

# Information for Line Managers

## Physiotherapy Service Introduction

Network Rail has contracted with RehabWorks to provide a highly specialised version of a physiotherapy service for any employee experiencing muscle, soft tissue or joint pain, commonly known as Musculoskeletal Disorders or MSD's. If an employee presents to you with an MSD, you can refer them directly into the RehabWorks service using the referral form on the [Physiotherapy page](#) on the Safety Central internal website. The service is charged to your cost centre on a per-session basis, subject to the maximum "Delegated Authority" described below. **You will receive regular reports and advice from the Physiotherapist overseeing the case to help you support your employee to remain on full duties or return to full duties quickly.**

**Safety Critical roles:** If your employee is off work or on restricted duties and is in a safety critical role you must refer via OH Assist Occupational Health as, Occupational Health will need to oversee the work recommendations.

## Why should I pay for physiotherapy when my employee can get it for free on the NHS?

The RehabWorks service is very different from the traditional GP/NHS pathway. It is occupational health focussed to maximise the chance of your employee remaining at work or returning to work quickly and permanently.

Because of our effective self-management protocols and our ability to manage down the number of sessions required, the average cost per case for Network Rail is currently £136. This is the equivalent of a single day's absence cost for the average employee. International statistics suggest an average of 12 days' absence can be saved if a common MSD receives the optimum clinical management, making the potential Return on Investment clear.

Your employee does not need to see their GP first because the telephone assessment includes screening for underlying serious conditions, and we will signpost to other appropriate interventions where necessary.

## What does it cost?

Physiotherapy Service Element	Price
Telephonic Clinical Assessment, including Guided Self Management advice and clinical case management	£56.00
Face to Face Physiotherapy – Initial Assessment	£53.75
Face to Face Physiotherapy – per follow up session	£38.00

Every case is assessed by telephone to indicate the most appropriate pathway to recovery. Some may only require self-management support so will only cost £56, others may require face to face treatment of between 1 and 6 sessions. By referring, you are providing a delegated authority to charge **up to a maximum** of £299.75 (Telephonic Clinical Assessment (physio) + Initial face to face assessment + 5 treatment sessions)

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Under certain conditions, further sessions of physiotherapy may be appropriate, but these will require individual authorisation to proceed on a case by case basis.

If OH Assist are managing a case which requires physiotherapy input, they will request a second cost centre code to authorise the delegated authority amount above. It is important that this authorisation is received within 7 days to maximise the chance of a successful intervention. Network Rail Route Management have agreed to this onward referral process to ensure that appropriate treatment can commence as soon as possible following a recommendation for physiotherapy.

Traditional Physiotherapy	RehabWorks
Current average wait of 19 weeks (ref: The Kings Fund - <a href="http://qmr.kingsfund.org.uk/2015/17/data">http://qmr.kingsfund.org.uk/2015/17/data</a> )	Intervention within <b>2 working days</b> - evidence shows that the earlier a person is referred for an intervention, the better are the chances of avoiding absence, and therefore reduces costs overall
Focus on injury only, little reference to wider factors which may impact the case	Holistic approach looks at wider influences on employee's ability to make sustained recovery
No work focus, does not address circumstances within the work environment which could be influencing the condition	Functional management plan to facilitate early and graduated return to work, or plan to remain at work during treatment. Work becomes part of the recovery process
Little focus on workplace injury risk reduction	Role-related advice to contribute to injury risk reduction strategy
No management reporting	Non-clinical management plan to guide you through supporting your employee in the workplace
Does not encourage responsibility for self-management	Self-management and behaviour change supported and encouraged by the case management process → sustained outcome
Relies on face to face input requiring absence from work to attend for assessment	Effective clinical assessment carried out by telephone: easy access, no need to leave the workplace. Many cases will be entirely remotely managed

### Long term absent or Chronic cases

For chronic, repeated or long term absence musculoskeletal cases, a **Functional Restoration Programme** (FRP) may be recommended. Each of these is considered on a case by case basis and pricing is advised with the recommendation.