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ACC announces 2008/09 workplan

ACC's Statement of Intent 2008-2012, tabled in Parliament on 30 June, highlights the work ACC is carrying out in the next 12 months and beyond to achieve its key strategic goals.

In 2008-2009, ACC will continue to work closely with health providers to achieve one of its key strategies - rehabilitation focused on returning to productive life.

One key area of work will be developing and implementing a relationship-based framework and principles for purchasing health and rehabilitation services. A monitoring framework will be developed to ensure clients are receiving the services they need, ACC is receiving value for money, and providers can deliver professional and sustainable services.

ACC will implement the Home Support Strategy to ensure that services are appropriate and meet client needs. It will also review vocational rehabilitation services.

Another main focus of work will be the review of ACC's service delivery model to meet future changes in population, technology and client needs. This review will explore partnership opportunities with providers, clients and their employers so that the scheme will deliver enhanced outcomes for clients.

At the same time, ACC will also continue to work closely with other government agencies, including the Ministry of Health. Because ACC and the Ministry of Health rely on the same providers and workforce to deliver health services, work will continue towards a more collaborative approach to improve outcomes for all New Zealanders.

ACC's Statement of Intent is available to view or download at www.acc.co.nz or by emailing melissa.grouden@acc.co.nz for a copy of the 2008-09 workplan.

New edition of Rehabilitation Research Review

The third edition of the Rehabilitation Research Review is now available and can be delivered straight to your email inbox. Subscribe at www.researchreview.co.nz and you'll have access to the latest studies as well as commentary and advice from New Zealand rehabilitation experts.

New law makes Scheme more accessible

New legislation designed to enable more flexible use of the health workforce, and help improve access by patients to the ACC scheme, comes into effect on 1 August 2008.

Some of the changes, resulting from the Injury Prevention, Rehabilitation, and Compensation Amendment (IPRC) Act 2008, will affect the way treatment providers work with ACC. Compliance obligations arising from the changes will be minimal.

Areas most affected will be assessment and treatment, due to patients claiming cover for an expanded range of injuries (primarily workplace mental injury, but there will also be the potential, in the future, for new work-related gradual process diseases or infections to be presented), and nurse practitioners will be able to assess a patient's ability to work.

Most of the legislation comes into force on 1 August 2008, but the provisions relating to workplace mental injury and vocational rehabilitation will not come into force until 1 October 2008.

The following provides an overview of the changes, and how they will affect treatment providers. More detailed information will be sent directly to professional organisations, and will be available on ACC's website and through ACC's Relationship Managers, who will update providers during their regular visits.

Expansion of potential work-related gradual process, disease, or infection claims – in force 1 August 2008

The ACC scheme currently provides cover for 41 work-related gradual process injuries,

diseases or infections, many of which were added in January to reflect greater understanding of the link between exposure to harmful agents and personal injury.

The new legislation makes the updating process simpler and more flexible by enabling certain occupations, industries, processes or levels of exposure to be added to Schedule 2 of the IPRC Act. For treatment providers, the key point is that they can expect, gradually and over time, a greater range of gradual process injuries to be presented for treatment and eligible for ACC cover.

In addition, amendments to rules around the three-part test of causation currently used by ACC to determine cover will reduce barriers to clients seeking cover. The new rules confirm that ACC is to pay for investigating the claim. Where causation is established, a claim can only be declined if ACC can prove that the work undertaken by the patient places them at no significantly greater risk of developing a personal injury.

Expanded role for Nurse Practitioners – in force 1 August 2008

Two changes under the Act ensure that nurse practitioners will be given a greater role as treatment providers under the ACC scheme.

The first is that nurse practitioners will now be able to determine a patient's ability to work. They will be able to record, on an ACC18 (medical certificate) form, whether a patient is fully fit for work, fit for selected duties, or fully unfit for work. An ACC18 can be completed where an ACC45 (injury claim form) has already been lodged. As well as

determining ability to work, it also identifies other needs the patient may have. This information will be used by ACC to calculate weekly compensation and for rehabilitation planning.

The second change is that the date on which treatment is first provided by a nurse practitioner (or a General Practitioner) can now be considered the deemed date of injury for work-related gradual process injury, disease, or infection claims. This is a pragmatic response to establishing when a gradual injury can be said to have occurred. It has no material impact on the activity of nurse practitioners.

Neither of the changes requires a significant time commitment, and further details of processes will be provided through the Relationship Management team.

These two functions were previously limited to medical practitioners. The changes are consistent with wider health policy, which is to enable more flexible use of the health workforce.

Wilful self-injury “automatically” entitled – in force 1 August 2008

ACC’s process for deciding eligibility for entitlements where self-harm occurred was long, invasive and didn’t support families dealing with grief. Entitlements consisted of treatment costs and injury prevention advice for clients who survived their injuries.

Research has shown, however, that over 90% of those who commit suicide have a mental health disorder.

The Amendment Act has repealed the disentitlement provision. This means people who have wilfully self-inflicted injury or suicide claims will not be disentitled and will be

managed like any other personal injury claim. However the amendment does not overturn previous disentitlement decisions. This change is unlikely to affect treatment providers.

Mental injury caused by witnessing a traumatic event at the workplace now covered – in force 1 October 2008

Cover for work injuries has been expanded to include mental injury as a result of experiencing, or being in close proximity to, a traumatic event while at work. It relates to scenarios such as where a train runs over a pedestrian and the driver suffers mental injury as a result of witnessing it.

This provision will come into force in October to provide time for final policy work to continue. Diagnoses of work-related mental injury will be restricted to registered psychiatrists. Full information will be provided in good time for the introduction of the new cover.

Other changes – in force 1 August 2008

A new provision also requires ACC to annually review the payment rates for treatment prescribed in regulations to assess whether they are sufficient in relation to treatment costs; and report to the Minister for ACC including any recommendation for change.

Other provisions of the law affect patients in a more indirect way, largely related to changes in eligibility and entitlement provisions relating to weekly compensation.

More information on the Act

More detailed information on The Injury Prevention, Rehabilitation, and Compensation Amendment Act can be found on the ACC website at www.acc.co.nz, or call your Relationship Manager.

ACC's Partnership Programme

ACC is working with the GP Liaison Group to identify and resolve the operational issues that some health professionals are experiencing with employers who are part of the ACC Partnership Programme.

The Partnership Programme (often called the accredited employer programme) is a self-insurance option for New Zealand's large employers. It enables them to take responsibility for the case and claims management of their employees' workplace injuries. The employers are required to provide all the legislative entitlements and best practice rehabilitation services that ACC offers – and are audited before they join and every year afterwards to ensure their safety and injury management standards and practices meet these requirements.

When employees are injured, the employers must provide opportunities for alternative duties and, given they directly benefit from the employees returning to work promptly, are motivated to encourage this. Many employ company doctors who are familiar with the work environment and work closely with the employer to facilitate return to work programmes.

The employers and their doctors welcome contact with GPs and other health professionals as they recognise their important role in managing injury claims. If your patient's employer is part of the programme, please don't hesitate to contact them or the work doctor – your early intervention can help to reduce the chances of a claim becoming complex, and help ensure the employee can stay at work.

New 'Obtain Employment' service

Changes are underway in ACC's vocational services for clients who have lost or may lose their job after an injury.

A new 'Obtain Employment' service, due for launch in March 2009, will replace the existing Work Preparation, Work Ready Programmes and enhance the Initial Occupational Assessment. Other services, including the Initial Medical Assessment, Functional Capacity Evaluation and Work Hardening Programme will also be affected.

The new approach aims to:

- ensure an 'outcomes' focus in all 'obtain employment' services
- combine existing services to produce an integrated, timely service, supported by a key worker
- include a procurement strategy that fits with the outcomes-focused approach.

The new service will include:

- a comprehensive interdisciplinary assessment (including the Initial Occupational Assessment and others as required, such as functional capacity, literacy and cultural assessments) that leads to services tailored to clients' vocational needs
- individualised 'Obtain Employment Plans', developed with clients, that guide the service delivery
- flexibility in the way services are delivered, determined by each 'Obtain Employment Plan'.

Clients will be streamed into one of three service pathways according to their ability to self-manage.

ACC general practice audits and reviews

If you're based at a general practice or accident and medical clinic, you may already be aware of ACC's audits and reviews, which were introduced in 2005.

These audits – undertaken randomly unless required for a specific reason – are a formal examination of an organisation's or individual's:

- accounts or financial compliance with a contract or regulations
- service provision – in particular that:
 - ACC clients' presenting symptoms are causally linked to stated accidents, rather than to underlying diseases or conditions
 - provisional diagnoses are clinically valid
 - the chosen management pathways are appropriate and necessary
- scheduled fees or contributions versus the services provided
- clinical records and notes with respect to ACC claims.

Audits to date have generally found:

- that diagnoses are completed to a consistently acceptable standard by treatment professionals working under the

Cost of Treatment Regulations, Rural General Practice Agreement and Accident and Medical Agreement

- some inconsistencies within some areas, such as injury management/progress and outcomes
- a lack of assessment detail in completing the ACC45 injury claim form's sections relating to the injury/accident description and patient employment. (Given that the ACC45 is the only information ACC receives for 90% of claims, accuracy and completeness in the ACC45 are crucial.)

Practices that have been audited receive a report of the relevant findings and an opportunity to comment on them before they're finalised. Local ACC Relationship Managers also offer follow-up visits to discuss the findings, as well as specific education sessions for practice staff. If considered necessary, follow-up audits are carried out six to 12 months later.

For more information on audits and findings, please contact Kim Eland at kim.eland@acc.co.nz or on 04 918 7813, or contact your local Relationship Manager. If you're not sure who they are, phone 0800 222 070.

Safety NZ Week 2008

This year's Safety NZ Week will focus on home safety. The theme responds to the fact that more injuries occur in the home than in any other environment – and that it's often complicated and difficult to change people's behaviour in their own homes.

With a tagline of 'Safety begins at home', Safety NZ Week will feature activities designed to raise awareness of the risks at home and the easy things people can do to reduce them and make

their home, and their behaviour at home, safer. Home safety will also continue as a focus for ACC right up until Safety NZ Week 2009.

For more information, check out www.safetynzweek.co.nz from 1 August – it will also include safety tips and ideas for groups and individuals to take part. If you would like information before 1 August, send an email to safetynzweek@acc.co.nz.

eLodgement – important information

Changes to ACC45 status messages in MedTech-32

MedTech-32 version 17 includes a number of changes to the ACC45 status messages. Here's a list of the new messages and what they mean.

If you need help with 'Uploading' and 'No Reply' messages, please call the eBusiness team on 0800 222 994, option 1.

Status	Definition
Completed	The ACC45 has been created but not uploaded to the eLodgement webpage.
Loaded	The ACC45 has been selected and is ready to be uploaded to the webpage.
Received	The ACC45 has been successfully uploaded to the webpage.
Failed	The ACC45 has been uploaded to the webpage, but some information needs to be corrected. You can view the reason for the failure in the 'Response' tab of the 'View ACC45' screen.
Parked	The ACC45 has been parked.
Printout	The 'Send Electronically' tick box on the ACC45 has not been ticked. (This needs to be done before the ACC45 can be uploaded to the webpage.)

Uploading ACC45s for eLodgement

Once you've uploaded your ACC45s to the eLodgement webpage, remember to click on the 'Ack' button on the 'ACC45 Electronic Lodgement Utility' screen. This will update the status messages – although only if the 'Directory Monitor' has been set up properly in MedTech.

Setting up the Directory Monitor

If you need to set up the Directory Monitor, make sure you use the computer that holds the digital certificates. For instructions, see 'ACC45_Change_MedTech_V1.0.pdf', which is on the MedTech-32 version 17 CD under D:\Documents\Release Notes and Other Documents. Alternatively, phone the eBusiness team on 0800 222 994, option 1.

Having trouble eLodging your ACC45s?

If you're using the new version of MedTech (Version 17), here's some information to help you eLodge your ACC45s.

'Suggested Treatment and Objectives' field:

- Only use this field when you're referring a patient to another health professional. Note: you can't enter any comments in this field without first selecting a referral provider.

Failed claims:

- Please don't resend 'Received' claims to the eLodgement webpage, as this will create duplicates.
- If you need to amend failed claims, change them in MedTech first. When their status changes to 'Completed', you can resend them to the webpage.

Noise-induced hearing loss:

- If your patient's occupation is 'Retired' and you state that their injury is work related, don't tick the 'Did the accident happen at work?' field. Instead, add a

comment to the 'Injury Cause' field (eg 'Work-related injury') and make sure the 'In Paid Employment' field is un-ticked.

'In Paid Employment':

- If you select 'Other' in the 'In Paid Employment' field and select an occupation (eg Student), but leave the 'In Paid Employment' field un-ticked, the claim will fail owing to inconsistent data. You must tick 'In Paid Employment', remove the text from 'Other', then un-tick 'In Paid Employment'.

Able to continue normal hours of work:

- You must complete and tick this field, even if your patient is a student, retired or an infant (MedTech treats these as occupations).

Severity has been replaced:

- The 'Severity' field has been replaced with 'Qualifier'. 'Confirmed' is the most commonly used option.

Additional comments:

- Your diagnosis description will be automatically added to the 'Comments' field.

- If you tick the 'Is this a work related gradual process, disease or infection claim?' field, the text 'Gradual Process' will automatically be added to the 'Comments' field.

If you have any questions about this, please phone the eBusiness team on 0800 222 994, option 1.

eLodging isn't invoicing

Please note that eLodging ACC45s doesn't mean you're invoicing ACC at the same time. It's important that you continue submitting invoices separately.

Fix it, don't fax it!

If you eLodge your ACC45s via a PMS system, but they fail on the ACC webpage, please take a few minutes to fix the claim and resubmit it. Printing and faxing it to the registration centre will only add unnecessary delays (and waste paper in the process).

If you need help correcting the ACC45, phone the eBusiness Team on 0800 222 994, option 1.

Upcoming conferences and events

Traumatic Brain Injury Functional Rehabilitation Conference

30 July – 1 August, Millennium Hotel, Queenstown.
Theme: 'It's about time: Vocational Rehabilitation and managing challenging behaviours after TBI'.
www.tbiconferences.co.nz

HealthCare Providers New Zealand Conference

11-13 August, Sky City Auckland Convention Centre.
Theme: 'Balancing Expectations between Consumers, Providers and Funders'. <http://healthcareproviders.org.nz/events/conference.htm>.

New Zealand Occupational Medicine Conference

22-24 August, Bayview Wairakei Hotel, Taupo.
Theme: 'Letting off Steam'. www.amsanz.org.nz

Emergency Nurses' Conference 2008

28 August – 1 September, Fisher and Paykel Healthcare Clinical Education Centre, Auckland City Hospital. Theme: 'Diverse Challenges, Driving Change'.
www.emergencynursingconference.co.nz.

New Zealand Association of Hand Therapists' Conference

30-31 August, Rydges Hotel, Christchurch. Theme: 'Under the Thumb'.
Email: handconference@gmail.com.

Safety NZ Week

1-7 September. Theme: 'Safety in the home'.
Email: safetynzweek@acc.co.nz.

New resources

ACC has recently released four new resources:

- The 'Guidelines on Maori Cultural Competencies' have been updated and a new DVD produced to help health professionals working with Maori patients. The code for the Guidelines (including the DVD) is ACC1625.
- The 'Nursing Treatment Profiles' (ACC4593).
- The 'Elective Surgery Procedure Codes' (ACC4684).

All are available and can be ordered at www.acc.co.nz (under For Providers) or by phoning 0800 802 444.

New evidence-based healthcare reports

Evidence based reviews and purchasing recommendations on a wide range of treatments are now available at www.acc.co.nz (under About ACC > Research at ACC > Evidence Based Healthcare (EBH) Group Reports). Reports recently added cover:

- extracorporeal shockwave therapy for selected musculoskeletal conditions
- lumbar and cervical inter-vertebral disc replacement.

New regulations proposed

The Government is proposing legislative changes that will affect treatment providers, registered health professionals and counsellors.

The proposed changes – currently under consultation – include:

- transferring the definition of 'treatment provider' and 'registered health professional' from the Injury Prevention, Rehabilitation, and Compensation Act 2001 to regulations
- making the definitions of 'registered health professional' and 'counsellor' more consistent with the Health Practitioners Competence Assurance (HPCA) Act 2003
- changing ACC's definition of counsellors applying outside the HPCA Act.

The changes offer a number of benefits:

- Transferring definitions to regulations will enable ACC to respond more quickly and appropriately to a changing clinical environment (for example, we'll be more easily able to include new professions in the definitions).
- With the definition of 'registered health professional' more consistent with the HPCA Act, ACC will be able to recognise new professions as registered health professionals – which means their patients will be eligible to apply for ACC cover for treatment injuries (injuries

caused by, but not a necessary or ordinary consequence of, treatment).

- The changes will set new requirements for counsellor qualifications, supervision, professional membership etc, to help ensure a high standard of counselling for ACC clients.

The consultation document provides more detail on:

- the reasons for the proposals
- the likely impacts of the proposed changes
- particular questions on which ACC would like feedback.

You can download it at www.acc.co.nz.

The deadline for submissions (which must be in writing) is 5pm on Friday 8 August. You can send yours:

- by email to acc.regs.consult@acc.co.nz (with 'Changes to the Cost of Treatment Regulations' in the subject line) or
- by post to ACC Regs Consult, PO Box 242, Wellington 6140.

If you have any questions about the proposed changes or the submission process, please email acc.regs.consult@acc.co.nz.