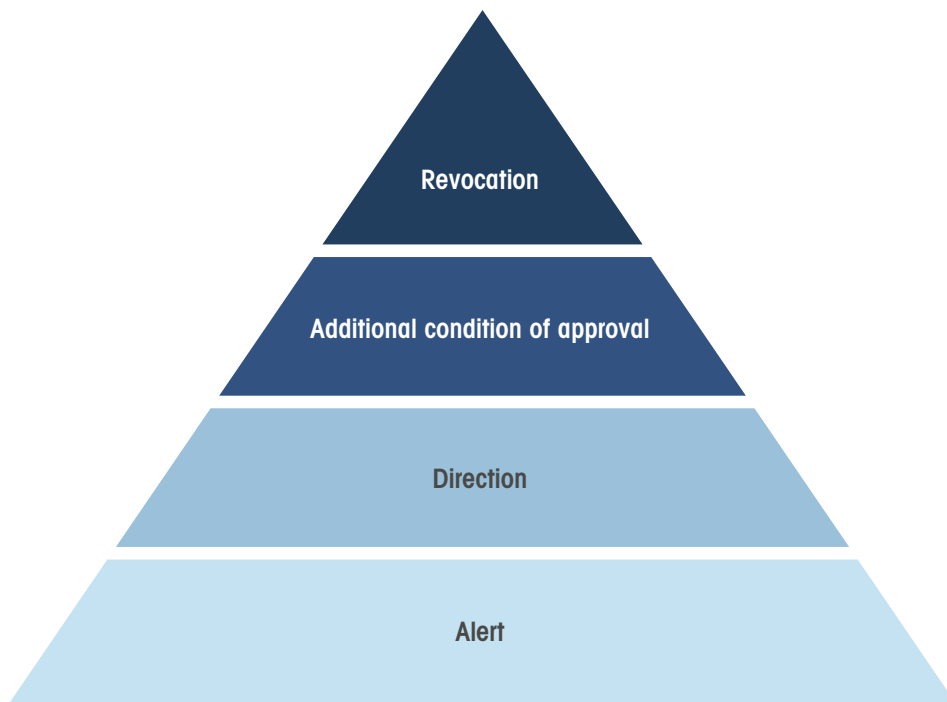


Figure 1: Stages of Response

⁵ WRPs are required under the Conditions of Approval (*Conditions of Approval*, currently in force, for approved workplace rehabilitation providers in the Comcare Scheme) to cooperate with Comcare to demonstrate compliance with the Conditions and Standards.

Level of the Staged Response	Actions required	When would this response occur?
Revocation	The WRP approval is revoked. The WRP is no longer able to undertake work in the Comcare, DVA or Seacare schemes.	For serious or systemic performance issues that a WRP is unable or unwilling to rectify.
Additional condition of approval	An additional condition is placed on the WRP's approval. ⁶	For significant performance issues that require an ongoing change to the WRP's approach or operations.
Direction	A WRP must rectify an issue within a set timeframe and demonstrate to Comcare that this has been completed. A Performance Improvement Plan will be required. The WRP is required to finalise this plan within a timeframe set by Comcare.	For identified performance issues that require timely attention.
Alert	Comcare identifies a performance concern. Comcare informs the WRP of the concern. The WRP is expected to take steps to address this concern or provide information to explain the situation.	For identified performance issues that require WRP attention.

Please note: Comcare retains the right to revoke approval at any stage should a serious or systematic performance issue be identified or if there is a failure from a WRP to address compliance and performance requirements.

⁶ s34P of the SRC Act allows Comcare to place conditions on WRP approval, such as to undertake an action, provide information or address a specific issue.

WRP SERVICE DELIVERY REQUIREMENTS

The following is adopted from the Heads of Workers' Compensation Authorities Principles of Practice for Workplace Rehabilitation Providers

To identify risks and needs when planning interventions, Workplace Rehabilitation Providers:

1. Identify the biological, psychological and socio-economic risk factors and barriers to return to work as early as possible.
2. Consider the biopsychosocial factors in conjunction with the objective evidence of functional capacity.
3. Develop strategies to address the risks, needs, strengths and capacities having regard for the worker's medical status, capacity for work, vocational status, psychosocial concerns, employer requirements, workplace issues and any relevant barriers.
4. Include strategies to address the biopsychosocial risk factors when setting work related goals, including assisting the worker to learn helpful self-management strategies.
5. Regularly monitor any changes in risk factors and barriers to achieving the goals, making adjustments in collaboration with the worker and their support team.
6. Recognise emerging issues early, such as the potential for secondary psychological injury, and address the contributing factors.
7. Have regard to suitable work/employment options that may be available to support a return to work currently or over time as capacity increases.
8. Identify and address any unhelpful beliefs to ensure they do not lead to entrenched barriers to return to work.
9. Collaborate with the worker and their support team to develop consistent strategies and approaches to address identified risk factors.

To build capacity through work, Workplace Rehabilitation Providers:

10. Collaborate with the worker and their support team in the design and implementation of activities that are workplace-based wherever possible (or work readiness activities when not).
11. Provide independent evidence-based advice on the most effective pathway to recovery.
12. Provide timely recovery and workplace information and advice to support appropriate certification of capacity for work.
13. Provide the employer and treating providers with guidance that will support the worker with their return to the work environment.

To empower the worker and employer to achieve goals, Workplace Rehabilitation Providers:

1. Support and motivate the worker and employer to be actively involved in the development of the program.
2. Establish that the worker has an awareness and understanding of the treating practitioner's recovery expectations relevant to their injury or condition.
3. Develop SMART goals (specific, measurable, achievable, relevant and timed) in collaboration with the worker.
4. Consider the value of health literacy as a motivating tool for the worker and employer, including the health benefits of good work to aid recovery, reasonable adjustments to work, team support and the critical importance of making suitable work available.
5. Ensure the worker has enough information to retain a sense of control in their return to work, and the information is understandable in their circumstances.
6. Align the expectations of the worker and employer—facilitating this through the treating practitioner and by using the certificate of capacity.
7. Strengthen relationships by using an empathetic and supportive communication style that is timely, proactive clear and tailored.
8. Identify and address cultural needs in appropriate way.
9. Assist the employer with responding to the needs of the worker, including promoting how supportive supervisors and colleagues contribute to better outcomes for the worker and employer.
10. Guide and support the employer to understand their duties and the health benefits of good work.

To identify tailored goals and support cost effective goal achievement, Workplace Rehabilitation Providers ensure that:

1. Objective information is collected from the worker and their support team to inform goal setting.
2. Treating providers are engaged early to establish how work could be used as therapy and how work activities can support and reinforce the treatment plan.
3. Goals are:
 - a) functional and SMART—specific, measurable, achievable, relevant and timed
 - b) designed to achieve a suitable, meaningful and durable return to work and health and increase work, family and community participation
 - c) developed in collaboration with worker and their support team
 - d) evaluated and modified as they are achieved or as circumstances change
 - e) reset in consultation with the worker and employer.
4. Where measurable improvement in achieving goals is slow or absent:
 - a) the cause/s is identified and communicated to all parties transparently
 - b) where indicated, goals are reset, or an alternate pathway to return to work is implemented, or
 - c) a service closure plan is developed, or
 - d) consideration of referral to another Workplace Rehabilitation Provider occurs.

5. Where there is certification for no work capacity:
 - a) provide information and strategies to the treating providers to consider capacity and return to work options
 - b) develop and implement strategies to build work readiness and capability that have a direct connection to a return to work strategy
 - c) the employer is guided to identify suitable work and enable certification by providing appropriate work adjustments (establishing the pathway to recovery through work)
 - d) the worker is educated about the role of work in helping recovery.

To ensure services are cost effective, Workplace Rehabilitation Providers:

6. Demonstrate through assessment the need for intervention and appropriateness of the return to work strategies.
7. Translate functional gains into meaningful work (or vocational) activity based on assessment of capacity for work and availability of suitable work/employment (preinjury or new employer).
8. Review service effectiveness and the ongoing need for services in discussion with the worker and their support team.
9. Regularly review the total accumulated time and financial investment in services in discussion with the referrer.
10. Avoid duplication by integrating with other services.
11. Cooperate with peer reviews of services and costs incurred.

To apply contemporary and evidence-based best practices Workplace Rehabilitation Providers:

1. Ensure evidence-based information substantiates service delivery decisions.
2. Maintain working knowledge of industry trends and emerging academic and clinical evidence.
3. Use assessment and reviews to demonstrate the need for intervention and the appropriateness of the return to work strategies.
4. Exercise judgement to determine when workplace rehabilitation services are not applicable or cost effective.
5. Provide health literacy information that supports the health benefits of good work and the role of work in recovery.
6. Promote the evidence of early intervention to employers and workers.

To demonstrate service delivery effectiveness, Workplace Rehabilitation Providers:

1. Use objective measures* to track and evaluate recovery and return to work outcomes.
2. Measure progress against goals at appropriate intervals specific to the worker's circumstances.
3. Communicate measurable progress with worker and their support team to mark progress against goals and motivate towards further improvement.
4. Terminate services in a timely manner where their services are no longer effective and objective measures do not support ongoing service delivery.
5. Confirm durability of goal attainment where successful service delivery is complete.

* Examples of objective measures include:

- changes/improvements to work status
- sustaining pre-injury hours for a specified period
- sustaining pre-injury or productive duties for a specified period
- significant changes to work capacity
- changes in functional capacity
- progress against SMART goals
- worker experience with services
- sustained placement in new employment