

Provider Guide – Completing the Provider Management Plan (PMP)

To request approval for treatment services for an injured worker, you should complete a PMP request in full (within your scope of practice) as the treating allied health provider.

It is important the injured worker is actively involved in the development of their own recovery goals, and that they understand:

- their injury
- the likely outcomes and timeframes of their recovery.

The use of the PMP is intended to provide greater clarity about treatment requests, future treatment options and the injured worker's progress. The PMP should be outcome focussed and provide measurable functional improvements.

The PMP will assist to provide relevant information for WorkCover Queensland (**WorkCover**) to determine if the treatment and services are necessary and reasonable.

When should a PMP be submitted?

- A PMP should be submitted if treatment is requested beyond the initial assessment or any pre-approved initial sessions.

How to submit a PMP

- The PMP should be initiated by the treating allied health practitioner and submitted to WorkCover Queensland via [Provider Connect](#), online or via the self-insurer preferred method.
- All sections of the PMP should be completed *within your scope of practice*.

Is the completion of the PMP billable?

- The completion of the PMP is not a billable item via the Table of Costs. Please refer to [Fees](#) for more details.
- The cost of ringing to check if a form has been received by the insurer is not billable.
- Please indicate on the form if you wish to have a claim owner contact you to discuss the progress or any matters relating to the worker on the PMP form. This will assist to reduce the administration burden on both sides.

What happens after I submit the PMP?

- WorkCover has the responsibility to determine whether the recommended treatment for the injured worker is a necessary and a reasonable expense.
- You can expect to receive a response once the form is received by WorkCover and additionally when it is being reviewed by a claim's owner.
- A response will then be sent to you once the plan is approved, partially approved, or declined by WorkCover. If the plan is partially approved or declined, WorkCover will provide an explanation.
- As the PMP is intended to be a case management tool to assess treatment, WorkCover will respond to the allied health provider in a timely manner.
- Provide your clinical assessment of the work-related injury *to your scope of practice* and based on your assessment of the worker on the day you complete the form.

- Your assessment may differ from the certifying doctor's diagnosis. This information will assist WorkCover by highlighting the need to clarify the injury.

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. Measuring and demonstrating the effectiveness of treatment is the first principle of the [Clinical Framework for the Delivery of Health Services](#), an excellent companion to these tools.

The five principles of the Clinical Framework are to ensure that you deliver the right care at the right time:

- Measure and demonstrate the effectiveness of treatment.
- Adopt a biopsychosocial approach.
- Empower the injured person to manage their injury.
- Implement goals focused on optimising function, participation and return to work.
- Base treatment on the best available research evidence.

Choose outcome measures that are reliable, valid, and sensitive to change. They should relate to the worker's injury, the functional goals of your treatment and the functional demands of the workers pre-injury duties and/or activities.

Your regular measurement of outcomes provides ongoing information about the worker's health status and the effectiveness of your intervention.

Reporting outcome measures is integral to justifying your treatment request. You should use at least **2 outcome measures**.

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 worker 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 and some further common tools are recommended below:

- Back injury – Oswestry Disability Index
- Screening for pain – Orebro Short Form Pain Screening
- Arm injury – Upper Extremity Functional Scale
- Leg injury – Lower Extremity Functional Scale
- Neck injury – Neck disability index
- Social provisions scale questionnaire
- The Depression, Anxiety and Stress Scale - DASS21
- PTSD Checklist PCL-5
- Kessler Psychological Distress Scale (K10)

Psychosocial screening measures	Pain measures	Musculoskeletal	Neck and whiplash	Disability measures	Psychological measures
Orebro Musculoskeletal Pain Screening Questionnaire (OMSPQ)	Patient Specific Functional Scale (PSFS)	Back and lower limb Hip Disability and Osteoarthritis Score (HOOS)	Neck Disability Index (NDI)	Function In Sitting Test (FIST)	Depression, anxiety (dis)stress Depression Anxiety and Stress Scale 42 Item (DASS-42) PHQ-9
Short Form Orebro Musculoskeletal Pain Screening Questionnaire (OMSPQ-10) Scoring Guide	Pain Catastrophising Scale (PCS)	Lower Extremity Functional Scale (LEFS)	Whiplash Disability Questionnaire (WDQ)	5x sit to stand	Depression Anxiety and Stress Scale 21 Item (DASS-21) GAD-7
Pain Self Efficacy Questionnaire (PSEQ)	Brief Pain Inventory (BPI)	Foot and Ankle Disability Index (FADI)	Whip Predict	Timed Up and Go (TUG)	Kessler Psychological Distress Scale (K-10)
Tampa Scale for Kinesiophobia (TSK)	Oswestry Disability Index (ODI)	Québec Back Pain Disability Scale (QBPDS)		Step Test	Posttraumatic stress disorder Impact of Events Scale – Revised (IES-R)
		Head, neck, and upper limb Disabilities of the Arm Shoulder and Hand (DASH)		Functional Reach Test	Posttraumatic Stress Disorder Checklist – 5 (PCL-5)
		Shoulder Pain and Disability Index (SPADI)		Balance Evaluation Systems Test (BESTest)	Substance abuse Alcohol Use Disorders Identification Test short form (AUDIT-C)
		Upper Extremity Functional Index (UEFI)		Mobility 10 metre walk test	Alcohol Use Disorders Identification Test (AUDIT)
		Keele STarT Back Screening Tool		Goal Attainment Scale (GAS)	Drug Use Disorders Identification Test (DUDIT)

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 non-compliance 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 WorkCover Queensland, or other treating practitioners may be able to assist e.g. referral to other services.

What about an independent assessment or file review?

- You can request a file review or recommend a referral for an independent assessment (medical or allied health) or assessment to overcome barriers and progress the person's recovery. The claim owner will call to discuss this with you.
- If agreed, WorkCover Queensland will arrange this referral.

What about medication?

- If you consider the injured worker'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 worker goals

- You should undertake early and collaborative goal setting with the injured worker to ensure you are focused on common objectives to achieve recovery. Collaborative goal setting also empowers the worker 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 worker to achieve their goals *e.g. To return to my pre-injury role as a courier by 26 August; To drive for 30 minutes to drop children off at school by 6 August; To return to training my kid's soccer team by 3 October; To hang washing on the line by 1 August.*
- If previous goals were not met, please provide additional relevant information/explanation to assist the claims owner to understand why goals have not been met.

Injured worker's self-management

- Empowering the worker to self-manage their injury is a key treatment strategy and is essential to recovery.
- You should encourage the injured worker 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, pain management strategies and self-management strategies.