



Treatment, care and support guideline 4

# Rehabilitation guideline

### 4. Rehabilitation guideline



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#### **Definitions**

Defined terms are shown throughout in bold underlined text when they first appear.

Allied health assistants	are healthcare workers who work within a defined scope of practice under the delegation and supervision of an allied health provider and are self-regulated by the Allied Health Assistants' National Association Ltd (AHANA).	
Allied health provider	means allied health professionals which are regulated under the Health Practitioner Regulation National Law (Queensland) including:  • medical radiation practitioners  • occupational therapists  • optometrists  • osteopaths  • pharmacists  • physiotherapists  • podiatrists  • podiatrists  • psychologists (and neuropsychologists).  Allied health providers also include persons who are part of a self-regulated allied health profession. Allied health providers who are part of a self-regulated allied health profession and are referred to in this guideline include:  • exercise physiologists accredited with Exercise and Sports Science Australia  • audiologists accredited by Audiology Australia  • dietitians accredited by the Australian Orthoptic Board  • orthoptist accredited by the Australian Orthoptic Board  • orthotist certified by The Australian Orthotic Prosthetic Association  • social workers and mental health workers accredited by the Australian Association of Social Workers  • speech pathologists certified with Speech Pathology Australia  • allied health assistants.	
Concurrent supports	are more than one type of rehabilitation support that is provided in the same period of time by more than one type of provider, or where similar services are provided by one type of provider.	
Health Practitioner Regulation National Law	is Queensland's modified application of Health Practitioner Regulation National Law under the Health Practitioner Regulation National Law Act 2009 (Qld).	
Medical practitioner	is a person registered by the Medical Board under the <i>Health Practitioner Regulation National Law</i> to <u>practice medicine in Australia</u> (other than student registration).	
Medicare Benefits Schedule	is a list of services subsidised by the Australian Government.	

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#### **MyPlan**

means a support plan prepared by the NIISQ Agency and approved under the National Injury Insurance Scheme Act (Queensland) Act 2016.

## Public sector health service

means any service provided by, or under any of the following:

- Cairns and Hinterland Hospital and Health Service
- Central Queensland Hospital and Health Service
- Central West Hospital and Health Service
- Children's Health Queensland
- <u>Darling Downs Health</u>
- Gold Coast Hospital and Health Service
- Mackay Hospital and Health Service
- Metro North Health
- Metro South Health
- North West Hospital and Health Service
- South West Hospital and Health Service
- Sunshine Coast Hospital and Health Service
- Torres and Cape Hospital and Health Service
- Townsville Hospital and Health Service
- West Moreton Health
- Wide Bay Hospital and Health Service.

# Rehabilitation supports

are a wide range of treatments, services and supports provided by rehabilitation providers and include psychological, physical, social, educational, and vocational measures, and are delivered individually or in combination to:

- support a participant toward achieving any goals identified by the participant
- maintaining a participant's level of function.

## Rehabilitation providers

are ordinarily allied health providers who provide rehabilitation supports. Rehabilitation providers have the requisite skill and experience to provide support to participants in the NIISQ, consistent with this guideline and other guidelines.

#### **Telehealth**

is technology-based consultations that use any form of technology, including, but not limited to videoconferencing, internet and telephone, as an alternative to face-to-face consultations.



# Supporting a participant who needs rehabilitation supports

Rehabilitation is the restoration of a participant's level of functioning to their pre-injury state, to the greatest extent possible, and is achieved through a range of treatments and services performed by **rehabilitation providers** (see: rehabilitation must be provided by an appropriate provider).

There is a plain language version of this guideline which is shorter and uses simpler words. To access it, view MyGuide 4 – Rehab.

The NIISQ Agency will assess a participant's needs for (or relating to) **rehabilitation supports** and will fund these supports in accordance with the *National Injury Insurance Scheme (Queensland) Act 2016*, the *National Injury Insurance Scheme (Queensland) Regulation 2016*, this guideline, and other relevant guidelines.

This guideline should be read in conjunction with the:

- Necessary and reasonable guideline
- Medical and pharmaceutical treatment guideline
- Assistive technology and consumables guideline
- · Orthoses and prostheses guideline
- · Motor vehicle modifications guideline
- Home modifications guideline.

#### Approval for rehabilitation supports

For rehabilitation supports to be funded under the NIISQ, the NIISQ Agency must provide written approval before any treatment or services are provided to the participant.

#### Rehabilitation must be necessary and reasonable

The National Injury Insurance Scheme (Queensland) Act 2016 and the National Injury Insurance Scheme (Queensland) Regulation 2016 describe how the NIISQ Agency decides whether the rehabilitation support is necessary and reasonable, and can be funded.

The NIISQ Agency has published a guideline which explains how it decides whether a support is necessary and reasonable, and is for a treatment, care and support need (see: Necessary and reasonable guideline).

When the NIISQ Agency is assessing if a participant's need for a particular rehabilitation support is necessary and reasonable, it will give particular attention to the following:

- whether the rehabilitation support benefits the participant by maintaining or maximising their independence for undertaking daily activities, as well as in participation in meaningful life roles, education, and work
- whether the rehabilitation support relates to any goals identified by the participant
- whether the rehabilitation support is, or is likely to result in a measurable improvement to the participant's level of functioning

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- whether similar rehabilitation supports are proposed to be (or are being) provided to the participant (see: concurrent rehabilitation supports)
- whether the rehabilitation support assists the participant to manage their injury
- whether the rehabilitation support is appropriate, having particular consideration and regard to:
  - whether providing the support is consistent with current clinical practice and other best practice
  - whether there is evidence that supports the effectiveness of the rehabilitation support (see: evidence-based interventions).

The NIISQ Agency will assess whether a participant's needs for treatment, care and support are necessary and reasonable by considering whether the rehabilitation supports adhere to the nationally-recognised Clinical Framework for the Delivery of Health Services (see: Necessary and reasonable guideline).

The NIISQ Agency will fund the associated transport costs incurred by a participant for attending necessary and reasonable rehabilitation (see: *Transport-related expenses* in the <u>Attendant care and support services guideline</u>).

#### Assessment of needs for rehabilitation supports

In assessing a participant's needs for rehabilitation supports, the NIISQ Agency will ordinarily require information from rehabilitation providers and, where necessary, specialist **medical practitioners** (for example, a rehabilitation physician) to assist the NIISQ Agency to decide whether a rehabilitation support is necessary and reasonable.

Identifying a participant's treatment, care and support needs is done in collaboration with the participant, their family and/or other informal supports, and providers.

# Information required by the NIISQ Agency to assess a participant's need for a rehabilitation support

The NIISQ Agency will generally require any existing information about the participant's accepted injury.

This information is ordinarily provided in the form of a <u>NIISQ allied health treatment plan and report</u> to be completed in consultation with a participant. A copy of the NIISQ allied health treatment plan is available on the NIISQ website.

For basic equipment required by a participant in relation to rehabilitation, the <u>NIISQ Agency equipment form</u> is to be completed. For assistive technology, refer to the <u>Assistive technology and consumables guideline</u>.

The information required by the NIISQ Agency generally includes matters which relate to:

- whether any recommended rehabilitation support relates to a participant's accepted injury, and
  if partially, the extent to which pre-existing or co-existing conditions have contributed to the
  participant's need for rehabilitation support treatment
- the benefits that the rehabilitation support will have for the participant, including how any benefits are weighed against the risks of any treatment recommended by a medical practitioner and/or rehabilitation provider, and how the effectiveness will be measured over time
- · whether there are any alternatives to the rehabilitation support
- whether the rehabilitation support is for the participant and not for another person (with the exception of certain <u>psychology supports</u>)



- information about an appropriate provider
- information about the costs of the rehabilitation support, including **Medicare Benefits Schedule** numbers (where available).

#### Access to public sector health services

A person's participation in the NIISQ does not affect their entitlement to a broad range of rehabilitation supports provided as part of a **public sector health service**. These services include in-patient services, outpatient services, transition care, outreach supports, and community-based rehabilitation.

These public sector health services are not required to be funded by the NIISQ Agency, and remain the responsibility of Queensland Health.

Specialised services that may provide rehabilitation supports to a participant which are part of a public sector health service include:

- Queensland Spinal Cord Injury Service which includes:
  - Queensland Spinal Injuries Unit
  - Transitional Rehabilitation Program
  - Spinal Outreach Team
- Brain Injury Rehabilitation Service (provided by the Brain Injury Rehabilitation Unit)
- Acquired Brain Injury Outreach Service
- Brighton Brain Injury Service
- Queensland Paediatric Rehabilitation Services
- other services provided as a part of a public sector health service.

#### Rehabilitation must be provided by an appropriate provider

Rehabilitation providers do not need to be a registered provider under the *National Injury Insurance Scheme (Queensland) Act 2016*, nor the *National Injury Insurance Scheme (Queensland) Regulation 2016* – with the exception of some allied health providers, providing services described in the <u>Home modifications guideline</u>, Attendant care and support services guideline, and <u>Motor vehicle modifications guideline</u>, and providers providing support coordination under this guideline.

All rehabilitation providers must be health professionals which are regulated by either the national regulation, which is administered by the Australian Health Practitioner Regulation Agency, or through self-regulation by a professional association that is responsible for certifying qualifications, or otherwise setting standards which apply to a profession (see: <u>definition of allied health provider</u>).

The NIISQ Agency expects rehabilitation providers to comply with their legal and professional obligations under the Health Practitioner Regulation National Law including (but not limited to):

- maintaining appropriate professional indemnity insurance
- complying with the shared <u>Code of conduct</u> published on the Australian Health Practitioner Regulation Agency's website, or in accordance with the appropriate self-regulatory entity.

<u>Allied health assistants</u> may support participants with therapeutic and program-related activities. The NIISQ Agency expects all allied health assistants to work under the supervision and delegation of <u>allied health providers</u>.



#### Providing telehealth rehabilitation supports

When deciding whether rehabilitation supports delivered via <u>telehealth</u> are necessary and reasonable, the NIISQ Agency will give particular consideration to:

- whether delivery of the support is appropriate for the participant in comparison to alternatives
   (i.e. face-to-face consultations or appointments) providers should only use telehealth when it
   is clinically appropriate for the participant, and the need for telehealth relates to the participant's
   accepted injury
- whether the provider is able to provide the support via telehealth (including that the provider has the necessary information technology, and can ensure that the participant's information is secure)
- whether the participant is able to use telehealth services (the NIISQ Agency does not fund computers, tablets, internet connections which are everyday items).

All rehabilitation supports provided by telehealth must be provided in line with peak body telehealth guidelines, and Australian Government and state policies including:

- Queensland Health requirements for the delivery of telehealth services
- <u>AHPRA guidelines for Telehealth consultations with patients</u> (including requiring providers to ensure that telehealth is safe and clinically appropriate for the service being provided and suitable for the participant).

#### **Concurrent rehabilitation supports**

The NIISQ Agency will generally not fund **concurrent supports**. This is because, where concurrent supports are provided to a participant, it may result in a duplication of services, and impedes the ability to measure and demonstrate the effectiveness of treatment.

In limited circumstances, where the NIISQ Agency has assessed a participant to have treatment, care and support needs for concurrent supports, the NIISQ Agency will require the following to determine whether the supports are necessary and reasonable:

- clinical justification for the concurrent supports which explicitly takes into consideration each support
  and how they will benefit the participant when delivered together, and
- confirmation by all concurrent support providers that the treatment aligns with any goals identified by the participant.



**Example:** The NIISQ Agency may fund necessary and reasonable musculoskeletal physiotherapy treatment provided by one provider, and neurological physiotherapy treatment from another provider concurrently, where each treatment addresses a different treatment, care and support need.



# Specific types of rehabilitation supports funded under the NIISQ

There are a broad range of rehabilitation supports which may be funded for a participant in the NIISQ. The treatments and services described below are not exhaustive, and there may be other treatments or services a participant may require.

#### Audiology services and supports

Audiology services and supports which may be funded under the NIISQ include services which are provided by an audiologist, and includes:

- · audiology assessments and reviews
- · audiograms and air conduction
- · impedance audiograms not associated with other tests
- · provision of basic assistive technology.

#### Dietetic services and supports

Dietetic services which may be funded under the NIISQ include:

- consultations with a dietitian
- weight loss and weight management treatment under the supervision of a dietitian
- management of a participant's nutrition needs under the supervision of a dietitian.

The NIISQ Agency will consider funding dietetic services where there is evidence that the support is endorsed by a medical practitioner who has confirmed that the need is a direct result of a participant's accepted injury.

#### Formulated food and feeding supports for at-risk participants

Where the NIISQ Agency has identified a participant to be at-risk in relation to their dietary needs because their requirements cannot be met by a normal diet and this is because of their accepted injury, the NIISQ Agency will consider funding formulated foods.

In these circumstances, the NIISQ Agency will generally require:

- a medical practitioner's written certification that the participant has a medical need for thickened foods/enteral feeding or nutritional supplements
- a medical practitioner's or dietitian's written certification that the dietary formula prescribed is nutritionally complete
- details of the participant's particular feeding requirements, which can be a dietitian's and/or speech pathologist's feeding instructions.

In relation to equipment required for home enteral nutrition (HEN) and percutaneous endoscopic gastrostomy (PEG) equipment and maintenance, refer to the <u>Assistive technology and consumables guideline</u>, and where a support worker is required to assist with the management of HEN or PEG requirements, refer to the <u>Attendant care and support guideline</u>.



#### **Driver supports**

Driver supports which may be funded under the NIISQ include services provided by an occupational therapist who has completed specialised postgraduate training, and adhere to the *Australian Competency Standards for Driving Assessors* maintained by <u>Occupational Therapy Australia</u>.

Supports funded by the NIISQ Agency include:

- driver training (including on the use of vehicle modifications funded under the NIISQ)
   (see: Motor vehicle modifications guideline)
- · driving assessments.

#### Exercise physiology, exercise programs and gym memberships

Exercise physiology services which may be funded under the NIISQ include a range of treatments provided by an exercise physiologist. Exercise physiology services which may be funded under the NIISQ include:

- · exercise physiology assessments and consultations
- group consultations (to a maximum of six patients in one session)
- monitoring and evaluation of gym or hydrotherapy
- basic equipment associated with exercise physiology (for example, hand weights, exercise balls and therapy bands).

Gym memberships and exercise programs may be funded under the NIISQ when a treating physiotherapist or an exercise physiologist has developed an exercise program that will benefit the participant which includes:

- the goals of the exercise program, and how these goals align with the participant's rehabilitation goals and any goals identified by the participant stated in the participant's **MyPlan**
- frequency of attendance
- · duration of the program
- whether part or all of the exercise program can be followed at home, or whether the exercise program must be followed at a gym.

#### **Occupational Therapy services**

Occupational therapy services enable participants to engage in meaningful activities and supports participants with strategies to increase independence, build capacity and assist with transitions to new environments and roles. Occupational therapy includes a range of supports provided by qualified occupational therapists. Occupational therapy can cover many areas of practice, and play an important role in understanding a participants needs for assistive technology, supporting participants with hand therapy (where appropriately accredited) and working with participants to manage cognitive problems and challenging behaviours. Occupational therapy services, and the related supports which may be funded under the NIISQ include but are not limited to:

- reports containing recommendations on the management of the participant's accepted injury
  or support required by the participant as a result of their injury (including workplace assessments
  and reports)
- driving assessments and driver training including on the use of vehicle modifications funded under the NIISQ (see: <u>Motor vehicle modifications guideline</u>)

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- home assessments and reports containing home modification recommendations (see: <u>Home modifications quideline</u>)
- design of specialised day programs to support social and community participation (see: <u>Attendant care and support services guideline</u>).

#### **Optometry and orthoptic**

Optometry and orthoptic support may be funded under the NIISQ where the support is provided by an optometrist or orthoptists. Support provided by an optometrist or orthoptist may include:

- · assessments of defects in vision
- · problems with general optical health
- vision-related supports (including costs associated with eyeglasses)
- prescribing eye exercises or other techniques (orthoptists generally focus on eye-movement disorders).

For medical treatment provided by an ophthalmologist, refer to the Medical and pharmaceutical guideline.

#### Podiatry and orthotic support

Podiatry supports funded under the NIISQ include supports provided by a podiatrist. Support provided by a podiatrist may include:

- assessments, consultations and recommendations including prescriptions
- · treatment including impressions and models
- modified or custom-made orthopaedic footwear
- footwear that is required to accommodate an orthosis required by the participant as a result of the accepted injury
- · manufacture, supply and fitting of an orthosis.

Orthotic supports funded under the NIISQ include supports provided by an orthotist. These supports include: prescription, manufacture and fitting of an orthosis.

While podiatrists and orthotists may support participants with simple digital or partial prosthesis for more complex prosthetic supports, refer to the <u>Orthoses and prostheses guideline</u>.

#### **Physiotherapy**

Physiotherapy services which may be funded under the NIISQ are services which are provided by a physiotherapist, and include:

- physiotherapy treatment, and reports containing recommendations on the management of the participant's accepted injury, or physiotherapy required by the participant as a result of their injury (including workplace assessments and reports)
- group consultations (to a maximum of six patients in one session)
- training and support (for specialised equipment), to engage in physical activity
- travel and related costs for off-site consultations and services.

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#### **Psychology supports**

Psychology supports which may be funded under the NIISQ are services which are ordinarily provided by a psychologist, who hold general registration and/or an area of practice endorsement.

Depending on a participant's treatment, care and support needs, treatment may be provided by a:

- clinical psychologist
- clinical neuropsychologist
- · community psychologist
- · counselling psychologist
- educational and developmental psychologist
- forensic psychologist
- · health psychologist.

Treatment provided by psychologist may include:

- individual assessments and consultations
- group consultations
- · counselling for a participant, or a participant and their partner
- · early intervention for behaviour support
- support provided as part of a multi-disciplinary approach to a rehabilitation program.

The NIISQ Agency may also consider funding services by accredited and appropriately-qualified mental health social workers to provide mental health services.

In limited circumstances where psychology supports are not available, accessible or appropriate, the NIISQ Agency may also fund mental health services provided by:

- mental health nurses
- · Aboriginal and Torres Strait Islander mental health workers
- counsellors
- mental health occupational therapists
- mental health recovery and rehabilitation workers.

Where a participant has pre-injury needs for psychology supports, the participant should access support through the appropriate service (for example, Medicare). If a participant has both pre-injury and injury-related needs for psychology supports, the NIISQ Agency will fund support for the participant's accepted injury-related needs only (see: <u>Limitations on support for rehabilitation supports</u>). In some circumstances, a participant may also require support to navigate multiple service systems.

Neuropsychiatry supports are covered under the Medical and pharmaceutical guideline.



#### Psychology support for an immediate family member

In addition to the above treatment which may be provided to a participant, the NIISQ Agency may fund psychology support for a participant's immediate family members, where the treatment is intended to assist the family member in relation to the impact of the participant's accepted injury.

Support provided to a participant's immediate family member must:

- have a benefit to the participant
- assist the family member for the period following the accident or event which resulted in the participant's accepted injury but is not long-term treatment.

Where it is unclear whether psychological treatment provided to an immediate family member of a participant is primarily intended to address the impact on the family member in relation to the participant's accepted injury, the NIISQ Agency may require information from the treating psychologist, or another suitably-qualified person.

#### Services for the coordination of treatment, care or support

The NIISQ Agency funds services for the coordination of treatment, care or support (support coordination) where support coordination is assessed as a necessary and reasonable treatment, care and support need. Support coordination is periodic and ordinarily provided by a person (for example, a case manager) who is:

- an appropriately-qualified rehabilitation provider and
- is registered by the National Injury Insurance Agency, Queensland (the NIISQ Agency) to provide the service.

#### Speech pathology

Speech pathology services funded under the NIISQ are services provided by a speech pathologist, which are intended to assist a participant with the management of their accepted injury by:

- improving a participant's communication skills, communication strategies and augmentative or alternative communication devices
- improving a participant's capacity to swallow safely
- undertaking assessments and providing advice to the NIISQ Agency in relation to a participant's capacity to communicate verbally, or swallow safely.

#### Limitations on support for rehabilitation supports

The NIISQ Agency does not fund rehabilitation supports which are required by a participant for a condition which existed prior to the event which caused their accepted injury.

The NIISQ Agency does not fund rehabilitation supports which are:

- provided as part of a public sector health service (for example, support provided by an orthotist who
  is employed by a public hospital)
- the responsibility of the National Disability Insurance Scheme (including NDIS outreach services)
- inconsistent with relevant Australian Government and state legislation.

The NIISQ Agency is not required to fund rehabilitation provided on an experimental basis.



# Rehabilitation supports that are generally not funded by the NIISQ Agency

The following is generally not considered necessary and reasonable treatment, care and support:

- exercise programs and gym memberships which are not prescribed by a treating physiotherapist
  or an exercise physiologist for a participant's accepted injury
- gym clothing, towels, fitness mats and drink bottles
- assistance from a physiotherapist or exercise physiologist after an exercise program has been established unless:
  - specialist assistance is required for a participant's safety, and a support worker is unable to provide, or cannot be trained to provide the required support, and
  - the support of an exercise physiologist or physiotherapist is not concurrent treatment.
- in relation to dietetic supports and services:
  - treatment and services which are only for cosmetic purposes
  - food services, food supplements or commercial weight loss programs, for example Lite n' Easy,
     Weight Watchers, Jenny Craig or Optifast
  - complementary or alternative products where there is no evidence of efficacy, including collagen, bone broth and digestive enzymes.
- in relation to driver supports, the NIISQ Agency will generally not fund general learner driver education costs and costs associated with obtaining a driver licence
- in relation to podiatry services:
  - repair or replacement of an orthosis that was required for reasons other than a participant's accepted injury
  - maintenance or repair of an orthosis which is covered by a statutory warranty or manufacturer warranty
  - footwear that is not required to be customised for a participant's treatment, care and support needs.
- in relation to psychology supports, the NIISQ Agency will generally not fund counselling services provided by a person who is not appropriately qualified and accredited to provide mental health treatment.



## Contact us

 $\cline{\cline{Constraints}}$  Telephone 1300~607~566 and we will call you back.

If you prefer to talk to us in your own language, call us and we will arrange an interpreter to effectively communicate with you.

If you are d/Deaf, hard of hearing, or have a speech communication difficulty, contact us through the National Relay Service. Choose your access option (<u>information here</u>) and provide 1300 607 566 when asked by the relay officer.

☑ Email enquiries@niis.qld.gov.au

Visit **niis.qld.gov.au** or scan the QR code





#### If you're in an emergency, please call 000.

We're not a first response medical provider.

The information provided in the *Treatment, care and support guidelines* is intended to provide general guidance. The guidelines are not legal advice. Please refer to the *National Injury Insurance Scheme (Queensland) Act 2016* and *National Injury Insurance Scheme (Queensland) Regulation 2016* for more details about the National Injury Insurance Scheme, Queensland. It is intended that the guidelines will be modified and updated over time as the NIISQ develops.