



# SERVICE SCHEDULE FOR SUPPORT NEEDS ASSESSMENT SERVICES

CONTRACT NO: SNAAXXXX

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## A. QUICK REFERENCE INFORMATION

### 1. TERM FOR PROVIDING SUPPORT NEEDS ASSESSMENT SERVICES

- 1.1. The Term for the provision of Support Needs Assessment Services is the period from 1 December 2024 (“Start Date”) until the close of 30 November 2027 (“End Date”) or such earlier date upon which the period is lawfully terminated or cancelled.
- 1.2. Prior to the End Date, the parties may agree in writing to extend the Term of this Service Schedule for a maximum of two further terms of two years. Any decision to extend the Term of this Service Schedule will be based on:
  - 1.2.1 the parties reaching agreement on the extension in writing prior to the End Date; and
  - 1.2.2 ACC being satisfied with your performance and delivery of the Services; and
  - 1.2.3 all other provisions of this Contract either continuing to apply during such extended Term(s) or being re-negotiated to the satisfaction of both parties.
- 1.3. There is no obligation on the part of ACC to extend the Term of the Service Schedule, even if the Supplier has satisfactorily performed all the Services.

### 2. SERVICE LOCATION (PART B, CLAUSE 4)

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### 3. SERVICE ITEMS AND PRICES (PART B, CLAUSE 19)

**Table 1 – Service Items and Prices**

Service Item Code	Service Item Description	Service Item Definition	Price (excl. GST)	Pricing Unit
ASI03	Support Needs Assessment (SNA) and Report – Child and Young Person (Standard) Up to age 16 years at date of assessment	Comprehensive Assessment in accordance with Part B, clause 5.4.	\$2,337.92	Set Fee per Client
ASI04	Support Needs Assessment (SNA) and Report – Child and Young Person (Complex) Age 0-5 at date of assessment	Comprehensive Assessment for child under 5 years old and with Exceptional medical support needs (see Appendix 2), in accordance with Part B, clause 5.4.	\$2,922.40	Set Fee per Client
ASI05	Support Needs Assessment (SNA) and Report – Adult TBI or SCI Age 16 years and above at date of assessment	Comprehensive Assessment in accordance with Part B, clause 5.4.	\$1,753.44	Set Fee per Client
ASI06	Support Needs Assessment (SNA) Additional Administration up to 6 hours	Additional administration time required to complete an assessment, including report writing. In accordance with clause 5.9.	\$146.12	Per hour, to a maximum of 6 hours No prior approval required
ASI07	SNA Additional Administration over 6 hours	Additional administration time required to complete an assessment, including report writing. In accordance with clause 5.10.	\$146.12	Per hour, to a maximum of 6 additional hours Prior approval required
ASI08	SNA Second Assessor due to Safety Concerns	Attendance of a second Assessor due to safety concerns identified by ACC. In accordance with 16.3	\$146.12	Per hour – prior approval required.

Service Item Code	Service Item Description	Service Item Definition	Price (excl. GST)	Pricing Unit
				Maximum 3 hours
PSA01	Retrospective Personal Support Assessment	Comprehensive assessment in accordance with Part B, clause 5.13. Includes peer review of each report in accordance with Part B, clause 8.3.2 for adults and 8.4.4 for paediatrics.	\$164.19	Per Hour
ASITT1	Travel Time	Paid for travel time: <ul style="list-style-type: none"> <li>inside the geographical area the first 30 minutes of travel must be deducted from the total time calculated; or</li> <li>outside the geographical area the first 30 minutes of travel is not deducted from the total time calculated.in accordance with Part B, clause 20.</li> </ul>	\$146.12	Per hour
ASITD10	Travel Distance	A contribution towards travel in accordance with Part B, clause 20.	\$0.78	Per kilometre above 20kms
ASITA1	Air Travel	Air travel when a Service Provider is required to travel in accordance with Part B, clause 20.	Actual and reasonable	Actual and reasonable
ASIT6	All Other Travel	Costs for return travel by ferry, taxi, rental car, public transport and parking in accordance with Part B, clause 20.	Actual and reasonable	Per Trip
ASIAC	Accommodation	Payable when an Assessor has been requested to travel by ACC in accordance with Part B, clause 20.	Actual and reasonable	Actual and reasonable
ASIDNA	Non attendance	If a Client fails to attend a scheduled appointment without giving at least 24hrs notice.	\$87.67	Per appointment

#### 4. PRICE REVIEW

ACC will review pricing when, at ACC's sole discretion, we consider a review is necessary. The factors ACC may take into account during a review include, but are not limited to:

- general inflation;
- changes in service component costs;
- substantial changes in the market.

If ACC finds that the factors we take into account have not had a significant impact on price, the prices will remain unchanged.

If ACC provides a price increase, the supplier must agree any adjustment in writing. The price increase will take effect from a date specified by ACC.

#### 5. RELATIONSHIP MANAGEMENT (PART B, CLAUSE 14)

*Table 2 - Relationship Management*

Level	ACC	Supplier
Client	Recovery Team / Recovery Team Member	Individual staff or operational contact
Relationship and performance management	Engagement and Performance Manager	Operational contact/ National Manager
Service management	Portfolio Team or equivalent	National Manager

#### 6. ADDRESSES FOR NOTICES (STANDARD TERMS AND CONDITIONS, CLAUSE 23)

##### NOTICES FOR ACC TO:

ACC Health Procurement (for delivery)  
Justice Centre  
19 Aitken Street  
Wellington 6011  
P O Box 242 (for mail)  
Wellington 6140  
Marked: "Attention: Procurement Specialist"  
Phone: 0800 400 503  
Email: health.procurement@acc.co.nz

##### NOTICES FOR SUPPLIER TO:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (for deliveries)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Marked: \_\_\_\_\_ Attention: \_\_\_\_\_ , \_\_\_\_\_  
Phone: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_

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## **B. SPECIFICATIONS FOR SUPPORT NEEDS ASSESSMENT SERVICES**

### **1. PURPOSE**

- 1.1 ACC wishes to purchase Support Needs Assessment Services (“the Services”) for Clients who have an injury related support or rehabilitation needs. The purpose is to inform the development and/or implementation of an Individualised Plan for Clients with multiple physical, sensory and/or cognitive disabilities.
- 1.2 The Service will assess a Client’s support needs and recommend options that will contribute towards restoring the Client’s independence to the maximum extent practicable in everyday living activities.

### **2. SERVICE OBJECTIVES**

- 2.1 ACC will measure the success of this Service based on the following objectives:
  - 2.1.1 Clients receiving a Needs Assessment within the timeframes set out in Clause 7.1 of this Service Schedule;
  - 2.1.2 Clients receiving a comprehensive assessment that identifies their current or retrospective support needs and abilities;
  - 2.1.3 Assessment outcomes which are defined qualitatively and through validated standardised measures, in accordance with the guidelines for these measures;
  - 2.1.4 A range of strategies and options are identified where appropriate to address the Client’s injury related needs and which will enhance independence, facilitate a Client’s participation in home, work, school/education, leisure and promote community independence and quality of life; and
  - 2.1.5 Assessments which provide sufficient, evidence-based and substantiated information to enable ACC to make a decision as to the nature and extent of ACC funded services and supports.

### **3. SERVICE COMMENCEMENT**

#### Eligibility Criteria

- 3.1 This Service is for Clients who have been determined by ACC as being eligible for Support Needs Assessment Services and have been referred to the Supplier by ACC.

## Referral process

- 3.2 ACC will refer a Client requiring a Support Needs Assessment to the Supplier by sending an ACC4202 Referral and Report form (adult referral), or an ACC4501 Referral and Report form (child and youth referral).
- 3.3 ACC will refer a Client requiring a Retrospective Personal Support Assessment to the Supplier by sending an ACC4209 Referral form (adult and paediatric). ACC will discuss and agree the referral with the Supplier before sending it.
- 3.4 At a minimum, the Referral will contain the following information:
  - 3.4.1 The Client's name, contact details, claim number, demographic details and a description of their injury;
  - 3.4.2 The reason for the referral based on the Client's identified needs and goals;
  - 3.4.3 Relevant clinical history to enable a quality assessment and recommendations that will support improved Client outcomes;
  - 3.4.4 Any previous Assessment report(s) relevant to the current circumstances;
  - 3.4.5 The name and contact details of other relevant providers who the service provider may need to contact as part of the assessment; and
  - 3.4.6 Any known risks associated with providing Services to the Client.
- 3.5 The Supplier must return any Referral to ACC if it contains inadequate information and request further details before accepting the Referral.
- 3.6 On receipt of a Referral, the Supplier will:
  - 3.6.1 Notify ACC within one Business Day if the Referral has been declined.
  - 3.6.2 Contact the Client within five Business Days to explain the Assessment process, answer any Client questions, confirm whether the Client requires a support person and arrange a suitable time and venue to undertake the Assessment.
  - 3.6.3 Notify ACC the Assessment date, time and location and contact details of the assigned Service Provider.

## 4. SERVICE LOCATION AND SPECIFIED AREA

- 4.1 The Service will be provided in the Client's home, workplace or other appropriate community location or as otherwise directed by ACC.
- 4.2 The Service can be delivered by Telehealth where clinically appropriate. Telehealth services must be provided in accordance with ACC's Telehealth Guide (ACC8331) which is available on ACC's website.



## **5. SERVICE REQUIREMENTS**

### Operational Guidelines

- 5.1 The Service must be provided in accordance with the Operational Guidelines for the Support Needs Assessments Service, which are available on the ACC website. The Operational Guidelines may be updated by ACC from time to time.
- 5.2 If there is a conflict between the Operational Guidelines and this Service Schedule, the provisions of the Service Schedule take precedence.

### Service Components

- 5.3 The Supplier may be requested to provide some or all of the following Services:
  - 5.3.1 Support Needs Assessment, in accordance with clause 5.4; and/or
  - 5.3.2 Retrospective Support Needs Assessment, in accordance with clause 5.13.

### Support Needs Assessment

- 5.4 The Support Needs Assessment will include information contained in the Referral and appended documents. The Service Provider must:
  - 5.4.1 Provide a full explanation of the assessment process at the beginning of the first meeting with the Client and Client's family/ whānau or support people if requested.
  - 5.4.2 Complete all aspects of the Support Needs Assessment and all standardised measures in accordance with the guidelines for those measures.
  - 5.4.3 Advise ACC of any changes needed to the information provided by ACC.
  - 5.4.4 Identify the Client's abilities and support needs.
  - 5.4.5 Develop a range of strategies and options to address those needs. Strategies must consider natural supports, community supports, Client actions and ACC funded responses. Strategies for Adults will be based in person-centred practice and, for Children and Young People will be based in family-centred practice.
  - 5.4.6 Identify any linkages to Iwi and Māori community organisations, and other ethnic and cultural groups, as appropriate.

- 5.4.7 Complete a Support Needs Assessment Report, using the template provided by ACC, which identifies options for meeting the Client's identified needs and goals including specific evidence based and substantiated rationale for ACC funded services and, in particular, any Exceptional Medical Support needs (tabled in Appendix 2), and responses to meet any identified support needs. The report should also identify any support that falls outside of ACC guidelines.
- 5.5 The Service Provider may use the Functional Independence Measure (FIM) (or WeeFIM where clinically applicable) for scoring a standard component of the Assessment. A change of FIM score compared to a previous Assessment which provided FIM scoring must be explained within the assessment tool.
- 5.6 The Supplier will provide all equipment and technology necessary to deliver services by Telehealth and manage their own technical issues.
- 5.7 If ACC or a reviewer engaged by ACC notifies the Supplier and Service Provider that an assessment report is not of an appropriate standard, the Service Provider must submit a revised report to ACC within ten Business Days at no further cost to ACC.

#### Additional Hours

- 5.8 The Supplier may request additional hours if the Client's sustained injury requires further assessment to better understand the Client's support needs.
- 5.9 Where an Assessment requires more than twelve hours to complete for an Adult assessment, or more than 16 hours to complete for a Child and Youth assessment, or more than 20 hours for a Complex Child and Youth, the Supplier may provide up to a maximum of an additional six hours to complete the assessment without requiring ACC prior approval.
- 5.10 Where an Assessment requires more than the allocated hours above, the Supplier can seek retrospective approval from ACC for a further maximum, six hours of Assessor time. The Supplier must submit:
  - 5.10.1 A report detailing the reasons for the additional hours, the time and activities and outcomes achieved to complete the Assessment;
  - 5.10.2 Any other information as required to assist the request; and
  - 5.10.3 The confirmed number of hours required to complete the Assessment.
- 5.11 ACC will review the request and has sole discretion to approve or decline the request for additional hours.
- 5.12 The Supplier must hold all records and provide to ACC on request.

## Retrospective Personal Support Assessments

- 5.13 The Assessment will include consideration of information contained in the Referral and appended documents. The Service Provider will:
- 5.13.1 Advise ACC of any further information that is required to complete the assessment.
  - 5.13.2 Consider the information gathered from the Client, caregiver or parents; clinical documentation and observation of the Client's current presentation. This should be balanced against the Service Provider's experience working with Clients of similar presentation and knowledge of the support that they typically require.
  - 5.13.3 Recommend attendant care hours that reflect the assistance that would have been required to complete daily personal care tasks during the retrospective period.
  - 5.13.4 Ensure a full explanation of the assessment process is provided to the Client and Client's family/ whānau or support people if requested.
  - 5.13.5 Obtain a peer review for each Assessment in accordance with clause 8.3.2.
  - 5.13.6 Identify any linkages to Iwi and Māori community organisations, and other ethnic and cultural groups, as appropriate; and
  - 5.13.7 Complete all aspects of the Retrospective Personal Support Assessment in accordance with Appendix 3 and complete standardised measures in accordance with the accepted guidelines for those measures.
- 5.14 If ACC or a reviewer engaged by ACC notifies the Supplier and Service Provider that an assessment report is not of an appropriate standard, the Service Provider must submit a revised report to ACC within ten Business Days at no further cost to ACC.

## For Paediatric Clients

- 5.15 The Service Provider will use the above Services to compare assessment results with available normative data of a typically developing child in accordance with the assessment guideline to inform recommendations.
- 5.16 The Assessment must detail and include the following:
- 5.16.1 The support required for the child, which is over and above what would normally be parental responsibilities for a typically developing child, (including the requirement to supervise children under the age of 14 years old);

- 5.16.2 Recommended support for those needs that are deemed to be over and above the needs and /or time required for the typically developing child of the same age.
- 5.17 The Service Provider will obtain a peer review for each Assessment in accordance with clause 8.4.4.

## 6. EQUIPMENT

- 6.1 All Rehabilitation Equipment must be requested in accordance with the Operational Guidelines for Managed Rehabilitation Equipment Services ('MRES') which are available on the ACC website ([www.acc.co.nz](http://www.acc.co.nz)).
- 6.2 Service Providers may purchase Non-List items valued at under \$100 (per item, excluding GST), directly from non-contracted suppliers without prior approval from ACC. ACC will reimburse the Supplier for the purchased item after receiving a separate invoice that details the item type and cost, cites service item code EU100, and has a receipt for the item attached.
- 6.3 The Supplier will ensure that Service Providers keep up to date with changes to MRES policies and processes, and updates to the MRES Equipment Lists. These can be found on the ACC website ([www.acc.co.nz](http://www.acc.co.nz)).

## 7. TIMEFRAMES

- 7.1 The Supplier will meet the following timeframes

**Table 3 - Timeframes**

Requirement	Applicable Timeframe - SNA	Applicable Timeframe - RPSA
Notify ACC if the Referral has been declined.	Within one Business Day of receiving the Referral.	Within one Business Day of receiving the Referral.
Contact the Client to explain the assessment process, answer any Client questions, confirm whether the Client requires a support person and arrange a suitable time and venue to undertake the Assessment.	Within five Business Days of receiving the Referral.	Within five Business Days of receiving the Referral.
Complete the Assessment.	Within 25 Business Days of accepting the Referral.	Will be dependent on assessment complexity and period of time that the assessment covers.
Complete and submit an Assessment Report to ACC.	Within 10 Business Days of completion of the Assessment.	Within 10 Business Days of completion of the Assessment.

Requirement	Applicable Timeframe - SNA	Applicable Timeframe - RPSA
ACC complete and submit feedback to Assessor for comment	Within 15 Business Days of receiving the Assessment Report	Within 15 Business Days of receiving the Assessment Report
Assessor responds to feedback and submits to ACC	Within 15 Business Days of receiving the Feedback Request	Within 15 Business Days of receiving the Feedback Request

## 8. SERVICE SPECIFIC QUALITY REQUIREMENTS

- 8.1 The Supplier must provide the Services using the Assessment Tools in accordance with Good Industry Practice.

Personnel qualifications and experience

- 8.2 The Supplier must ensure all Service Providers and other personnel involved in the delivery of the Service meet the following requirements, as applicable:

- 8.2.1 Each Service Provider undertaking Assessments must:

- 8.2.1.1 Hold the appropriate professional qualification (either Occupational Therapist, Registered Nurse or Physiotherapist); and
- 8.2.1.2 Has demonstrated competencies in accordance with clause 9, Table 4; and
- 8.2.1.3 Maintains registration with the appropriate responsible authority under the Health Practitioners Competence Assurance Act 2003; and
- 8.2.1.4 Meets the competency requirements as documented in Appendix 1 – Competency Framework.

- 8.2.2 Non-registered service providers or personnel must:

- 8.2.2.1 Have the appropriate qualification and expertise; and
- 8.2.2.2 Have regulatory documented supervision, appropriate to their level of qualification and competency to ensure that they provide support activities safely and effectively; and
- 8.2.2.3 Undertake ongoing training in their area of expertise.

- 8.2.3 All Personnel must:
  - 8.2.3.1 Consistently provide the highest standard of customer service in accordance with Good Industry Practice, and
  - 8.2.3.2 Undertake induction and development requirements.
- 8.2.4 Each Service Provider undertaking Retrospective Personal Support Assessments:
  - 8.2.4.1 Meets the criteria set out above and additional criteria set out in clause 8.3 or adults and 8.4 for paediatrics; and
  - 8.2.4.2 Each Assessment report is peer reviewed in accordance with clauses 8.3.2 for adult and 8.4.4 for paediatrics.

#### Adult Retrospective Personal Support Assessment

- 8.3 For all Adult Retrospective Personal Support Assessment, the Supplier must ensure the Service Provider has the following additional skills and experience:
  - 8.3.1 More than three years current and continuous experience completing Adult SNA for ACC and /or an alternative comparable organisation as may be determined at ACC's sole discretion; and
  - 8.3.2 Access to Peer Review by a senior practitioner. The Peer Review can be conducted by a Service Provider who is within your organisation or outsourced from another SNA Supplier.

#### Paediatric Retrospective Personal Support Assessment.

- 8.4 For all Paediatric Retrospective Personal Support Assessment, the Supplier must ensure the Service Provider has the following additional skills and experience:
  - 8.4.1 More than three years current and continuous experience completing SNA for ACC and /or an alternative comparable organisation; and
  - 8.4.2 More than three years current and continuous postgraduate experience in either assessing paediatric support needs, or providing paediatric rehabilitation in a community setting for any agency as considered comparable by ACC (e.g. Health NZ - Te Whatu Ora); and
  - 8.4.3 Ability to apply international and local validated normative data, outcome measures and relevant research including but not limited to; Paediatric Evaluation of Disability Inventory (PEDI), Hawaii Early Learning Profile (HELP), WeeFIM, Plunket, Oranga Tamariki; and
  - 8.4.4 Access to Peer Review by a Senior practitioner. The Peer Review can be conducted by a Service Provider who is within your organisation or outsourced from another SNA Supplier.

### Supervision of new service personnel

- 8.5 The Supplier may support the development of staff or contractors who do not possess the minimum experience requirements into the Service Provider role.
- 8.6 Where a Service Provider does not possess the minimum experience requirements set out in clause 8, the Supplier must:
- 8.6.1 ensure the Service Provider is supervised and mentored by a Service Provider who has at least five years' experience and has within their position description the responsibility for developing the capability and skill sets of others (Supervisor);
  - 8.6.2 the Supervisor has experience and is able to demonstrate through their ongoing professional development, competence in delivering Clinical Supervision to others; and
  - 8.6.3 ensure that each Assessment is peer reviewed in accordance with clause 8.3.2; and
  - 8.6.4 hold auditable records of the professional development activities undertaken by staff and any contractors.
- 8.7 Monitoring Competency
- 8.8 The Supplier must maintain quality assurance systems and processes in accordance with Good Industry Practice to identify and monitor competency level, training needs and compliance with supervision and training requirements for Service Providers and other Personnel that provide any part of the Services.

### Practising Certificate

- 8.9 The Supplier must ensure all registered Service Providers have and maintain current and valid annual practising certificates, and that the Service Providers comply with any relevant conditions on their delivery of Services.

### Capacity and Capability

- 8.10 The Supplier must ensure it has Service Providers and Personnel necessary to deliver the Services in accordance with this Service Schedule. The Supplier must ensure all personnel required to deliver the Services meet the requirements of Part B, clause 8.2, and are available in each of the locations identified in Part A, clause 2 (Service Regions).
- 8.11 The Supplier will advise ACC immediately if they do not have Service Providers available to undertake Assessments within any of the locations identified in Part A, clause 2. ACC may suspend referrals to the Supplier in the affected area until the Supplier notifies ACC in writing of being able to deliver the Services in the affected area.

## Safety Checks

### 8.12 The Supplier must:

- 8.12.1 Uphold the safety of ACC Clients by carrying out appropriate screening/vetting, including Police vetting, for all authorised persons who provide services under this contract;
  - 8.12.2 Establish and maintain systems, processes and security screening practices, for all supplier authorised persons, including subcontractors and collaborate with ACC, to uphold the safety of Clients;
  - 8.12.3 All authorised persons who work with children must complete a Children's Workforce Safety Check to ensure they are safety checked to the standard required under the Children's Act 2014 and the Children's (Requirements for Safety Checks of Children's Workers) Regulations 2015; and
  - 8.12.4 Immediately notify ACC of any actual, possible or anticipated issues that could impact the safety of Clients.
- 8.13 If ACC receives any information from any source related to the safety of Clients in relation to these Services, ACC may take steps to investigate and take appropriate action. If ACC considers on reasonable grounds that the safety of a Client or Clients may be impacted, ACC can, at its sole discretion, suspend or terminate all or any part of the Services, or this contract.

## Policies, protocols, guidelines and procedures

### 8.14 The Supplier must maintain the following:

- 8.14.1 **Operating Procedures** to manage Service Provider induction, training, decision making and oversight, quality improvements, performance management and risk management in relation to the Services.
- 8.14.2 **Privacy Policy** to manage Client Personal Information including to meet the requirements of clause 9 of ACC's Standard Terms and Conditions.
- 8.14.3 **Health and Safety Plan** relevant to the Client and environments where the Supplier and their Service Providers will be delivering the Services.
- 8.14.4 **Business Continuity Plan** to manage service continuity and minimise impacts to the Services and Client.
- 8.14.5 **Service Provider List** to document all Service Providers including any subcontractors delivering the Services to Clients under this Contract.



- 8.15 A copy of the above items must be promptly provided to ACC on request or as required.

## 9. QUALIFICATIONS AND EXPERIENCE CRITERIA

**Table 4**

Qualification	Competencies
<ul style="list-style-type: none"> <li>Registered Nurse; or</li> <li>Occupational Therapist; or</li> <li>Physiotherapist</li> </ul> <p>With a current Practising Certificate and holds Registration with the relevant Registration Board in accordance with the Health Practitioners Competence Assurance Act 2003.</p> <p>All Service Providers must hold current FIM (Functional Independence Measure) and/or WeeFIM accreditation.</p>	<p><b>Adults</b></p> <p>The Service Provider must demonstrate at least 3 years post graduate experience and the following competencies:</p> <ul style="list-style-type: none"> <li>Community experience in assessing support needs and abilities of Clients with serious injury or congenital or other acquired disability; and</li> <li>Assessment practice that demonstrates a Client centred approach with a focus on abilities and needs; and</li> <li>Awareness of age typical activities, roles, and needs, and strategies to respond to such needs; and</li> <li>Ongoing professional development.</li> </ul> <p><b>Children and Young People</b></p> <p>The Service Provider must demonstrate at least 3 years post graduate experience and the following competencies:</p> <ul style="list-style-type: none"> <li>Community experience of assessing support needs and abilities of young people with injury or congenital or other acquired disability; and</li> <li>Assessment practice that demonstrates a family centred approach supportive of the integrity of family/whanau and parents in their role as parents; and</li> <li>Ongoing learning; and</li> <li>Experience and understanding of the education system and a young person's needs within education; and</li> <li>Awareness of age appropriate activities, roles, developmental stages and needs, and strategies to respond to such needs.</li> </ul>

## **10. SERVICE EXIT**

- 10.1 The Services for a Client will end on the later of the following occurring:
  - 10.1.1 Submission of an Assessment Report to ACC where no further information is requested; or
  - 10.1.2 Recovery Team Member advises the Supplier that Services are complete for the Client; or
  - 10.1.3 ACC withdraws the referral for any reason.

## **11. EXCLUSIONS**

- 11.1 The following services (without limitation) are excluded from this Service:
  - 11.1.1 All other Social Rehabilitation Assessment Services; and
  - 11.1.2 Treatment, rehabilitation and support services.

## **12. LINKAGES**

- 12.1 The Supplier will develop and maintain linkages with groups and organisations relevant to the provision of the Services. This includes but is not limited to:
  - 12.1.1 Other ACC contracted Assessment Services;
  - 12.1.2 Cultural groups;
  - 12.1.3 Health NZ - Te Whatu Ora;
  - 12.1.4 Regulatory bodies.

## **13. PERFORMANCE REQUIREMENTS**

- 13.1 The Services must align with the objectives detailed in Part B, clause 2.1.
- 13.2 ACC and the Supplier will review the Supplier's delivery of the Services and compliance with this Contract annually or as required. Each review will consider the following:
  - 13.2.1 Services are delivered within the timeframes set out in Part B, clause 7.1;
  - 13.2.2 demonstrate that mechanisms are in place to ascertain Client satisfaction with all aspects of Services (see Part B, clause 19.3);
  - 13.2.3 Quality improvement programmes consistent with Good Industry Practice, including Information security and health and safety obligations;

13.2.4 Established peer review process for Service Providers undertaking Assessments that are consistent with accepted good practice; and

13.2.5 Service Providers who meet the requirements of Part B, clause 9, Table 4 are available to provide services in each of the Regions included in Part A, clause 2.

13.3 Performance will be measured in accordance with the following table:

**Table 5 - Performance Measures:**

Objective	Data Source	Target	Performance Measure
Clients receive services in a timely manner	Supplier reported data	≥90%	Percentage of initial Assessment reports submitted within 40 business days from receipt of the referral.
ACC is able to make decisions on the first submission of the assessment report	Supplier reported data	≥90%	Percentage of assessment reports which have not required further clarification or queries from ACC.

13.4 The Supplier will demonstrate competence in the provision of Services as set out in Part B, clause 8 of this Service Schedule.

## 14. REPORTING REQUIREMENTS

14.1 The Supplier will report to ACC in accordance with the following table:

**Table 6 – Reporting Requirements**

Information	Frequency	When	Responsibility
Service timeframe reporting (clause 7.1): Percentage of Assessment reports submitted within service timeframes Average and median days to submit the Assessment report.	Six monthly	Due on the last business day in July and January.	Supplier, via ACC survey
Provide details summarising the number of times resubmission of a report or clarification was provided to ACC after completion of the assessment.	Six monthly	Due on the last business day in July and January.	Supplier, via ACC survey
Customer Satisfaction: <ul style="list-style-type: none"><li>Percentage of Clients offered the satisfaction survey</li><li>Percentage of Clients completing the satisfaction survey</li></ul>	Annually	Due on the last business day in January	Supplier

Information	Frequency	When	Responsibility
<ul style="list-style-type: none"> <li>Overall satisfaction levels</li> <li>Any points of interest or learning (including Client feedback, complaints)</li> <li>Issues which impact on service delivery of service and/or timeliness.</li> </ul>			
Cultural Responsiveness: <ul style="list-style-type: none"> <li>Demonstrate how you have supported your staff in the provision of culturally responsive assessment services, including cultivating appropriate organisational and community linkages to support Clients' cultural needs.</li> </ul>	Annually	Due on the last business day in January	Supplier
Updated list of staff, detailing their experience, qualifications and profession.	Annually	Due on the last business day in January	Supplier

## Annual Declaration

- 14.2 ACC may, from time to time, request a declaration from the Supplier to confirm with all or any part of the Contract or to disclose information to ACC relevant to the Supplier's visibility or suitability to deliver the Services. If requested to do so, the Supplier must provide ACC with a signed declaration promptly and within the period reasonably requested by ACC.

## Information review

- 14.3 ACC may also obtain and review information from their Managed Rehabilitation Equipment Services (MRES) about Service Providers' use of the MRES service including:
- 14.3.1 Number of times that the MRES supplier has had to ask for further clarification or amendments on reports and equipment orders;
  - 14.3.2 The amount of List vs non-List equipment ordered;
  - 14.3.3 Trials completed within the timeframes indicated in the MRES Operational Guidelines.
- 14.4 ACC may request further information or reports on Services provided. Any such request will be reasonable and the Supplier shall provide the information within 20 Business Days of the request being received by the Supplier.

## **15. INFORMATION SECURITY**

### **15.1 The Supplier must:**

- 15.1.1 Ensure that its Personnel that receive and have access to ACC Client Personal Information from ACC, only do so for the purposes of delivering the Services and in a manner that complies with the Supplier's privacy, security and confidentiality obligations under this Contract;
- 15.1.2 Not transmit, transfer, export or store Personal Information and Confidential Information outside of New Zealand;
- 15.1.3 Maintain information security systems, procedures and process in accordance with Good Industry Practice to protect Client Personal Information and Confidential Information against loss or unlawful access, use, modification or disclosure;
- 15.1.4 Undertake regular security assurance, monitoring and testing of its information management systems; and
- 15.1.5 Remediate any identified security vulnerabilities, in accordance with Good Industry Practice;
- 15.1.6 Comply with any security information, accreditation and certification requirements requested or notified by ACC from time to time;
- 15.1.7 Ensure that its Subcontractors meet all the above requirements before providing them any ACC Client Personal Information or Confidential Information under this Contract.

## **16. HEALTH AND SAFETY**

### **Health and Safety Risk Management**

- 16.1 In addition to the Supplier's obligations under clause 8.16 of ACC's Standard Terms and Conditions, the Supplier must maintain a health and safety risk management plan relating to the delivery of Services that at a minimum:
  - 16.1.1 Identifies health and safety risks arising from the Services;
  - 16.1.2 Establish controls to eliminate or minimize those health and safety risks so far as reasonably practicable;
  - 16.1.3 Ensure all workplaces, environments, fixtures, fittings and plant (as defined in the Health and Safety at Work Act 2015) are, so far as reasonably practicable, without risk to health and safety;
  - 16.1.4 Describe the duties that overlap with other Persons Conducting a Business or Undertaking ('PCBUs' as defined by the Health and Safety at Work Act 2015); and

- 16.1.5 Ensure there are arrangements to consult, cooperate and coordinate with those other PCBUs in order to manage health and safety risks and events (including accidents, harm or near misses), so far as is reasonably practicable.
- 16.2 The Supplier must report on health and safety incidents, events and risks related to the Services to ACC via ACC's online health and safety form. ACC's online health and safety form can be accessed on the ACC website.

#### Safety management and second-person attending assessments

- 16.3 The Supplier having assessed a safety risk in meeting with a Client, the Supplier may request the attendance of a second person to mitigate the risks identified in the risk assessment.
- 16.4 The Supplier must submit a written request seeking approval for a second attendee prior to arranging the assessment. The written request must explain alternative options including, but not limited to:
  - 16.4.1 Meeting the Client at an alternative location such as an ACC office where security can be provided;
  - 16.4.2 Carrying out the assessment via Telehealth (if clinically appropriate); or
  - 16.4.3 Declining the referral due to safety concerns.
- 16.5 Any travel costs incurred for the attendance of a second attendee may be claimed using travel service item codes.
- 16.6 Once approved, the Supplier will discuss the need for a second attendee with the Client and ensure the Client has provided written consent before attendance with the Client. On request, the Supplier must provide a copy of the Client's written consent within five working days of the request.

### **17. BROADER OUTCOMES**

- 17.1 The Supplier will take reasonable steps to achieve, and enhance opportunities to achieve, broader social, economic and environmental outcomes through the Services, including to:
  - 17.1.1 Improve cultural equity and outcomes for Māori, Pacific and other ethnic or indigenous groups;
  - 17.1.2 Perform the Services in a manner that gives appropriate regard to the protection of the natural environment, including by looking for opportunities to reduce emissions and waste impacts, such as by procuring and using low-waste and low emissions good and services where reasonably possible; and

- 17.1.3 Comply, and ensure that its subcontractors and Personnel comply, with relevant employment standards and laws (including obligations under the Employment Relations Act 2000, Minimum Wage Act 1983, Wages Protection Act 1983, and the Holidays Act 2003 or equivalent legislation).

## **18. OPERATIONAL CONTACT**

- 18.1 During the Term of this contract the Supplier will nominate a person (as specified in Part A, clause 5) to be the main contact for ACC who will undertake the functions of the Relationship Manager in clause 11 of the Standard Terms and Conditions.

## **19. PAYMENT AND INVOICING**

- 19.1 Service prices are defined for this Service in Part A, Clause 3.
- 19.2 The prices set out are the entire amount chargeable to ACC in relation to the Services and no additional amount may be charged to ACC, the Client or other person for Services under this contract.

## **20. PROVIDER TRAVEL**

### Travel by road

- 20.1 ACC agrees to contribute towards road travel expenses in accordance with ACC's Travel Policy, available on ACC's website (<https://www.acc.co.nz/assets/provider/supplier-road-travel-guidelines.pdf>) and itemised in Part A of this Service Schedule.
- 20.2 The Supplier must ensure all Service Providers comply with ACC's Travel Policy.

### Accommodation

- 20.3 ACC agrees to pay accommodation costs where the Service Provider is required to deliver service in an outlying area which is not the Assessor's usual area of residence and overnight accommodation is necessary. Prior approval is required.
- 20.4 ACC will pay the costs of accommodation costs up to a maximum of \$273.85 plus GST per day with prior approval. This includes:
- 20.4.1 The hotel costs a maximum of \$182.57 plus GST per night.
- 20.4.2 Meals and incidental allowances to a maximum of \$91.28 plus GST per 24-hour period.

20.5 Accommodation costs do not include reimbursement for alcohol and mini-bar expenses incurred.

#### Air travel

20.6 ACC agrees to pay for air travel costs when:

20.6.1 The Service Provider has been requested by ACC to travel to an outlying area that is not the Service Provider's usual area of residence or practice to deliver Services; and

20.6.2 Air travel is necessary and has been approved by ACC.

## 21. DEFINITIONS

In this Service Schedule, unless the context otherwise requires:

**“Goal”** means an aspiration, target and/or future condition that the Client wishes to achieve in relation to them leading an everyday life. Goals can service more than one purpose. For example, by clarifying the desires of the Client in the Individual Plan, the basis for measuring outcomes and progress can be determined.

**“Good Industry Practice”** the exercise of the due care, skill and diligence, and to the appropriate professional or industry standard, as would be expected from a leading provider or person in the relevant industry.

**“In person”** means the provider and Client are physically present in the same room.

**“Rehabilitation”** means a process of active change and support with the goal of restoring to the maximum practicable extent, a Client's health, independence and participation in society.

**“Personnel”** all individuals engaged by either Party in relation to this contract or the delivery of the Services.

**“Telehealth”** means the use of information or communication technologies to deliver health care when Clients and care providers are not in the same physical location.

For this Service Schedule, Telehealth relates to real-time videoconferencing interactions and telephone consultations. Telehealth excludes electronic messaging e.g. texts and emails.

A Telehealth consultation is to replace an in-person visit so it does not include a quick triage or check-in phone calls (unless specified)."

**“Treatment/Rehabilitation Services”** includes Treatment, Training for Independence, Rehabilitation Retraining Programmes, Maximum Abilities Programmes, Psychological Services, Pain Programmes, Community Nursing,



Activity Based Programmes, Supported Employment, Living My Life, and Vocational Rehabilitation Services. Treatment/rehabilitation services do not include other assessments, for example neuropsychological assessments, housing modifications, transport for independence, equipment, nursing, education support, specialist assessments, single discipline assessments.

## 22. APPENDIX 1 – COMPETENCY FRAMEWORK

### Appendix 1 - Support Needs Assessment Competency Framework

#### Assessment of the client's injury related needs

Description	Competencies	Demonstrated by
Assessor works with the client, and their family/whanau to understand their injury related needs, independence goals and outcomes to be achieved.	<p>Formulates an assessment using a person-centred approach with a focus on strengths, abilities and needs. It also takes into account social and cultural aspects of the client's life.</p> <p>In the case of children, a family centred approach respects and supports the integrity of the family / whanau and parents in their role as parents.</p>	<p>An assessment utilizing standardized measures, in accordance with the guidelines for that measure, and a range of strategies directed towards enhancing independence, and facilitating a client's participation in typical and valued life roles in home, work, school, leisure and community, and promoting quality of life.</p> <p>In the case of children, the assessment takes into account ordinary and usual family and parental roles and responsibilities.</p>
<p>Assessor demonstrates:</p> <ul style="list-style-type: none"> <li>a service philosophy consistent with the New Zealand Disability Strategy 2016 – 2026</li> <li>the requirements of the ACC Act</li> <li>an understanding of contemporary disability practice</li> <li>distinguishes between injury and non-injury related needs</li> </ul>	<p>Demonstrates an understanding of the NZ Disability Strategy's vision and applies contemporary disability practice when considering strategies and responses to identified strengths and needs.</p> <p>Takes into account the availability of natural supports and what attendant care might reasonably be expected to be provided without causing disruption to the employment or activities of the family member providing the care, for example supervision or sleepover, and the extent to give the family member a break from providing care.</p>	<p>Recommendations:</p> <ul style="list-style-type: none"> <li>Describe strategies which are non-disabling and promote full inclusion.</li> <li>reflect contemporary disability practice with regard to safety, and a client's right to the dignity of risk, the ability to take risks and the right to make choices.</li> <li>consider a range of responses/strategies to meet support needs from least restrictive (ie aids and appliances, environmental controls, non human assistance, family/friends/community/natural supports) down to attendant care and residential placement (most restrictive).</li> <li>considers family responsibility (for example with sleepover/supervision). Comes up with some creative and innovative responses to meet needs.</li> <li>clearly describes the injury vs non injury related need and provides an approach for the non-injury related need that may be facilitated by ACC, but does not place the on-going responsibility with ACC</li> <li>take into account the developmental and age typical considerations</li> </ul>

<b>Other Considerations</b>		
Ability to tailor services to age related need, recognising change in need over time	Discusses a hierarchy of responses as for Adult assessments but takes into account family goals, and normal family and parental roles and responsibilities. Able to Provide an assessment across all environments the child operates in ie school and home	Recommendations take into account: <ul style="list-style-type: none"> <li>the developmental and age typical considerations for this client group.</li> <li>describes normal family and parental roles and responsibilities.</li> <li>all environmental considerations</li> </ul>

## 23. APPENDIX 2 – EXCEPTIONAL MEDICAL SUPPORT NEEDS

ACC recognises exceptional medical needs occur from accidents and bodily injuries that have resulted in permanent impairment, of physical, and/ or mental bodily function. Exceptional medical needs, include specific complex specialist therapeutic interventions, supportive medical equipment, and care, potentially for the rest of a Client's life.

ITEM	MEDICAL SUPPORT	ITEM	MEDICAL SUPPORT
1	Respiratory:	4.4	Fracture risk (spontaneous fractures)
1.1	Ventilator	4.5	Temperature regulation
1.2	Non-invasive ventilation (CPAP or BiPAP)	4.6	Autonomic dysreflexia
1.3	Postural drainage	4.7	Pain management
1.4	Suctioning	4.8	High tone, spasticity, and joint contractures
1.5	Uses oxygen	5	Other
1.6	Tracheotomy		
1.7	Assisted cough		
1.8	Nebulisers		
1.9	Support with inhalers		
2	Eating:		
2.1	Oral assistance & jaw positioning		
2.2	Tube feeding		
2.3	PEG feeding		
2.4	Insulin pump		
2.5	Glucose patches		
3	Skin care:		
3.1	Turning or positioning by others		
3.2	Other wound management		
3.3	Sphincter management:		
3.4	Indwelling catheter		
3.5	Intermittent catheterisation		
3.6	Assistance in bowel management (e.g. assistance to insert suppository)		
4	Other medical needs:		
4.1	Poorly controlled seizures		
4.2	Dialysis		
4.3	Ostomy care		

## 24. APPENDIX 3 – RETROSPECTIVE PERSONAL SUPPORT ASSESSMENT

### Minimum Reporting Framework Requirements

#### Context

The Retrospective Personal Support Assessment (RPSA) is a Client assessment that considers the claim/claims when there is a historic, unfunded personal support need that has become eligible for consideration of funding by ACC.

#### Purpose

The purpose of the RPSA is to objectively consider a Client's attendant care needs over a retrospective period of time.

The RPSA is a thorough, detailed and complex assessment that covers a retrospective period of time and includes a comparison to normative data and outcome measures. The Assessor should have extensive clinical experience in the appropriate areas (Child, adult or both) and also be able to apply advanced clinical reasoning skills and have an ability to objectively consider large volumes of information.

These assessments can take long periods of time to complete and require peer review.

#### Requirements Framework

These assessments require a robust analysis of all information from multiple sources over a period of time, frequently going back a number of years. ACC Clients undergoing these assessments could be any age. Paediatric Clients undergoing the assessment require consideration of each development milestone as suggested below.

The Peer Reviewer needs to be a senior practitioner, who is also a Named Service Provider for this assessment in your organisation. This is to ensure that the Client assessment is thoroughly considered across all domains and age ranges, and clinically rationalised using appropriate validation tools.

#### Report Minimum Standard

For this purpose, the following Framework is required for completion of these assessments.

Report Section	Requirements
Cover Sheet	<ul style="list-style-type: none"><li>• ACC Recovery team member, ACC location, Team Member, Purchase Order</li><li>• Date of referral, Date of Assessment, Date of Report, Date of report sent to ACC</li><li>• Client name</li></ul>

	<ul style="list-style-type: none"> <li>• Claim number</li> <li>• Date of Birth</li> <li>• Date of Injury</li> <li>• Address, phone, e-mail</li> <li>• Injury details</li> <li>• Schedule of Documents – from ACC and supplied by Client, other relevant documents, meetings relevant to this assessment.</li> <li>• Name and qualification of assessor completing this assessment.</li> <li>• Name and qualification of Peer Reviewer.</li> <li>• Participants in the assessment</li> <li>• Other Agency/private funded support: home help, care support hours, equipment on loan</li> <li>• Time period requested for RPSA</li> <li>• Periods spent in Hospital by Client</li> </ul>
Overview	<ul style="list-style-type: none"> <li>• Explanation to Client and consent</li> <li>• Injury details</li> <li>• Specific timeframes to be considered</li> <li>• Current presentation</li> </ul>

## Areas of Assessment

The following is a guide of the most common areas of assessment. There will be other areas that require additional detail and research of normative data based on the Clients' needs.

Area	Activity	Sub-Categories
Self-Care	Eating and Drinking	<ul style="list-style-type: none"> <li>• Swallowing</li> <li>• Tube Feeding</li> <li>• Medication</li> </ul>
	Bathing	
	Dressing	
	Grooming	
	Toileting	<ul style="list-style-type: none"> <li>• Bladder needs</li> <li>• Bowel Need</li> </ul>
Mobility and transfers, community access	Standing and walking	
	Steps and inclines	
	Running and playing	
	Outdoors	
	Car transfers	
Motor skills and functional ability	Fine motor skills	
	Gross motor skills	
Sleep		

Area	Activity	Sub-Categories
Social and cognitive	Communication	<ul style="list-style-type: none"> <li>• Speech</li> <li>• Language</li> <li>• Reading and writing</li> <li>• Interaction with others (including play)</li> <li>• Assistive technology</li> </ul>
	Self-management and responsibility	<ul style="list-style-type: none"> <li>• Attention</li> <li>• Memory</li> <li>• Organising and planning</li> <li>• Taking care of daily needs</li> <li>• Health management (taking meds, bowel and bladder care)</li> </ul>
Staying safe	Safety Management	
	Behavioural Needs	

### Adult RPSA – Steps for assessment

Each Adult RPSA should be assessed in the following way:

1. Caregiver/Family reports
2. Clinical notes/other information sources
3. Standardised measures (FIM/FAM adult)
4. Consideration of other Agency involvement such as MOH
5. Consider natural supports
6. Consider ACC legislation
7. Demonstrate clinical reasoning validated by research of the support required and the recommended hours.

## **Paediatric RPSA**

Paediatric RPSA should assess the client against the following age-appropriate developmental milestones:

1. Birth to 6 weeks
2. 6 weeks to 3 months
3. 3 months to 6 months
4. 6 months to 9 months
5. 9 months to 12 months
6. 12 months to 18 months
7. 18 months to 24 months
8. Each consecutive year thereafter.

Each area of Retrospective Support Needs should be assessed the following way for each developmental stage/time frame:

1. Parental reports
2. Clinical notes/other information sources (e.g. school, paediatric clinics)
3. Observation of current support
4. Age and areas of support required
5. Comparison to a minimum of the following validated Normative data, outcome measures and relevant research including but not limited to; Paediatric Evaluation of Disability Inventory (PEDI), Hawaii Early Learning Profile (HELP), WeeFIM, Plunket, Oranga Tamariki, Normal Sleep patterns in infants and children: A systematic review of observational studies (Galland et al., 2012).
6. Consider other agencies (Ministry of Health/ Ministry of Education)
7. Consider parental responsibility
8. Consider natural supports
9. Consider ACC legislation
10. Demonstrate clinical reasoning validated by research of the support required and the recommended hours.