The treatment cycle is a new way to manage allied health treatment for DVA clients. It aims to improve the quality of care for clients and make sure they get the best treatment for their needs. It improves communication and coordination between clients, their GP and their allied health providers.

For more details and clinical resources, including which allied health professions are covered under the treatment cycle, see www.dva.gov.au/treatment-cycle
DVA clients who have a Totally and Permanently Incapacitated (TPI) Gold Card do not use the
treatment cycle for physiotherapy and exercise physiology services.

TPI clients receiving physiotherapy or exercise physiology:
• need an annual or indefinite referral for physiotherapy or exercise physiology
• can have as many sessions as are clinically necessary in the period covered by the referral
• do not need the physiotherapist or exercise physiologist to report to the GP after 12 sessions.

Exercise physiology and physiotherapy services for TPI clients must still be clinically necessary,
evidence based and goals focused.
For allied health services other than physiotherapy or exercise physiology, TPI clients must use
the treatment cycle.
See the DVA website for a leaflet for physiotherapists and exercise physiologists:
www.dva.gov.au/treatment-cycle

What do I need to do?
To continue to provide high-quality care to DVA clients, you need to:
• provide clinically necessary treatment for DVA clients when they are referred by their GP – each referral is valid for up to 12 sessions or one year, whichever ends first
• develop a Patient Care Plan with the client and set goals that are SMART – Specific, Measurable, Achievable, Relevant and Timely
• use standardised outcome measures to monitor treatment effectiveness
• communicate with the client’s GP if required during the cycle
• complete the End of Cycle Report to the GP at the end of the treatment cycle, using the template. The report outlines the treatment, standardised outcome measures and recommendations for further treatment if required
• send the report to the client’s usual GP who is coordinating their care
• claim the End of Cycle Report item to receive a payment for completing the report.

Why have a treatment cycle?
To improve the quality of DVA clients’ care through coordination and better communication between GPs, allied health providers and clients. The treatment cycle reinforces the role of the DVA client as the centre of care and the GP as the care coordinator.
The treatment cycle benefits DVA clients, GPs and allied health providers through:
• improved management planning
• increased coordination of care
• increased communication between providers
• stronger continuity of care and clinical accountability
• regular review to ensure that DVA clients get the most effective treatment for their needs.
See the DVA website for more information and guidance about the treatment cycle:
www.dva.gov.au/treatment-cycle

Did you know?
On average, DVA clients who use allied health services see their GP 14 times a year. This means that, for most DVA clients, the treatment cycle will not change how often they need to see their GP.