

Collaboration and Honesty Between Stakeholders

The **2015 Rehabilitation Code** was introduced to promote **early intervention and collaborative rehabilitation** in personal injury claims. Its primary goal is to ensure that injured individuals receive timely medical, social, vocational, and psychological support to aid their recovery, rather than focusing solely on financial compensation.

Key reasons for its introduction:

- Prioritising Recovery: The Code emphasizes that rehabilitation should begin as soon as possible, even before liability is determined, to maximize recovery potential.
- Encouraging Collaboration: It fosters cooperation between claimant solicitors, compensators, and healthcare professionals to streamline rehabilitation efforts.
- Addressing All Injury Levels: The 2015 update expanded provisions to include lower-value claims (under £25,000), recognizing that even minor injuries can have significant life impacts.
- Reducing Long-Term Impact: By ensuring early rehabilitation, the Code aims to improve quality of life, independence, and return-to-work prospects for injured individuals.

A Detailed Breakdown: The Impact of the 2015 Rehabilitation Code on Case Management

The **2015 Rehabilitation Code** was introduced to strengthen the role of rehabilitation in personal injury claims, ensuring that recovery is prioritised alongside compensation. It has significantly influenced **case management practices**, particularly in complex and catastrophic injury cases.

1. Prioritising Early Intervention

- The Code emphasises immediate rehabilitation, encouraging claimant solicitors and compensators to collaborate as early as possible in the claims process.
- Rehabilitation can begin before liability is determined, ensuring injured individuals receive timely medical and psychological support.

2. Strengthening Collaborative Case Management



 Case Managers play a key role in assessing rehabilitation needs and overseeing treatment.

The Code promotes **joint decision-making** between solicitors, compensators, and healthcare professionals, streamlining rehabilitation efforts.

 It encourages direct engagement with NHS clinicians to align rehabilitation plans with existing medical care.

3. Expanding Support for Lower-Value Claims

- The 2015 update introduced structured provisions for claims below £25,000, recognising that even minor injuries can have lasting consequences.
- It established a **Triage Report system**, ensuring lower-value cases receive appropriate rehabilitation without unnecessary delays.

4. Improving Case Manager Selection & Oversight

- Case Managers must be professionally qualified and independent from medicolegal reporting.
- The Code outlines best practices for selecting and instructing Case Managers, ensuring that rehabilitation plans are evidence-based and focused on achievable goals.

It promotes **continuity of care**, with Case Managers overseeing treatment from initial assessment through to recovery.

5. Ensuring Financial Transparency & Justification

- Compensators must **justify refusals** to fund rehabilitation and provide alternative recommendations.
- The Code establishes clear payment timelines, ensuring assessments and treatments are funded promptly.
- It protects claimants from **unreasonable financial burdens**, ensuring that agreed rehabilitation costs are not disputed later.

6. Enhancing Rehabilitation for Catastrophic Injuries

 For severe cases, the Code mandates Immediate Needs Assessments (INA) to determine urgent rehabilitation requirements.



- It encourages multi-disciplinary collaboration, ensuring that medical, vocational, and psychological needs are addressed holistically.
- The Code recognises the **long-term nature of rehabilitation**, promoting ongoing assessments and adjustments to treatment plans.
- By integrating these principles, the 2015 Rehabilitation Code has strengthened the
 role of case management, ensuring that injured individuals receive structured,
 timely, and effective rehabilitation