# **Physiotherapy: Treatment Management Plan**

Health care providers should deliver services according to the principles outlined in the <u>Clinical Framework for the Delivery of Health Services</u>. The TMP is an important communication tool that requires Physiotherapists to demonstrate they are adopting the principles of the Framework in the treatment of the worker's injuries.

Contact details										
Worker's name			Date of birth Claim No.							
Occupation			Employer							
Referrir	ng medico	al prac	ctitioner				Insure	r		
Workplace rehabilitation provider (if applicable)										
Clinical assessment										
Date of injury Date of initial consultation										
Number of consults to date Number of consults since last surgery (if applicable)										
Physiotherapists' diagnosis										
Area/s treated										
Screening tools/questionnaires										
(e.g Orebro – DD/MM/YYYY; Initial score – 76; High risk of long term disability and failed return to work)										
Tool Date				Interpretation of results		Date re- administered		Subsequent score		Outcome
	administ	erea	score	Te	SUIIS	aami	misierea	SCO	ie	
Functional measures (select relevant activities)  (e.g. lifting - 10kg floor to waist, 15 repetitions; walking – 5km, moderate intensity, limited due to pain)										
Functional activity			Initial/as						ected/goal	
·				reported		d		(within denoted timeframe)		
☐ lifting – floor to waist										nename)
☐ lifting – waist to shoulder heig				eight						
working above shoulder heigh										
	ting 									
standing										
<ul><li> walking</li><li> pushing/pulling</li></ul>										
			'sauattina	r						
bending/twisting/squatting driving				9						
	her (spec	ify)								
Briefly c	omment o	on the	workers	adherer	nce to treat	ment				
Briefly comment on the workers adherence to treatment										
Biopsychosocial factors										
Have you identified, or are you aware of, any factors that may impact the workers return to										
work?										
Biological factors Psychosocial factors							∐ Yes	F	] No	
Other	social fac	ctors					Yes Yes		] No ] No	
If you have identified any factors that may impact the workers return to work, do you have										
any recommendations for addressing them?  (e.g. diagnostic imaging, specialist referral, reassurance, education regarding injury and treatment expectations,										
	nostic imagi assessment, e		cialist referi	ral, reassur	ance, educat	ion rego	arding injury	and treat	ment ex	pectations,
	- / ·	,								

Current work status									
Hours Pre-injury hours at work Current hours at work per week	Current duties  Pre-injury duties  Alternative/modified duties  Not working								
I would like more information about the duties and the associated physical demands of the workers pre-injury occupation/available duties									
Return to work progression									
Has the worker's hours and/or duties progressed in the last six weeks?   Yes No  Provide details									
Is the worker likely to return to the functional capatities?  Yes Anticipated timeframe  No Comment:	pacity required to perform their pre-injury								
Unsure Comment:									
Do you have any comments to assist the medical practitioner certify capacity for the worker? (e.g. consider current functional measures, modifications to the workplace)									
organismos contraction and the contraction of	e wanpiacej								
Proposed management plan									
Physiotherapy consultations  Number of treatment sessions proposed to be conducted over weeks  Utilising service codes PB001, PC001 or PG001, as per the WorkCover WA rates, fees & payments for physiotherapy  Treatment proposed									
Exercise based program  Supervised exercise programs require a cost proposal for prior approval by the insurer. Refer to the WorkCover WA rates, fees & payments for exercise-based programs									
Have self-management strategies been implem	ented? Yes No								
Physiotherapist's details									
Name	Telephone								
Practice	Email address								
Signature	Date:								
A copy of this form has been sent to (please tick):									
☐ Insurer/Self-insurer ☐ Medical Practitioner ☐	Other (Specify)								
Insurer approval									
<b>Note to insurer:</b> It is expected that a response be provided to the physiotherapist within three to five business days of receipt of this TMP.									
☐ Approved ☐ Not Approved ☐	Further information required (specify)								
Insurer contact name	Telephone								
Signature	Date								

## Useful resources for physiotherapists

## Links to screening tools

- Orebro (Long-Form, Short-Form)
- STarT Back
- Outcome Measure Compendium

#### Resources available at the WorkCover WA website

- Clinical Framework for the Delivery of Health Services
- Using the Flags Model: A practical guide for GPs
- Your role in supporting injured workers a snapshot of the clinical framework

## Explanatory notes – completing the TMP

The TMP is intended to provide greater clarity about future treatment options for workers who are likely to require more than ten physiotherapy consultations. It will also provide approved insurers and self-insurers with a mechanism to determine whether the treatment and costs are reasonable under the workers' compensation legislation.

The following notes may assist physiotherapists and insurers:

## Notes for physiotherapists

- A TMP may be requested or required when the physiotherapist is of the view that treatment will be required beyond ten consultations.
- The TMP may be initiated by a physiotherapist or requested by an approved insurer or selfinsurer (note - there is a maximum combined total of three reports permitted without prior approval from insurer or self- insurer).
- A copy of the TMP should be provided to the worker, treating medical practitioner and insurer/self-insurer.
- All sections of the TMP should to be completed.
- Completion of the TMP is a billable item refer to item PR003 of the WorkCover WA rates, fees & payments for physiotherapy.
- "Physiotherapist's diagnosis" may differ from the medical practitioner's injury description on a certificate of capacity. This information will assist the claims management process by highlighting the need to obtain clarity around the diagnosis.
- You are not required to elaborate on the self-management strategies you have implemented. It is expected you empower the worker to manage their injury, through education, setting expectations, developing self-management strategies and promoting independence from treatment.

### Notes for insurers and self-insurers

- Insurers and self-insurers have a responsibility to determine whether treatment for workers is "reasonable" (pursuant to Clause 17 Payment of medical and other expenses of Schedule 1 to the Workers' Compensation and Injury Management Act 1981).
- The TMP may be used as a mechanism to assist in determining whether any treatment proposed by a physiotherapist is a "reasonable" expense.
- It is desirable that insurers and self-insurers respond to physiotherapists in a timely manner. To avoid potential delays in physiotherapy treatment, the benchmark for responding to physiotherapists is within three to five business days from receipt of the TMP.