Where a DVA client has completed the rehabilitation process, their Rehabilitation Plan (the plan) must be closed. Alternatively, a plan may be closed where the client requires a new plan due to a plan variation, or the client has been transferred to a new Rehabilitation Provider (the provider).

**Reasons for plan closure**

Plan closure typically occurs under the following circumstances:

- the client has **achieved all of their rehabilitation goals**
- a client on a return to work plan has **returned to work or returned to optimum hours/duties**
- the client **no longer requires further support and services** through their plan (note that client may still be accessing other DVA support or supplementary services and treatment)
- the client chooses to **withdraw** from rehabilitation
- due to **client non-compliance**, such as the client ceasing contact with their rehabilitation consultant (the consultant) and/or the rehabilitation delegate (the delegate), or the client failing to participate in their plan. When closing a plan due to non-compliance:
  - the consultant should work closely with the delegate on non-compliance issues, including to determine the appropriate length of time to wait before closing a plan due to the client ceasing contact, and
  - the consultant shouldn’t close the plan without the delegate giving their approval.
- the consultant advises the delegate that they consider that **no further gains are likely**, and the delegate agrees that the plan should be closed
- the provider can no longer continue to provide case management services for the client and they **need to be transitioned to another provider**. This may happen where:
  - the client moves location and the provider does not have an appropriately qualified and DVA registered consultant in the client’s new location and cannot service the client remotely
  - a consultant leaves the provider, and the provider does not have the capacity or capability in the client’s location to continue servicing the client, or
  - the provider loses their Comcare registration, or terminates their contract with DVA, and can no longer continue servicing DVA clients
- the client requires a **plan variation** (i.e. to move from a return to work to a return to work plan, or vice versa)
- **rehabilitation is no longer considered appropriate** (i.e. it is unlikely to provide any further value to the recovery process), and/ or
- a **medical assessment indicates that further rehabilitation**, at that point in time, is **impractical or not appropriate**.
Process for plan closure

- Plan closure must always be discussed with the delegate prior to closing the plan.
- Close consultation and **communication between the consultant and client** is required to ensure the **client is comfortable with the plan being closed**.
  - Where the plan is being closed due to non-compliance the delegate will discuss this with the client. **A consultant should not communicate plan closure due to non-compliance with the client**.
- The **D1335 Rehabilitation Plan Closure** form must be completed at the time the plan is closed.
  - The closure report must include the **reasons for closing the plan**, the client’s **Life Satisfaction Indicator (LSI) scores**, and comments against the achievement of each goal.
  - Where the client has obtained employment, information about the type of employment, industry, hours secured and rate per hour must be specifically recorded in the closure report.
  - In order to ensure meaningful closure reports, consultants are required to **fully and honestly complete the form**.
  - A closure report is **not required where the plan is being closed due to a plan variation**.
- The **client’s life satisfaction at the time of plan closure must be obtained** by having the client complete the **D9230 Life Satisfaction Indicators** form.
  - This information is important to help DVA understand what changes have occurred through the client’s participation in rehabilitation.
- The **goals in the plan must be assessed using Goal Attainment Scaling (GAS)**. The score from all the goals in the plan must be converted using the conversion table in the rehabilitation closure report.
- **Where the client is in receipt of DVA incapacity payments**, it is DVA’s responsibility to communicate with the client about their payments.
- **The client and consultant must sign the closure form**, and the consultant must submit it to DVA via the Provider Upload Page (PUP).
- The **final invoice should be uploaded at the same time as the plan closure report**, and as a separate document.