29 July 2021

[redacted]

Tēnā koe [redacted]

Your Official Information Act request, reference: GOV-012146
Thank you for your email of 1 July 2021, asking for the following information under the Official Information Act 1982 (the Act):

1. *Can you provide a list of all suppliers, by region, who are contracted by ACC to provide Integrate Services for Sensitive Claims.*
2. *How many therapists, by region, provide services under suppliers' ISSC contracts? (ie, how many therapists by region provide ACC sensitive claims services?)*
3. *When did ACC first contact suppliers and providers to notify them that the Sensitive Claims Unit was being disestablished?*
4. *What correspondence did ACC sent to suppliers and providers notifying them of the change (please provide a copy of the letter).*
5. *What consultation did ACC carry out before deciding to disestablish the Sensitive Claims Unit, and when was this consultation done?*
6. *How many suppliers and therapists engaged with ACC's consultation process?*
7. *Please provide a summary of feedback from suppliers and therapists obtained during the consultation process.*
8. *Please provide any research/analysis/reports/briefings compiled by ACC that discuss the rationale behind closing the Sensitive Claims Unit in Wellington favour of establishing a network of Sensitive Claims offices around the country. What were the reasons for this shift?*
9. *How does this new system benefit clients?*
10. *When, and why, are clients moved from a recovery partner to a recovery assistant team? What consultation is done with a client prior to this transition?*
11. *What is the difference between a recovery partner and a recovery assistant?*
12. *What is the average case load of a recovery partner, and what is the case load of a recovery assistant?*

Transformation at ACC
You may be aware that ACC has undertaken a far-reaching transformation programme known as Shaping Our Future. This programme of work was launched in 2014 in response to feedback we had from thousands of New Zealanders (including clients and ACC staff) who told us that they wanted ACC to be more responsive, more transparent and easier to deal with.

To meet these expectations, we have aligned our people, processes, information and technology around the needs of our customers, including clients. As part of this, we developed a new case management approach called Next Generation Case Management (NGCM).

Under the new model, there are four Recovery Teams that operate across the country. Clients are managed in a Recovery Team according to their level of need. The Recovery Teams, and the clients they support, are:

- **Enabled Recovery** - clients primarily manage their own recovery using an online portal to select services and regularly check in. Clients can contact an ACC team for support also.
- **Assisted Recovery** - clients primarily manage their own recovery. A Recovery Assistant will contact them at key milestones in their recovery or if a client requires assistance.
- **Supported Recovery** - clients have a dedicated Recovery Coordinator who works with the client to recover from their injury.

- **Partnered Recovery** - clients build a relationship with a Recovery Partner who supports them and their whānau to manage their injury or recovery.

Service provided to sensitive claims clients under NGCM
It is important to stress that under this new model, sensitive claims clients continue to receive the same one-to-one support from specially- trained ACC staff that was previously the case. We have, however, made a number of changes that have resulted in a better and more responsive service. The key change is that instead of a centralised unit, we now have dedicated teams of Recovery Partners managing sensitive claims across eight locations: Whangarei, Newmarket, Hamilton, Tauranga, Hawke's Bay, Wellington, Christchurch, and Dunedin. At the same time, the number of people working with 1:1 with survivors has increased from 85 to 140.

ACC knows that over time, needs change, and for many clients once they are in treatment and are well supported, their need for contact with ACC reduces. For many clients, this means that their needs could be best met by a small team of Recovery Assistants (Assisted Recovery).

We have also centralised administrative functions, which frees up more time for Recovery Partners and Recovery Assistants to support their clients.

The decision to transition a claim is done collaboratively and must be discussed with the client and/or their provider prior to transition. Please note that the transition discussion happens with the client, but for some clients, they may elect for this conversation be with their provider – hence the and/or.

The changes began in September 2019 and were completed in September 2020.

ISSC suppliers and therapists (Questions 1 & 2)
The names of all suppliers and therapists providing support under the Integrated Service for Sensitive Claims (ISSC) contract is listed on the Find Support website at https://www.findsupport.co.nz/. The list can be filtered in a number of ways including location.

As such we aren't reproducing this information. This decision has been made in line with Section 18(d) of the Act.

Correspondence and consultation with suppliers and providers (Questions 3-7)
Consultation
The transformation programme undertaken by ACC involved an operational change to the management of ACC claims. As such, ACC did not specifically undertake consultation with stakeholders in relation to the Sensitive Claims Unit. ACC did however engage with key stakeholders from the sensitive claims sector on the overall changes to case management (NGCM), and how ACC would manage sensitive claims under NGCM.

Information on the engagement ACC undertook with stakeholders is publicly available on the Parliamentary website at this link, within Minister Sepuloni's responses to WPQ 25235 (2021), WPQ 25236 (2021) and 25238 (2021).

As such, we have not reproduced this information in line with Section 18(d) of the Act.

Timing of engagement
As outlined above, ACC engaged with its stakeholders (including its ISSC suppliers and providers) on the changes to claims management. This engagement included ACC running webinars and the provision of information within the ISSC newsletters about the changes and how ACC would manage sensitive claims under the new operating model, NGCM.

The ACC led webinars took place on the following dates:

- 3 December 2019
- 10 December 2019
- 23 June 2020
- 25 June 2020
- 4 August 2020

ISSC newsletters from September 2020 to April 2021 are publicly available on ACC's website at this link. As such, we have not reproduced this information in line with section 18(d) of the Act.

Supplier and therapist feedback
Because specific consultation was not undertaken with ISSC suppliers and therapists, ACC did not receive submissions from stakeholders. We are therefore refusing this part of your request in line with section 18(e) of the Act, as the information requested does not exist.

The Sensitive Claims Unit (Question 8)
ACC's decision was to implement a new claims management model (i.e. NGCM), and the decision to move the management of sensitive claims into Partnered and Assisted Recovery was made as part of this wider change.

The following documents, attached at Appendix 1, provide the rationale for changes to the way that ACC managed claims and the introduction of Next Generation Claims Management (NGCM):

- Client Service Delivery Phase 2 (October 2018)
- Client Service Delivery Phase 3 (April 2019).

Please note that the documents provided were internal ACC consultation and feedback documents and were not used to consult with clients or other stakeholders.

For your information, the reasons for the changes to the way we manage claims are explained on our Newsroom site at this link.

Benefits to sensitive claims clients (Question 9)
We have interpreted this part of your request to be specifically related to the benefits experienced by sensitive claims clients, rather than all ACC clients.

Specifically, ACC has introduced the following under NGCM, which greatly benefits sensitive claims clients:

- Significantly increased the number of staff supporting survivors from 85 Service Co-ordinators to 140 Recovery Partners working 1:1 with clients, including a greater regional presence which allows ACC to better support and engage face to face with clients and build greater relationships with providers, NGO's and other organisations who are also supporting ACC clients.
- Created a much more stable workforce in the regions, which ultimately ensures that clients have consistency of care and ACC continues to build and develop internal capability to best support clients.
- Removed all administration work from our Recovery Partners and Recovery Assistants, which allows them to spend 100 percent of their time supporting our clients, proactively engaging and being more efficient. This ensures that those clients who have just lodged claims are supported quickly and in the best way by Recovery Partners.
- Introduced 'heartbeat' feedback for clients with a sensitive claim for the first time to ensure we effectively hear from survivors and continue to improve and support survivors.
- Introduced MyACC for sensitive claims clients, allowing them another channel of choice in how they communicate with ACC. MyACC is our optional, online self-service app available to clients to support their recovery.
- Centralised support via the Recovery Support model, which allows the provision of quality and consistent practice, clinical and technical advice.

- Introduced whole of person management – at any point in time a client may also have a physical injury claim active alongside their sensitive claim – these are managed together (unless otherwise requested by the client) to ensure we are supporting the client most effectively.

Transition of claims from Partnered Recovery to Assisted Recovery (Question 10)
As stated above, the decision to transition a sensitive claim from Partnered Recovery to Assisted Recovery, is done collaboratively and must be discussed with the client and/or their provider prior to transition.

As part of the discussion, the Recovery Partner will discuss with the client and/or provider the client's needs, and the changes to how they will be supported by the Assisted Recovery team, now that they require less frequent contact from ACC.

Please see attached, a copy of the following documents at Appendix 2 which provide guidance on when and why claims should be transitioned, and what conversations staff should be having with clients:

- *Choosing the Right Recovery Team* - guidelines
- *Having Recovery Team Transition Conversations* - supporting information
- *Transitioning a Client to Another Recovery Team* – Frequently Asked Questions

Please note that these documents are generic in that they provide guidance for all ACC recovery teams and are not specific to sensitive claims.

Difference between Recovery Partners and Recovery Assistants (Question 11)
The differences between a Recovery Partner and a Recovery Assistant are outlined in Minister Sepuloni's response to WPQ 21585 (2021).

As such, we have not reproduced this information in line with Section 18(d) of the Act as the information requested is publicly available on the Parliamentary website at this link.

Sensitive claims staff caseloads (Question 12)
We have interpreted this part of your request to be for the average case load of Recovery Partners and Recovery Assistants managing sensitive claims.

Recovery Partners
As at 3 July 2021, the average case load was 113 sensitive claims per Recovery Partner.

Recovery Assistants
ACC has one team of 20 Recovery Assistants located in Wellington and Dunedin, who provide dedicated management of sensitive claims for clients who no longer require 1:1 support from ACC.

Management of the claims is completed on a 'task' based system across the team. That means any task that comes in on a sensitive claim which is being managed in the Assisted Recovery team can be picked up and processed/managed by any of our Recovery Assistants. Tasks include everything related to a claim including 12-monthly case-conferences, emails and phone calls from clients and providers, and processing of payments to clients and providers.

Most clients managed within Assisted Recovery require limited contact with ACC; often only once or twice a year.

As at 3 July 2021, the team of Recovery Assistants were managing a total of 7947 sensitive claims.

Questions
If you have any questions, you can email the media team at media@acc.co.nz.

If you are not happy with this response, you have the right to make a complaint to the Ombudsman. Information about how to do this is available at www.ombudsman.parliament.nz or by phoning 0800 802 602.

Nāku iti noa, nā

Sasha Wood
Manager Official Information Act Services
Government Engagement & Support

Client Service Delivery – Phase 2 Consultation and Feedback

Proposal for consideration

SENSITIVE

INTERNAL

EMBARGOED Until

17 October 2018, 5pm

Introduction: Phases of our transformation journey

ACC is on a transformation journey driven largely by our desire to put the customer at the heart of everything we do.

A lot of our transformation projects really come to life over 2018-2019 and where we will start to look and feel different, both for our employees and our clients.

For Client Service Delivery, these changes have been broken down into three sequential phases –

PHASE 1: 2017-18 Client Service Delivery Model	PHASE 2: 2018 Roles and Ways of Working	PHASE 3: 2019 Individual Impact and Roll-out
Developing the Client Service Delivery operating model This included: - defining the fact base, - building our blueprint of case management, - creation of the Launch Pad and - consultation on the Client Service Delivery operating model and leadership team structure. **This phase is complete.**	**Consulting on the proposed future roles and ways of working** This phase builds on: - the Client Service Delivery operating model, - learnings from Launch Pad, - and provides a more detailed overview of each of the recovery streams and - how the proposed roles would work with new ways of working. **This phase is now underway.**	**Identifying potential individual impacts, and plan for implementing the model** This phase builds on: - the decisions from the Phase 2 consultation, and - consults on the potential impact of the model by location and role across the country, and - support for our employees through this change. **This phase will occur in 2019.**

This document seeks to provide you with an overview of the different phases, focusing primarily on Phase 2 and seeking your feedback on the material. Further supporting information is available on our Organisational Change page on The Sauce.

To support your understanding, this document is broken into five sections:

1. **Introduction** – Overview of phases (this page)
2. **Phase 1** – Developing the Client Service Delivery model (recapping what has happened)
3. **Phase 2** – Proposed roles and ways of working (the proposal)
4. **Phase 3** – Potential individual impact and roll-out (possible next steps)
5. **Consultation Process** – Information on the process, timeframes and feedback mechanisms

Phase One: Recap

Before we discuss our proposal for Phase Two, below is a recap of Phase One. Further information is available on the Sauce in the Completed Changes section of Organisational Changes.

PHASE ONE: 2017-2018

Phase One in this document provides a reminder of our challenges, why we needed to make changes, what has happened to date and how that has shaped our thinking leading into Phase Two.

Recap:
In 2016 we established our Next Generation Case Management intentions. Feedback from our clients has told us that often our current case management 'one size fits all' approach is not targeted to where ACC can add most value to our clients' recovery.

Feedback and Changes:
We responded to this feedback in Phase One. Our changes included:

- Completing our fact base with an understanding of our current service delivery offering
- Designing a blueprint for how case management could be in the future
- The start of detailed design of the model and establishing of our Launch Pad to test that model
- Consultation and confirmation on the Client Service Delivery model and leadership team structure

Our Model:
The new integrated model has been confirmed and is proving that it will meet the needs of the client in a way that is dynamic and holistic. We've also made changes to reinforce a culture that focuses on putting people before processes – both clients and employees.

This section is for reference – further information can be found on the Sauce.

PHASE TWO: 2018

Phase Two forms the focus for the October / November consultation. We want to hear your thoughts and feedback on the proposed enhanced model before any decisions are made and we move onto Phase Three.

This is a formal consultation for all of Client Service Delivery, but at this point, there will be no direct impact on individual roles.

Focus:
Phase Two introduces the proposed:

- Enhanced Client Service Delivery operating model,
- Scope and detail of the different client engagement streams
- Hubs and sites concept
- Where work is proposed to be completed
- Future roles
- Concepts and ways of working
- Way we'll support our you through change

Feedback:
This proposal has been developed through engagement with our key business leaders, product owners and SME's across Client Transformation. We are sharing our thinking and seeking your feedback before we make any decisions on the future of Client Service Delivery.

This section requires your feedback. Please consider the proposal carefully and let us know your thoughts.

PHASE THREE: 2019

Completion of Phase Two will help us understand the implications of our changes and what it would mean for you. We plan to come back in early 2019 to consult on what this means for you specifically. At this point, all roles in Client Service Delivery would be considered.

Focus:
Key proposals to be consulted on in Phase Three will be:

- Locations where our work would be completed
- Selection criteria that would be used for each role
- Team structures and position numbers
- Impacts specific to your current role
- Selection processes and EOI options
- Timing of implementation and phasing by site

Transition:
This pack outlines our current high level thoughts on the proposed transition for your review. During this time we will also see the introduction of new technology to support our transformation journey. This includes:

- Embedding of our new lodgement models
- Upgrading Eos, our core processing system to version 8.8
- Replacing of our analytics platform
- Establishing our payments processing capability in Eos.

Consultation areas of Phase Three are subject to feedback and decisions made through Phase Two. We would value your thoughts at this point, and consultation on this phase will follow in early 2019.

Phase One: Timeline so far. . .

ACC PREVENTION. CARE. RECOVERY. Te Kaporeihana Awhina Hunga Whara

Here's a recap of the Client Service Delivery journey to-date; where we've come from and what we've achieved as we move from Phase One to Phase Two.

During 2014 Transformation journey began following significant customer feedback

October 2016 Developed a fact base and confirmed our current state for Client Service Delivery

November 2016 – April 2017 Design work to address opportunities identified – Blueprint created

April 2017 Detailed design work kicked off and completed August 2017

September 2017 Creation of Launch Pad to test thinking and model with real clients and live data

November 2017 Confirmation of Client operating model and leadership team

March 2018 Refinement of the model & further testing in Launch Pad

October 2018 Sharing our approach and thinking with you – your input into our future

NGCM FOUNDATION	FACT BASE	BLUEPRINT	DETAILED DESIGN	LAUNCH PAD	MODEL & LEADERSHIP	HAVING YOUR SAY
Phase 1						Phase 2
• Shaping our future diagnostic • Customer and staff pain points • Transformation projects • NGCM foundation	• Developed a Fact base • Confirmed current state	• Blueprint	• Detailed design on key elements of the model	• Launch Pad • Testing the model • Scope of testing • Results • Approvals of stage gates	• Operating model • Confirmation of LT • Confirmation of engagement streams	• Long-term roll out • Sharing our thinking • Gaining your feedback

Phase One: Fact base conclusions

Understanding our current state via the Fact base exercise enabled us to design a future model that incorporated many inputs from our customers, employees, internal process, technology constraints and external factors.

INTERNAL FACTORS

- **Over-management** of claims regardless of the value ACC can add
- Unnecessary **hand-offs** due to rules based on duration, not outcome
- **Inconsistent decision making** due to decentralised network in a judgement based scheme
- Sub-optimal '**Process before People**' case management environment
- **Reactionary processes** that limit ability to anticipate and respond proactively to client needs
- **Gaps in timeliness and quality** of clinical/technical advice
- **Inconsistent recognition of competence** and application to roles, work type or career paths
- **Adhoc staff coaching practices** with a primary focus on compliance activities
- **Old-fashioned ways of working**

EXTERNAL FACTORS

- **Rising claim** volumes
- Changing claims mix with **ageing population**
- Changing customer expectations around **digitisation**, with self-service increasingly expected
- Increasing predictive accuracy from **advanced analytics** technology and techniques
- Accelerating moves to **cloud-based data storage**

Phase One: Scope of blueprint

Our early work in NGCM focused on our post-cover model and sought to answer three key questions: **Where does case management add value?**; **What type of intervention is required and how it should be done?**; and **What are the key enablers?**

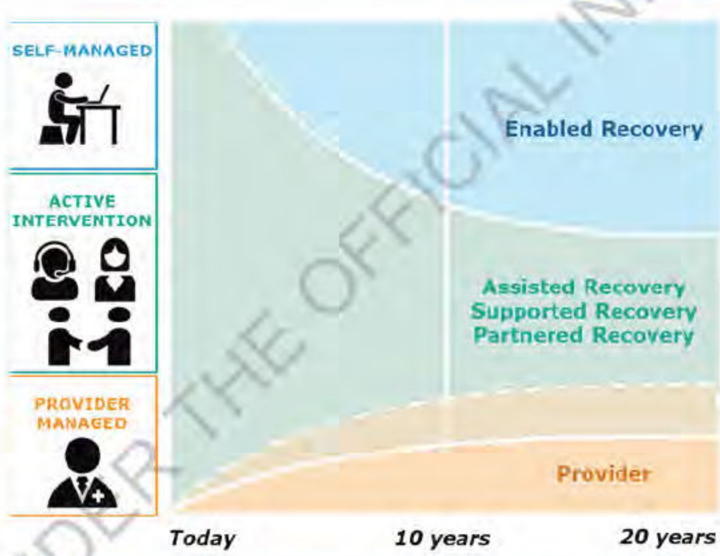
Prioritisation & triage

Claims accurately and efficiently directed to right team upfront

- Claims assessed on outcome rather than expected duration
- Automated allocation to relevant team based on predictive analytics
- Escalation will be rules-based, not duration focused
- Enabling - Claims to be processed faster with quicker response times and client contact

Claims management

Three proposed methods to managing claims; Self managed; ACC managed; Provider Outsourced



Support model

Enhanced model enabling case owners to focus on core role

- Three-tiered clinical and technical advice model
- Centralised reviews team
- Enhanced administration support enabled by capability-based workflow management

Environment

- New operating rhythms
- Continuous improvement capability
- Client outcome focused approach
- Organisation design

Tools, technology & processes

- Improved client management in Eos, business rules, knowledge management and workforce management
- Self-service capabilities (MyACC)
- Controls framework

Measures of success

- Improved 'top-level' measures
- Detailed operational measures
- Quality management framework

Phase One: Confirmed client engagement streams

Outlined below are our primary client engagement streams, and an example of the types of clients supported by each stream.

Enabled Recovery

Clients primarily manage their own recovery using an online portal to select services and regularly check in. Clients can contact an ACC team for support.

Example An office worker with a fracture who can still work most of the time.

Assisted Recovery

Clients primarily manage their own recovery. A member of the ACC team will contact them if there is something specific to discuss.

Example A teacher with a dislocated shoulder who may need additional services throughout recovery.

Supported Recovery

Clients have a dedicated ACC contact who works with the client to recover.

Example A farmer with a disc prolapse where coordination will help manage multiple providers, a challenging work environment; and additional services that may be needed throughout recovery.

Partnered Recovery

Clients build a relationship with a dedicated ACC contact who supports them to manage their injury or recovery.

Example A client with paraplegia who needs our expert support to coordinate specialised services. This may continue for an indefinite period.

Provider Recovery

Clients are supported by providers who work with them to manage their recovery.

Example In the future, a client with an anterior cruciate ligament rupture where the pathway for treatment is well understood and an agreement with providers has previously been established.

Phase One: Confirmed Client Service Delivery model

In November 2017 we consulted with you and confirmed the Client Service Delivery model below. Further information is available on the Sauce in the Completed Changes section of Organisational Changes.

Phase One: Key benefits for our people and clients

RETURN TO HEALTH OUTCOMES

Short timeframe to independence

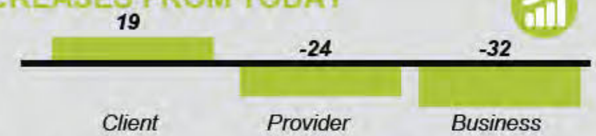
6 days WEEKLY COMP DAYS REDUCTION

- Focus on claims where ACC can influence the outcome (high variance outliers)
- More targeted spend on clients that need it

CUSTOMER EXPERIENCES

Better client, provider and employer experience

NTS INCREASES FROM TODAY



- Right level of support, at the right time, for clients (based on outcome)

EFFICIENCY

More productive employees and spend

50-60% FEWER CLAIMS NEEDING ACTIVE MGMT.

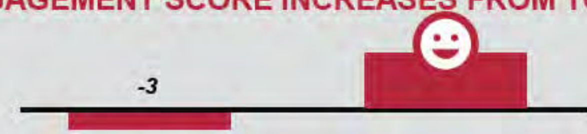
20-30% FEWER TREAT-MENT & REHAB REFERRALS

- Improved scale, more focused case management
- Removal of non-value adding activities through automation or separation of support activities

EMPLOYEE ENGAGEMENT

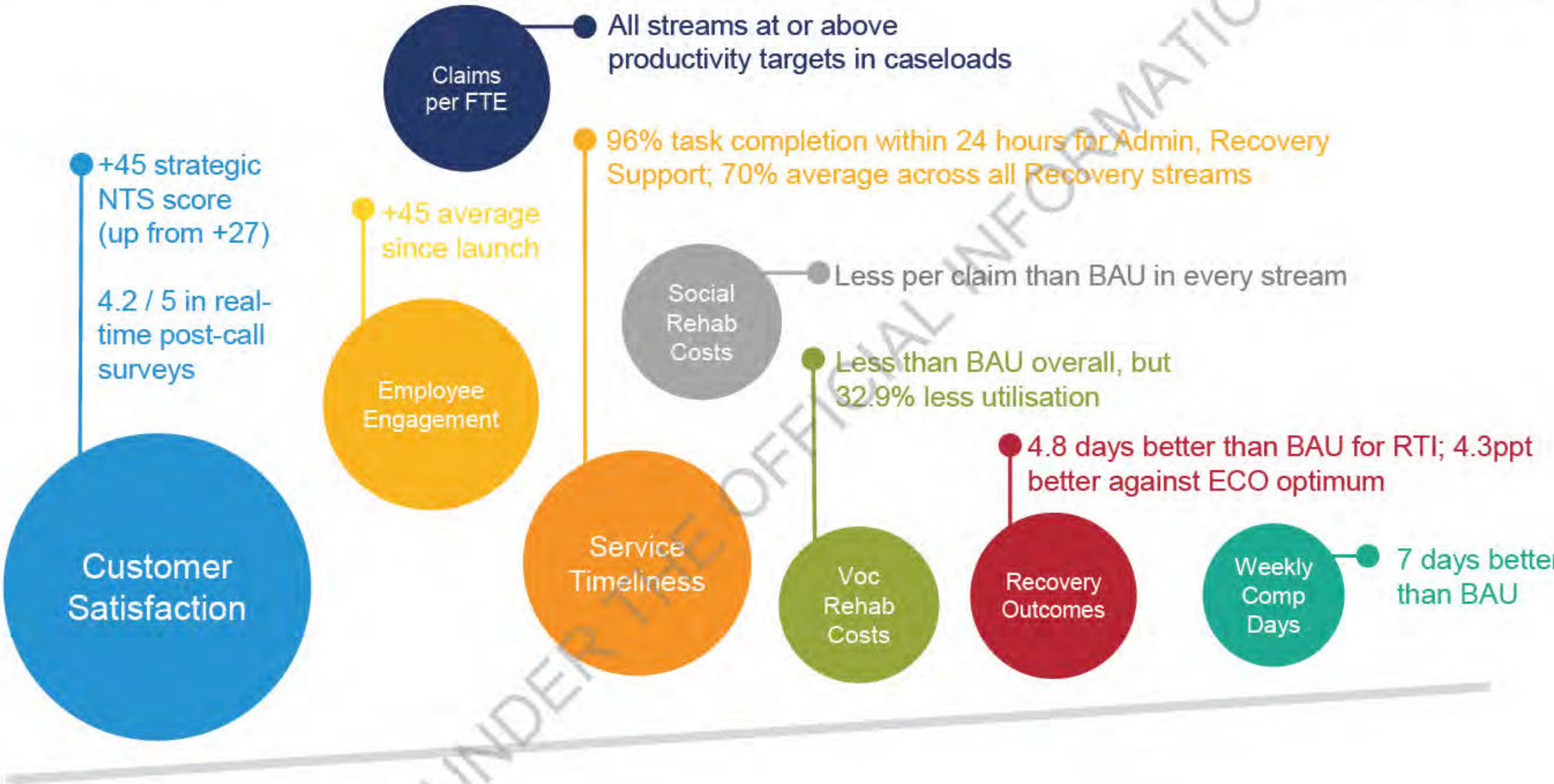
Better engagement

ENGAGEMENT SCORE INCREASES FROM TODAY



- Attractive career paths and skill development

Phase One: Launch Pad testing and results



Ongoing focus areas of Launch Pad

- Extension of Launch Pad until May 2019
- Creating separation between our Admin / Enabled / Assisted model (Hamilton) and building our Supported / Partnered model (Hawke's Bay)
- Established a Supported team focused on incorporating new claim types from BAU into the Launch Pad and on proving the migration process for existing claims
- Migrated the current Enabled Recovery Assistants into either the Admin or Assisted teams to prove client self-management via MyACC
- Repurposing Guidance Coordinators so can validate how technical and clinical advice is accessed via the Recovery Support Tool

Updated results (as at end July 2018) and measures are against a similar cohort of BAU claims

Phase Two: Overview

October 2018 marks the start of Phase Two. This period provides the opportunity for consultation and feedback with you on the future roles within Client Service Delivery and the key concepts and design elements that would drive our operating model. While this proposal outlines thoughts for all of Client Service Delivery, we acknowledge Lodgement & Triage teams have recently gone through change this year.

PHASE ONE: 2017-2018

Phase One in this document provides a reminder of our challenges, why we needed to make changes, what has happened to date and how that has shaped our thinking leading into Phase Two.

Recap:
In 2016 we established our Next Generation Case Management intentions. Feedback from our clients has told us that often our current case management 'one size fits all' approach is not targeted to where ACC can add most value to our clients' recovery.

Feedback and Changes:
We responded to this feedback in Phase One. Our changes included:

- Completing our fact base with an understanding of our current service delivery offering
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Our Model:
The new integrated model has been confirmed and is proving that it will meet the needs of the client in a way that is dynamic and holistic. We've also made changes to reinforce a culture that focuses on putting people before processes – both clients and employees.

This section is for reference – further information can be found on the Sauce.

PHASE TWO: 2018

Phase Two forms the focus for the October / November consultation. We want to hear your thoughts and feedback on the proposed enhanced model before any decisions are made and we move onto Phase Three.

This is a formal consultation for all of Client Service Delivery, <u>but at this point, there will be no direct impact on individual roles</u>.

Focus:
Phase Two introduces the proposed:

- Enhanced Client Service Delivery operating model,
- Scope and detail of the different client engagement streams
- Hubs and sites concept
- Where work is proposed to be completed
- Future roles
- Concepts and ways of working
- Way we'll support our you through change

Feedback:
This proposal has been developed through engagement with our key business leaders, product owners and SME's across Client Transformation. We are sharing our thinking and seeking your feedback before we make any decisions on the future of Client Service Delivery.

This section requires your feedback. Please consider the proposal carefully and let us know your thoughts.

PHASE THREE: 2019

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Focus:
Key proposals to be consulted on in Phase Three will be:

- Locations where our work would be completed
- Selection criteria that would be used for each role
- Team structures and position numbers
- Impacts specific to your current role
- Selection processes and EOI options
- Timing of implementation and phasing by site

Transition:
This pack outlines our current high level thoughts on the proposed transition for your review. During this time we will also see the introduction of new technology to support our transformation journey. This includes:

- Embedding of our new lodgement models
- Upgrading Eos, our core processing system to version 8.8
- Replacing of our analytics platform
- Establishing our payments processing capability in Eos.

Consultation areas of Phase Three are subject to feedback and decisions made through Phase Two. We would value your thoughts at this point, and consultation on this phase will follow in early 2019.

Phase Two: Enhanced Client Service Delivery operating model

Our design work throughout 2018 has proposed additional streams of support within the Client Service Delivery model; Payments and Entitlements, and recognises Administration and Recovery Support work across the entire model. This incorporates existing functions within the current Claims Administration and Client Support (CACS) area and extends the scope of other components. Further detail is provided on subsequent pages.

 Your feedback on Phase Two is important, this is your opportunity to help shape our streams and future roles, you are encouraged to consider the proposal across the entire model.

Phase Two: Concept of hubs and sites

We have already confirmed that we will continue to have a presence in all of our current locations. To ensure that we can provide services to our clients that reflect their needs and aligns to our overall target operating model, we are proposing to change where we do our aspects of our work and how our locations are structured. We believe this starts with the principle of hubs and sites.

	HUBS Hubs would provide a national service undertaking high volumes of task based activities. We propose hubs are based in key locations around the country.	**SITES** Sites would support regional clients who require a one-to-one relationship to aid their recovery. They would also be the face of our community engagement.
Type of work	• Task management activities where a team of people work together to deliver a function or service to clients (or enable work for our clients). • We propose to locate different functions undertaking similar activities within the Client Service Delivery operating model into hubs, to maximise efficiency and support the front-line staff. • Clients in one part of the country could be serviced from a hub in a different location. This would allow us to be more available to our clients and manage your workloads more effectively. • This approach allows alignment to other non CSD functions including Channel Operations and Technical Services.	• Sites would support work that require a one to one relationship with our clients in order to achieve the best outcome for our clients. • Allows for work to be streamed regionally and builds in the ability to continue providing face-to-face services as required. • Being able to integrate and be involved in the community, and understand our community partners. • Being able to partner and work with families / whānau and providers where required. • Sites would have the engagement stream that best aligns to the target operating model.
Alignment to streams	- Enabled - Administration - Entitlements - Operations & Performance (specific roles) - Assisted - Payments - Lodgement and Triage	- Supported - Partnered
Potential locations	• The five proposed hub locations are: - Auckland - Hamilton - Wellington - Christchurch - Dunedin • These locations a e being proposed due to links to existing non-Client Service Delivery teams, primary city locations, population growth and proximity to like-minded organisations. • Not all streams would be in each of the proposed hubs in order to drive consistency and manage team sizes.	• We propose servicing our Supported clients across our current 25 branch locations, who would manage a mix of local and national claims. • We believe our Partnered model would work best in a smaller number of sites – and believe this is between 8 and 12 sites. • For further information on the sites being considered, look at the supplementary information on location.

 Your feedback on Phase Two is important, this is your opportunity to help shape our streams and future roles, you are encouraged to consider the proposal across the entire model.

Phase Two: Concept of Client Service Delivery roles

PREVENTION. CARE. RECOVERY.
Te Kaporeihana Āwhina Hunga Whara

Leadership
- Client Service Leader
- Recovery Stream Support Manager
- Team Leader

Lodgement and Triage
- Senior Cover Assessor
- Cover Assessor
- Lodgement Administrator

Enabled Recovery

Assisted Recovery
- Recovery Assistant

Supported Recovery
- Recovery Coordinator

Partnered Recovery
- Recovery Partner
- Safety Response Advisor
- Principal Advisor

Provider Recovery

Payments
- Payments Assessor

Entitlements
- Entitlement Assessor

Administration
- Recovery Administrator

Recovery Support
- Manager Home Modifications
- Manager Transport For Independence
- Practice Mentor

Operations and Performance (Insights, Reporting and Feedback)
- Operations Manager
- Hub Administration Manager
- Business Adviser
- Team Administrator
- Performance Manager
- Performance Advisor
- Third Party Relationship Manager
- Team Administrator
- Knowledge and Practice Manager
- Practice Mentor
- Workforce Manager
- Workforce Forecasting Analyst
- Workforce System Specialist
- Real Time Queue Analyst
- Product Owner
- Business Analyst

Ways of Working

Position Descriptions are available on the Sauce.

Your feedback on Phase Two is important, this is your opportunity to help shape our streams and future roles, you are encouraged to consider the proposal across the entire model.

Phase Two: Concept of role similarities to current roles

Our overall design has taken into account the capabilities and roles needed for the future of Client Service Delivery. We recognise that you may not see a direct connection or link from your current roles. Outlined below is a summary of the proposed roles with our future model and some initial thinking on the similarities to existing roles. Further information on the different expectations of the teams are outlined in the following pages.

Grouping of Proposed Roles	Proposed roles	Proposed similarities to existing roles
Front line roles	- Recovery Assistant - Recovery Coordinator - Recovery Partner	The proposed roles have a number of similarities to the current case owner roles, due to the underlying core case management skills and capabilities.
Admin	- Recovery Administrator	The proposed role is similar with the breadth of current administration, task driven roles. This role encompasses the wide scope of activity within one role, and signals cross skilling of employees within these roles.
Assessment Roles	- Senior / Assessor (Payments, Entitlements, Lodgements)	The functions of existing assessment, payment and entitlement roles align to the future design.
Specialist Roles (Ops & Perf, Partnered Recovery)	All other specialist roles	Similarity to these roles will be considered on an individual basis.
Leadership	- Client Service Leader	The proposed role is different from current leadership roles in a number of important ways.
	- Team Leader	The proposed role is similar to our existing Team Manager roles in the scope of managing front line teams.

Phase Three will confirm potential individual impacts which will also include number and location considerations.

1. Client Service Leader
We believe the proposed role is significantly different from the current Unit Leader roles in behavioural and performance expectations, breadth and focus of work, scope and ways of working. Under the proposed approach, Leaders would work in functional streams, and provide support across a region. Client Service Leaders would now be required to operate regionally, and drive performance through remote management or across large number of teams. Leaders would be required to work across streams to ensure the appropriate level of service and hand-off between teams, and drive for a combined performance outcome. Under the proposed approach, they would use data and daily insights in decision making, while being agile to align performance and improvements based on daily regional and national performance indicators.

Phase Two: Concept of multi-level approach to roles

For our proposed front line roles within Client Service Delivery, we are proposing to implement a multi-level approach, with two remuneration bands.

Each role would have an **entry level** for people starting in the position, and an **experienced level**. Operating at the experienced level would require you to deliver services that are more complex, supporting clients with more complex needs, and demonstrating stronger judgement and the ability to detect and manage risks more proactively. You would also be expected to use your skills and experience to mentor your colleagues and support their development, and in some cases, engage in cross-agency work.

Implementing this concept of multi level roles would allow us to:

- Support career growth and career pathways within the organisation. This would be in line with progressing internally where there is a business need, performance, capability and experience; and
- Reward you appropriately as you develop skills and experience that support your career choices.

It is our intention this would be managed as part of talent management practices (e.g. application for progression in line with mid year or end of year review) and would link to a broader competency framework (still in development for roll out in 2019). The progression framework would be based on performance, capability and business needs. This would be managed in accordance with our existing remuneration framework.

Other roles would continue to align to a single remuneration band and be managed in accordance with our existing remuneration framework.

Outlined below are the roles proposed to have a multi-level approach:

Administrator	Assessor	Recovery Assistant	Recovery Coordinator	Recovery Partner	Practice Mentor	Team Leader	Client Service Leader
11/12	13/14	14/15	14/15	15/16	16/17	16/17	18/19

More information on the multi-level approach is available in our supporting documents and frequently asked questions on the Sauce.

Phase Two: Lodgement & Triage

By simplifying and streamlining claims registration and cover decision processes, Lodgement and Triage will approve claims as quickly and consistently as we can, allowing clients to get on with their recovery. Our people within the Lodgement function would be integrated and working collaboratively together, with greater flexibility to grow and utilise skills and experience.

What is Lodgement and Triage and how does it fit into the integrated model?	What would be different if the proposed changes are implemented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?
• The lodgement and triage function is the front end of our client's claim journey. Clients will access the Lodgement and Triage work stream through their provider. • 100% of client claims will be processed through the Lodgement tool or function. • We work alongside analytics-driven technology to ensure that claims are lodged quickly, accurately and effectively. The goal is to make timely and consistent cover decisions, automated where possible. • Where we need to investigate cover prior to a decision, our staff apply their experience and expertise to ensure a fast, accurate, consistent decision is made. We expect that around 8% of client claims will be triaged and require manual intervention. • Following a cover decision, clients are automatically triaged and streamed into the appropriate recovery stream based on client need.	• Our continuous improvement focus will use analytics, technology and automation to improve data quality, reduce manual processing and focus our staff skills on making complex decisions. Ove time, more manual or repetitive tasks will be automated. • There will be a focus on simplifying the experience for the majority of customers while effectively monitoring and managing exceptions as appropriate. • Our team members will be able to develop and utilise either generalist or specialist skills in a multi-functional environment. • There is a team focus on delivery and shared responsibility for outcomes. We will continue to have clear metrics and individual ownership of tasks, quality and customer feedback. • The Lodgement and Triage team would access support from the centralised administration team to complete their services. • We will also work closely with our Clinical and Technical colleagues to ensure the right level of recovery support is provided in a timely manner.	• As confirmed in our August consultation, Lodgement and Triage is located in our Dunedin and Hamilton hubs, with Treatment Injury remaining in Lower Hutt. • Throughout 2019, Treatment Injury will look to extend capability and build continuity by operating from a second hub site. • Our proposal aligns the rest of the teams that predominantly perform a cover assessment function to be part of Lodgement & Triage. This includes: - Work-related Gradual Process - Accidental Death - Hearing Loss - Work Injury Inquiry Resolution • Lodgements currently has two roles. It is proposed those new teams would align to these roles. Those roles would be: - Cover Assessor in band 12 - Senior Cover Assessor in band 13/14 - We expect Lodgement would have more people, with the addition of these teams. We would need this resource to manage our current volume, however this need would reduce over time as we improve our processes and systems.

Phase Two: Enabled Recovery

Clients in the Enabled stream will be empowered to manage their own recovery and have better visibility over their recovery services, with our people supporting clients when they need us.

What is Enabled Recovery and how does it fit into the integrated model?	What would be different if the proposed changes are implemented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?
• Clients in the Enabled stream will need/want very little interaction with ACC. This option recognises a client's individual needs and allows them to work in a way that suits them best. • Clients will be able to primarily manage their own recovery through our online portal (MyACC). When/if required however, we would be there to support them. • We anticipate this will be around 47% of our managed clients. • We will set clients up with a MyACC account so they can complete the onboarding process as soon as they would like. Eventually this will link directly to our notifications at claim lodgement, so there is no delay between ACC becoming aware of their claim and our ability to start to support them to recovery. • Clients would have more channels to contact and interact with us than they currently do. • Clients can transition between recovery streams as/if their recovery needs change.	• There would be no dedicated team to support our enabled clients, but our Admin and Assisted teams would be there to help where required. Tasks generated on MyACC by Enabled clients would be routed to these teams for completion. • Because our clients will be empowered to manage their own recovery, our people will be freed up to focus on those clients that need us the most. • We will use analytics and business rules to ensure we know when the client may benefit from additional support from ACC and to monitor any exceptional activity on the client's recovery journey.	• Clients will be able to access support online or via the phone at a time and place that suits them. • Tasks generated by this interactive channel would be performed by our Assisted Recovery and Administration teams located in our proposed hubs. • No directly assigned proposed roles to Enabled Recovery.

Phase Two: Assisted Recovery

Clients in the Assisted stream would be supported by a national team delivering a consistent experience and greater outcomes from working in a task managed way as and when the clients need us.

What is Assisted Recovery and how does it fit into the integrated model?	What would be different if the proposed changes are implemented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?
• Clients in this stream require some direct support from us to achieve their recovery outcome. An example of this could be home-based care or return to work support. • We anticipate this will be around 37% of our managed clients. • Clients would no longer have a dedicated case owner. Instead they would interact with a team who would assist them with their requirements. This would mean that clients in the Assisted stream could deal with multiple ACC people over the course of their recovery. • Clients can transition between recovery streams as/if their recovery needs change. • They will also have access to MyACC to support their recovery.	• Our Assisted team would work together to support this group of clients, rather than work on a one-on-one basis. • Clients managed by the Assisted team would be allocated work on a national basis. The work would be allocated to staff who are best placed to complete that work from a capability, capacity and preference perspective. • Assisted teams would manage assigned tasks for clients, rather than a dedicated 'case load'. • There would be a team focus on delivery and shared responsibility for outcomes. We would continue to have clear metrics and individual ownership of tasks, quality and customer feedback. • Our ways of working would support our people to easily come up to speed with the client's recovery and give clients confidence that they will get a consistent service. This would also prevent the client from having to re-tell their story to each new person. • We would operate in a structured way of working with allocated times to attend meetings / coaching / breaks so that we can ensure there is sufficient coverage of our team and clients. We see opportunities in this stream and others to potentially have flexibility in hours of work due to the ways of working. • The Assisted team would access support from the centralised administration team to complete their services. • We would also work closely with our Clinical and Technical colleagues to ensure the right level of recovery support is provided in a timely manner.	• We are proposing to complete this work out of five hubs in Auckland, Hamilton, Wellington, Christchurch and Dunedin. • We are proposing one core role – a Recovery Assistant that would span across bands 14 and 15 based on individual performance, capability and business needs. • Some of the functions performed in the below teams will be performed in Assisted Recovery: - Short Term Claims Centres - Branches (Case Managers) - Service Needs Assessment - Some roles within Claims Assessment and Client Support • We expect Assisted Recovery would represent a significant portion of our overall workforce, due to the centralisation of these activities and the intended volume of managed clients.

Phase Two: Supported Recovery

Our vision for the Supported stream is to be a national team working in a consistent way. Our focus would be on doing the things that are going to move a client's recovery forward, including meeting clients where that's the right thing to do. We would be able to put our hand on our heart and know that clients in Supported Recovery are getting a consistently great service focussed on maximising their independence, wherever they live.

What is Supported Recovery and how does it fit into the integrated model?	What would be different if the proposed changes are implemented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?
• In Supported Recovery we would work one-on-one with clients who require more support than those in Assisted Recovery. This stream is all about helping clients progress their recovery by solving the challenges they're facing like their diagnosis changing or their job being at risk. • We anticipate this will be around 14% of our managed clients. • Our goal will be to move their recovery forward with every conversation we have. • We would often need to think outside the box to support our clients' return to independence. We would also need to coordinate closely with providers and employers to do so. • Clients can transition between recovery streams as/if their recovery needs change. • They will also have access to MyACC to support their recovery.	• Our teams in Supported Recovery would continue to have dedicated case loads as they do today. This would enable you to fully understand, track and support a client and their stakeholders through their end-to-end recovery journey. • Our work would be streamed, taking into account what we're good at and enjoy, and our capacity. • Although we would still support dis inct geographic areas and offer face to face contact, we would also work nationally. This would allow the workload to be distributed more fairly and mean clients receive the same great service regardless of location. • We would work in simple, consistent ways that mean we can focus on where we really add value – like having great conversations with clients, providers and employers. • We're designing and proposing new ways of working to make sure our clients get the support they need when our team members are on leave or move to new roles. These ways of working would also mean our expectations of each other are fair. • There would be an individual focus on delivery and shared responsibility for outcomes. We would continue to have clear metrics and individual ownership of tasks, quality and customer feedback. • The Supported team would access support from the centralised administration team to complete their services. • We would also work closely with our Clinical and Technical colleagues to ensure the right level of recovery support is provided in a timely manner. • We would also impact some of our specialty service teams (incl Cultural Capability Team), and propose these would be integrated across the relevant engagement streams.	• Supported teams would be based in our current branch locations, so we can meet clients face to face when that will assist with their recovery. • We are proposing one core role – a Recovery Coordinator that would span bands 14 and 15 depending on individual performance, capability and business needs. • Some of the functions performed in the below teams will be performed in Supported Recovery: - Short Term Claims Centres - Branches (Case Managers) - Some roles within Claims Assessment and Client Support • Our Supported stream teams would be different sizes than our branch teams are today, and our sites are likely to be smaller than they are today.

Your feedback on Phase Two is important, this is your opportunity to help shape our streams and future roles, you are encouraged to consider the proposal across the entire model.

Phase Two: Partnered Recovery

Partnered Recovery would ensure that clients with intensive and extensive needs will get the support they require in a holistic way. The ways we work would make it easier to support clients and their family/whānau during the most critical parts of their recovery.

What is Partnered Recovery and how does it fit into the integrated model?	What would be different if the proposed changes are implemented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?

• In Partnered Recovery, we would work one-on-one with clients who have the most intensive or extensive needs; they might have a complex injury, a complex life or be in a vulnerable situation.
• We would partner with people who may have experienced a life-changing event. This means we might be working towards different goals and outcomes over different timeframes.
• We anticipate this will be around 1-2% of our managed clients.
• Sometimes we would also need to work with the client's family or whānau, support people and providers to help them recover.
• We would support clients based on their need, not injury type. If a client had a physical injury and a sensitive claim, they would have a single person working with them rather than two case owners. That means that we would be supporting the person rather than managing a claim.
• Clients can transition between recovery streams as/if their recovery needs change.
• They will also have access to MyACC to support their recovery.
	• Like the other recovery streams, our work would be streamed to the best person by the triage tool, which takes into account what we're good at and enjoy, and our capacity.
	• We would work in more consistent ways so that our clients receive the same great service regardless of location. We would still meet with our clients, family/whānau and providers face to face where this helps with their recovery.
	• We will have new simple tools to ensure we provide a consistent service; for example tools to support serious injury profiling and ensure more consistent decision-making.
	• We would introduce new ways of working with our high risk and intensive clients to ensure we're providing the right level of support to them in a streamlined way.
	• There would be an individual focus on delivery and shared responsibility for outcomes. We would continue to have clear metrics and individual ownership of tasks, quality and customer feedback.
	• The Partnered team would access support from the centralised administration team to complete their services.
	• We would also work closely with our Clinical and Technical colleagues to ensure the right level of recovery support is provided in a timely manner.
	• It is proposed that some of our specific teams will change as a result of this proposal:
	    • Employer Centric Services would be integrated across the relevant engagement streams, and additional services provided by Business Customer Solutions.
	    • Remote Claims Unit and Wellington Central Branch would continue to operate as separate teams within Partnered, but would align to our future roles and ways of working, and we would continue to assess the scope of the exceptional clients they support.
		• We think our teams would be based in several locations across the country to reflect where our current and future clients are. This would enable us to meet with our clients face-to-face, support us to develop partnerships with our communities and help build our capability and capacity.
		• Based on our location data, claim data and our location principles, we are considering being in 8-12 sites across New Zealand.
		• The implication of this is that we are proposing to decentralise the Sensitive Claims Unit and rationalise Serious Injury.
		• We are proposing one core role – a Recovery Partner that would span across bands 15 and 16 depending on individual performance, capability and business needs.
		• Some of the functions performed in the below teams will be performed in Partnered Recovery:
		    - Sensitive Claims Units (Wellington, Dunedin and Hawke's Bay)
		    - Branches (Serious Injury and Complex Injury Teams)
		    - RCU and WCB Teams
		• We expect Partnered Recovery would grow from today with the inclusion of a broader definition of clients, and claim growth.

 Your feedback on Phase Two is important, this is your opportunity to help shape our streams and future roles, you are encouraged to consider the proposal across the entire model.

Phase Two: Payments

Our vision for Payments is that we will simplify and integrate all types of payments into Eos to improve the client experience. This will also empower our frontline staff by having greater visibility of payments information and eventually the ability to set-up non-complex payments for clients.

What is Payments and how does it fit into the integrated model?	What would be different if the proposed changes are implemented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?
• The Payments function would support clients in all streams who receive compensation, reimbursement or any other type of financial transaction. This would include weekly compensation, transport, pharmacy costs, and independence allowance lump sum payments. • Completion of the Client Payments transformation projects will move payments into our core client management system – Eos. This will enable us to speed up and simplify processes. • Clients will be able to view their payments, send us updated information and documents and interact with us if any queries via MyACC.	• The Payments team would cover the spectrum of payment types. We would handle the more complex payments that require specialist knowledge e.g. tax, legislation, and provide support as required for all payment transactions. • Certain payments tasks would move to frontline. In some instances, front line teams would be able to approve payments and the system will automatically process and pay the client. In these cases, there would be no need for any involvement from the Payments team. • We will have the ability to access real-time earnings information from Inland Revenue which will speed up the process for setting up payments. • All staff will have more visibility of payments information. • Over time we will add more functionality into Eos and MyACC to further streamline the process. • The Payments team would access support from the centralised administration team as required to complete their services. • There would be a team focus on delivery and shared responsibility for outcomes. We would continue to have clear metrics and individual ownership of tasks, quality and customer feedback. We would operate in a structured way of working with allocated times to attend meetings / coaching / breaks so that we can support our team and our clients.	• We are proposing that the Payments function be co-located with other like-functions in proposed hubs. We believe that utilising Hamilton and Dunedin predominately would provide the most efficient service to clients and the recovery streams. • We are proposing one core role that would sit across two bands. • Payments Assessor in bands 13 / 14 depending on individual performance, capability and business needs. • Some of the functions performed in the below teams will be performed in Payments. This includes: - Weekly Compensation - Accidental Death - Transport / Pharmaceuticals - Lump Sum / IA Payments • We expect Payments would have more people, with the addition of these teams. However this would reduce over time as we improve our processes and technology.

Phase Two: Entitlements

Entitlements is a function that would specialise in assessing and facilitating various services for clients based on quality, consistent, timely decisions. We would provide opportunities for multi-skilling across entitlement areas and a variety of assessment work.

What is Entitlements and how does it fit into the integrated model?	What would be different if the proposed changes are implemented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?
• The Entitlements function would support clients in all streams who require treatment that needs prior approval by ACC, and requires specialised assessment. This would include those seeking entitlement decisions where they may have a significant injury impairment and may be entitled to receive a lump sum payment or independence allowance. • Other transaction types would include: - Elective surgery - Extension of primary treatment (e.g. physio) - Dental treatment - Nursing care treatment - Hearing aid replacement - Orthotics	• Our work would be performed by centralised teams to deliver quality, consistency and timely treatment entitlement decisions. We would also provide specialist assessment support to streams in the rest of the integrated model. • Where required, we would manage the assessment process on behalf of the other streams when the client is receiving other rehabilitation assistance, ensuring seamless service to the client. • We would also manage the end-to-end assessment processes and communication to the client when the claim is not being managed in another recovery stream, but where ACC is funding the treatment (or being asked to). • We would provide opportunities for our team members to learn other subject areas by cross-skilling of specialisms. • There wou d be a team focus on delivery and shared responsibility for outcomes We would continue to have clear metrics and individual ownership of tasks, quality and customer feedback. We would operate in a structured way of working with allocated times to attend meetings / coaching / breaks so that we can ensure there is sufficient coverage of our team and clients. • The Entitlements team would access support from the centralised administration team to complete their services. • We would also work closely with our Clinical and Technical colleagues to ensure the right level of recovery support is provided in a timely manner.	• We are proposing that the Entitlements function be co-located with other teams in proposed hubs. We believe that utilising Hamilton and Dunedin predominately would provide the most efficient service to clients and the recovery streams. • We are proposing one core role that would sit across two bands. - Entitlements Assessor in bands 13 / 14 depending on individual performance, capability and business needs • Some of the functions performed in the below teams will be performed in Entitlements. This includes: - Speciality Teams (Dental, Nursing Care, Elective Surgery, Hearing Loss – Re-aiding, Lump Sum/IA Impairment Assessment, other Complex Treatments) • With Entitlements as a dedicated function this will align existing entitlement focused activities. Overall the size of the team would reduce over time as we improve our processes and technology.

Phase Two: Administration

Our national Administration stream would provide trusted and valued support to everyone to enable great outcomes for our clients. Our people would work together to deliver consistent and timely administration support.

What is Administration and how does it fit into the integrated model?	What would be different if the proposed changes are implemented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?
• The Administration stream would be a critical part of the integrated model and essential to client recovery. They would provide support as required to 100% of clients across all recovery streams. • By having a dedicated administration function, it would allow our teams in the rest of the model to focus on having great conversations with our customers. • Tasks generated from MyACC directly from clients would also be performed by the Administration team.	• The team would work together in a national way to complete administration tasks that are needed to support a client's recovery across all recovery streams. • Tasks would be triaged from a national queue according to people's capability, capacity and preference • We would look to maximise the support the Administration team can provide meaning that where required, we would speak with clients, providers and employers to complete the task. • There would be individual ownership of tasks but shared responsibility for outcomes and performance metrics. • We would operate in a structured way of working with allocated times to attend meetings / coaching / breaks so that we can ensure there is sufficient coverage of our team and clients. • Teams would interface with MyACC as part of the service offering.	• We are proposing that this function would be located in proposed hubs for ensuring greater scale and consistency. We believe that utilising Hamilton and Dunedin predominately would provide the most efficient service to clients and the recovery streams. • We are proposing one core role – Recovery Administrator – that would sit across bands 11 / 12 based on individual performance, capability and business needs. • Some of the functions performed in the below teams will be performed in Administration. This includes: - Customer Information - Document Management (including scanning) - Privacy - Administration within Claims Assessment and Client Support, Branches or the Short Term Claim Centre • We expect Administration as a new function will grow with the centralisation of these activities and the intended volume of managed clients.

Phase Two: Recovery Support

Recovery support is really important to us because we know that getting quick, clear, consistent clinical, technical and practice guidance means we can move a client's recovery forward in a timely way and provide great service to our clients. While the majority are not structurally part of Client Service Delivery, the clinical, technical and practice teams would be an integral part of our overall model.

What is Recovery Support and how does it fit into the integrated model?	What would be different if the proposed changes are imp emented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?
Recovery support will be available in 3 ways: • Via a **knowledge portal** – where you can access generic information to resolve simple queries, if you are new to a role or have a question about the process for getting guidance. The information in the knowledge portal will grow over time based on your feedback and as things in the wider health system change. • A **hotline** – that you can call to get a simple piece of guidance instantly about what to do next for the client based on their individual circumstances. • **Written guidance** – a simple way to request written guidance through Eos if the claim requires an integrated clinical and technical view. This will come back as one simple piece of advice to move the claim forward.	• We're already making progress on implementing this part of the model. Some of our recovery support teams sit outside of the Client Service Delivery structure, like Clinical and Technical Services. Technical Services was established in August 2017 and Clinical w ll be established in mid-November 2018. We will work closely with them to ensure we're keeping the best of what we have today and making improvements so all streams have access to the guidance they need regardless of location. • In addition, we propose to have a team that provides guidance and support to our front line teams on practice management – including updating information on knowledge platforms and case management practices, ensuring consistency of service and targeting capability improvement interventions. • Guidance will be received much more quickly than it is today as there will be different ways of getting guidance, our processes will be simpler and not all requests will go to medical doctors – some will go to allied health providers. • Guidance will also be much shorter and clearly set out two or three recommended actions. • In making a referral for Recovery Support, we would need to be very clear about what guidance is required; our role is to provide great information for the recovery support team to consider. • We would be expected to act on the guidance we receive, although there will be a process to review the guidance and ask questions if required.	• Technical and clinical advice will be provided via our teams in Technical and Clinical Services on a national basis. • For teams within Client, our proposal would align the roles that predominantly perform a mentoring or advice function to be part of Recovery Support. This includes: - Specialised roles within Partnered Recovery - Roles within Operations & Performance • We are proposing that the Client Recovery Support function be co-located with either: • Other teams within Technical and Clinical Services. • Similar support roles based in the proposed hubs. • We are proposing one role that would sit across two bands. Those roles would be - Practice Mentor in bands 16 / 17 depending on individual performance, capability and business needs.

Phase Two: Operations & Performance

Our Operations & Performance vision is all about looking for improvements in the end-to-end process. We work with pace and energy, connecting and making the system more efficient and effective, while ensuring we are delivering national consistency across the rest of the integrated model.

What is Operations & Performance and how does it fit into the integrated model?	What would be different if the proposed changes are implemented?	Where are we proposing the work be done and by which roles? How would this link to existing functions/teams within Client?
• Operations & Performance is an internal enabling function, providing support to all the other recovery and engagement streams within Client Service Delivery. • They would also be our internal owners of driving continual service improvement in a systemic way. They would work with teams across the model to ensure that we focus on the things that add the most value to our staff and clients. • The function would also add value to our people through the quality and performance framework; looking at all things to do with how we work with our people and leaders. • Customers of this function will be largely internal with the exception of Third Party Administrator Support.	• Our Operations and Performance stream is proposed to cover 6 support sub-functions: - Operations – overseeing our non-client administration and business support. - Performance – managing operation wide performance through reporting, quality, and assurance management. - Third Party Administrator (TPA) Support – service offering to accredited employers to enable their non-work claims to be managed through a 3rd party. - Knowledge and Practice – would provide support for our people to learn, grow and build out our practice advice and drive consistency. - Workforce Planning – managing national workloads and future forecasting our employee requirements. - Continuous improvement in technology, process, business rules and analytics – providing support across the entire Client Service Delivery tools and technology. • The team would rationalise tasks to ensure staff at sites and across the streams can focus on delivering great customer experience and outcomes. • We are proposing to have new tools to support national work queue management, and to build capacity and capability on an ongoing basis. New knowledge tools will also help with consistency across the integrated model.	• Due to the varied nature of the work, we believe the Operations and Performance roles could be in the Justice Centre, hubs or sites, depending on the position and who they interact and engage with. • We are proposing a range of specialist and support roles. These are outlined on slide 14. • Some of the functions performed in the below teams will be performed in Operations & Performance. This includes: - Teams within Operations & Performance - Roles within the Client Transformation Project - Administration roles that provide office or team administration in centres and branches. • We expect Operations & Performance would have more people, with the establishment of new functions to support Client Service Delivery.

Phase Two: Leadership

Leaders in Client Service Delivery would be responsible for leading a group of teams, based in a site, hub or across regional sites. They would be accountable for delivering a seamless, consistent, high quality customer experience and achieving the best recovery outcomes for clients while ensuring the sustainability of the scheme. They would achieve this by creating a positive employee experience to ensure an engaged workforce who are motivated to improve our customers' outcomes and experience.

[illegible]	[illegible]	[illegible]
• Leadership in Client Service Delivery would be consistent with the same roles across all functions. • We would move away from only site leadership to a hybrid of localised, regional and functional roles depending on the requirements of the service being provided. • We would have an enhanced focus on collaboration and integration across the integrated service model in order to support clients as they move seamlessly through the streams. • Our leaders would embrace technology to connect virtually in new ways with colleagues and teams across country. We would also have new ways of engaging with our clients depending on their preference and need. • We would expect our leaders to create a culture of trust with our staff and our clients.	• Leaders would ensure consistency across the work our people are doing with a focus on continuous improvement. • Some leaders would manage teams remotely at times, requiring new ways of connecting and collaborating. We will have new tools to support us in doing this and it would be the leaders role to facilitate this for our teams so that it feels natural and drives better outcomes for our clients. • Our teams would be clear on what they need to do to achieve desired outcomes and feel motivated to do this. • They would have a leader available to provide dedicated coaching, real time feedback and insights to support performance. • Our operating rhythms would align with performance boards and daily stand ups that support collaboration and continuous improvement including real time customer feedback to support coaching. Our leaders would create a positive presence to inspire and enhance these engagements. • Our leaders would understand what it takes to operate in an environment with new performance metrics, and be able to translate goals from team to individual in a logical, cascading manner.	• We are proposing two core leadership roles that would sit across two bands: - Client Service Leader across bands 18 / 19 - Team Leader across bands 16 /17 • Client Service Leaders would be geographically dispersed based on the needs and region/location they cover. • It is proposed that there would always be a team leader on site managing their respective team. • The number of leadership roles will be smaller than today, and this is due to reduce the layers of management and increase in our scope and span of control.

Phase Two: Ways of working

We need different ways of working to introduce and support how we would operate in the future. These include improvements to existing frameworks, and the introduction of new approaches to ensure we are able to provide the best service to our clients.

Concepts	Benefit of Changing	What this may mean
Flexible work and working hours	• Increases opportunities for our employees • Meets expectations of our clients	• We are thinking how we can be more accessible to our clients, and are looking at if we align the work in our proposed hubs to support our clients. For example, we are considering extending our hours to align with our Contact Centres and operate from 7am to 7pm (or some variation). • We see this as an opportunity to facilitate flexibility in roles, offering part time and other flexible variations.
Operating rhythms	• Drives national consistency • Provides greater awareness of relevant information • Rolls up to leadership levels • Permits timely targeted interventions	• A new operating rhythm (collaboration, meetings, coaching/development, training) to keep people connected and support them to do their best work every day. This would allow us to use our new metrics, reports and tools to grow our capability and improve performance. This could include: - "Buzz meetings": short meetings to focus on key metrics/outcomes, increase coordination and collaboration across the team, and allowing a fast response to issues. - Side-by-side, one-on-one coaching in real time. - One-on-one performance development coaching discussions, tailored to the individual's specific coaching needs and development opportunities.
Workforce Management	• Improves our resourcing models to anticipate and meet fluctuating workloads • Supports training options for employees • Permits future forecasting by predicting case volumes and resource levels • Provides better understanding of pain points and issues in our processes and for our people	• A system and solution that supports our people and business processes consistently across the organisation. Aspects of Workforce Management would apply to everyone across all Client Service Delivery increasing and enhancing over time. It would assist us to understand more about: - Capacity / Resourcing - Monitoring employee capability profiles - Completing future forecasting to ensure that we have the right people, working at the right time to support our clients. • Introducing a workforce management system is not about monitoring what our people are up to. It's about supporting you in your work load and ensuring you have the right amount of work you are able to do and that would provide you with opportunities for growth. This would ensure our people only be getting allocated work that they are capable and confident of doing, enhancing employee engagement and client delivery.

Phase Two: Ways of working

Concepts	Benefit of Changing	What this may mean
Client needs assessment and re-assessment	• Allows for us to manage our customer experience and tailor our service to our clients	• We would need to trust each other to do our part as clients move between people and streams in the model. • We would need to have consistency in the way we use Eos and record aspects of our client's recovery journey • We would need additional flexibility in how we work to enable a seamless experience for our clients
Customer feedback / closed loop feedback	• Permits real time feedback and awareness of what we are doing right and how we can improve	• With real time feedback from our team, clients, providers and business customers we will be able to continue to refine and improve what we do on an ongoing basis. By responding to customers we could ensure our services continue to meet their needs. • This will show whether our re-designed case management model is improving client recovery; rather than how well the process is followed • We could use these measures to inform our continuous improvement efforts.
Leadership expectations	• Improves coaching, guidance for employees	• New coaching tools would incentivise the right ways of working for leaders and team members. • Real time performance measures would help improve coaching and grow staff capability so everyone has more opportunity to be their best.
Employee experience	• Increases employee engagement and customer outcomes	• We want personal accountability for decisions, advice and workload with a focus on cross skilling and knowledge and capability development. • We will be looking for close collaboration and coordination across functions to ensure a seamless experience – ensuring we have an integrated and overarching view of the end to end services we provide our customers. • We will be looking to institute regular, consistent ways of collecting input on the experience of our team so that we can collectively improve ACC as a great place to work.
Performance measures	• Targets measures to ensure successful outcomes for our clients • Provides real time reporting against measurable and tangible outcomes • Gives greater transparency on our overall performance	• We are designing our services around our clients' individual needs rather than their injury type or duration of the claim. In order to do this, our focus and therefore, what we measure as success also needs to change. • We would also be focusing equally on the quality and consistency of our decision making, as well as the experience of our clients and team members. • We would look to have a cascading set of performance metrics that enable us to monitor and manage our contribution between groups, teams and individuals.

Your feedback on Phase Two is important, this is your opportunity to help shape our streams and future roles, you are encouraged to consider the proposal across the entire model.

Phase Two: Ways of working

Concepts	Benefit of Changing	What this may mean
Data, analytics and reporting	• Moves to a data driven model to improve decision making	• Exception reports could make sure that we understand any claims that are off-track so that we can act on these. • Analytics would drive the 'next best action' to support our decision making.
Processes and tools	• Increases consistency across the country • Provides more efficient processes enhanced by technology – to serve our clients better	• Simpler processes would enable us to complete our work more efficiently and our people would be supported by tools that help them do their jobs. • Recovery plans would define specific recovery goals and actions for clients and create "recovery check-in" points with target dates to track and monitor progress of the client's recovery. These would be visible to clients and over time, all other stakeholders to ensure clear expectations about who was doing what. • A recovery status tool (including a recovery status indicator) would allow us to use relevant client data (e.g. psychosocial factors) to track a claim more closely. • A recovery check in would allow us to assess a client's progress towards their recovery goal and key milestones and whether our current engagement approach is appropriate.
Technology	• Increases consistency across the country • Offers more efficient processes	• New technology would enable our people to complete their work efficiently. - New Lodgement & Triage tool - Eos 8.8 - Analytics 2.0 - Client Payments

Your feedback on Phase Two is important, this is your opportunity to help shape our streams and future roles, you are encouraged to consider the proposal across the entire model.

Phase Three: Overview

Phase Three sets out our intentions for 2019. This phase focuses on bringing our proposed new way of working and case management system to life. As we work through your feedback on Phase Two, we may make changes to accommodate your suggestions. We acknowledge that this may be unsettling, but we want to be as upfront with you as we can, so that you know what is coming and can take advantage of extra support as our planning progresses.

PHASE ONE: 2017-2018

Phase One in this document provides a reminder of our challenges, why we needed to make changes, what has happened to date and how that has shaped our thinking leading into Phase Two.

Recap:
In 2016 we established our Next Generation Case Management intentions. Feedback from our clients has told us that often our current case management 'one size fits all' approach is not targeted to where ACC can add most value to our clients' recovery.

Feedback and Changes:
We responded to this feedback in Phase One. Our changes included:

- Completing our fact base with an understanding of our current service delivery offering
- Designing a blueprint for how case management could be in the future
- The start of detailed design of the model and establishing of our Launch Pad to test that model
- Consultation and confirmation on the Client Service Delivery model and leadership team structure

Our Model:
The new integrated model has been confirmed and is proving that it will meet the needs of the client in a way that is dynamic and holistic. We've also made changes to reinforce a culture that focuses on putting people before processes – both clients and employees.

This section is for reference – further information can be found on the Sauce.

PHASE TWO: 2018

Phase Two forms the focus for the October / November consultation. We want to hear your thoughts and feedback on the proposed enhanced model before any decisions are made and we move onto Phase Three.

This is a formal consultation for all of Client Service Delivery, but at this point, there will be no direct impact on individual roles.

Focus:
Phase Two introduces the proposed:

- Enhanced Client Service Delivery operating model,
- Scope and detail of the different client engagement streams
- Hubs and sites concept
- Where work is proposed to be completed
- Future roles
- Concepts and ways of working
- Way we'll support our you through change

Feedback:
This proposal has been developed through engagement with our key business leaders, product owners and SME's across Client Transformation. We are sharing our thinking and seeking your feedback before we make any decisions on the future of Client Service Delivery.

This section requires your feedback. Please consider the proposal carefully and let us know your thoughts.

PHASE THREE: 2019

Completion of Phase Two will help us understand the implications of our changes and what it would mean for you. We plan to come back in early 2019 to consult on what this means for you specifically. At this point, all roles in Client Service Delivery would be considered.

Focus:
Key proposals to be consulted on in Phase Three will be:

- Locations where our work would be completed
- Selection criteria that would be used for each role
- Team structures and position numbers
- Impacts specific to your current role
- Selection processes and EOI options
- Timing of implementation and phasing by site

Transition:
This pack outlines our current high level thoughts on the proposed transition for your review. During this time we will also see the introduction of new technology to support our transformation journey. This includes:

- Embedding of our new lodgement models
- Upgrading Eos, our core processing system to version 8.8
- Replacing of our analytics platform
- Establishing our payments processing capability in Eos.

Consultation areas of Phase Three are subject to feedback and decisions made through Phase Two. We would value your thoughts at this point, and consultation on this phase will follow in early 2019.

Phase Three: Proposed roll out approach

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We are proposing a staged roll out through a series of Tranches. Subject to feedback and further design, our current intention is to create capacity by firstly establishing an Admin and Assisted capability in Dunedin. This would be followed by a small tranche of a hub and some of our current branches as we continue to refine our roll out approach. Successful implementations in the first tranches would facilitate the roll out of the new ways of working and structure to the rest of the country in a way that minimises disruption to our clients.

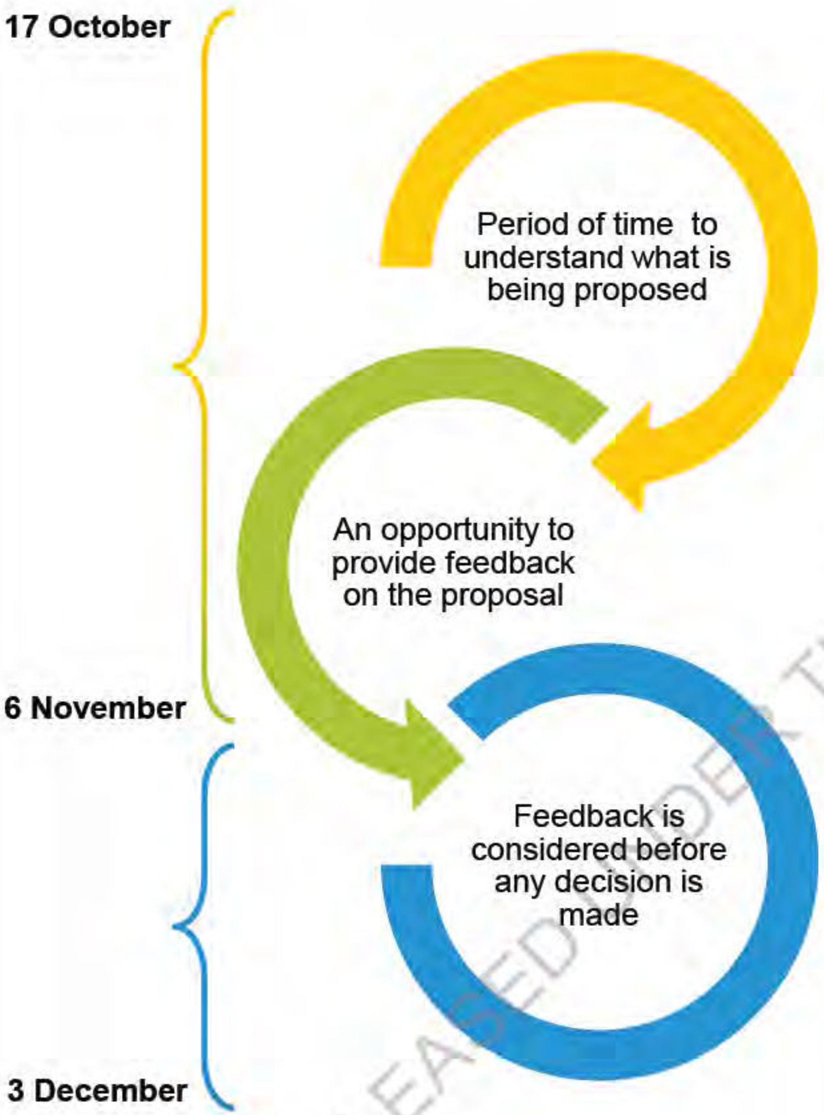
- **Tranche 0**
  Dunedin (Admin / Assisted)
- **Tranche 1**
  (Payments Function, Branches in (Waikato, Te Rapa, Launch Pad, Tauranga, Rotorua, Whakatane, Gisborne, Hawke's Bay, Hamilton Hub and rest of Dunedin Hub,)
- **Tranche 2**
  (Everywhere else in multiple waves)

Proposed roll out approach

Each roll out would progress in three phases:

- **Prepare** is about getting the site ready and making sure we understand the run sheet so that our implementation goes as smoothly as possible.
- **Deploy** is where we would look to train our people on our future ways of working so that they are ready to go on day 1 of the new operating model.
- **Sustain** is where our people in the new world would be supported in the weeks following deployment from a process, technology and cultural perspective.

Consultation Process: Timeline



- Your feedback is a key component of consultation. You know the clients, the business and your roles best so we want to hear your thoughts before any decisions are made.
- You will be able to provide feedback in a variety of ways and will have access to commonly asked Q&As, supporting information and updated questions on the Sauce throughout the consultation period.
- There will be links available on the Sauce to multiple feedback surveys so that you can provide your feedback on various aspects of the proposal.
- All feedback will be reviewed daily as it is submitted, and questions monitored and responded to regularly throughout the consultation period. We would appreciate it if you could please check our Frequently Asked Questions document to see if your questions has already been answered prior to submitting a new one.
- All feedback must be submitted by **5pm Tuesday 6 November.**

- All Client Service Delivery employees will be briefed on the proposals on Wednesday 17 October. Consultation documentation will be available on the Sauce from 5pm.
- We will hold Question and Answer sessions on 19, 24, 31 October, led by your Unit Leader.
- The Client Service Delivery leadership team will also be traveling to all locations around the country in the week of 22 October to answer any questions, offer support or provide clarification in person.

- As we have noted in this consultation document, and during our briefings, this is a proposal. We want to hear and consider your views and ideas, before any decisions are made. You are welcome to seek independent or legal advice in regards to this proposal.
- Your feedback will be carefully considered. We are aiming to provide you with responses on the themes of consultation in the week beginning 3 December 2018.

Consultation Process: Feedback and questions

There are a number of ways to provide feedback or ask questions throughout the engagement period.

Feedback Surveys	We have created four surveys to help you to provide feedback. All responses to surveys will be anonymous. You can provide your feedback individually, or as part of a group. The survey topics are: **- Operating Model and Concepts** **- Process and Approach** **- Roles** **- Specific Concept - Hubs and Sites** We also want to hear your thoughts about additional support that may be useful to you during the change process.
Questions	You can send questions or queries throughout the consultation period to ClientSDConsultation@acc.co.nz. The inbox is monitored by Talent who will seek business input to responses as required. We will endeavour to respond to inbox queries within two days. If questions has already been answered you will be directed to the updated FAQs available on The Sauce. Your manager, unit leader and union representative will also be available to answer queries and escalate common questions on your behalf. Questions and Answer sessions will be facilitated by our Unit Leaders on **Friday 19, Wednesday 24 and Wednesday 31 October**. This will cover common questions and feedback received via the mailbox and the surveys.
Change Working Group	We recognise that our solutions will be improved by getting our people involved in the decision making. In addition to individual feedback via the surveys and mailbox, we set up a Change Working Group in October 2018 as an avenue for key matters to be discussed. This will ensure we have clear representation of the voice of our people. The group will predominantly focus on addressing topics around supporting our people and what this may mean through 2019. It is intended that this would be a collaborative and solution focused approach to coming up with a decision on key matters. This group will be guided by a Terms of Reference, which is available of the Sauce. The group is made up of around 8 – 10 members with representatives from the PSA, and team managers and team members from across Client Service Delivery.

Consultation Process: Support available

We acknowledge and understand that for many people this proposal represents a significant change to how we currently work and operate. This may be an unsettling time for you, and those feelings may increase as you work through the proposal and provide feedback. We want to make sure there are a range of options available to support you during this time.

Support / Contacts	• ACC's Employee Assistance Programme provides you with up to 4 one-hour sessions to help you. • EAP are aware ACC is undergoing change, and will ensure they are available for ACC employees throughout consultation. You will be able to contact the line at any time to speak with someone who can help.	We also encourage you to also seek support within your personal network. You may want to discuss the proposal with: • Family / whānau, friends and team members • Your manager, a member of the leadership team, or someone from Talent • If you are a PSA member, your PSA representative
Online Resources	• The Change@ACC pages on the Sauce outline the different stages of change, and provide an overview of change and how it may impact you. • The Change related support page shows a step by step guide to the Org Change process and provides several different resources for you to use during Organisational Change. • The Organisational Change Policy provides you with a simple and concise explanation of the policy principles and standards that apply to organisational change. • The Career Centre helps you to discover your values, motivators, skills and talents with an online career development tool.	
Wellbeing	• Our Thrive team space has some great resources including the five ways of wellbeing to help you through change. • ACCtivate, ACC's workplace wellness programme, provides you with resources, tips and advice to support your wellbeing.	

We look forward to hearing from you on what you like and where we can make our future model even better.
Thank you in advance for your feedback.

For more supporting information:

- Visit our Organisational Change page on The Sauce
- Review the Frequently Asked Questions document
- Email any new questions to ClientSDConsultation@acc.co.nz

Submit your feedback by **5pm, Tuesday 6th November 2018**

Client Service Delivery
Phase Three Consultation and Feedback

Proposal for consideration

SENSITIVE

INTERNAL

EMBARGOED Until

3 April 2019, 5pm

Introduction: Recap on why we're transforming

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Overview

We're changing how we work and the way we're structured to help our clients recover as best they can, as fast as possible. Over the past five years we've been looking at the recovery experience from the client's perspective, and re-designing the way we help people to recover from an injury. Our aim is to significantly improve the quality of service we give our clients, and help them recover more quickly. To achieve this, we need to change the way we work. This involves making some tough decisions that will impact the work you do at Sites across the country.

Why are we changing

- Much of the rationale as to why we are changing has been driven by our clients. They told us that we need to make it easier for them to work with us; that we need to simplify and speed things up; and that we need to ensure our service is consistent.

- Where clients need closer one-on-one support, they'll continue to receive this at our local Sites. All our Sites are remaining open to continue providing this level of support. But the reality for many people is they don't want to go into a local branch, and don't want to speak to someone on the phone. Clients will have the option of being managed through one of our centralised teams in a Hub or through an online service which allows clients to manage their recovery on their own terms, at a time and place that suits them. Empowering our clients to do this will help to free up our people to provide phone, email and face to face support to those who need or want it.

- We've tested and proven the new approach in Hamilton and Hawke's Bay over the past 18 months with more than 25,000 clients supported by 100 employees, resulting in both improved client satisfaction levels and health outcomes. For less complex claims, recovery times improved by an average of almost five days compared to our existing service.

What this means

- We're aiming for more consistency and less delay. Our five centralised Hubs that we confirmed through Phase Two consultation will help clients with what they need more quickly. They'll also take on the processing of straightforward injury claims that may not need face to face support, like sprains, strains and breaks. These kinds of injuries currently make up to 94% of our claims. Hubs are there to support the majority of our clients who just need a few things from us when they need. We think we can do that faster and more efficiently in centralised Hub locations where we can build capability and ensure load balancing.

- The changes will also significantly reduce the 40% of time our customer-facing people currently spend on administrative tasks, freeing them up to spend more time working directly with clients who need tailored care and recovery plans.

- All 25 existing ACC branches will remain open.

- Overall, the number of people within Client Service Delivery will stay at around 1800 people. However, for many of our people, our proposal means there could be varying impacts on the work you do and your role within the organisation. There is more information on that further in this document.

We recognise that there will be uncertainty for our people in branches where roles are changing, especially in places where the number of roles may be reduced. This will be a difficult time for many of our people. Our priority is on supporting you through the process.

Introduction: Recap on phases of our client service transformation

As many of you know, ACC is transforming to put the customer at the heart of what we do. We confirmed with you in late 2018 that we would communicate and consult with you again this year on Phase Three of our Client Service Delivery (CSD) consultation process, specifically around what many of the changes may mean for you from an individual perspective. This document and our briefings mark the start of the Phase Three consultation and feedback process.

Below is a brief re-cap of the Client Service Delivery consultation phases:

PHASE 1: 2017-18
Client Service Delivery Model

Phase One was about developing the Client Service Delivery operating model

This included:
- defining the fact base;
- building our blueprint of case management;
- creation of the Launch Pad; and
- consultation on the Client Service Delivery operating model and leadership team structure.

This phase is complete and for reference only – further information can be found on the Sauce.

PHASE 2: 2018
Roles and Ways of Working

Phase Two was when we consulted on the future roles and ways of working

This phase built on:
- the Client Service Delivery operating model,
- learnings from Launch Pad,
- and provided a more detailed overview of each of the recovery streams; including
- how the proposed roles would work with new ways of working.

This phase is complete and for reference only – further information can be found on The Sauce.

PHASE 3: 2019
Individual Impact and roll out

Phase Three identifies potential individual impacts, and the proposed plan for implementing the model

<u>Focus:</u>
Key proposals to be consulted on in Phase Three include:
- team structures and full time equivalent (FTE) position numbers
- impacts specific to your current role
- selection processes and Expression of Interest (EOI) options
- selection criteria that would be used for each role
- timing of implementation and phasing by Site

This phase builds on:
- The decisions from the Phase Two consultation;
- Consults on the potential impact of the model by location and roles across the country; and
- Available support for our employees through this change.

This phase is now underway. Please consider the proposal carefully and submit your feedback.

To support your understanding, this document is broken into six sections:
1. **Introduction** – Overview and scope of the consultation
2. **Operating Model** – Proposed changes for teams within the overall Client Service Delivery model
3. **Potential Impact** – Potential impacts for individuals
4. **Assessment** – EOI, selection approach and timing proposal
5. **Roll Out** – roll out, transition approach and timing proposal
6. **Next Steps** – Information on the process, timeframes and feedback mechanisms

Further supporting information is available on our <u>Organisational Change page</u> on The Sauce.

Introduction: Overview and scope of Phase Three consultation information

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The scope of Phase Three Consultation focuses predominantly on what this means for you individually. We confirmed key concepts and roles / position descriptions through Phase Two and therefore will not be consulting on them further. This allows us to now focus on what our future footprint will look like, to be able to provide an efficient, consistent and seamless customer experience for all New Zealanders.

The Phase Three consultation is made up of two inter-linked consultation processes – Payments then the rest of the Client Service Delivery model. The information for both is contained in this one document but we are proposing they run to different consultation and decision timelines, driven largely by the need to have Payments people in place in advance of the CP1 Go-Live (Payments functionality within Eos) on 5 May 2019. There is more information on this further in the document.

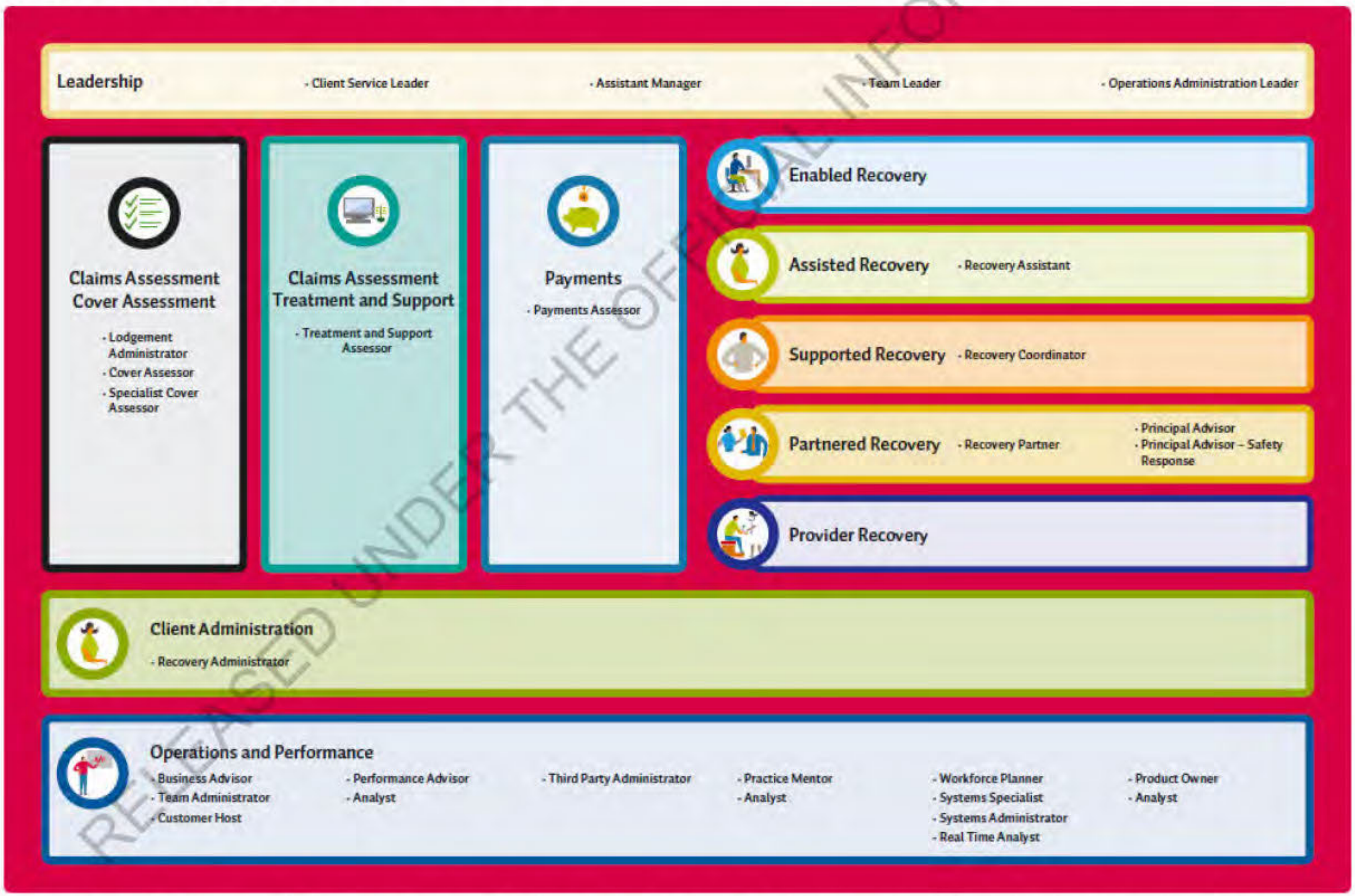
Below is a high-level overview of the scope of Phase Three consultation and what information you will be able to find further in this document. We are seeking your feedback on all of the below.

What we are consulting on in Phase Three	Overview
Structure - Detailed team structures *(#s/locations/roles)*	• Information on proposed FTE numbers, numbers of roles in each location and team structures
Individual Impacts - Role impacts or changes - Location impacts - Other terms and conditions	• Information on what the proposal may mean for you from an individual impact perspective relative to your terms and conditions.
Roles - New or altered roles	• Information on new proposed roles or proposed changes to roles that were confirmed through Phase Two consultation.
Expression of Interest (EOI) and Selection - EOI Approach - Selection Process and Methods - Selection Criteria	• Information on the proposed expression of interest process, selection process and selection criteria for each role including proposed timeframes. • Where possible the requirement for you to provide information or go through a selection process will be as minimal as possible.
Rollout Approach - Transition (Tranche Rollout) - Timing	• Information on transition approach to the new Client Service Delivery model and timing of tranches / waves.

Operating Model: Updated model and roles

In Phase Two we consulted with you on additional aspects and name changes to the Client Service Delivery model which we confirmed at that time. Details on Phase Two are available on the Organisational Change pages on The Sauce.

Since the end of Phase Two, additional design and client centred language work has been undertaken. We are proposing further tweaks to the model, mainly in relation to team names and minor changes to position descriptions. The model below is our proposed future state. Further detail is provided on subsequent pages and in supporting information on The Sauce.



Operating Model: Hub locations and information

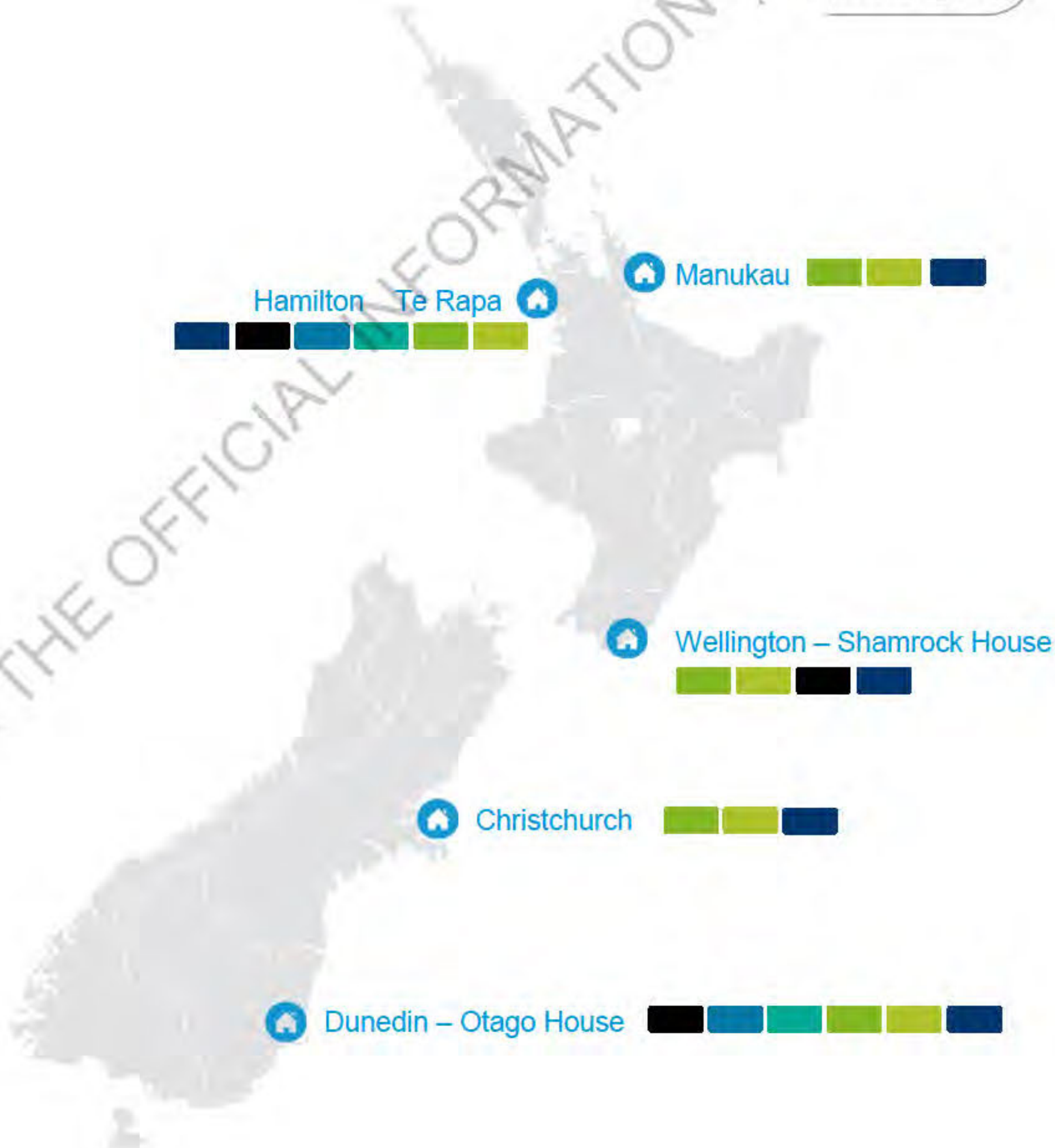
- This map outlines which teams will be based in Hub locations as was confirmed in Phase Two consultation.

- We are confirming that our physical Hub locations will be:
    - Auckland - Manukau
    - Hamilton - Te Rapa
    - Wellington - Shamrock House
    - Christchurch
    - Dunedin - Otago House

- Some of our Hubs are also Sites:
    - Manukau
    - Wellington
    - Christchurch

- We are consulting further on location as part of Phase Three as it relates specifically to individual implications and terms and conditions.

Operations and Performance
Cover Assessment
Payments
Treatment and Support
Administration
Assisted Recovery



Operating Model: Site locations and information

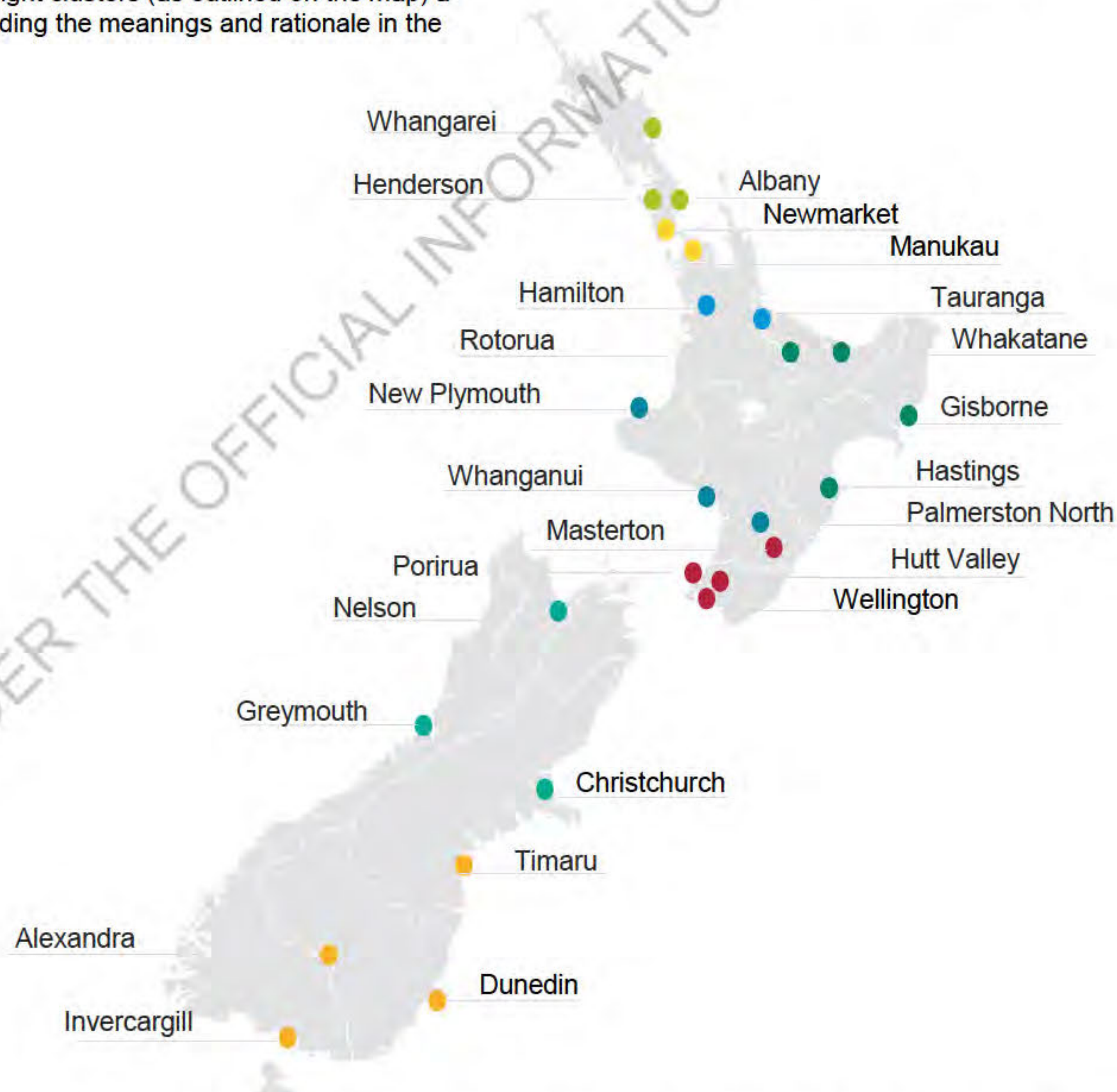
- This map outlines which teams will be based in Site locations as was confirmed in Phase Two consultation.
- We are proposing to organise our Supported and Partnered Sites into regions that would each be led by a Client Service Leader. These regions are grouped by colour on this map and outlined in more detail further in this document.
- Some of our Sites are also Hubs:
  - Manukau
  - Wellington
  - Christchurch
- You will also see the following name changes to better align with location:
  - Counties-Manukau to Manukau
  - North Harbour to Albany
  - Waikato to Hamilton
  - Hawke's Bay to Hastings
- We believe we will need one proposed Customer Host role within some of our smaller Sites (there is more detail on this further in the pack).

Supported Recovery
Partnered Recovery – Physical Injury
Partnered Recovery – Mental and Physical Injury
Operations and Performance

Operating Model: Site locations and information

As per our Phase Two decisions, this map outlines our proposal to incorporate the use of Te Reo into our locations. We are proposing to give our eight clusters (as outlined on the map) a Te Reo name. There is more information on this, including the meanings and rationale in the supporting information on The Sauce.

Proposed Name	Sites in Region
Te Hiku Region	○ Whangarei ○ Albany ○ Henderson
Te Kaki Region	○ Newmarket ○ Manukau
Te Manawa Region	○ Hamilton ○ Tauranga
Te Urutira Region	○ Whakatane ○ Rotorua ○ Gisborne ○ Hastings
Te Piha Region	○ New Plymouth ○ Whanganui ○ Palmerston North
Te Upoko Region	○ Masterton ○ Porirua ○ Hutt Valley ○ Wellington
Te Tauihu Region	○ Nelson ○ Greymouth ○ Christchurch
Te Taurapa Region	○ Dunedin ○ Timaru ○ Alexandra ○ Invercargill



Operating Model: Leadership

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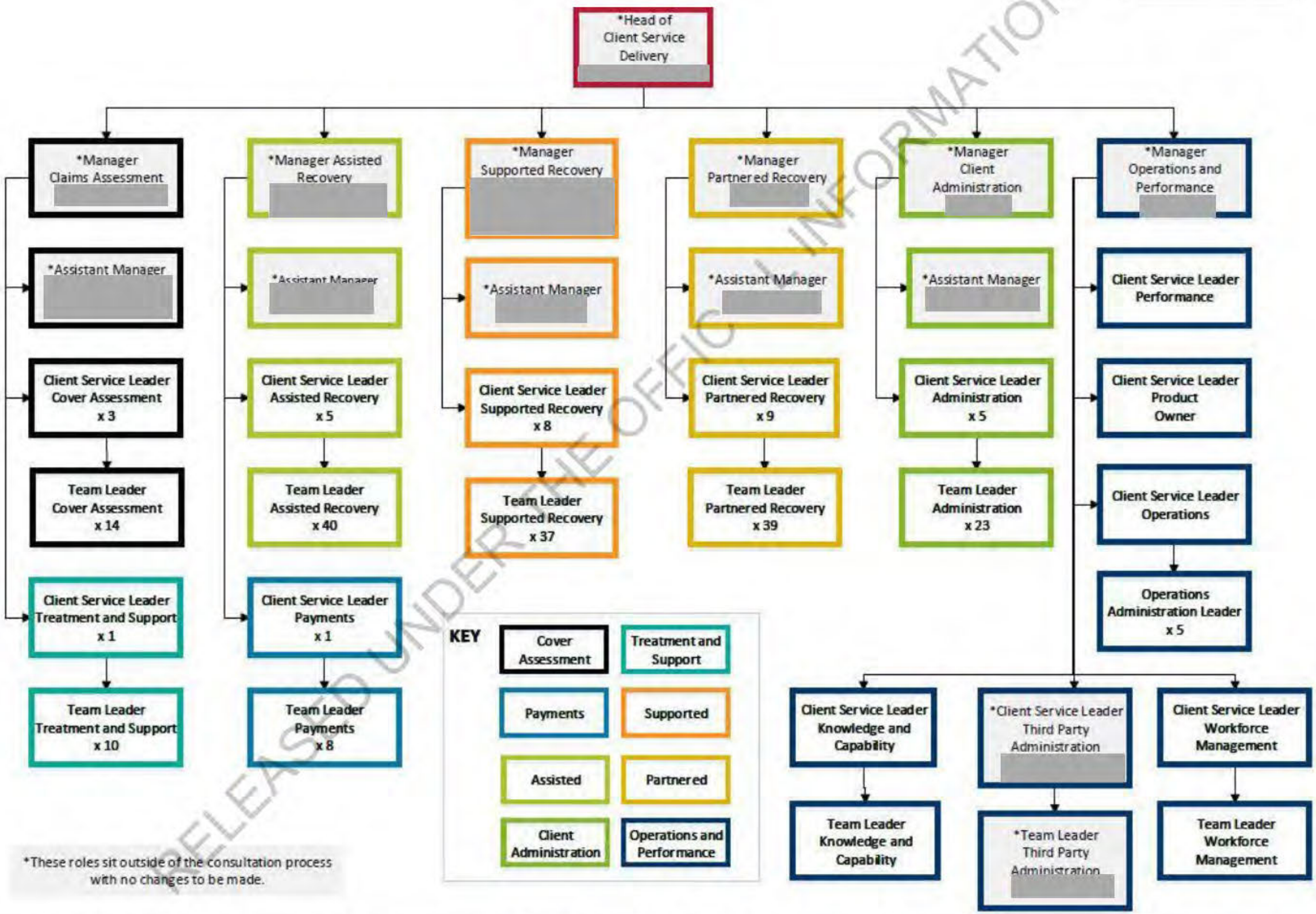
This page should be read in conjunction with your Location Impact and Current Role Impact one page information, available as part of supporting information on The Sauce.

What we confirmed in Phase Two Consultation	What we are now proposing in Phase Three Consultation	Potential impacts
• We confirmed that we would have two leadership roles in the new operating model; a Client Service Leader across bands 18 / 19 and a Team Leader across bands 16 /17.	**Client Service Leaders** ✓ Client Service Leaders would operate within a team of the model, but would work with their colleagues to drive an integrated service for our clients. ✓ We are proposing to have 38 Client Service Leaders within the whole model.	• This means that we are proposing to disestablish all Unit Leader positions and there would be a reduction in our overall number of Leaders at this level across the Client Service Delivery model.
• We confirmed that the intent of the Client Service Leader role is different from the current Branch Manager role, but that the Team Leader position was similar to our current people leader roles.	✓ Within Assisted Recovery, Client Administration, Payments and Claims Assessment, the Client Service Leaders would be physically based in one of our five Hub locations and responsible for a number of teams in that Hub. We anticipate that only limited travel will be required for our Hub-based Client Service Leaders ✓ For Supported and Partnered Recovery, our Client Service Leaders would each be responsible for a region made up of two to five Sites The role would be located within the region it supports. Travel would be required for this role to support the other Sites within the region. Further information on the regions can be found on slide 6 in this document and in the supporting information. ✓ We are also proposing to have Client Service Leader roles within the Operations and Performance team, which would be based in either a Hub or at Justice Centre in Wellington.	• Team sizes under Client Service Leaders would be more balanced than they are today. • As there is only a requirement for some Client Service Leaders to travel, we are proposing that cars will only be provided as a tool of the job where required (i.e. where travel between Sites is required and those distances are driveable as opposed to travel by air). We anticipate this will be for most but not all Supported and Partnered Client Service Leader roles.
• In line with our core design principles, we confirmed that team sizes and spans of control would be set practicably, and where it makes sense, across functions. We also said we would consult on any proposal in relation to this and you would have an opportunity to provide feedback as part of Phase Three.	✓ We are proposing that the Client Service Leader roles would be open for anyone to apply for, as this is a new role within the Client Service Delivery model. ✓ The proposed selection process would include some experience-based questions for shortlisting and a behavioural-based interview which would include a presentation.	• Anyone could apply for the Client Service Leader position and would be considered should they meet the shortlisting requirements.
• We confirmed through the position descriptions how leadership on Site will work. This included information on: - Functional vs Site leadership - People Leadership respons bility of Client Service Leaders - Senior Leader on Site respons bilities - Community engagement - The approach to manage Health & Safety responsibility at Team Leader level by Site – and additional expectations.	**Team Leaders / Operations Administration Leaders** ✓ Team Leaders will report to the Client Service Leaders, and run specific teams aligned to one of the areas of the operating model. ✓ We are proposing 175 Team Leaders across Client Service Delivery. ✓ In addition, we propose o have five Operations Administration Leaders, one in each of the Hub locations. These roles will be responsible for the effective running of our large operational Sites and oversee our proposed Customer Hosts.	• This means that we are proposing to disestablish all current Team Leader and Team Manager positions and there would be a reduction in our overall number of Leaders at this level across the Client Service Delivery model.
	✓ Within Assisted Recovery, Client Administration, Payments and Claims Assessment, Team Leaders would be physically based in one of our five Hub locations and be responsible for teams in that Hub. ✓ For Supported and Partnered Recovery, our Team Leaders would be located in the Site of the team they are leading. Further information on the regions can be found on slide 6 in this document and in the supporting information.	• Team sizes that Team Leaders manage would be more balanced than they are today.
	✓ We are proposing that the Team Leader and the Operations Administration Leader roles would be open to all current people leaders and Operations Administration Leaders would have remote management of their teams. ✓ The proposed selection process would include some experience-based questions for shortlisting and a behavioural-based interview which would include a presentation.	• Any people leader could apply for a Client Service Leader, Team Leader or Operations Administration Leader position and would be considered should they meet the selection requirements.

Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Operating Model: Leadership

PREVENTION. CARE. RECOVERY.
Te Kaporeihana Āwhina Hunga Whara



*These roles sit outside of the consultation process with no changes to be made.

Operating Model: Claims Assessment – Cover Assessment

PREVENTION. CARE. RECOVERY.
Te Kaporeihana Āwhina Hunga Whara

This page should be read in conjunction with your Location Impact and Current Role Impact one page information, available as part of supporting information on The Sauce.

What we confirmed in Phase Two Consultation	What we are now proposing in Phase Three Consultation	Potential Impacts within our Team
• Claims Assessment would continue to operate out of Hamilton and Dunedin Hubs and we indicated that we would look to grow Treatment Injury (TI) capability in either Dunedin or Hamilton, and potentially broaden the use of the specialist clinical knowledge for other complex cover decisions. • Claims Assessment would sit within the Wellington region Hub in a future model. • We indicated we would look at how we integrate Treatment Injury into the new model (including roles) and that we would consult on through Phase Three. • We confirmed that there would be one Cover Assessor role to align with the other Assessment roles and that it would be a multi-level role across bands 13 / 14. • We also confirmed that Lodgement Administrator roles would remain part of the Claims Assessment team. • We said that we anticipated aligning the Lodgement Leader to the new Team leader and the Lodgement Manager to the new Client Service Leader roles as part of the Phase Three consultation. • We also confirmed a function name change from Lodgement and Triage to Claims Assessment.	**Cover Assessment Hubs** ✓ We are proposing that all roles within the Cover Assessment team would sit in Hubs within the three locations of Hamilton, Wellington and Dunedin. ✓ We are proposing that team sizes would be based on a ratio of 1:10 within Cover Assessment. ✓ In terms of how teams and numbers are proposed to be spread, these are not equal due to certain property constraints.	• This means you would be aligned to a Hub and have a Team Leader and a Client Service Leader located physically in the Hub.
	Cover Assessment ✓ We are proposing that we would retain our existing number of Lodgement Administrator positions as today. We are also proposing to have 71 Cover Assessor positions; and 29 Specialist Cover Assessor positions. Over time as attrition occurs we will be building Treatment Injury capability and Specialist Cover Assessor roles in one of the other two Hub locations. ✓ We are proposing that most current Lodgement and Triage and Cover Assessment Centre roles would align to the Cover Assessment team and could therefore be confirmed with a minor change. ✓ We are proposing that Wellington based Cover Assessment oles would shift to be undertaken from the Wellington Hub at Shamrock House. If you are outside of these three locations we are proposing that your role would be disestablished and centralised to one of the three Hub locations.	• This means that we are proposing to disestablish the following roles within Treatment Injury: Claims Advisor, Centre Support Manager TI, Claims Officer Client Info, Team Administrator TI and TI Practice Mentor. We have however identified other roles within the Client Service Delivery model that are similar to your current role. • We are also proposing to disestablish the Claims Administrator TI, Team Administrator and Insurer Liaison Manager position however we have been unable to identify a similar role in the future model. • To understand what this means for your role and your location please refer to our Current Role Impact and Location Impact supporting information on The Sauce. • This means that anyone in a Cover Assessor, Claims Officer TI, Claims manager Accidental Death, Claims Manager Hearing Loss, Claims Officer Accidental Death or Senior Cover Assessor role would have a minor change and be confirmed into a Cover Assessor role. This also means that anyone in a TI Specialist role would be confirmed into a Specialist Cover Assessor role. • This would mean a travel impact for those whose work we are proposing shift from Hutt Valley to the Wellington based Hub at Shamrock House.
	Cover Assessment EOI and Selection ✓ As we are proposing confirmation or disestablishment there is no proposed EOI or selection process for the Cover Assessment roles. ✓ Where there are vacancies in Cover Assessment, a second round of EOI would be run after the rest of Client Service Delivery EOI and selection and would follow a standard business as usual (BAU) recruitment approach. First preference would be given to those in the redeployment pool and impacted roles.	• This means that if you are in a Claims Officer TI, TI Specialist, Cover Assessor, Senior Cover Assessor or Lodgement Administrator role today, you don't need to do anything regarding EOI or selection as we would confirm you straight into a Cover position. • Where you are in a Claims Administrator TI or Insurance Liaison Manager role you would need to wait until the second round of EOI following the rest of Client Service Delivery EOI and selection. • Where you are currently on a lower salary than the new position band, you would receive uplift to 85% of the new band or move across on your current salary in line with the new positions band.
	Cover Assessment Leadership ✓ We are proposing that there would be three Client Service Leaders in the Cover Assessment function located in either Hamilton, Wellington or Dunedin Hub and respons ble for Cover teams across the Hub locations. Current Lodgement Managers would be confirmed into the Client Service Leader Cover Assessment roles. ✓ We are also proposing that there would be 15 permanent Team Leaders within the Cover Assessment function across the three locations. Current Lodgement Leaders would be confirmed into Team Leader Cover Assessment roles.	• The reason we are proposing these roles to be confirmed through is that they were impacted and put into these roles as part of recent Client Front End Establishment (CFEE) change which was an early kick off of client transformation. The roles needed to be set up in advance and we knew that there would be future position title changes as part of aligning to the future. • Wherever you are based there would always be a Team Leader and a Client Service Leader at the Hub.

Operating Model: Claims Assessment – Treatment & Support

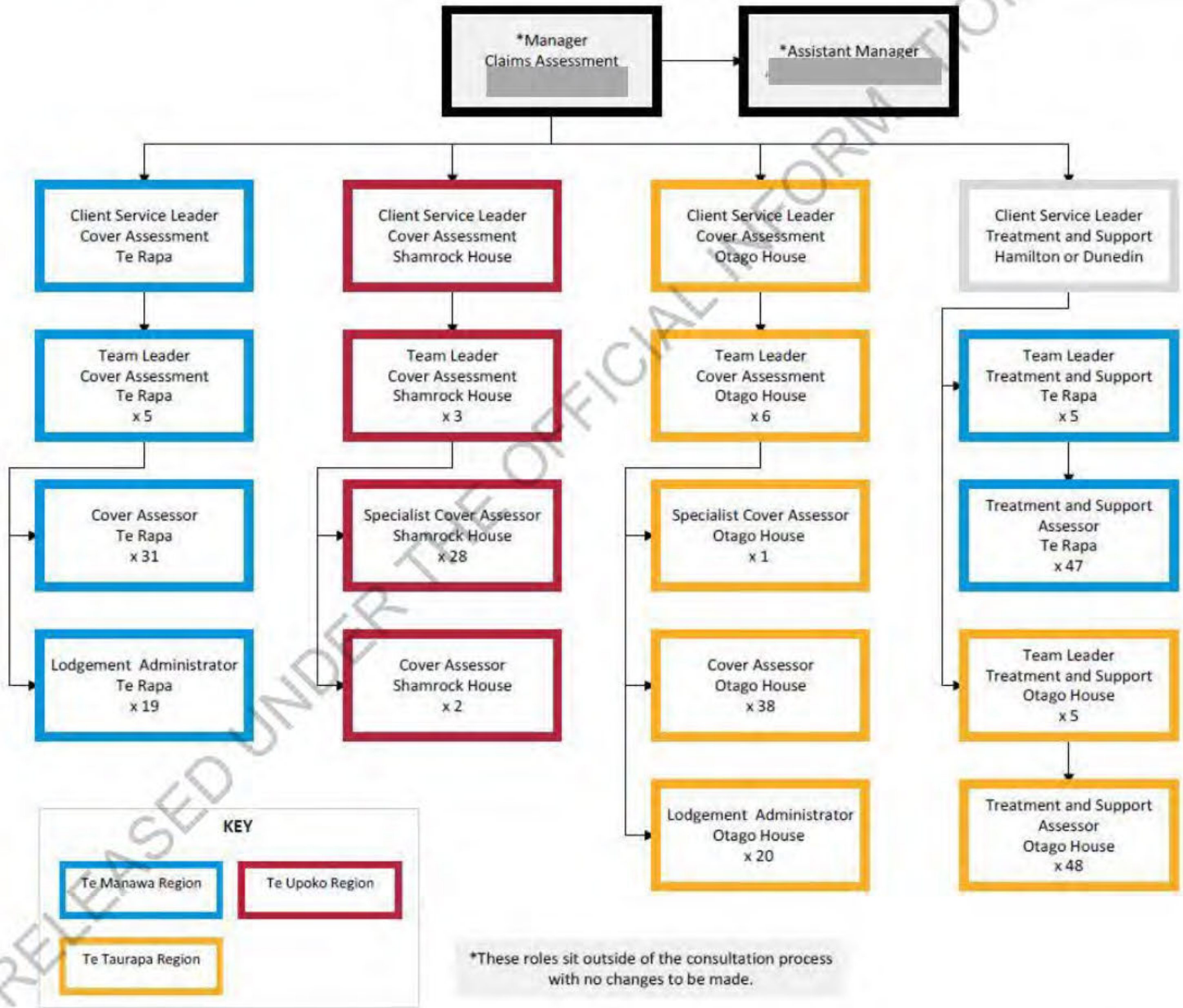
ACC
PREVENTION. CARE. RECOVERY.
Te Kaporeihana Āwhina Hunga Whara

This page should be read in conjunction with your Location Impact and Current Role Impact one page information, available as part of supporting information on The Sauce.

What we confirmed in Phase Two Consultation	What we are now proposing in Phase Three Consultation	Potential Impacts within our Team
• We confirmed that the Entitlements function would be located in our Hamilton and Dunedin Hubs. • We also confirmed there would be one role as an Entitlements Assessor. This would be a multi level role across bands 13 / 14. • We confirmed that some of the functions performed in the following teams would be performed in Entitlements. This included: - Speciality Teams (Dental, Nursing Care, Elective Surgery, Hearing Loss – Re-aiding, Lump Sum/IA, Impairment Assessment, other Complex Treatments). • We confirmed Entitlements as a dedicated team within the wider operating model.	**Treatment & Support Hubs** ✓ We are proposing to have a number of teams in each of the two Hubs, Hamilton and Dunedin. ✓ We are proposing that team sizes would be based on a ratio of 1:10 within Treatment & Support. ✓ In terms of how teams and numbers are proposed to be spread, these are not equal due to certa n property constraints.	This means you would be aligned to a Hub and have a Client Service Leader located physically in your Hub. • Team sizes would be more balanced than they are today however some Hubs would have more teams than others due to property constraints and availability.
	Treatment & Support ✓ We are proposing a change of name from Entitlements team to Treatment & Support team and a change in position title to Treatment and Support Assessor, in line with a move to more client centred language. ✓ We are proposing that in total we would have 95 Treatment & Support Assessor positions, of which 47 would be in Hamilton and 48 would be in Dunedin. ✓ We are also proposing that anyone in a Claims Officer Entitlements (except Hearing Loss and Accidental Death) role in Hamilton or Dunedin would be confirmed into a Treatment & Support Assessor role as they align directly to the Treatment and Support Assessor role. ✓ We are considering if the work focused on Delayed Incapacity which is currently undertaken in the Short Term Claims Centre (STCC) and Branches should transition to Treatment & Support. We believe this would be one team off approximately 13 people and one Team Leader, however we haven't yet worked through the analysis of what recovery team would reduce in numbers to accommodate this. We welcome your feedback on this.	• This means that we are proposing to disestablish the following roles within the Claims Assessment Client Support (CACS) team (Speciality Teams (Dental, Elective Surgery, Lump Sum/IA, Impairment Assessment, other Complex Treatments). However we have identified that the Treatment and Support Assessor is similar to your current role. • This means that anyone in a Claims Officer Entitlements or Claims Manager Entitlements role in Hamilton or Dunedin would have a minor change and be confirmed into a Treatment and Support Assessor role. • To understand what this means for your role and your location please refer to our Current Role Impact and Location Impact supporting information on The Sauce. • If this proposal is supported we would need to re-model the future FTE numbers within Treatment and Support.
	Treatment Assessor EOI and Selection ✓ Where there are vacancies in Treatment & Support after roles are confirmed, a second round of EOI would be run after the rest of Client Service Delivery EOI and selection and would follow a standard BAU recruitment approach. First preference would be given to those in the redeployment pool and those impacted by this change. ✓ Proposed selection criteria for the Treatment & Support Team Leader role is based on the Team Leader position description that we confirmed as part of Phase Two. We are proposing that the selection process would include a behavioural interview and presentation. ✓ Current Team Leaders within Entitlements teams would need to participate in the EOI and selection process as outlined further in this document.	• We are proposing that if you are in a Claims Officer Entitlements role (with the exception of Hearing Loss) in Hamilton or Dunedin today, you don't need to do anything regarding EOI or selection as we would confirm you straight into a Treatment and Support Assessor position. • Where you are in a Claims Officer Entitlements role outside of the two Hub locations please refer to your location one page supporting information that is available on The Sauce. • Where you are currently on a lower salary than the new position band, you would receive uplift to 85% of the new band or move across on your current salary in line with the new positions band.
	Treatment & Support Leadership ✓ We are proposing that there would be one Client Service Leader in the Treatment and Support team located in either Hamilton or Dunedin Hub and respons ble for the teams across both Hub locations. ✓ We are also proposing that there would be ten Team Leaders within the Treatment & Support team across the two locations.	• Wherever you are based there would always be a Team Leader and a Client Service Leader at one of the Hubs but would travel regularly to the other Hub.

Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Operating Model: Claims Assessment – Cover Assessment and Treatment & Support



*These roles sit outside of the consultation process with no changes to be made.

Operating Model: Payments

PREVENTION. CARE. RECOVERY.
Te Kaporeihana Āwhina Hunga Whara

This page should be read in conjunction with your Location Impact and Current Role Impact one page information, available as part of supporting information on The Sauce.

What we confirmed in Phase Two Consultation	What we are now proposing in Phase Three Consultation	Potential Impacts within our Team

• We confirmed that Payments teams will be based in the two Hub locations of Hamilton and Dunedin.
• We also confirmed that we would create transition roles to support the transition of Payments from Pathway to Eos 8.8, which will be required during 2019.
  - As part of this we recognised the knowledge and experience across our existing Payments teams and confirmed that our intention is to support these teams and look for ways we can minimise impacts to our clients and increase opportunities for our people during this transition.
• We confirmed one core role as a Payments Assessor. This would be a multi level role across bands 13 / 14.
• We confirmed that the functions performed in the below teams would be performed in the Payments team:
  - Weekly Compensation
  - Transport / Pharmaceuticals
• We confirmed that the intention was to move all payments into the Payments function but as design work continued in CP2 we would continue to assess the suitability of completing certain payments at the first point of contact rather than transferring it.
• We confirmed we would further consult with you around what a transitionary team could look like and where it could be located as part of Phase Three.
	Payments Hubs
	✓ We are proposing that team sizes would be based on a ratio of 1:10 within the Payments team.
		• This means you would be aligned to a region and have a Team Leader in the Hub with you. There would also be a Client Service Leader who may or may not be located physically in your Hub, they would however travel regularly to your Site. Team sizes would also be more balanced than they are today.

	Payments ✓ We are proposing that in total we would have 80 Payments Assessor positions, of which 40 would be in Hamilton and 40 would be in Dunedin. ✓ We are also proposing that anyone in a Payments role (excluding IA Lump Sum) in Hamilton or Dunedin would be confirmed into a Payments Assessor role or Payments Team Leader role. ✓ Additionally anyone in a permanent Payments role (excluding IA Lump Sum) outside of these locations would be offered relocation and confirmed into a Payments Assessor or Payments Team Leader role if they wish to move to Hamilton or Dunedin. ✓ We are proposing that anyone in a Payments role in Timaru would continue operating in their current role for a period of up to 12 months to support transition f om Pathway to Eos and the migration of claims in CP2. At that point in time we are proposing the role would be disestablished and we would look to see if there were any suitable alternatives within the organisation. ✓ We have introduced a short-term Payments workforce to support transition through until August 2019. This means 12 people supporting BAU tasks during ramp up and while our Payments Assessors are training in the new systems and technology (Eos).	• This means that we are proposing to disestablish the Payments positions in Newmarket, Rotorua and Timaru, however relocation and confirmation to a Payments Assessor role in Hamilton or Dunedin would be offered. We anticipate these roles would disestablish in August 2019. • In the two Hubs where the Payments function will be located, there would be an increase in our number of people at this level across the Client Service Delivery model. • To understand what this means for your role and your location please refer to our Current Role Impact and Location Impact supporting information on The Sauce. • There would be a 12 month support plan through transition from Pathway to Eos. As this is a proposed delayed end date it is anticipated that the numbers of people needed will slowly drop off as more and more claims are managed in Eos.
	Payments EOI and Selection ✓ As we are proposing confirmation, relocation or disestablishment there is no proposed EOI or selection process for the Payments Assessor or Payments Team Leader role within the Payments function. This excludes individuals in an IA Lump Sum role. ✓ Current Team Leaders (excluding IA Lump Sum) outside of Hamilton or Dunedin within Payments would have the option to relocate to Hamilton or Dunedin and be confirmed into a Payments Team Leader role. Alternatively they could wait and participate in line with the Team Leaders EOI and selection for the rest of Client Service Delivery. ✓ For those interested in any vacant roles within the Payments function, preference in the first instance would be given to those currently in Payments roles. Where there are vacancies in Hamilton and Dunedin, a second round of EOI would commence and selection would follow with a BAU recruitment approach. First preference would be given to those in the redeployment pool and anyone impacted by this change.	• We are proposing that if you are in a Payments role in Hamilton or Dunedin today, you don't need to do anything regarding EOI or selection as we would confirm you straight into a Payments Assessor position. This excludes individuals in an IA Lump Sum role. • Where you are in a Payments role in Newmarket, Rotorua or Timaru, you would need to express an interest in relocation. Should you be interested you would be confirmed into a Payments Assessor role in one of the two Hub locations based on your preference. Alternatively you would need to wait until the second round of EOI following the rest of Client Service Delivery EOI and selection. • Where you are currently on a Band 12 you would receive uplift to 85% of the new band or slot across on your current salary in line with the new positions band.
	Payments Leadership ✓ We are proposing that there would be one Client Service Leader (in either Hub location) who would be responsible for the Payments teams within both Hub locations. Travel would be required in this role. ✓ We are also proposing that there would be eight Team Leaders within the Payments function across the two locations.	• Wherever you are based there would always be a Team Leader and in one of the locations a Client Service Leader based at the Hub.

Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

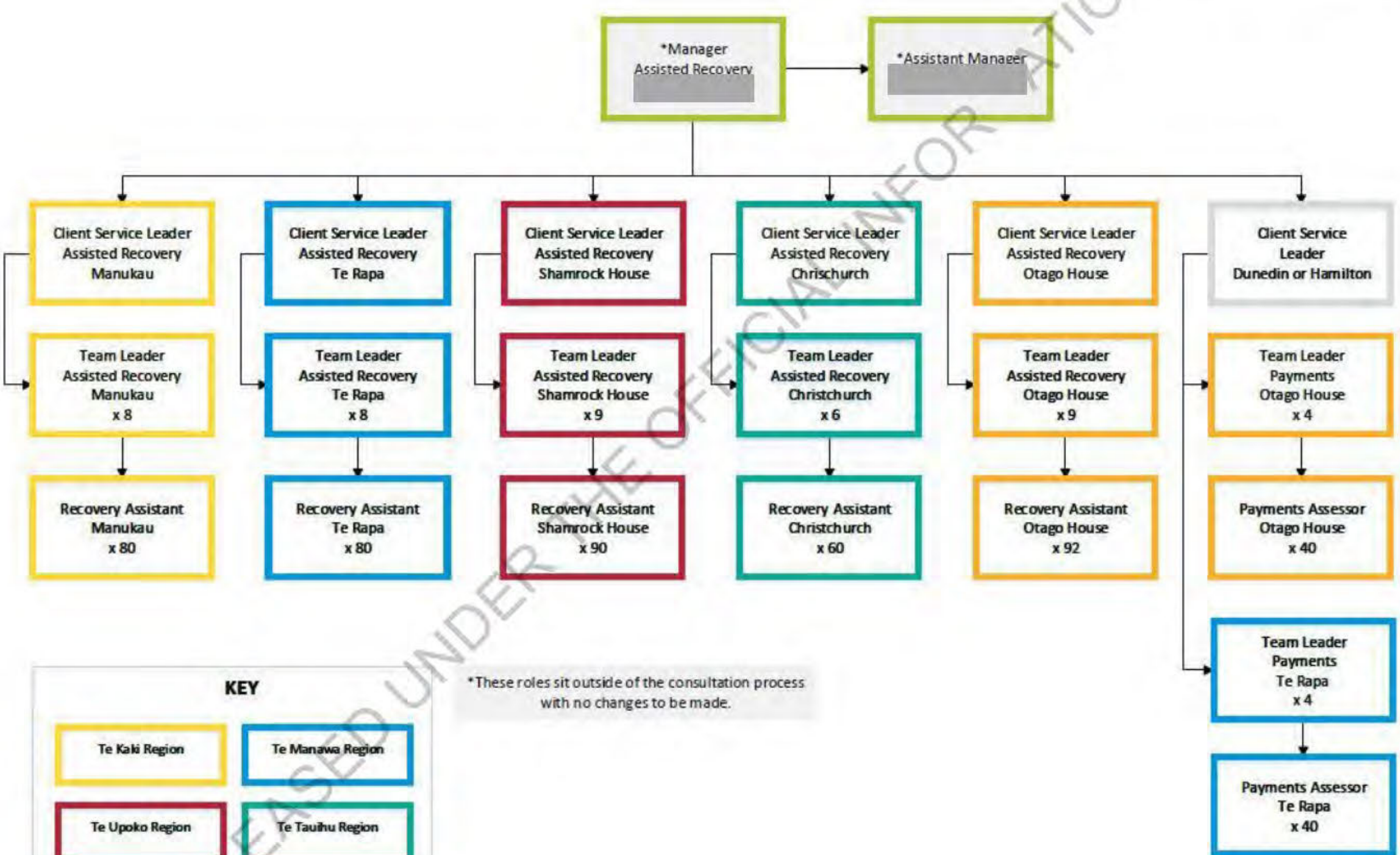
Operating Model: Assisted Recovery

This page should be read in conjunction with your Location Impact and Current Role Impact one page information, available as part of supporting information on The Sauce.

What we confirmed in Phase Two Consultation	What we are now proposing in Phase Three Consultation	Potential Impacts within our Team
• Assisted teams would operate out of the five Hubs and would undertake task based national queue streamed work. • We confirmed there would be one core role in this team, a Recovery Assistant. This would be a multi level role across bands 14 / 15. • We confirmed that while the work undertaken by Recovery Assistants and Recovery Coordinators is done in a different way, the expectations, customer outcomes and scope are fundamentally similar. • We confirmed that the following functions would form part of the Assisted recovery stream: - Short Term Claims Centres - Branches (Case Managers) - Service Needs Assessment - Some roles within Claims Assessment and Client Support. • We also confirmed that there would be dedicated Assisted Recovery support for Partnered Recovery clients. • We let you know that we felt there was more work to be done around the centralisation of certain task based activities and the intended volume of managed clients; and that as information was available we would share that with you as part of Phase Three.	**Assisted Recovery Hubs** ✓ We are proposing that team sizes would be based on a ratio of 1:10 within Assisted Recovery. ✓ Within the Assisted function, there would be dedicated people focused specifically on complex claims (such as sensitive claims) and there would be an option to EOI for this if you are interested. ✓ In terms of how teams and numbers are proposed to be spread, these are not equal due to certain property constraints.	• This means you would be aligned to a Hub and have a Team Leader and a Client Service Leader located physically in your Hub. • Team sizes would be more balanced than they are today however some Hubs would have more teams than others due to property constraints and availability. • Where you are in a Service Needs Assessor role you would need to wait until the second round of EOI following the rest of Client Service Delivery EOI and selection, as your role is not proposed to align to a future role.
	Assisted Recovery ✓ We are proposing that in total we would have 402 Recovery Assistant positions. ✓ Within this number, 70 positions would focus on clients with more complex needs. Work will be allocated based on capacity, capability and preferences. ✓ We are proposing that anyone in a Service Needs Assessor role in a Hub location would continue operating in their current role for a period of 12 months to support transition. At that point in time we are proposing the role would be disestablished and we would look to see if there were any suitable alternatives within the organisation.	• This means that we are proposing to disestablish all current Case Coordinator, Case Manager (all types) and Service Coordinator (all types) positions, however we have identified that the Recovery Assistant and Recovery Coordinator is similar to your current role. • In some Hubs there would be a reduction in our number of people at this level and at other Hubs there would be an increase in our number of people at this level across the Client Service Delivery model. • To understand what this means for your role and your location please refer to our Current Role Impact and Location Impact supporting information on The Sauce.
	Recovery Assistant EOI and Selection ✓ Proposed selection criteria is based on the Recovery Assistant position description that we confirmed as part of Phase Two. We are proposing that the selection process would be looking to assess key elements of the role including team work, communication, customer focus, adaptability, and a task focus. ✓ For those interested in roles within Assisted Recovery, preference would be given to those currently in Case Coordinator, Case Manager (all types) and Service Coordinator (all types) roles across Branch and Short Term Claim Centres. For more information about this please refer to the Current Role Impact supporting information on The Sauce.	• We are proposing that Case Management, Case Coordination or Service Coordinator roles (all types) within Branch and STCC would have first preference to be considered for the Recovery Assistant or Recovery Coordinator position through the EOI process. • Where we are prosing to reduce in numbers then an EOI and selection process would apply. Where numbers align following EOI preferences you would be confirmed into a role. • Where there are vacancies, other impacted roles within Client Service Delivery would be given preference through second round EOI.
	Assisted Recovery Leadership ✓ We are proposing that there would be five Client Service Leaders (one in each Hub) who would be responsible for the Assisted teams within that Hub. ✓ We are also proposing that there would be 40 Team Leaders within Assisted Recovery.	• Wherever you are based there would always be a Team Leader and a Client Service Leader at the Hub.

Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Operating Model: Assisted Recovery and Payments



KEY

- Te Kaki Region
- Te Manawa Region
- Te Upoko Region
- Te Tauihu Region
- Te Taurapa Region

*These roles sit outside of the consultation process with no changes to be made.

Operating Model: Supported Recovery

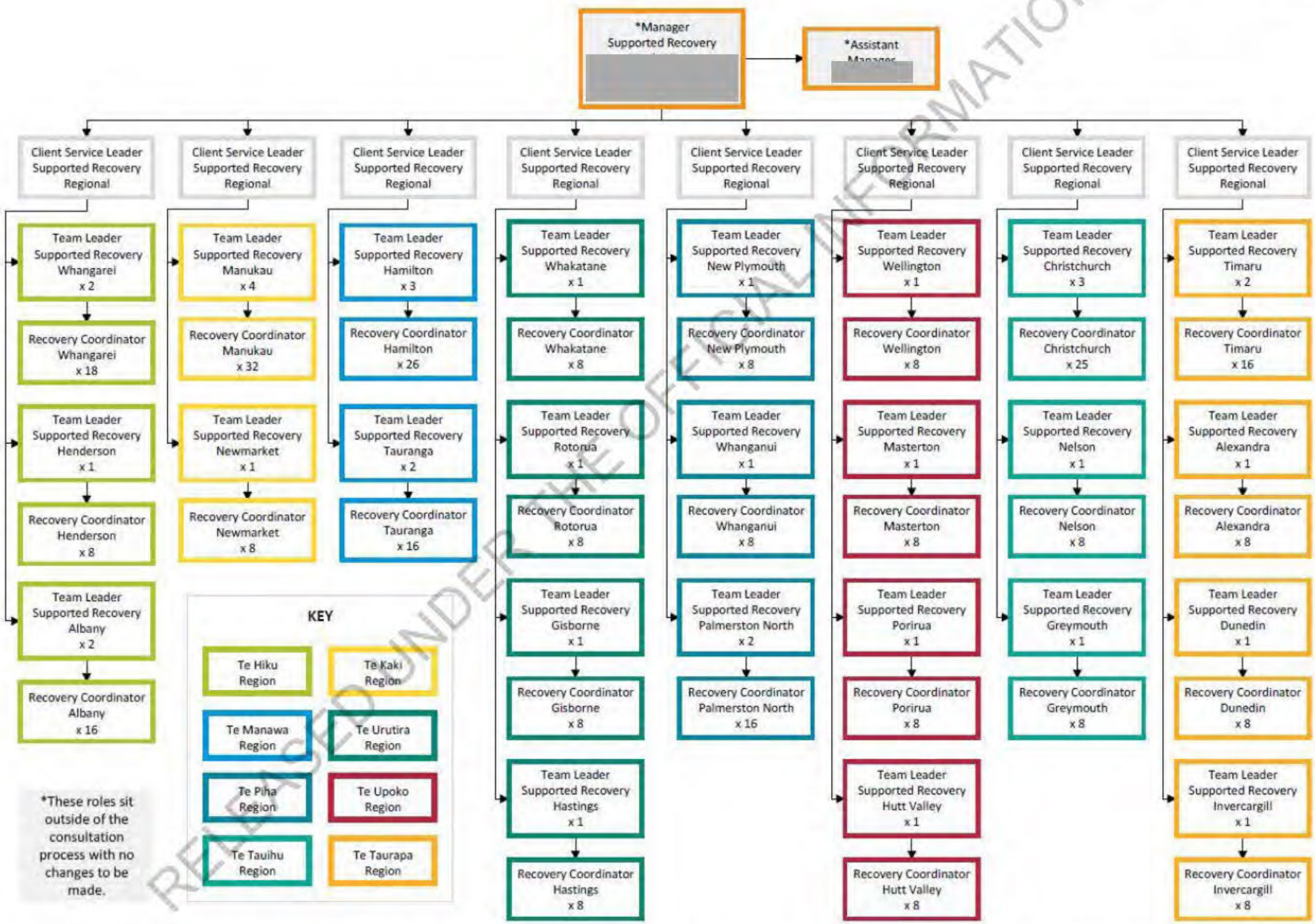
PREVENTION. CARE. RECOVERY.
Te Kaporeihana Āwhina Hunga Whara

This page should be read in conjunction with your Location Impact and Current Role Impact one page information, available as part of supporting information on The Sauce.

What we confirmed in Phase Two Consultation	What we are now proposing in Phase Three Consultation	Potential Impacts within our Team
• We confirmed that Supported Recovery would be based in all ACC Sites. • We confirmed there would be a core role in this team, a Recovery Coordinator. This would be a multi level role across bands 14 / 15. • We confirmed that while the work undertaken by Recovery Assistants and Recovery Coordinators is done in a different way, the expectations, customer outcomes and scope are fundamentally similar. • We confirmed that the functions performed in the below teams would be performed in Supported Recovery: - Short Term Claims Centres - Branches (Case Managers) - Some roles within Claims Assessment and Client Support. • We proposed that our Supported stream teams would be different sizes than our branch teams are today, and that our Sites are l kely to be smaller than they are today.	**Supported Recovery Sites** ✓ We are proposing that there would be eight Supported regions consisting of between two and five Sites within each region.	• This means you would be aligned to a region and have a Team Leader on Site with you. There would also be a Client Service Leader who may or may not be located physically in your Site, they would however travel regularly to your Site.
	Supported Recovery ✓ We are proposing that in total we would have 301 Recovery Coordinator positions. ✓ These roles would be based across our 25 Sites. ✓ There would be at least one team in each Site, and we are proposing that team sizes would be at a ratio of 1:8 Recovery Coordinators in a team. ✓ We are proposing to distribute the teams based on the volume of claims and where our clients are based – as well as considering distribution within our regions.	• This means that we are proposing to disestablish all current Case Coordinator, Case Manager (all types) and Service Coordinator (all types) positions, however we have identified that the Recovery Assistant and Recovery Coordinator is similar to your current role. • In some Sites there would be a reduction in our number of people at this level and at other Sites there would be an increase in our number of people at this level across the Client Service Delivery model. • To understand what this means for your role and your location please refer to our Current Role Impact and Location Impact supporting information on The Sauce. • Team sizes would be more balanced than they are today however some Sites would have more teams than others due to the distribution of claims.
	Recovery Coordinator EOI and Selection ✓ Proposed selection criteria is based on the Recovery Coordinator position description that we confirmed as part of Phase Two. We are proposing that the selection process would be looking to assess key elements of the role including communication and relationship skills, problem solving, customer focus and planning. ✓ For those interested in roles within Supported Recovery, preference would be given to those currently in Case Management or Case Coordination roles across Branch and Short Term Claim Centres. For more information about this please refer to the Current Role Impact supporting information on The Sauce.	• We are proposing that Case Management, Case Coordination or Service Coordinator roles (all types) within Branch and STCC would have first preference to be considered for the Recovery Assistant or Recovery Coordinator position through the EOI process. • Where we are prosing to reduce in numbers then an EOI and selection process would apply. Where numbers align following EOI preferences you would be confirmed into a role. • Where there are vacancies, other impacted roles within Client Service Delivery would be given preference through second round EOI.
	Supported Recovery Leadership ✓ We are proposing that there would be eight Client Service Leaders (one in each of the eight regions) who would be respons ble for the Supported teams within that region. ✓ We are also proposing that there would be 37 Team Leaders within Supported Recovery. Where there are more than one Team Leader in a Site there would be additional Health and Safety (H&S) responsibilities for one of them for that Site. Where there is only one Team Leader in a Site they would hold H&S responsibilities for that Site.	• Wherever you are based there would always be a Team Leader on Site and in some cases a Client Service Leader.

Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Operating Model: Supported Recovery



Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Operating Model: Partnered Recovery

PREVENTION. CARE. RECOVERY.
Te Kaporeihana Āwhina Hunga Whara

This page should be read in conjunction with your Location Impact and Current Role Impact one page information, available as part of supporting information on The Sauce.

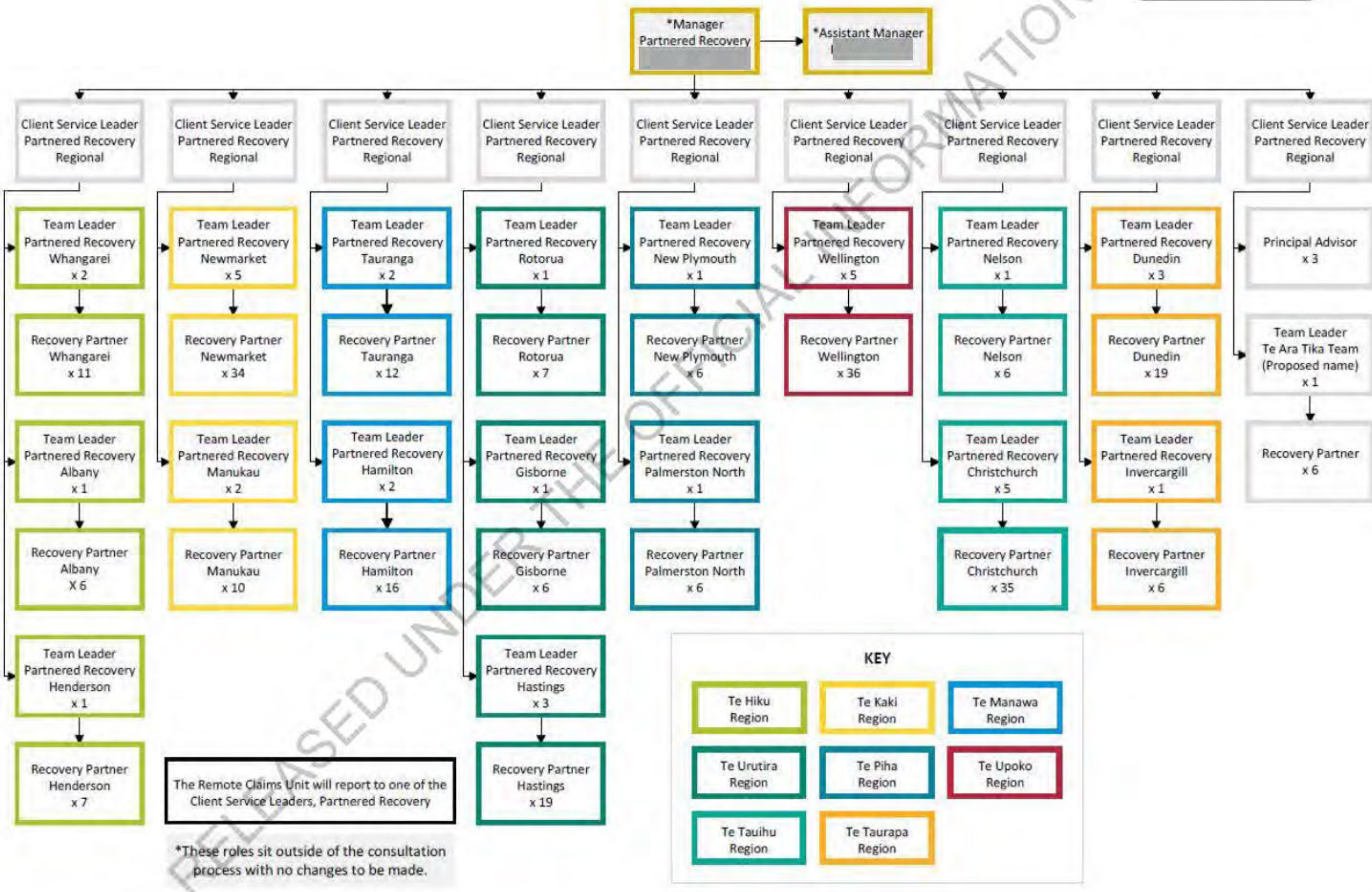
What we confirmed in Phase Two Consultation

- We confirmed that we would increase the number of Partnered locations from what we originally proposed. There will be eight Partnered Sites that manage complex physical and mental injury in the same location. There will also be nine Partnered Sites that manage complex physical injury only.
- We confirmed there would be a core role of Recovery Partner in this team. This would be a multi level role across bands 15 and 16.
- We also confirmed that dedicated team members within Client Administration and Assisted Recovery would support Partnered Recovery and clients.
- We confirmed that you would have a choice to opt into dealing with Sensitive Claims (a resilience screening would also apply) and would receive appropriate employee support and training to undertake this work.
- We confirmed a change in job title to Principal Advisor, with a role dedicated to each specialist area of physical injury, mental injury and safety response; meaning we will not have a Safety Response Advisor role.
- We Confirmed Manager Transport for Independence and Manager Home Modifications would sit within the recovery support model.
- We confirmed that we would discuss an additional role with Technical Services based on your feedback.

What we are now proposing in Phase Three Consultation	Potential impacts within our Team
Partnered Recovery Sites ✓ We are proposing that there would be eight Partnered regions consisting of between two and five Sites within a region. ✓ We are proposing that Team Leaders may lead a team which includes a mix of both Mental Injury and Physical Injury focused Recovery Partners. Teams will have a minimum size of six people. ✓ The number of teams and Recovery Partners is based on where our clients are located.	• Recovery Partners would report to a Team Leader who would be based on Site. • Team Leaders from across a region would report to a Client Service Leader who may or may not be located physically in your Site, but they would regularly travel to each Site. • Regions for Supported Recovery and Partnered Recovery are aligned (however as confirmed in Phase Two, not all Sites will have a Partnered presence). • Team sizes would be more balanced than they are today however some Sites would have more teams than others due to the distr bution of clients.
Partnered Recovery ✓ We are proposing that in total we would have 139 Mental Injury Recovery Partner positions and 121 Physical Injury Recovery Partner positions. ✓ We are also proposing to have two Principal Advisor roles dedicated to a Mental and Physical Injury portfolio and one Principal Advisor Safety Response role. These could be based in any location and would be open for anyone to express and interest in. ✓ For Wellington Central Branch we are proposing a team name change to be called the Te Ara Tika Team that would sit within Partnered Recovery. This team would manage all types of clients. ✓ We are proposing to disestablish all current Serious Injury support roles (Serious Injury Manager, SI Advisors, Manager Practice and Assessment, Business and Programme Manager, and Programme Manager DSS) except for the Manager Home Modifications and Manager Transport. We are proposing that these two roles will move to Technical Services, as part of our recovery support team.	• This means that roles that sit within our current Serious Injury (SI) and Sensitive Claims (SCU) teams would align with different parts of the future Client Service Delivery model. The roles that align to the future Recovery Partner role are SI Support Coordinators, Sensitive Claims Service Coordinators and Sensitive Claims Triage Service Coordinators. • We believe SI Service Coordinators would align to either Recovery Coordinator or Recovery Assistant roles. • The number of Recovery Partners in a Site, managing those with physical injuries may be more or less than current SI team numbers due to the distribution of Partnered clients. • To understand what this means for your role and your location please refer to our Current Role Impact and Location Impact supporting information on The Sauce. • The Manager Home Modifications and Manager Transport would have minor changes to the position descriptions and job title change to Service Support Lead. There would also be a reporting line change to the Technical Policy Team Manager in Technical Services and we will not be adding in any new roles. • The five weeks leave that applies as per the Collective and Individual Employment Agreements to those working within Sensitive Claims would apply to those in future Recovery Partner Mental Injury roles.
Partnered Recovery EOI and Selection • Proposed selection criteria is based on the Recovery Partner position description that we confirmed as part of Phase Two. We are proposing that the selection process would be looking to assess key elements including relationship management, risk assessment, problem solving, customer focus, resilience and planning.	• The roles that align to the future Recovery Partner role are SI Support Coordinators, Sensitive Claims Service Coordinators, Sensitive Claims Triage Service Coordinators and they would have first preference to be considered for this position through first round of EOI. • The roles that align to the future Recovery Assistant and Recovery Coordinator role are SI Service Coordinators and they would have eligibility to be considered for these positions through first round EOI. • We are proposing that if you are in a frontline role within Wellington Central Branch today we would confirm you into a Recovery Partner position as part of the respective future team.
Partnered Recovery Leadership ✓ We are proposing that there would be nine Client Service Leaders: one in each of the eight regions (respons ble for all Partnered teams within that region) and one to lead our Principal Advisors, and Te Ara T ka team. ✓ We are also proposing that there would be 39 Team Leaders within the Partnered function.	• Wherever you are based there would always be a Team Leader on Site and in some cases a Client Service Leader.

Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Operating Model: **Partnered Recovery**



Operating Model: Client Administration

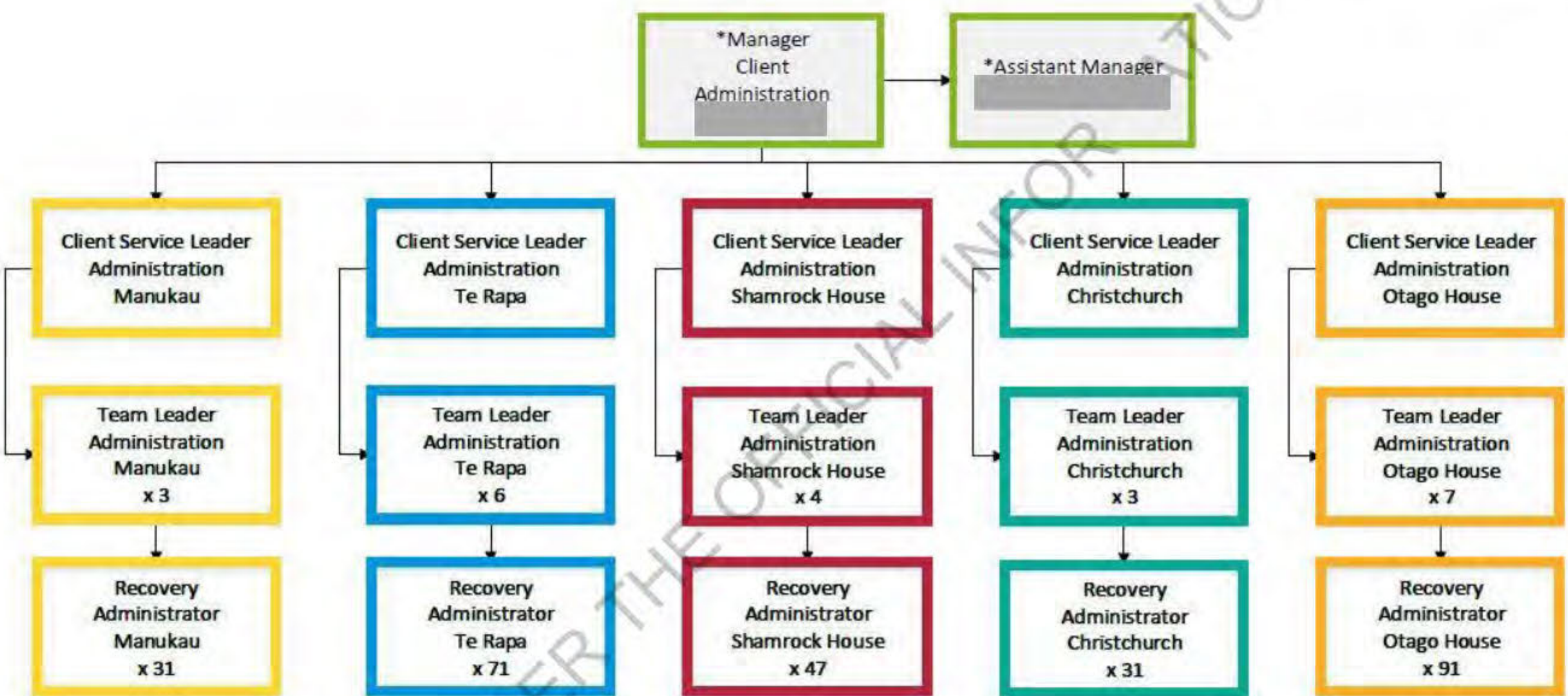
PREVENTION. CARE. RECOVERY.
Te Kaporeihana Āwhina Hunga Whara

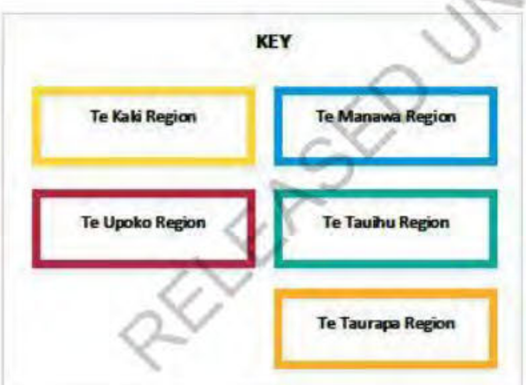
This page should be read in conjunction with your Location Impact and Current Role Impact one page information, available as part of supporting information on The Sauce.

What we confirmed in Phase Two Consultation	What we are now proposing in Phase Three Consultation	Potential Impacts within our Team
• We confirmed that Client Administration teams will be located in all five Hubs. • We confirmed there would be one core Recovery Administrator role. This would be a multi level role covering bands 11 / 12. • We confirmed that some of the functions performed in the below teams would be performed in Client Administration. This included: - Customer Information - Document Management (including scanning) - Privacy - Administration within Claims Assessment and Client Support, Branches or the Short Term Claim Centre. • We confirmed that the function and role of Recovery Administrator would be centralised to drive consistency and efficiency. • We recognised that there is further work to do in terms of scoping processes and refining how centralised administration (non case management) support would work. We confirmed that we would share thinking and information with you as it becomes available.	**Client Administration Hubs** ✓ We are proposing that team sizes would be based on a ratio of 1:12 within Client Administration. ✓ Within Client Administration, there would be three dedicated team areas – Recovery Administration supporting the whole Client Service Delivery model with a sub group of this focused on complex claims (such as sensitive claims) and there would be an option to EOI for this if you are interested; Privacy and Client Information; and Inbound and Outbound Documentation. ✓ In terms of how teams and numbers are proposed to be spread, these are not equal due to certain property constraints.	• This means you would be aligned to a Hub and have a Team Leader and a Client Service Leader located physically in your Hub. • Team sizes would be more balanced than they are today however some Hubs would have more teams than others due to property constraints and availability.
	Client Administration ✓ We are proposing that in total we would have 271 Recovery Administrator positions, of which 40 positions would focus on more complex cases and 100 of those positions would focus across the areas of Privacy, Client Information and Documentation. ✓ As there will be three dedicated groups within Client Administration, we are proposing to confirm any current administration roles within Inbound / Outbound Document Management, Privacy, and Client Information and Scanning teams in Hamilton and Dunedin as they align directly to the groups within the Recovery Administrator role.	• This means that we are proposing to disestablish all current administration positions within Claims Assessment and Client Support, Branches or the Short Term Claim Centre, however we have identified that for some of you the Recovery Administrator or Customer Host role is similar to your current role. For others there would be opportunities to apply for these roles through second round EOI. There is more detail on what this means for you under the proposed impact pages and in the supporting information. • In some Hubs there would be a reduction in our number of people at this level and at other Hubs there would be an increase in our number of people at this level across the Client Service Delivery model. • To understand what this means for your role and your location please refer to our Current Role Impact and Location Impact supporting information on The Sauce.
	Client Administration EOI and Selection ✓ Proposed selection criteria is based on the Recovery Administrator position description that we confirmed as part of Phase Two. We are proposing that the selection process would be looking to assess key elements that are deemed critical to the role such as teamwork, attention to detail, adaptability, communication and customer focus.	• We are proposing that if you are in a Inbound / Outbound Document Management, Privacy, and Client Information and Scanning role in a Hub today, you don't need to do anything regarding EOI or selection as we would confirm you straight into a Recovery Administrator position. • We are proposing that Case Administration or Team Administration roles within Branch and STCC would have first preference to be considered for the Recovery Administrator position through the EOI process. Where numbers align following EOI preferences you would be confirmed into a role. • Where there are vacancies, other impacted roles within Client Service Delivery would be given preference through second round EOI.
	Client Administration Leadership ✓ We are proposing that there would be five Client Service Leaders (one in each Hub) who would be responsible for the Administration teams within that Hub. ✓ We are also proposing that there would be 23 Team Leaders within the Administration function.	• Wherever you are based there would always be a Team Leader and a Client Service Leader on Site.

Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Operating Model: Client Administration





*These roles sit outside of the consultation process with no changes to be made.

Operating Model: Operations and Performance

PREVENTION. CARE. RECOVERY.
Te Kaporeihana Āwhina Hunga Whara

This page should be read in conjunction with your Location Impact and Current Role Impact one page information, available as part of supporting information on The Sauce.

What we confirmed in Phase Two Consultation

- We confirmed our intent to have Operations and Performance roles located in the Justice Centre, Hubs or Sites, and said we would consult further on this as part of Phase Three.
- We updated the Practice Mentor position description to better reflect the roles focus on the entire CSD business unit and various levels, specifically across three areas of task, relationship and leadership. The role also had added accountability to make it clear that this role will support Team Leaders to induct new team members and provide one to one mentoring when required.
- We also updated the Performance Advisor position description to make it clear that this role has a system-wide focus and will deliver future-focused insights and recommendations.
- Confirmed that we would introduce a new role in Phase Three. This role will be responsible for education and supporting clients to new ways of working, front of house and / daily Site duties, and assisting with national queue task based administration work (these will be operational tasks not client tasks).

What we are now proposing in Phase Three Consultation

- ✓ The roles needed in Operations and Performance in the future are both new and different. The operating environment will be heavily dependent on analytics and insights to frame up our interventions with leaders and teams. Interventions will be cross cutting to effect improvements across the whole Client Service Delivery model.
- ✓ Selection and assessment for all of the roles is proposed to include EOI shortlisting criteria and questions as well as a behavioural interview. A presentation may be required for some roles.

Potential Impacts within our Team

- This means that we are proposing to disestablish all current Operations and Performance positions except for Third Party Administration, Business Advisors and Team Administrators. You would have the option to apply for any open and available roles as part of first round EOI and selection.

Operations - We are proposing:
- ✓ One Client Service Leader role which would be open to all to apply for
- ✓ Five Operations Administration Leaders, each based in a Hub location and would be open to all people leaders to apply for
- ✓ A new role of Customer Host that would be responsible for interacting with and servicing clients, Site or Hub based administrative tasks, and national admin task based activity. We think that our current Team Administrator and Customer Support Officer roles would align to this position. To support the model we are proposing that 12 Customer Hosts would be based in Hubs (with three in each of Hamilton and Dunedin and two in each of the other Hubs); and there would be six Customer Host roles based across our small Sites.
- ✓ Additionally our current Business Advisors and Team Administrators would be confirmed as is currently today.

Performance - We are proposing:
- ✓ One Client Service Leader role which would be open to all to apply for and based in Justice Centre
- ✓ Six Performance Advisor roles which would be open to all to apply for and based in Justice Centre or a Hub
- ✓ Three Analyst roles which would be open to all to apply for and they would be based in Justice Centre or a Hub

Third Party Administration – We are proposing:
- ✓ That the team would stay the same as it currently is however the Manager Third Party Administration would have a change in position title to Client Service Leader TPA.

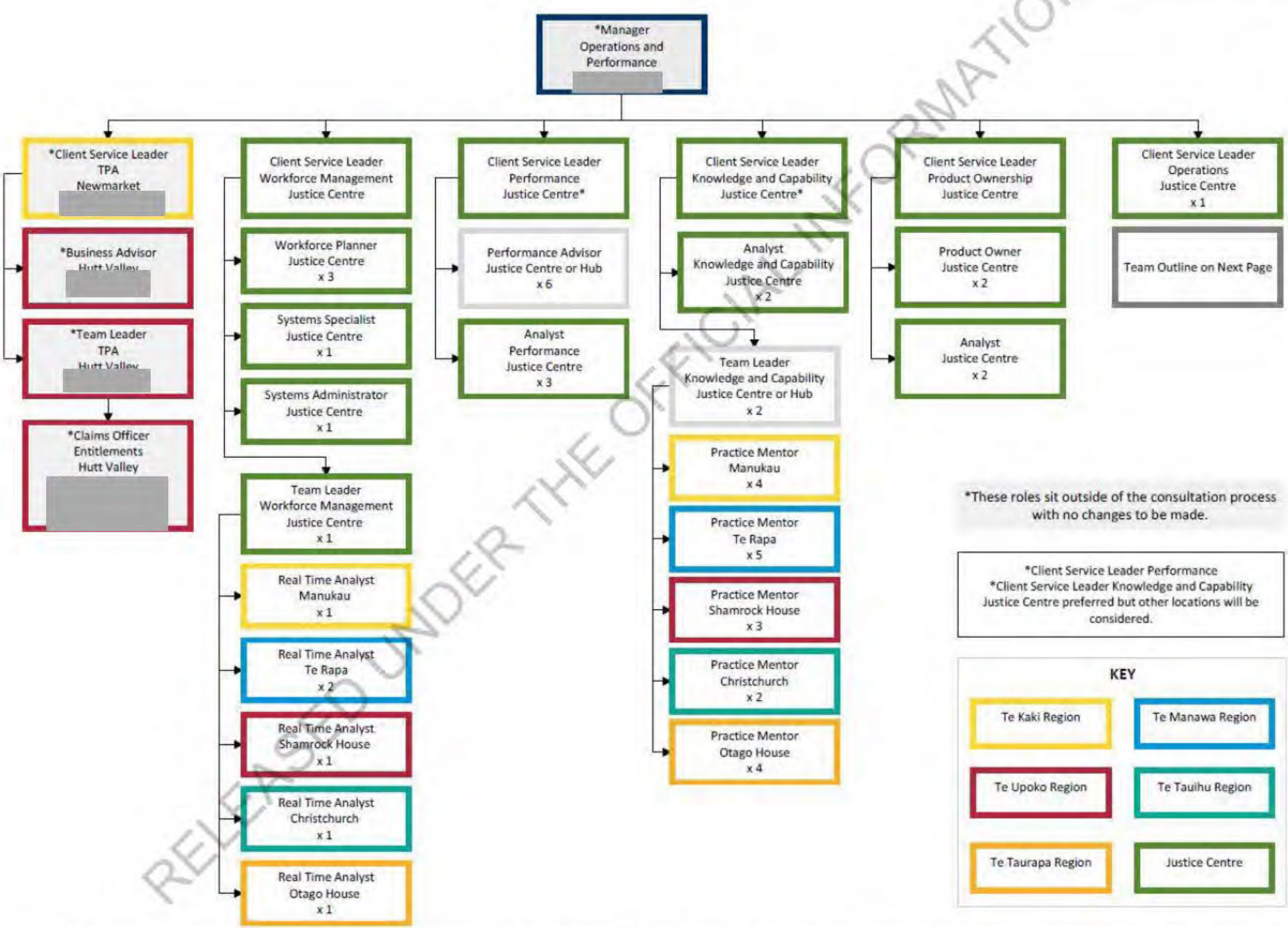
Product Owner – We are proposing:
- ✓ That the team name changes from Continuous Improvement to Product Owner
- ✓ One Client Service Leader (Product Owner) role which would be open to all to apply for and based in Justice Centre Wellington
- ✓ Two Product Owner roles which would be open to all to apply for and based in Justice Centre Wellington
- ✓ Two Analyst roles which would be open to all to apply for and based in Justice Centre Wellington

Knowledge and Capability – We are proposing:
- ✓ One Client Service Leader role which would be open to all to apply for
- ✓ Two Team Leaders which would be open to all people leaders to apply for
- ✓ 18 Practice Mentors (focused on Task / Relationships / Leaders) which would give eligibility preference to current Case Management Mentors and TI Practice Mentors; we are proposing that the task focused roles would be based in Hubs and tasks would be remote managed. The Relationships and Leaders team could be based in Hubs and / or Sites and the Team leaders would have remote management
- ✓ Two Analysts (with a knowledge focus) which would be open to all to apply for but based in Justice Centre
- ✓ That Team Leader roles won't necessarily be at the same Site as the Practice Mentors or Analysts

Workforce Management – We are proposing:
- ✓ One Client Service Leader role which would be open to all to apply for
- ✓ One Team Leader role which would be open to all people leaders to apply for
- ✓ Three Workforce Planners roles which would be open to all to apply for
- ✓ One Systems Specialist role which would be open to all to apply for
- ✓ One Systems Administration role which would be open to all to apply for
- ✓ Six Real Time Analyst roles which would be open to all to apply for
- ✓ All these roles would be based in either Justice Centre or a Hub

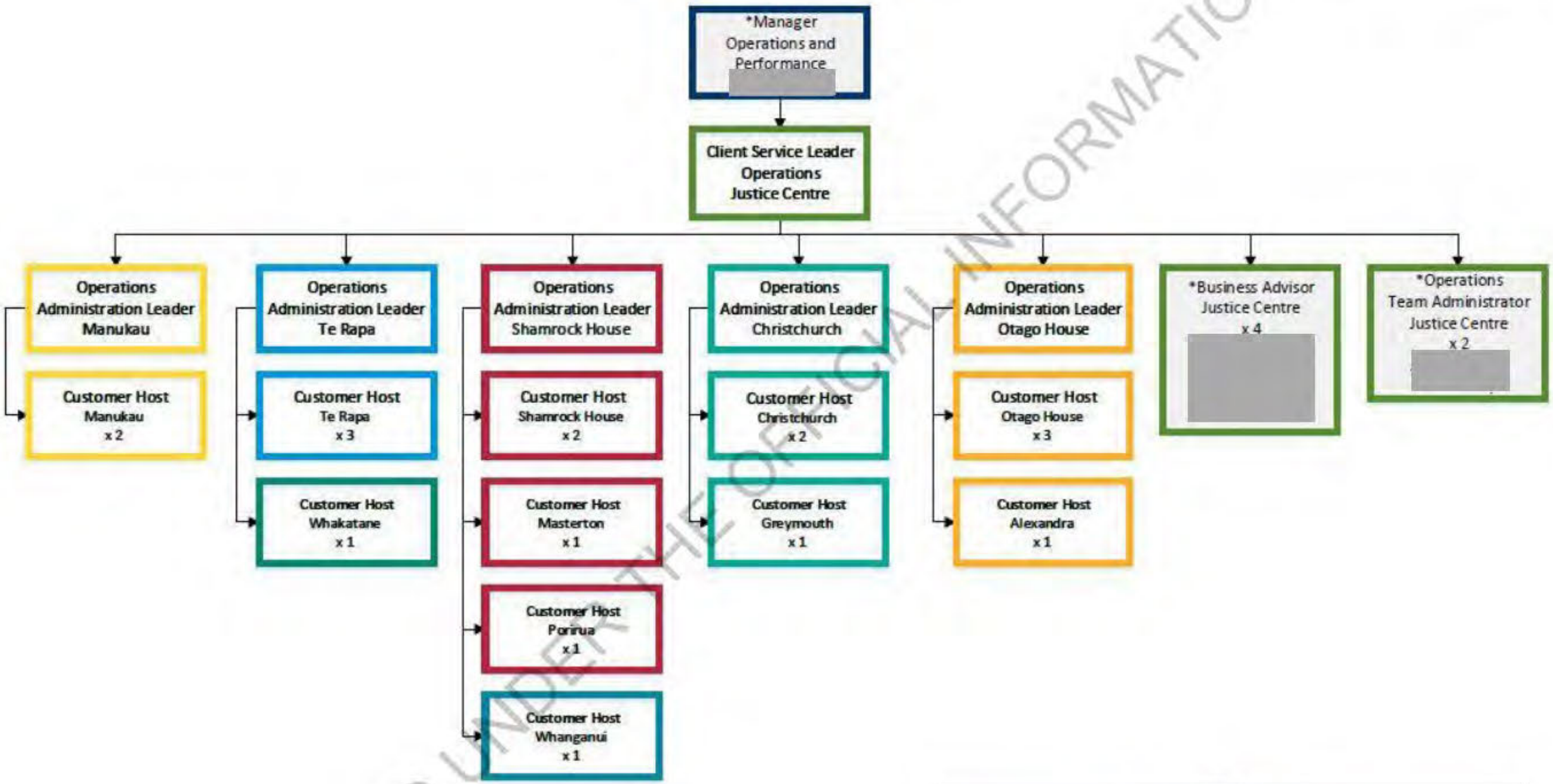
Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Operating Model: Operations and Performance



Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Operating Model: Operations and Performance



*These roles sit outside of the consultation process with no changes to be made.

Potential Impact: Proposed role impacts

There are different impacts on all roles across Client Service Delivery. The following pages set out all of our current roles and outlines what the potential alignment and / or implications for these roles could be. There is further detail on each role in the proposed Current Role Impact and Location Impact one page supporting information on The Sauce. There is also information in this section on the open and available roles as well as transition roles.

Current Role	Proposed Implications
Administration Officer	• We have identified that your current role is the same or similar to two future options - Recovery Administrator, Band 11 / 12 and Customer Host, Band 12. You would be eligible to participate in the first round of EOI and selection for either of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Branch Manager	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Branch Support Manager	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Business Advisor (Operations)	• There are no proposed changes to your current role. You will continue in your role of Business Advisor in the future model.
Business and Programme Manager	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Business Support Officer - Sensitive Claims	• Proposed reporting line change to Operations Administration Leader and minor position description changes. There are no other proposed changes to your current role. You will continue in your role of Business Support Officer in the future model.
Case Administrator	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.

Potential Impact: Proposed role impacts

Current Role	Proposed Implications
Case Coordinator	• We have identified that your current role is the same or similar to two future options - Recovery Assistant, Band 14 / 15 and Recovery Coordinator, Band 14 / 15. You would be eligible to participate in the first round of EOI and selection for either of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Case Coordinator (WRGP)	• We have identified that your current role is the same or sim lar to one future option – Cover Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin
Case Management Mentor	• We have identified that your current role is the same or similar to one future option - Practice Mentor, Band 16 / 17. • However the future role requires a dedicated skill set to support the appropriate Recovery Team. You could submit an EOI for Practice Mentor. This would be reviewed to ensure we have the right skill sets in the right locations to support the CSD teams.
Case Manager (all types including Complex Claims, ECS and the Diversity team)	• We have identified that your current role is the same or similar to two future options - Recovery Assistant, Band 14 / 15 and Recovery Coordinator, Band 14 / 15. You would be eligible to participate in the first round of EOI and selection for either of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Case Officer (Long Term Service Claims Unit)	• We have identified that your current role is the same or similar to two future options - Recovery Administrator, Band 11 / 12 and Customer Host, Band 12. You would be eligible to participate in the first round of EOI and selection for either of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Case Officer - Sensitive Claims	• We have identified that your current role is the same or similar to two future options - Recovery Administrator, Band 11 / 12 and Customer Host, Band 12. You would be eligible to participate in the first round of EOI and selection for either of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Centre Manager (Includes CACS, TI, STCC)	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Centre Support Manager	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.

Potential Impact: Proposed role impacts

Current Role	Proposed Implications
Claims Administrator (Treatment Injury)	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.
Claims Advisor TI	• We have identified that your current role is the same or similar to one future option – Specialist Cover Assessor, Band 16. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton, Wellington and Dunedin.
Claims Manager - ACC32 Treatment Assessment	• We have identified that your current role is the same or similar to one future option – Treatment and Support Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Manager - Accidental Death	• We have identified that your current role is the same or similar to one future option – Cover Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Manager - Dental	• We have identified that your current role is the same or similar to one future option – Treatment and Support Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Manager - Elective Surgery	• We have identified that your current role is the same or similar to one future option – Treatment and Support Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Manager - Hearing Loss	• We have identified that your current role is the same or similar to one future option – Cover Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Manager - Lump Sum IA	• We have identified that your current role is the same or similar to one future option – Treatment and Support Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Manager - Client Information	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.

Potential Impact: Proposed role impacts

Current Role	Proposed Implications
Claims Manager - Weekly Comp	• We have identified that your current role is the same or similar to one future option - Payments Assessor, Band 13 / 14. As the numbers align, those in Hamilton and Dunedin would not need o participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin. • For those in this role outside of Hamilton and Dunedin this means your role is proposed to be disestablished. You would however be eligible to relocate and be confirmed into this role as part of first round EOI and selection. Additionally, you would be eligible to participate in the second round EOI and selection for any vacant roles in your current location that are not filled initially.
Claims Officer Assessment - WIIT	• We have identified that your current role is the same or similar to one future option – Cover Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in Hamilton.
Claims Officer - Client Information	• We have identified that your current role is the same or similar to one future option – Recovery Administrator, Band 11 / 12 focusing on Client Information. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton, Wellington and Dunedin.
Claims Officer Entitlements - Accidental Death	• We have identified that your current role is the same or similar to one future option – Cover Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Officer Entitlements - Additional Treatment and ACC32	• We have identified that your current role is the same or similar to one future option – Treatment and Support Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Officer Entitlements - Dental	• We have identified that your current role is the same or similar to one future option – Treatment and Support Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Officer Entitlements - Elective Surgery	• We have identified that your current role is the same or similar to one future option – Treatment and Support Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Officer Entitlements - Hearing Loss	• We have identified that your current role is the same or similar to one future option – Cover Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.

Potential Impact: Proposed role impacts

Current Role	Proposed Implications
Claims Officer Entitlements - Lump Sum and IA	• We have identified that your current role is the same or similar to one future option – Treatment and Support Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Officer Entitlements - Transport	• We have identified that your current role is the same or similar to one future option – Payments Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin.
Claims Officer Entitlements - TPA Support	• There are no proposed changes to your current role. You will continue in your role of Claims Officer Entitlements - TPA Support in the future model.
Claims Officer - TI	• We have identified that your current role is the same or similar to one future option – Cover Assessor, Band 13 / 14. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin or Wellington.
Claims Reviewer	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.
Clerical Assistant	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.
Cover Assessor	• There are minor changes to your current role. You will continue in your role of Cover Assessor in the future model.
Customer Support Officer	• We have identified that your current role is the same or similar to two future options – Customer Host, Band 12 and Recovery Administrator, Band 11 / 12. You would be eligible to participate in the first round of EOI and selection for either of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Entitlements Payments Officer	• We have identified that your current role is the same or similar to one future option - Payments Assessor, Band 13 / 14. As the numbers align, those in Hamilton and Dunedin would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin. • For those in this role outside of Hamilton and Dunedin this means your role is proposed to be disestablished. You would however be eligible to relocate and be confirmed into this role as part of first round EOI and selection. Additionally, you would be eligible to participate in the second round EOI and selection for any vacant roles in your current location that are not filled initially.

Potential Impact: Proposed role impacts

Current Role	Proposed Implications
Executive Officer	• We have identified that your current role is the same or similar to two future options – Team Leader, Band 16 / 17 and Operations Administration Leader, Band 16. You would be eligible to participate in the first round of EOI and selection for either of these preferences or for any open roles.
Lodgement Administrator	• There are no proposed changes to your current role. You will continue in your role of Lodgement Administrator in the future model.
Manager Business Customer Centric Services	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Manager Home Modifications	• Minor change to position description and job title change to Service Support Lead. There would also be a reporting line change to the Technical Policy Team Manager in Technical Services.
Manager Practice and Assessment	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.
Manager Sensitive Claims	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Manager Serious Injury	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Manager Supported Assistance	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.

Potential Impact: Proposed role impacts

Current Role	Proposed Implications
Manager Transport for Independence	• Minor change to position description and job title change to Service Support Lead. There would also be a reporting line change to the Technical Policy Team Manager in Technical Services.
Operations Manager	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Performance Advisor	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Performance Manager	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would however be eligible to participate in the first round of EOI and selection for any roles that are open to all or for all people leader roles. This includes the Client Service Leader, Team Leader and Operations Administration Leader positions. You also would be able to apply through second round EOI and selection for any vacant roles that are not filled in the first round of EOI.
Programme Manager DSS	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.
Senior Cover Assessor	• There are minor changes to your job title. You will be confirmed in the role of Cover Assessor in the future model.
Serious Injury Advisor	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.
Service Coordinator - Sensitive Claims Unit	• We have identified that your current role is the same or similar to three future options - Recovery Assistant, Band 14 / 15; Recovery Coordinator, Band 14 / 15; and Recovery Partner, Band 15 / 16. You would be eligible to participate in the first round of EOI and selection for any of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.

Potential Impact: Proposed role impacts

Current Role	Proposed Implications
Service Coordinator - Serious Injury	• We have identified that your current role is the same or similar to two future options - Recovery Assistant, Band 14 / 15 and Recovery Coordinator, Band 14 / 15. You would be eligible to participate in the first round of EOI and selection for either of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Service Needs Assessor	• We have not been able to identify any same or similar future role to your current position. We are however proposing that your role will continue to be required for a period of time to support transition to the new model. This means your role is proposed to be disestablished in a period of 12 months. You would be eligible to participate in the second round EOI and selection for any vacant roles that are not filled initially.
Service Portfolio Manager SCU	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.
Support Coordinator - Serious Injury	• We have identified that your current role is the same or similar to one future option - Recovery Partner, Band 15 / 16. You would be eligible to participate in the first round of EOI and selection for this role. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Team Administrator – Operations	• There are no proposed changes to your current role. You will continue in your role of Team Administrator in the future model.
Team Administrator - Sensitive Claims	• We have identified that your current role is the same or similar to two future options - Recovery Administrator, Band 11 / 12 and Customer Host, Band 12. You would be eligible to participate in the first round of EOI and selection for either of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Team Administrator TI	• We have identified that your current role is the same or similar to two future options - Recovery Administrator, Band 11 / 12 and Customer Host, Band 12. You would be eligible to participate in the first round of EOI and selection for either of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Team Leader (across all CSD functions)	• We have identified that your current role is the same or similar to one future option – Team Leader, Band 16 / 17. You would be eligible to participate in the first round of EOI and selection for this role across functions in your current location as well as Operations Administration Leaders and Client Service Leaders in your region. You also would be able to apply through second round EOI and selection for any vacant roles. • Current Lodgement Team Leaders would be confirmed into Cover Assessor Team Leader roles due to recent Client Service Delivery CFEE change that needed to be set up in advance.

Potential Impact: Proposed role impacts

Current Role	Proposed Implications
Team Manager (across all CSD functions)	• We have identified that your current role is the same or similar to one future option – Team Leader, Band 16 / 17. You would be eligible to participate in the first round of EOI and selection for this role across functions in your current location as well as Operations Administration Leaders and Client Service Leaders in your region. You also would be able to apply through second round EOI and selection for any vacant roles. • Current Lodgement Managers would be confirmed into Cover Assessor Client Service Leader roles due to recent Client Service Delivery CFEE change that needed to be set up in advance.
TPA Relationship Leader	• There is a proposed minor change to your current role – a title change to Client Service Leader, Third Party Administration. We are therefore proposing to confirm you into this role in the future model in your current location.
Treatment Injury (TI) Cover Specialist	• We have identified that your current role is the same or similar to one future option – Specialist Cover Assessor, Band 16. As the numbers align, you would not need to participate in EOI or selection. We are proposing to confirm you into this role in the future model in locations of Hamilton and Dunedin or Wellington. • For those in this role outside of these locations this means your role is proposed to be disestablished. You would however be eligible to participate in the second round EOI and selection for any vacant roles in your current location that are not filled initially.
Treatment Injury Practice Mentor	• We have identified that your current role is the same or similar to one future option - Practice Mentor, Band 16 / 17. • For Case Management Mentors based outside of Wellington, as the numbers align you would not need to participate in EOI or selection. • Within Wellington you would need to participate in the first round of EOI and selection for this role. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.
Triage Manager	• We have not been able to identify any same or similar future role to your current position. This means your role is proposed to be disestablished. You would be eligible participate in the first round of EOI for any roles that are open to all to apply for or in the second round of EOI for any vacant roles.
Triage Service Coordinator - Sensitive Claims	• We have identified that your current role is the same or similar to three future options - Recovery Assistant, Band 14 / 15; Recovery Coordinator, Band 14 / 15; and Recovery Partner, Band 15 / 16. You would be eligible to participate in the first round of EOI and selection for any of these preferences. Where the numbers align, we would propose to confirm you into a future role without having to go through the EOI and selection process.

Potential Impact: Proposed new and fixed-term roles

New Role	Confirmed Band	Proposed FTE	Locations Available
Client Service Leader	18/19	38	Multiple Locations
Principal Advisor	18	2	Open Location
Principal Advisor – Safety Response (fixed-term)	18	1	Open Location
Product Owner	18	2	Justice Centre
Performance Advisor	17	6	Justice Centre or Hub based
Analyst (multiple teams)	16	7	Justice Centre or Hub based
Workforce Planner	16	3	Justice Centre
Real Time Analyst	13	6	Hub Locations
Workforce System Specialist	15	1	Justice Centre
Workforce System Administrator	13	1	Justice Centre

Transition Role	Confirmed Band	Duration	Locations Available
Transition Support Role	Will be based upon individuals current band	Up to 18 months – variable depending on the role	Hamilton and Wellington preferred however would consider locations outside of this

As mentioned further in this document, there would be a central and onsite support team that would provide BAU support to teams that are transitioning to the new ways of working. They would manage any operational matters caused by the disruption and respond to any business continuity events that could occur during this period.

Transition roles would support the roll out of Client Service Delivery over the next 18 month period. These roles, while not permanent, are open for all to apply for.

Next Steps: Proposed consultation and feedback timeline

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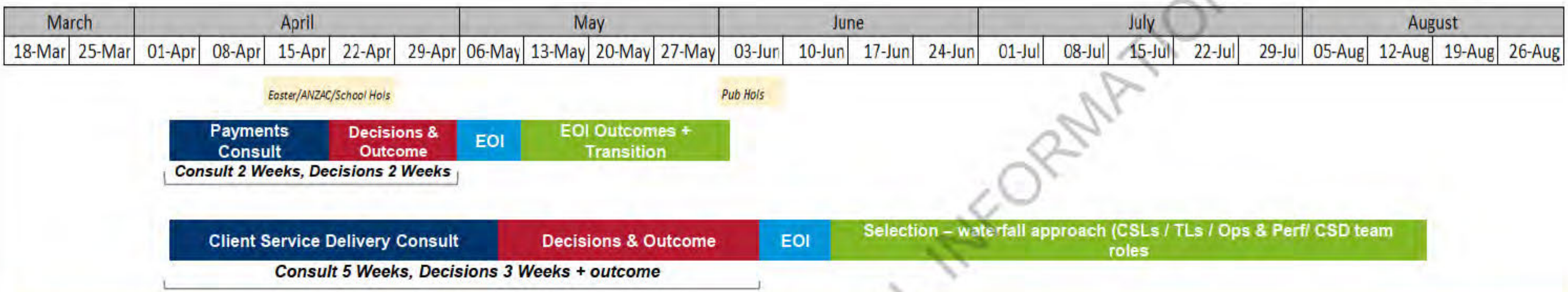

Key Consultation Dates	Overview of activity
Wednesday 3 April	• Client Service Delivery Phase Three consultation begins – People Leaders 10am; All Client Service Delivery people 3pm. • Consultation documentation will be available on The Sauce from 3:15pm.
4, 10, 17 April and 1 May	• Question and answer sessions led by your Unit Leader, to update you on questions and key areas of feedback.
Throughout the consult period	• This is a period of time to understand what has been proposed and provide any feedback on the proposal. We will be utilising a series of surveys to collect your feedback, similar to Phase Two. • The Client Service Delivery leadership team will be traveling to all locations around the country during consultation to answer any questions, offer support or provide clarification in person.
Wednesday 17 April	• Payments consultation closes and all feedback to be submitted by 5pm.
Thursday 2 May	• Payments final decision outcome briefings. Your feedback will be carefully considered before any decisions are made.
Wednesday 8 May	• Rest of Client Service Delivery consultation closes and all feedback to be submitted by 5pm.
Tuesday 4 and Wednesday 5 June	• Rest of Client Service Delivery final decision outcome briefings. Your feedback will be carefully considered before any decisions are made.

As we have noted in this consultation document, and during our briefings, this is a proposal. We want to hear and consider your views and ideas, before any decisions are made. You are welcome to seek independent or legal advice in regards to this proposal.

Assessment: Proposed EOI and selection timeline

Approach

Client Service Delivery consultation begins on 3 April 2019. However, Payments and the rest of Client Service Delivery would have different consultation and selection timeframes due to Payments earlier Go-Live date.

Payments Indicative EOI Dates	Key EOI Activity
Monday 6 May	• Payments Go-Live.
Friday 3 May – Thursday 9 May	• EOI would open for permanent Payments employees in Newmarket, Rotorua or Timaru. You would be able to express an interest in relocation to either Hamilton or Dunedin Hub. Should you be interested, you would be confirmed into a Payments Assessor role in one of the two Hub locations based on your preference. • EOI would open for permanent Payments Team Leaders or Managers in Newmarket, Rotorua or Timaru. You would be able to express an interest in relocation to either Hamilton or Dunedin Hub. Should you be interested, you would be confirmed into a Payments Team Leader role in one of the two Hub locations based on your preference. Alternatively you would have the option to wait and EOI in line with the rest of Client Service Delivery people leader roles.
Friday 10 May – Tuesday 14 May	• Confirmation offers would be generated for Payments Team Leaders and Payments Assessors willing to relocate. No further process would be required.

CSD Indicative EOI Dates	Key EOI Activities
Thursday 6 June – Thursday 13 June	• EOI would be open for all remaining roles across Client Service Delivery.
Monday 17 June – Friday 28 June	• Client Service Leader assessment and selection process.
Thursday 4 July – Friday 26 July	• Team Leader, Operations and Performance and Principal Advisors assessment and selection process.
Monday June 24 – Friday 9 August	• Recovery Administrator, Recovery Assistant, Recovery Coordinator and Recovery Partner assessment and selection process.

Assessment: Proposed EOI and selection process

EOI	Key Information
Principles	✓ Accessible and understood ✓ Fair and transparent ✓ Appropriate for the role ✓ Needing minimal requirement from our people where possible
Approach	• We are proposing to take a waterfall approach to EOI selection to allow leaders to be involved in selecting their future teams where possible. We are proposing Client Service Leaders would be selected first, followed by Team Leaders, Operations and Performance roles, Principal Advisors and then Client Service Delivery Team roles. • Following interviews and assessments, a moderation panel would review all assessment material and would be the decision makers for EOI outcomes.
Secondments	• Under this proposal, if your substantive role within Client Service Delivery is impacted you would be eligible to express interest based on your substantive role. If your substantive and your seconded role within Client Service Delivery are impacted, and you have been in your seconded role for more than 12 months, you may be able to choose your EOI preference based on either your substantive or seconded role.
Fixed term and casual employees	• Fixed term and casual employees would be eligible to participate in the selection process. However, permanent employees affected by any proposed changes and permanent employee's in ACC's redeployment pool would be considered first for any new or vacant positions in the confirmed structure. • Any new positions that were not filled via the selection process would then be available to those who were unsuccessful in other pools within Client Service Delivery change and ACC's wider redeployment pool and then advertised internally and potentially externally.
EOI rounds	• To ensure the EOI and selection process runs as efficiently as possible while giving people appropriate opportunities, we are proposing first round eligibility groups, which have been deemed same or similar as existing positions. Individuals within these groups would have first preference for roles Individuals outside of these groups would be able to be considered for any vacant positions during the second round of EOI.

Proposed weightings and ratings that would be used during EOI assessments

Weighting	Definition
5 – High	Essential experience, qualifications and behaviours required to perform this position competently.
3 – Medium	Desirable experience, qualifications and behaviours required to perform this position competently with appropriate training and support.
1 - Low	Not essential, can be acquired with appropriate training and support.

Rating	Definition
4	Exceeds criteria
3	Demonstrates criteria
2	Potential, would require support
1	Not observed

More information on the proposed EOI and selection process can be found in the supporting documentation on the Sauce

Assessment: Proposed selection methods

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The below information provides an overview of the proposed selection process and assessment method by role. Additional information is available in relation to each of the roles as part of the supporting information available on The Sauce.

	Proposed Method							
Position/s	EOI Form	Behavioural Interview	Interview Presentation	Conversation with leader	Written Scenario	Resilience Exercise	Interview Panel (three panel members)	Moderation Panel
Client Service Leaders (CSL) – All Types	✓	✓	✓	X	X	X	CSD LT member Assistant Manager Business Leader	CSD Leadership Team Assistant Managers
Team Leader Operations Administration Leader	✓	✓	✓	X	X	If supporting Partnered	Client Service Leaders* Business Leader	CSD Leadership Team Assistant Managers
Recovery Administrator	✓	X	X	✓	✓	If supporting Partnered	X	Assistant Manager (Administration)* Operations Administration Leaders*
Recovery Assistant	✓	X	X	✓	✓	If supporting Partnered	X	Assisted Client Service Leaders* and Assistant Managers
Recovery Coordinator	✓	X	X	✓	✓	X	X	Supported Client Service Leaders* and Assistant Managers
Recovery Partner	✓	X	X	✓	✓	✓	X	Partnered Client Service Leaders* and Assistant Managers
Principal Advisor Principal Advisor, Safety Response	✓	✓	X	X	X	X	Manager Partnered Recovery Partnered Client Service Leaders* Injury Prevention Representative	Manager Partnered Recovery CSD LT member
Performance Advisor Product Owner Real-Time Queue Analyst Workforce Forecasting Analyst Systems Specialist Systems Administrator CSD Analyst	✓	✓	✓	X	X	X	Operations and Performance Client Service Leaders* Business Leader	Manager Operations and Performance* CSD LT member Operations and Performance Client Service Leaders*
Customer Host	✓	✓	X	X	X	X	Operations Administration Leaders* Operations and Performance Client Service Leaders*	

- *Depending if or when position is filled. This page should be read in conjunction with the location one page information and relates only where we have indicated an EOI process may be required.
- Talent Representatives would support and facilitate interview and moderation panels.
- Individual performance (PDC) ratings may be used as supplementary information throughout the EOI process.

Your feedback on Phase Three is important. This is your opportunity to help shape our future structure. You are encouraged to consider the proposal across the entire operating model.

Assessment: Proposed selection criteria

Leadership Roles	Selection Criteria	Weighting Number
Client Service Leader	• All ACC Behaviours & Leadership Capabilities • Experience leading customer centric service delivery and continuously improving customer experience to drive improved outcomes • Proven ability to lead, motivate and sustain consistent ways of working across multiple sites/teams • Ability to think and act strategically and make decisions in complex and/or challenging situations • Ability to interpret performance data and customer insights and use these insights to coach and motivate leaders and teams	All High
	• Demonstrated ability to lead and influence through change • Proven experience in relationship management/partnering with external organisations in your community	All Medium
Team Leader	• All ACC Behaviours & Leadership Capabilities • Leadership experience in a customer-focused or service delivery environment • Ability to lead, coach and motivate teams to deliver an improved customer experience • Ability to analyse and interpret performance metrics, customer insights and use these insights to actively coach and motivate teams • Ability to lead and transform a team through change, and create an engaging work environment	All High
	• The ability to detect and manage client risks effectively • Sound problem solving and robust decision making skills	All Medium
Operations Administration Leader	• All ACC Behaviours & Leadership Capabilities • Previous experience in operational management including Site management responsibilities • Ability to manage and motivate remote teams to deliver consistent operational management and customer service across multiple Sites • Ability to identify and manage risks and issues for Site operations • Ability to drive process and operational improvements	All High
	• Experience of health, safety and wellbeing systems and monitoring • Ability to champion and influence new ways of working with multiple stakeholders • Proficient in using technology to connect with teams and stakeholders	All Medium

Assessment: Proposed selection criteria

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Leadership Roles	Selection Criteria	Weighting Number
Client Service Leader - Operations	• All ACC Behaviours & Leadership Capabilities • Experience in identifying and solving system-wide problems • Business experience encompassing operational management, financial management, reporting, business analysis, performance improvement and delegation • Experience in working with other leaders to deliver an integrated service offering • Strong interpersonal skills with the ability to make pragmatic decisions in complex and/or challenging situations • Ability to effectively lead through others and empower your team	All High
	• Experience leading complex business operations and continuously improving the services delivered to enable service delivery • Clear focus on business needs, issues and results, with strong business acumen	All Medium
Client Service Leader – Performance	• All ACC Behaviours & Leadership Capabilities • Experience providing strategic leadership for the monitoring and evaluation of service delivery in a complex and dynamic environment • Experience in identifying and solving system-wide problems • Experience in a leadership role embedding a culture of high performance • Experience in leading a quality and performance framework • Strong interpersonal skills with the ability to collaborate and influence across a wide range of stakeholders and situations • Ability to maintain a future-focus, ensuring the delivery of a proactive function that can influence and provoke thinking on key issues • Strong understanding of analytically driven and insight enabled performance management • Ability to effectively lead through others and empower your team	All High
	• A strong understanding of customer centric service delivery and how to drive ongoing improvements to customer experience • Experience in working with other leaders to deliver an integrated service offering	All Medium

Assessment: Proposed selection criteria

Leadership Roles	Selection Criteria	Weighting Number
Client Service Leader – Workforce Management	• All ACC Behaviours & Leadership Capabilities • High volume workforce experience preferably within a large complex se vice or multi-channel environment • Experience establishing a workload management function in a large organisation • Demonstrated evidence of implementing the use of new tools and/or technologies to improve business intelligence and deliver on strategic objectives • Leadership experience in a dynamic service delivery environment • Proven ability to motivate a team to achieve excellent service delivery outcomes using data analysis, monitoring, reporting, planning and forecasting • Strong interpersonal skills with the ability to make pragmatic decisions in complex and/or challenging situations • Strong analytical skills and the ability to generate and present reports to inform workforce strategy and planning	All High
	• Agile and able to problem solve and make decisions in fast-paced and challenging situations • Well-developed relationship management, influencing, negotiation and communication skills	All Medium
Client Service Leader – Product Owner	• All ACC Behaviours & Leadership Capabilities • Proven strategic leadership experience in a dynamic service delivery environment • The ability to set strategy, aligned to business priorities, and to deliver integrated roadmaps in complex service envi onments • Experience leading business change to support customer focused outcomes • Experience of product development and delivery practices and disciplines including Agile • Exceptional relationship management, influencing and negotiation skills. • Highly col aborative approach • Flexible, adaptive, agile and resilient in a rapidly changing environment	All High
	• The ability to network with and influence a wide range of internal and external stakeholders • Sound problem solving and robust decision making skills, with the ability to make decisions in highly complex and/or challenging situations	All Medium

Assessment: Proposed selection criteria

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Leadership & Operations and Performance Roles	Selection Criteria	Weighting Number
Client Service Leader – Knowledge and Practice	• All ACC Behaviours & Leadership Capabilities • Leadership experience in a customer-focused or service delivery environment • Expertise in knowledge management and developing knowledge management systems • Experience in capability development and an understanding of the levers to increase capability • Experience leading the strategic development of a knowledge management function • Proven ability to motivate specialist teams to deliver advice, coaching and support knowledge management • Ability to influence effectively during change and to support the adoption of new ways of working • Highly collaborative and able to work with multiple stakeholders to drive outcomes	All High
	• Knowledge of health, community and disability services • Experience creating positive employee engagement in an ever-changing work environment	All Medium
Practice Mentor	• All ACC Behaviours • Significant experience understanding client support needs, recovery action planning and support available to facilitate the best recovery outcomes • Ability to build rapport with colleagues and leaders • Effective education / training skills, including the ability to build trust and educate peers/colleagues • The ability to provide expert advice effectively with the ability to adapt your approach to meet individual requirements • Ability to take a holistic view of a range of complex information to develop appropriate education plans • Ability to collaborate closely with peers to support a cohesive work programme	All High
	• The ability to conduct quality reviews and make practical, actionable recommendations • Ability to work independently and achieve work programme requirements and deadlines	All Medium

Assessment: Proposed selection criteria

Specialist Roles	Selection Criteria	Weighting Number
Principal Advisor	• Demonstrated experience understanding the machinery of government, working cross agencies and within the wider disability sector • Ability to identify core drivers of performance, liability and risk • Demonstrated high level conceptual and creative thought leadership for the provision of expert advice for the relevant specialist area (Mental Injury/Physical Injury) • Experience in delivering tangible outcomes in a transformational or significant change environment • Commitment to supporting the diverse needs of our customers, including knowledge relevant legislation that supports this (Treaty of Waitangi, Equal Employment Opportunities, Occupational Health and Safety, Disability Action Plan) • Ability to proactively identify and mitigate or manage risks	All High
	• Proven ability to achieve mutually beneficial outcomes by balancing the needs of multiple parties and influencing without line management accountability • Demonstrated experience driving improvements within a multi-faceted customer services environment	All Medium
Principal Advisor – Safety Response	• Demonstrated experience understanding the machinery of government, working cross agencies and within the wider wider child and family harm sector • Demonstrated high level conceptual and creative thought leadership for the provision of robust advice • Demonstrated experience driving improvements within a multi-faceted customer services environment • Commitment to supporting the diverse needs of our customers, including knowledge relevant legislation that supports this (Treaty of Waitangi, Equal Employment Opportunities, Occupational Health and Safety, Disability Action Plan) • Ability to proactively identify and mitigate or manage risks	All High
	• Ability to identify core drivers of performance, liability and risk • Experience in delivering tangible outcomes in a transformational or significant change environment • Proven ability to achieve mutually beneficial outcomes by balancing the needs of multiple parties and influencing without line management accountability	All Medium

Assessment: Proposed selection criteria

Operations and Performance & Frontline Roles	Selection Criteria	Weighting Number
Customer Host	• All ACC Behaviours • Demonstrated ability to display cultural awareness, empathy and understanding when interacting with customers • Ability to understand customer needs and empower them to access the appropriate services in the appropriate way • Excellent customer service and interpersonal skills to work productively with a wide variety of people • Ability to prioritise and co-ordinate activities and resources to meet changing business needs and deadlines	All High
	• Ability to educate and help customers to understand and adopt new ways of working • Proven ability to work cooperatively with others to deliver excellent customer service	All Medium
Recovery Administrator	• All ACC Behaviours • Demonstrated commitment to quality customer service • Demonstrated ability to work effectively as part of a team in a task based administrative environment • Sound judgement, knowing when to question if something doesn't look right • Effective communication skills, including being able to display cultural awareness, empathy and understanding when interacting with customers • Openness to different ways of doing things and willingness to adapt • Accuracy and strong attention to detail	All High
	• Awareness of privacy and confidentiality and how it relates to the management of client information	All Medium
Recovery Assistant	• All ACC Behaviours • Demonstrated ability to take individual ownership for your work and to operate effectively in a collaborative team environment • Openness to different ways of doing things and willingness to adapt • Effective relationship management skills, with the ability to quickly establish rapport and successfully motivate, negotiate, and influence outcomes • Effective communication skills, including the ability to display cultural awareness, empathy and understanding when interacting with customers Ability to rapidly review a wide range of information, assess risks and make quality decisions using sound judgement	All High
	• The ability to multi-task (listen, talk, type, think, action) and record concise client information	All Medium

Assessment: Proposed selection criteria

Frontline Roles	Selection Criteria	Weighting Number
Recovery Coordinator	• All ACC Behaviours • Demonstrated ability to take individual ownership for your work and to operate effectively in a collaborative team environment • Openness to different ways of doing things and willingness to adapt • Sound judgement and problem solving skills with the ability to take a holistic view of a range of complex information and make considered and timely decisions • Effective communication skills, including the ability to display cultural awareness, empathy and understanding when interacting and building rapport with customers • Effective planning skills with the ability to prioritise workload and manage key steps to achieve quality client outcomes	All High
	• Effective relationship management skills, with the ability to build relationships and successfully motivate, negotiate, and influence outcomes	All Medium
Recovery Partner	• All ACC Behaviours • Ability to take a multi-disciplinary approach, and work as part of a team to support clients with complex needs. • Openness to different ways of doing things and willingness to adapt to changing situations • Effective relationship management skills, including previous experience working in partnership with internal and external stakeholders • Sound judgement with the ability to take a holistic view of a range of information and make sound decisions in complex and emotive situations • Effective communication skills, including the ability to build trust, display empathy and successfully motivate, negotiate, and influence outcomes in sensitive situations • Level of resilience working with fluctuating workloads and vulnerable clients	All High
	• The ability to assess risk factors and respond appropriately • Effective planning skills with the ability to respond to immediate needs and manage key steps to achieve quality client outcomes	All Medium

Assessment: Proposed selection criteria

Operations and Performance Roles	Selection Criteria	Weighting Number
Performance Advisor	• All ACC Behaviours • Experience in monitoring and evaluating service delivery • Knowledge of quality management systems • Proven ability to analyse data and present insights to drive future improvements • Ability to interpret a wide range of information and present this in a way that enables evidence based decisions making • Effective communication skills with the ability to explain and present complex information and insights in a clear way	All High
	• Ability to lead a work programme and influence the delivery of performance outcomes • Effective relationship management skills with the ability to influence key stakeholders	All Medium
Product Owner	• All ACC Behaviours • Experience working with a customer-centric mindset to drive service improvement • Experience working in complex delivery environments, managing competing demands and multiple stakeholders • Ability to enable the delivery of strategy through improved product development. • Ability to maintain focus on vision and drive delivery of requirements • High level of collaboration, co design, facilitation and negotiation • Strong interpersonal skills with the ability to network with and influence a wide range of internal and external stakeholders • Strong planning and organisational skills, including the ability to delegate, meet deadlines, work under constraints and balance competing requirements	All High
	• Sound problem solving and robust decision making skills, with the ability to make decisions in complex and/or challenging situations • Experience of product delivery practices and disciplines with the ability to apply in practice, ideally including Agile	All Medium

Assessment: Proposed selection criteria

Operations and Performance Roles	Selection Criteria	Weighting Number
Real Time Analyst	• All ACC Behaviours • Attention to detail and the ability to continuously monitor and identify trends in service performance • An eye for detail with the ability to quickly identify themes, blockages and opportunities to increase efficiencies and effectiveness • Proficient in Excel • Ability to influence and persuade other people without direct authority • Experience operating effectively in a digital environment with a wide range of technology systems and tools • Awareness of workforce management practices	All High
	• Ability to effectively manage and prioritise workload fluctuations and competing demands • Provides flexible, collaborative and proactive support in team environment	All Medium
Client Service Delivery Analyst	• All ACC Behaviours • Proven knowledge of operational delivery tools, practices, technologies and key performance indicators • Ability to effectively manage and prioritise workload fluctuations and competing demands • Ability to influence and persuade other people without direct authority • Has the ability to analyse data and generate appropriate reports and recommendations in a timely manner • Able to think of the big picture to understand how the data can influence service delivery • Ability to interpret a wide range of information and present this in a way that enables evidence based decisions making	All High
	• Ability to provide flexible, collaborative and proactive support in a virtual team environment • Targeted Technical Knowledge (Process, Business Analysis, Technology, etc.)	All Medium

Assessment: Proposed selection criteria

Operations and Performance Roles	Selection Criteria	Weighting Number
WFM Systems Specialist	• All ACC Behaviours • Experience supporting workforce management technology • Experience managing business rules and updating configurations in workforce systems • Ability to take individual ownership for your work and to operate effectively in a collaborative team environment • Ability to collaborate effectively with technical experts and colleagues to resolve complex issues • Ability to effectively manage and prioritise own workload fluctuations	All High
	• Ability to easily identify blocks, barriers and business savvy solutions	All Medium
WFM Systems Administrator	• All ACC Behaviours • Experience delivering accurate and reliable system administration • Previous experience working in a team based environment working cooperatively with others to deliver seamless support • Proactive can-do attitude and solutions-focussed approach • Confident with the use of excel and database administration • Ability to effectively manage and prioritise workload fluctuations and competing demands • Initiative, adaptability, curiosity and sound judgement	All High
	• Able to operate effectively in a digital environment with a wide range of technology systems and tools	All Medium
Workforce Planner	• All ACC Behaviours • Knowledge of forecasting and modelling methodologies • Experience supporting workforce planning activities • Experience working with large volume data and analytics in a complex organisation to inform robust and reliable operational decision making • Demonstrated ability to take individual ownership for your work and to operate effectively in a collaborative team environment • Ability to effectively translate information and analytics into timely outputs which can be readily interpreted by operational areas • Anticipates future needs and adapts approach to ensure that quality information can be derived to inform operational decision making	All High
	• Can operate effectively and quickly adapt in a digital environment with a wide range of technology systems and tools	All Medium

Assessment: Recruitment and redeployment

As we work through EOI, selection and assessment for the new model there will be impacts on our people, numbers and team make up. Below is how we are proposing to approach some of the key areas in regards to vacant roles, how we will recruit externally and how we will treat our people that are in the redeployment pool.

Outcome management

- Within this session an individual would be told either they have been confirmed, offered a future role or alternatively this would be an opportunity to have a conversation and provided rationale about why they have been unsuccessful. In the latter case, this would allow an opportunity for feedback and discussion and the option to have this decision re-evaluated.

- Following that discussion and during the roll out period, we would regularly communicate with unsuccessful people and continue to explore redeployment options. An indicative end date to employment would be provided based on the transition plan.

- Unsuccessful employees would receive Notice of Redundancy at the appropriate time, but at least four weeks before the employment end date. The work would be absorbed as part of the transition and claim migration plan. Any project work would be picked up as part of workforce transition at that time.

- During this period, any unsuccessful employees would have access to outplacement support as well as additional programmes.

- Outplacement support would be provided to any unsuccessful employees and those in the redeployment pool and who may be leaving the organisation as a result of the organisational change process. Throughout this period ACC would continue to assess the redeployment pool for other suitable opportunities within ACC. More information on outplacement support and our provider, CPI, can be found on the Me@ACC page on The Sauce.

Roll out: Proposed roll out and tranche information

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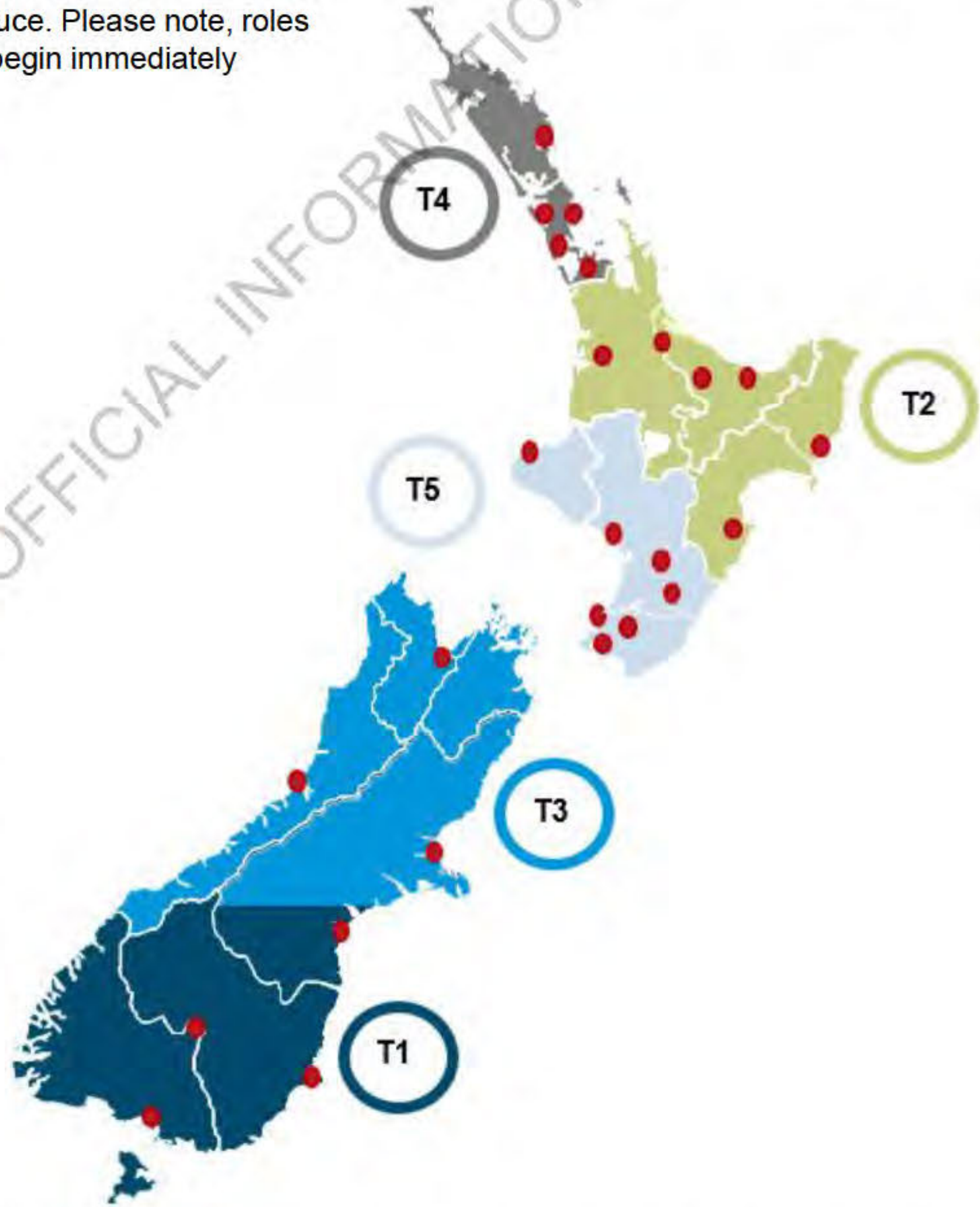
The below information sets out the proposed tranche groupings and indicative timeframes. There is more information in the supporting information on The Sauce. Please note, roles within Operations and Performance and Principal Advisors would begin immediately following selection.

Tranche 1 August 2019	Dunedin Hub and Site / Timaru / Alexandra / Invercargill / Remote Claims Unit
Tranche 2 January 2020	Hamilton Hub and Site / Tauranga / Whakatane / Rotorua / Gisborne / Hastings / Te Ara Tika Team
Tranche 3 March 2020	Christchurch Hub and Site / Nelson / Greymouth
Tranche 4 April 2020	Manukau Hub and Site / Newmarket / Whangarei / Albany / Henderson
Tranche 5 June 2020	Wellington Hub and Site / New Plymouth / Whanganui / Palmerston North / Hutt Valley / Masterton / Porirua



Roll out: Proposed roll out timeline

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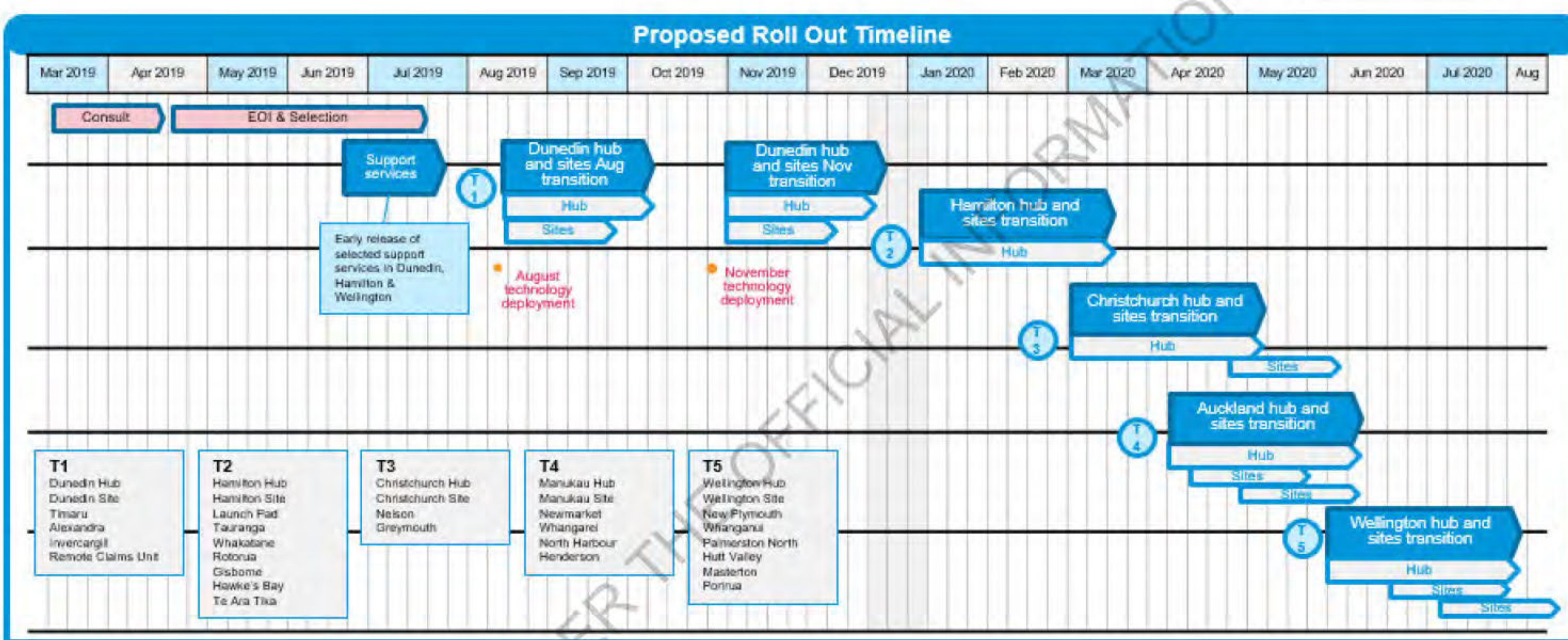

We are proposing as part of the targeted roll out plan:

- **Two technology deployments:** There would be a halfway / hybrid solution in August 2019 and full technology solution in November 2019.
- **Tranche sequencing:** Each tranche is made up of a Hub and the Sites in the region around it. Within a tranche, Hubs would Go-Live first, followed soon after by the Sites. In some traches there would more than one 'wave' of Site Go-Lives.
- **Partnered Recovery Mental Injury teams:** The stand up of Mental Injury teams within Partnered Recovery would start as soon as a decision is reached on the new Client Service Delivery structure. This would allow adequate time for any people moving into that function to train. These new teams would work in a BAU way until the roll out schedule reaches their region.

Roll out: Transition and roll out information

Workforce transition is the period of time that comes after final decisions, selection and outcome conversations It is how we support our people to transition from our current BAU world into the new model and ways of working. Transition would be run over a period of 12 months to ensure minimal disruption to our clients and to provide you with as much support as possible to ensure you are set up in the best possible way.

There would be multiple implications both as roles transition at their tranche Go-Live date, and as some positions that may no longer be required and people move on from the organisation. How we intend to approach any possible implications is outlined below.

Implication areas	Mitigation information
Leadership Focus	• We will hold Boot Camps with Client Service Leader and Team Leader roles to provide contextual awareness and develop the strategic view of each of the functional areas • There will also be a regional leadership focus to support this being a leader led process. As each tranche rolls out, this would focus on support and strategies for establishing teams, culture and ensuring alignment to model. This would also flow down from the functional leadership work that would be flowed into the regional teams for each recovery team.
Workforce Transition Plans	• Tailored Functional and Regional Transition plans would be developed and provided to support leaders through this period. Support for Workforce Transition would come from three key areas: ✓ **CSD Leadership Team / Client Service Leaders** – Leaders would each own their Workforce Transition plans and lead these on site in order to support the successful delivery of people change. ✓ **Organisational Change Design Project Team** – Oversight of the Workforce Transition Plans, linkage with the central Transition Team. Issue and Escalation management. ✓ **Talent Consultants** – Each Talent Consultant would support a specific area of the Client Service Delivery Operating Model, and would support the leaders in delivering on the overall plan.
Role / Transition Support	• 'Closing Out / 'Starting New' – This is the proposed approach to saying goodbye to the old Client Service Delivery model, and stepping into the new ways of working and Client Service Delivery structure and model. • There would be support for the Transition Team within roll out from a people change focus. This would be focused on role scope, ongoing recruitment needs (aligned to sourcing strategy) and how we are looking after our people. • This would include activities to support HRIS updates and any impacts to Active Directory (including system access). • There would also be support for any relocation – this is outlined further in the supporting information and on the Sauce.

Roll out: Transition overview

We are proposing to approach transition in Hubs and Sites in three stages – Prepare, Train and Support. The below information outlines each of these stages and what is involved in more detail.

Transition Phase	Proposed transition overview and scope
Prepare	• This is a period of leader, Site, team and claim preparation tailored for each Site depending on size and any specific unique qualities relating to the site. • During this phase there would be heightened activities around preparing the Site for new ways of working, people transitioning, training, and preparing current clients and claims • The Transition Team would work closely with the teams to carry out and assist with the preparation activities, well ahead of the Go-Live for a site. The transition team would also be physically present at Sites during the immediate weeks leading up to a Go-Live to provide the best possible opportunity for teams to adopt and embrace the new ways of working.
Train	• This is a period of classroom training where frontline roles would undertake different learning modules depending on their role. • All training would be completed in a one week period. In the Hub locations training would be spaced over a four week period. This is allow us to ensure everyone in that location is trained in time for their tranche Go-Live while not extensively disrupting service to our clients. • There would be trainers on Site for face-to-face classroom style training and business trainers to provide back up and extra support (they would then become an onsite early life support person to ensure continuity across transition phases). • During this time you would also gain access to your new tools and undertake new ways of working e.g. buzz boards, new operating rhythms etc. • It is important to note that there would be claim transfers happening across both of the first two phases.
Support	• This phase includes a period of onsite support (varying depending on Site / Hub size) , followed by on-going central support from a remote team until roll out is completed. • This phase is focused predominantly on embedding the training, supporting claims and reinforcing new operating rhythms. • Teams would also be supported with triaging and resolving any problems (business and technical) experienced during the early stages after a Go-Live. The onsite support team, which includes the change champions, would also help with managing any key stakeholder impacts as well as relaying any key communications that is required during this period.

Roll out: Claim transition

As part of our transition planning – we recognise that the clients that are currently under our management will also need to be transitioned to a potential new way of being managed. Outlined below is some of the key considerations and this will be discussed in detail at the commencement of transition for your Site.

Migration focus areas	Key Information
Claim Transition Approach	• Ensuring a good experience for our customers is paramount during transition. This means the Transition Team would work closely with Team Leaders and case owners to tailor the approach to transition current customers, where applicable, to the new ways of being managed. • We are also wanting to ensure that as much as possible the teams have the necessary capacity to participate in training and adopt the new ways of working. • We are proposing that there would be a Transition Team in place to help teams going live with transitioning current claims to future ways of management and providing overflow capacity. Support will be available on-site during the heightened go-live period and centrally throughout the roll-out period. • It is proposed that when a Site is preparing for Go-Live we could pause any new claims going to that site. Ahead of Go-Live, the Transition Team would work with the Team Leaders and case owners to triage and transition current claims that need to moved to other forms of future management. • This approach may take a different shape for Partnered Recovery (Mental Injury) claims. This is due to Sensitive Claims Unit needing to manage risks and train others within Mental Injury around the country, so therefore requires a more appropriate way to transition claims out from the Wellington Sensitive Claims Unit to new Partnered Sites.
Go-Live Approach	• A Go-Live would largely entail the teams being provided with access to new tools and moving to new ways of working. • Immediately following a Go-Live there is likely to be some work required by case owners to prepare their cases in new tools in line with the new ways of working. The onsite Transition Team would support the teams through these activities, ensuring the teams embrace the change and have timely avenues for escalating and managing problems. • Onsite support would consist of Business Trainers as well as Business Process Improvement team members looking at operating rhythms. There would also be support from the Change Network and from a Centralised Support Team who triage and manage issues during this period of time. While onsite support would conclude after 2-4 weeks after a Go-Live, central support would continue to be available throughout the roll out period. • New claims would start to be allocated to a new NGCM site when the site has appropriately transitioned and are able to start accepting new claims.

Roll out: Launch Pad

Since September 2017 Launch Pad has a test environment for us to ensure the future Client Service Delivery model works. Through the Launch Pad we've been able to test our thinking with real clients and live data and have been able to make changes and refinements to how we will support our clients recovery journey in the future.

Since Phase Two consultation we've done further testing especially around Supported and Partnered. Our current Launch Pad secondments are in place until May this year, so this information sets out the implications as a result of the Client Service Delivery consultation for anyone in roles within the Launch Pad.

Launchpad focus areas	Proposed approach and activity within Launchpad
Launch Pad Secondments	• We believe we need to extend the Launch Pad until the region rolls out in alignment with our transition period. This means that we are offering extensions to those that are currently in roles within the Launch Pad to continue on in place in Hamilton and Hawkes Bay until their region transitions (February 2020). This extension is focused on continuing to operate the Launch Pad as a normal business team, rather than disband Launch Pad. • As this shifts from a testing environment to a stable business team, we are shifting the leadership of the Launch Pad from within the NGCM Project, to the relevant leaders within Client Service Delivery. This will result in the Administration Team reporting to [redacted] Assisted Team reporting to [redacted], Supported Team reporting to [redacted] and Partnered team reporting to [redacted] • As we establish the Transition Team, we expect some of the support for these roles to come from the Launch Pad teams given their experience in the model.
Expression of interest implications for individuals in the Launch Pad	• Anyone in a role within Launch Pad would be eligible to participate in EOI and selection for a permanent role in Client Service Delivery that is in alignment or deemed the same or similar with either their seconded or substantive position.

Roll out: Resourcing levels and recruitment approach

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Resource modelling was used to help us determine the numbers of positions in different roles and different locations – to help us determine where historically the types of claims and where these clients were located. This modelling focused on the Recovery teams and Payments teams where we were predominantly changing our service offerings.

The resourcing modelling used information and insights including:

- Claims managed per week (rolling 12 month average)
- Claim segmentation rules to align claims to different teams
- Level of projected face-to-face requirements
- Transfer rates between different recovery teams within the model
- Claims growth rates
- Claims/tasks per employee (role type)
- Support ratios – levels of administration support
- Team Leader to Staff ratios to define level of leadership.

Resource modelling for the other teams was based on current activity levels.

With the proposed resourcing levels we have proposed a conservative approach with our resourcing. Recognising that the next 12 months will see a level of disruption to our process as we train and embed the new ways of working across our teams. As a result, we do recognise that there will be greater efficiencies to be achieved, and that we will improve on our average claims per employee levels.

To help us understand this, the resource modelling will be transferred to the Workforce Management Team, who is expected to provide the ongoing management and support for his modelling. This team will work with our Client Service Leaders on the appropriate level of resources and recruitment needed as part of the future.

Further information on the modelling can be found in Supporting Information on The Sauce.

Should this proposal go ahead – the on-going monitoring of vacancies and our resource modelling will be crucial to ensuring we have the right skills and capabilities within our organisation.

Vacancy Management

- This means that during this time the Workforce Management team would monitor and review levels of claims across the network and regularly assess how well our people are operating in the new model.
- As we continue to see efficiencies in the model, we anticipate that as people move on from their roles within ACC, that depending upon our updated modelling we may choose not to replace those individuals.
- The Workforce Management team will oversee all recruitment, to ensure that we replace what we need with the right level of skills and capability. They will also be working with the learning and knowledge and capability teams to look at our skill profile across Client Service Delivery to support capability development.
- This will mean that all vacant positions would be assessed by the Workforce Management team in relation our current performance levels. This would help us to determine if we would need to replace those roles in certain functions of the model.
- Individuals within the redeployment pool would be given first preference for any vacant roles that we choose to replace. This means you could potentially transition from an unsuccessful role to a vacant role in another team within the model, but in your location.

Next Steps: Feedback and questions

There are a number of ways to provide feedback or ask questions throughout the engagement period.

Feedback Surveys	We have created surveys to help you to provide feedback. All responses to surveys will be anonymous. You can provide your feedback via the surveys on the Organisational Change page on The Sauce. This can be individually, or as part of a group. The survey information is captured via teams within the model with an additional survey focusing on Process and Approach. The survey questions focus on: **- Structure and FTE modelling** **- Eligibility and EOI** **- Selection process and methods** **- Transition and roll out** **- Regional groupings** **- Timeframes and general feedback** • We also want to hear your thoughts about additional support that may be useful to you during the transition and roll out phases. • All feedback will be reviewed daily as it is submitted, and questions monitored and responded to regularly throughout the consultation period. All feedback is fully considered before any decisions are made.
Questions	• You can send questions or queries throughout the consultation period to ClientSDConsultation@acc.co.nz. The inbox is monitored by Talent who will seek business input to responses as required. We will endeavour to respond to inbox queries within two days. • If questions have already been answered you will be directed to the updated FAQs available on The Sauce. • Your manager, unit leader and union representative will also be available to answer queries and escalate common questions on your behalf. • Questions and Answer sessions will be facilitated by our Unit Leaders **on 4, 10, 17 April and 1 May.** This will cover common questions and feedback received via the mailbox and the surveys.
Change Working Group	• The Change Working Group has continued to meet as the proposal for consultation took shape. As you may remember, the group is made up of around 8 – 10 members with representatives from the PSA, Team Managers and team members from across Client Service Delivery. The group has discussed and provided feedback on a number of topics along the way to bring the voice of our people to the development process. It would have been great to have involved everyone in this process but the Change Working Group was a pragmatic way to get some early insights prior to consultation, with consultation being the opportunity for everyone to let us know their views. • Along the way the Change Working Group has input into decisions around who will lead the consultation discussions with you (it'll be your local leaders), how Q&A sessions will be run (they'll be at your Site) and whether it was better to let you know a potential consultation date before we had certainty (we did).

Next Steps: Support available

We acknowledge and understand that for many people this proposal represents a significant change to how we currently work and operate. This may be an unsettling time for you, and those feelings may increase as you work through the proposal and provide feedback. We want to make sure there are a range of options available to support you during this time.

Support / Contacts

- ACC's Employee Assistance Programme provides you with up to 4 one-hour sessions where required.
- EAP are aware ACC is undergoing change, and will ensure they are available for ACC employees throughout consultation. You will be able to contact the line at any time to speak with someone who can help.

We also encourage you to also seek support within your personal network. You may want to discuss the proposal with:

- Family / whānau, friends and team members
- Your manager, a member of the leadership team, or someone from Talent
- If you are a PSA member, you could also discuss the proposal with your PSA representative.

Online Resources

- The Change@ACC pages on The Sauce outline the different stages of change, and provide an overview of change and how it may impact you.
- The Change related support page shows a step by step guide to the Organisational Change process and provides several different resources for you to use during Organisational Change.
- The Organisational Change Policy provides you with a simple and concise explanation of the policy principles and standards that apply to organisational change.
- The Career Centre helps you to discover your values, motivators, skills and talents with an online career development tool.

Wellbeing

- Our Thrive team space has some great resources including the five ways to wellbeing to help you through change.
- ACCtivate, ACC's workplace wellness programme, provides you with resources, tips and advice to support your wellbeing.

Next Steps: Additional information available

There will also be additional information available on The Sauce on the following:

- 1 page Current Role Impact pages based on all current roles e.g. alignment, EOI options, proposed impact, location impacts etc.
- 1 page Future Role Eligibility pages based on confirmed roles
- 1 page Location Impact pages e.g. key information and implications regarding the proposal that is specific to each location, teams, numbers, reconfirmed roles, EOI information and tranche rollout dates etc.
- FAQs
- Scenarios relating to key FAQ / policy questions (secondments retirement, redundancy, relocation etc.)
- Updated position descriptions and new Customer Host position description / day in the life of (DILO)
- Supporting Slides with extra information on the following:
    - FTE modelling and assumptions
    - Additional Partnered information
    - Additional Payments information
    - Additional Leadership information
    - Position description updates
    - Position analysis statements
    - Additional EOI and moderation information
    - Transition process
    - Customer Host rationale
    - Use of Te Reo and client centred language
    - Progression framework and how this applies to multi level bands
    - Competency framework
    - Performance and Quality framework including KPIs
    - Feedback survey questions and overview

We look forward to hearing from you. Thank you in advance for your feedback.

For more supporting information:

- Visit our Organisational Change page on The Sauce
- Review the Frequently Asked Questions document
- Email any new questions to ClientSDConsultation@acc.co.nz

Submit your **Payments** feedback by **5pm Wednesday 17 April 2019.**

Submit your **Client Service Delivery** feedback by **5pm Wednesday 8 May 2019**.

Choosing the Right Recovery Team

Guidelines

Introduction

Our clients may be manually assigned to a recovery team. Clients may also need to transition between recovery teams as they progress with their recovery, their situation changes, or new information becomes available. This ensures that our clients will receive the right level of support for their needs, at the right time.

How will I know a client should be transitioned to another team?

Transitioning a client to a new recovery team takes place when the current team is no longer the best option for supporting the client's needs. Recovery team members should use their discretion when making this decision, drawing on Promapp processes, provider feedback, HCG responses and recovery support as required.

To ensure we are consistently considering our client needs, you may at times be prompted to review the claim and assess whether the client's needs would be better supported by another team. This prompt may come from your leader.

What if my client has another open claim?

Review the other claim information and consider if the client is being supported in the right team for their needs.

Under NGCM, ACC considers the person rather than the claim or injury, aiming to frame a service around customer need. If a client has more than one open or active claim, they are able to have all claims managed by one person, if that is their preference – this is called the Whole of Person (WOP) approach. For more information about managing multiple 'accepted' claims refer to the Whole of Persons Guidelines.

For clients with 3 or more claims in the Enabled or Assisted teams, consider the client's preference for holistic support or seek internal advice to determine if the client should be supported by a single Recovery team member. Follow the guideline below to support your transition decision and let the client know of the move.

When the new claim requires cover to be assessed.

In the situation where a cl ent has a claim being managed in a Recovery Team, and a new 'non-specialist' claim is lodged that requires cover to be assessed, the new claim will be transferred from Cover Assessment to the Recovery Team or individual Recovery Team Member to manage. The receipt of the new claim will trigger the Recovery Team Member to review the 'Track Recovery' procedures, the Assessing Claim for Cover in Recovery Team guidelines, as well as these guidelines, to determine if the two claims should continue to be managed in the current Recovery Team. Key considerations will include how the new injury/condition is likely to impact the client's ability to achieve their current recovery goals (irrespective of the future cover decision), as well as the level of complexity and contact required to assess the new claim.

* a 'specialist claim' is one of the following: Treatment Injury, Hearing Loss, Work-Related Gradual Process, and Fatal. Staff, Remote, Te Ara Tika, and 'sensitive' claims do not go via Cover Assessment.

What if my client has a Delayed Request for Weekly Compensation?

A delayed request for weekly compensation (DRWC) is the delay of 28 days + ECO max between either the date of the accident (for first incapacity) or the end of the last period of incapacity (for subsequent incapacity) and the date of the weekly compensation request.

A DRWC can come from the following scenarios:

- New requests on an injury claim that is not new
- Claims with recently approved cover.

These requests are managed in the Supported team, or if the client has Partnered needs, the Partnered team. To determine whether a request for weekly compensation is considered delayed before you transition the client to Supported, see Promapp here.

What if the claim needs to transition to/from Partnered?

Transition to Partnered – Take a common-sense approach. The decision to transition the claim is done collaboratively and the client will consent to the change in team and transition plan

Transition to Assisted – The decision to transition the claim is done collaboratively and is discussed with the client and/or provider prior to transition.

There is more detailed information on Partnered transition triggers, please go to page 9

What if I have concerns that the client has been transitioned to a team unable to support their needs?

Have a conversation with your leader to talk through your concerns about the transition. If appropriate, your leader may decide to discuss these concerns with the team leader of the individual who made the original transition decision so the feedback can be used in coaching. You may decide together to transition the client to a team better able to suit their needs.

Considering what team is best able to support our client

The following tables provide guidance on how each team is able to support our clients.

Enabled Recovery

Recovery Team Enabled	Team Structure	What to consider when transitioning or assigning to Enabled	Client experience of transition to Enabled
	**Enabled Recovery** includes self-managed claims where the client is empowered and able to be proactive about what they need from ACC, with low risk to their recovery. Clients will primarily manage their own recovery though they can choose to contact Assisted Recovery for any additional support needs. **CLIENT ENGAGEMENT NEEDS** reactive engagement suggests **Enabled**	Client doesn't need regular ACC contact and: • No ongoing programmes are required for recovery • Does not require any assessments or referrals • Does not require ACC to follow-up with any stakeholder • There are no actions or follow up required on the claim • Recovery is expected with no complications • Any mental health condition is now stable • Minimal supports required to aid recovery e.g. home help, weekly compensation, abatement, transport and reimbursement • Client is over the age of 18 – note there is no upper age limit but consider the client's ability to self-manage • There is no active vulnerable indicator • Injury is stable now and predicted to stay that way long term • Proactive management no longer required • Client has strong natural supports available	• Experiences no delays receiving the level of support needed and feels confident that they can self-manage • Understands how their claim will be managed, who they can contact should they need any support • Client is satisfied and confident with this level of engagement from ACC • Is not negatively impacted by any supports expiring or not being put in place when their claim is transitioned

Assisted Recovery

Recovery Team Assisted

Team Structure

Assisted Recovery manages claims where one to many relationships would suffice between the recovery team member and clients. A Recovery Assistant will contact them if there is something specific to discuss or at the next planned recovery check- in.

CLIENT ENGAGEMENT NEEDS
periodic engagement where a personal and consistent relationship is not required suggests **Assisted**

NOTE: if the claim was previously in Partnered and requires transition, it should go back to Partnered and not Supported.

What to consider when transitioning from Assisted

To Enabled

- Minimal supports required to aid recovery and no complex relationships to manage, e.g. with the client, employer or multiple providers
- The clinical pathway is straightforward or has stabilised
- Client is confident and willing to seek assistance from ACC as required
- Client is over the age of 18
- See Enabled Recovery page above

To Supported

- Recovery is not on track based on ECO dates
- Multiple psychosocial factors are present
- Clear expectation setting needs to be made on an ongoing basis
- There is a need for ongoing ACC contact for assistance and proactive response to changes in need
- There is an active Vulnerable Indicator
- Client has undergone Vocational Independence on a previous claim for the same body site and/or the current claim.
- We have received new information from a provider indicating Assisted support is no longer appropriate
- The client has lost their pre-injury employment and it's unlikely they are able to return to their pre-injury role
- The client is being investigated by Integrity Services

What to consider when transitioning to Assisted

From Enabled

- There is a need for regular ACC contact for assistance and proactive response to changes in need
- The client has identified they are having difficulty self-managing their recovery via MyACC
- Recovery is not on track based on ECO dates
- We have received new information from a provider indicating Assisted support is appropriate
- There are complex relationships to manage e.g. with the client, employer or providers
- Unstable mental injury
- Investigation required of additional diagnosis request
- Assessment of Weekly Compensation required

From Supported

- There are no complex relationships to manage, e.g. with the client, employer or provider
- The clinical pathway is straightforward or has stabilised and is predicted to stay that way long term
- Any mental health condition that was affecting a client's recovery is now stable
- We have received new information from a provider indicating Assisted support is appropriate
- Client does not have an active Vulnerable Indicator
- Client has been issued a Vocational Independence decision and there are no other interventions required.

Client experience of transition to Assisted

- Experiences no delays receiving the level of support needed and feels confident that their new team knows what support is required without having to tell them
- Does not have to re-tell their story
- Knows their new team contact details and how their claim will be managed and is satisfied and confident with this level of engagement from ACC
- Is not negatively impacted by any supports expiring or not being put in place when their claim is transitioned
- Experiences no delays having an additional injury diagnosis assessed

Assisted Recovery continued

Recovery Team Assisted | **Team Structure**

What to consider when transitioning from Assisted

To Partnered

- New information received reports person has an injury of a serious, complex or sensitive nature and has been confirmed as caused by the accident currently being managed
- Treatment Injury being investigated for cover and injury has caused a significant impairment that has resulted in a disability
- The person has a pre-existing impairment and/or comorbidity that results **in a disability or long-term chronic health and/or enduring mental health illness and the mix of these impairments and the injury is impacting on everyday activities** and a disability approach would be of benefit for the client.
- Client's personal circumstances have changed, and this will involve significant input from ACC e.g. The client's family/whānau situation has become complex and or risky and a disability approach would be of greatest benefit for the client. The person with a serious or sensitive injury has changing support needs and more intensive ACC s pport is required
- Protection of Personal & Property Rights (PPPR) is required
- Housing Modification – if these impact the client's ability to maintain their level of independence and/or are Standard/Complex modifications.

The Client is under 18 years of age and transitioned to Assisted from Partnered Recovery:

- There are risk factors pre-ex sting or current e.g. non-accidental injury/s, unstable family situation, multi-agency relationships exist, relationship with Oranga Tamar ki
- An assessment is due or ecommended e.g. Support Needs Assessment, Education Based Rehab Assessment
- Child is transitioning to school, or changing schools e.g. from primary to intermediate or leaving school
- There is a deterioration in injury / health status e.g. onset/increase of seizure activity, increased hospital admissions, surgery
- Increased or regular school absence
- Family / provider request for increased personal support
- Family / provider request for respite care

What to consider when transitioning to Assisted

From Partnered

- Is there an active Vulnerable Indicator? If so, the claim remains in Partnered
- Adult with support needs assessment completed in the last 12 months and all required supports in place
- The client's condition and situation are stable, and they understand that one-to- one case management is not required
- The client has opted for short term supports for their Sensitive claim or is post-cover decision and their needs have stabilised
- We have received new information from a provider indicating Assisted support is appropriate
- Client has been issued a Vocational Independence decision and there are no other interventions required.

If the Partnered client is under 18 years of age, they can transition to Assisted if the injury is not a sensitive claim and:

- There are no vulnerability or risk indicators existing or known
- Current supports are stable and appropriate for the age and stage of the child
- All assessment recommendations have been completed
- Tasks are in place to prompt reassessments and / or review of supports
- Natural supports, including family responsibilities are known and living environment is stable
- Multi-agency relationships don't exist

Client experience of transition to Assisted

Supported Recovery

Recovery Team Supported

Team Structure

Supported Recovery manages claims that are likely to require a dedicated one to one relationship between the client and the Recovery Coordinator who works with the client to recover. There may be multiple parties involved in the recovery.

CLIENT ENGAGEMENT NEEDS
Holistic engagement where a personal and consistent relationship is required suggests **Supported**

What to consider when transitioning from Supported

To Assisted

- There are no complex relationships to manage, *e.g. with the client, employer or provider*
- The clinical pathway is straightforward or has stabilised and predicted to stay that way long term
- Any mental health condition that was affecting a client's recovery is now stable
- Client does not have an active Vulnerable Indicator
- Client has been issued a Vocational Independence decision and there are no other interventions required.

To Partnered

- New information received reports person has an injury of a serious, complex or sensitive nature and has been confirmed as caused by the accident currently being managed
- Treatment Injury being investigated for cover and injury has caused a significant impairment that has resulted in a disability
- The person has a pre-existing impairment and/or comorbidity that results **in a disability or long- term chronic health and/or enduring mental health illness and the mix of these impairments and the injury is impacting on everyday activities** and a disability approach would be of benefit for the client.
- The person will have a serious injury, complex injury and/or sensitive claim and/or their family/whānau is in a situation that has become complex and/or risky and a disability approach would be of greatest benefit for the client. Client family/whānau will be experiencing at least two of these issues **in consultation and on recommendation from multi advisory review from Guidance Support**
- The person with a serious or sensitive injury has changing support needs and more intensive ACC support is required
- Protection of Personal & Property Rights (PPPR) is required
- Housing Modification- if these impact the clients ability to maintain their level of independence and/or are Standard/Complex modifications.

What to consider when transitioning to Supported

From Assisted

- Recovery is not on track based on ECO dates
- Multiple psychosocial factors are present
- Clear expectation setting needs to be made on an ongoing basis
- There is a need for ongoing ACC contact for assistance and proactive response to changes in need
- There is an active Vulnerable Indicator
- Client has undergone Vocational Independence on a previous claim for the same body site and/or same claim.
- The client is being investigated by Integrity Services

Client experience of transition to Supported

- Experiences no delays receiving the level of support needed and feels confident that their new team knows what support is required without having to tell them
- Does not have to re-tell their story
- Knows their new team contact details and how their claim will be managed and is satisfied and confident with this level of engagement from ACC
- Is not negatively impacted by any supports expiring or not being put in place when their claim is transitioned
- Experiences no delays having an additional injury diagnosis assessed

Partnered Recovery

Recovery Team Partnered

Team Structure

Partnered Recovery manages claims that are likely to require specialist rehabilitation support. Clients build a relationship with a dedicated Recovery Partner that supports them to manage their injury or recovery.

CLIENT ENGAGEMENT NEEDS Specialist engagement with intensive and extensive needs, with a level of vulnerability and complexity suggests **Partnered. See below for further guidance.**

What to consider when transitioning from Partnered

Note: If there is an active Vulnerable Indicator, or if clients require one-to-one support, they will remain in Partnered.

To Assisted

- For clients that have had a needs assessment completed, all required supports are in place
- The client's condition and situation are stable, and they understand that one-to- one case management is not required
- The transition has been discussed with the client and/or provider
- The client has opted for short term supports for their Sensitive claim or is post-cover decision and their needs have stabilised
- Client has been issued a Vocational Independence decision and there are no other interventions required.

If the Partnered client is under 18 years of age, they can transition to Assisted if the injury is <u>not a sensitive claim</u> and:

- There are no vulnerability or risk indicators existing or known
- Current supports are stable and appropriate for the age and stage of the child
- All assessment recommendations have been completed
- Tasks are in place to prompt reassessments and / or review of supports
- Natural supports, including family responsibilities are known and living environment is stable
- Multi-agency relationships don't exist

What to consider when transitioning to Partnered

- Treatment Injury is being assessed for cover and has caused a significant impairment that has resulted in disability
- Significant change in client needs. Client will need intensive input from ACC includ ng a support needs assessment, e.g. pressure areas and impact on every day function
- New information identifies that the client has serious, complex or sensitive injury related needs
- The mix of pre-existing impairment(s) the client has impacts on everyday activities, where a disability approach would be beneficial.
- Client's personal circumstances have changed, and this will involve significant input from ACC e.g. The client's family/whānau situation has become complex and or risky and a disability approach would be of greatest benefit for the client
- Housing Modifications- if these impact the clients ability to maintain their level of independence and/or are Standard/Complex modifications.

Client experience of transition to Partnered

- Experiences no delays receiving the level of support needed and feels confident that their new team knows what support is required without having to tell them
- Does not have to re-tell their story
- Knows their new team contact details and how their claim will be managed and is satisfied and confident with this level of engagement from ACC
- Is not negatively impacted by any supports expiring or not being put in place when their claim is transitioned
- Experiences no delays having an additional injury diagnosis assess

More information for Partnered transition triggers

Partnered is defined by four key elements of the clients engagement needs:

Intensive: severe or persistent symptoms or factors contributing to the clients presentation and/or are barriers to recovery and high / increased contact requirements and supports from ACC
Extensive: Requires partnering with internal and external groups or agencies to support and coordinate key activities, supports and engagement
Vulnerable: potential threat to their safety, health, or wellbeing. This includes but is not limited to isolation, addictions with a combination of their living situation or risky Family/ whānau situation, or an increased level of vulnerability due to their age or intellectual difficulties
Complex presentations: For **Partnered Mental Injury** clients it could be a combination of covered and non-covered injuries or symptomology, vulnerabilities, pre-existing impairment or disabilities as a result of long term chronic health, mental health illness or psycho social impacts. For **Partnered Physical Injury** clients, a serious and complex injury that has altered their life significantly and requires a disability approach to rehabilitation. A client could also have a combination of non-covered injuries or health conditions, vulnerabilities, pre-existing impairment or disabilities which pose a barrier to rehabilitation.

These four elements will need to be considered alongside any transition criteria for Partnered Recovery..

Additional scenarios for transitioning to Partnered:

New information received that client has an injury of a serious, complex or sensitive nature

- **Severe TBI** (GCS 8 or lower and PTA > 7 days)
- **Moderate TBI** (GCS 8 or lower and PTA up to 7 days)
- **Hypoxic injury that has resulted in cognitive and/or physical impairment**
- **Burns >20% third degree/full thickness burns:** Burns that have been treated at a National Burns Centre and involve the face, hands, feet, genitalia, perineum, or major joints, requiring ongoing surgery, rehabilitation and resulting in functional impairment
- **Spinal Cord Injury at any level and AIS A-D**, including cauda equina or central cord syndrome with evidence of neurological deterioration and impact on everyday life function and participation
- **Limb Amputee (single limb and multiple limb)** requiring prosthesis/artificial limb, NZ Artificial Limb Service input, rehabilitation and other ACC support
- **Sensory Impairment**: Low Vision and/or Blindness as a result of injury that cannot be corrected or improved by glasses, medicine or surgery and makes everyday tasks difficult.
- **Unstable and/or complex Mental Health Diagnosis** that is requiring a community or compulsory treatment plan/order (or has one in place) and specialist psychological/psychiatric treatment/support plan

<u>Client's personal circumstances have changed</u>.

- ***In consultation with Team Leader and if needed guidance through Recovery Support***
- ACC client will have a serious injury, complex injury and/or sensitive claim and is experiencing the below issues which increases vulnerability factors. Factors include but not limited to:
- **English as a Second Language/Literacy:** Support needs for client and family/whānau is difficult to determine and/or mobilise due to language barriers and challenges accessing information
- **Care and support:** Disclosure of abuse and/or care support breakdown but still requires care. Concerns identified with capacity regarding decision making (requires PPPR or supported decision making), requires support but has no funded or unfunded support in place
- **Harm and/or extra injury events:** Self harm, suicidality, consequential injuries as a result of distress, poor self-care practices
- **Housing situation:** Eviction from home **and/or** homeless/transient **and/or** hoarding **and/or** overcrowding that impacts on optimal health
- **Mobility:** Client with disability has no natural supports, is house bound, socially isolated and lacks engagement with community
- **Family-whānau situation**: Another family member the client is responsible for has a disability, mental health or chronic health condition that the client is having to support, **and/or** significant other is out of work due to sickness, illness. Self-report of financial and/or social strain and requiring or has cross government support from multiple agencies (at least 2 of Oranga Tamariki Ministry of Social Development, Ministry of Education, Ministry of Health, Corrections, Youth Justice)
- **Addictions:** Unstable addictions and/or substance abuse that impacts on activities of daily living (i.e. self-care, family commitments, employment or education participation)
- **Increasing/Escalating Medical Support Needs:** Requires increase in care, nursing, psych nurse assistant support on a weekly basis to ensure health and wellbeing
- Request from a provider involved with the client, and/or the client, family-whānau, and/or GP/Specialist identifying the client has deteriorated and needs an increase in ACC entitlements or support including one or more of the following:
  - increase in HCSS hours of more than 2hrs per day or 14hrs per week
  - increase in education support hours to a total >15hrs per week
  - increase in psychology intensive support from long term support for wellbeing plan
  - increase in nursing and/or psych nurse support on a weekly basis to ensure health and wellbeing of more than 3hrs per day or 21 hrs per week
  - Self-managing client has requested an increase to their self-management budget allocation
  - increase in nursing and/or psych nurse support on a weekly basis to ensure health and wellbeing of more than 3hrs per day or 21 hrs per week
  - Self-managing client has requested an increase to their self-management budget allocation

<u>The client has a pre-existing impairment and/or comorbidity that results in a disability or long-term chronic health and/or enduring mental health illness (whether this is covered by ACC or not).</u>

- ***In consultation with Team Leader and if needed guidance through Recovery Support***
- Disability, mental health and/or chronic health issues that **impact on the persons ability to engage in or access** information, everyday activities, i.e. the person needs and accesses support (ACC funded or not) to manage/complete their activities of daily living, uses manual or power wheelchair for mobility, requires support to get into the community, access information, participate in school/work **and**
- Currently involved or requires involvement with at least two (2) Specialist Services such as Community Mental Health Teams, MoH Disability Support Services, Children's Action Teams, Oranga Tamariki, Ministry of Education Early Intervention, ORRS, High and Complex Needs, Child Development Services, Child and Adolescent Mental Health Services, Youth Justice, Corrections, Whanau Ora, Strengthening Families, Enabling Good Lives

<u>Treatment Injury being investigated for cover</u>

- Birth injury and/or Child or adult who has had a brain injury, spinal cord injury, stroke or comparable injury during treatment.

Recovery Partner will complete Liaison Role and collaborate with Treatment Injury while investigating claim to ensure client and their family-whānau is receiving adequate Disability Support Services from the Ministry of Health and provide support with any transition to ACC once cover is established.

Transitioning a Client to Another Recovery Team

Frequently Asked Questions

The information below is to help respond to potential questions from our clients while being moved between teams.

Question	Answer
I don't want to move to another team or individual	**To a team** The decision to move your claim to this team is to ensure you receive the level of support that's right for your needs right now. You will still be supported by highly skilled and qualified team members who can help you with any query. Your current entitlements and supports won't change, and there will always be someone from the team available to talk to you when you need us. If your needs change in the future, get in contact with us and we can arrange for you to have one-to-one support. **To another Recovery team member** The decision to move your claim is to ensure you receive the level of support that's right for your needs right now. You will still be supported by a highly skilled and qualified team member who can help you with any query. Your current entitlements and supports won't change, and if your needs change in the future, then we will talk with you before we move you to another team or individual. **If your client continues to decline, explain the following:** Lets arrange for you to remain with me for now and we can take a look at your needs and who at ACC is best able to support them when at your next Recovery Check-in.
Why don't I have an individual supporting me anymore?	Due to the progress you have made so far in your recovery journey, you no longer need one-to-one support. Anyone you speak to in the team will be able to help. The services you currently receive from us won't change, and if your needs change, and you need additional support, we can go back to a one-to-one relationship.
Why has ACC made these changes?	We have received feedback from our customers and made some changes to the way we support your return to independence. Our new way of supporting clients means you will have a more consistent experience regardless of who you speak to and will receive the right level of support for your needs
Can I request a one-to-one support?	Anyone in the team will be able to support your needs but yes, if your needs change, we can always move you back to a single contact person at ACC.
Will I need to meet with you	Not at this stage as we will be able to provide you with the

personally/ is there a need to come to the local branch office?	assistance you need without having to meet you. However, for client's whose needs increase, it may be beneficial for them to meet with someone at ACC face to face. If there is a need to meet later, we can discuss it at that point in time.
Will there still be ACC branches?	Yes, there will be. The site located nearest to you is ….
Why am I not being managed by someone in my local branch?	Our new ways of working mean we can communicate with all our customers nationally. While your ACC contact person may not be local, all the services you receive will be in your area and easily accessible to you.
What happens to my claim/personal information if my claim is managed by a team of people?	Our privacy principles have not changed. We take the security of your information very seriously and everyone you speak with in the team will handle your information with care.
Where are you going/ what's happening to you?	I'm staying here at ACC. Your support needs have changed, and your recovery will be better supported by our [XX XX] team.

Having Recovery Team Transition Conversations

Supporting Information

How to have a client transition conversation

We want our client experience to be clear, simple and consistent. We want to ensure continuity and that our clients feel they are important to us, no matter what team they are being supported by. The language we use is therefore very important.

Transitioning a client between teams

Provide reassurance	When explaining why a client is now being supported by a team or single contact person at ACC, avoid using words that could imply they are getting worse or not progressing. Instead use words that imply we are changing our approach to better support their needs. If a client is moving from Cover Assessment, acknowledge the journey they have had so far.
Set clear expectations	Explain how they will be supported and ensure they have a clear understanding of what the next steps are. Let them know they can expect to hear from their new team at their next Recovery Check-in and that they can still use the MyACC application to check their details and request supports (if applicable).
Explain that supports will continue	Explain that if they are currently receiving support from us, there won't be changes related to the move. We will continue to make sure they have the right support for their needs and will look at whether there is anything else we can do to help
Inform other parties	Let all relevant parties know about the client's move and when they can expect to hear from ACC. This is important for any client who has multiple stakeholders involved in their recovery. It's critical for providers of our Partnered clients moving to Assisted, so they have updated contact details and we confirm the client's needs are stable.

Transitioning from Cover Assessment to a Recovery Team

What you might say:

- Now that we have been able to give you cover for your injury, I think you would benefit from speaking with someone about your support needs.
- Your new team / person will be in touch very soon. If you have any questions before then, feel free to contact your new team / person on 0800 ACCHELP (0800 222 435) extension [XX] and we can help.

Transitioning from self-management to team-based support (Enabled to Assisted)

What you might say:

- I've had a look at how you're doing, just to make sure we're giving you the right level of support. I think you'd benefit from working with another team at ACC who can provide more support - how does this sound to you?

- Your new team will keep in touch with you at regular recovery check ins. You can contact the team on 0800 ACCHELP (0800 222 435) extension [XX]

Transitioning from team-based to one-to-one support (Assisted to Supported/Partnered)

What you might say:

- I've had a look at how you're doing, just to make sure we're giving you the right level of support. I think you'd benefit from working with a contact at ACC who can provide dedicated support while you need it - how does this sound to you?
- They will be in touch with you at your next check in to see how you're going and how else we can help you. If you need to get in touch with them in the meantime, you can call 0800 222 435 (0800 ACC HELP) extension [XX]
- We will be in contact with your provider [name of provider] to let them know of the change, and to pass our contact details on to them. This move won't affect the [services/supports] you receive from us.
- If at any time your needs or situation changes, please get in touch with us and we can discuss the best way we can help.

Transitioning from one-to-one to team-based support (Supported/Partnered to Assisted)

What you might say:

- I'm calling to talk to you about some changes we're making to how we support you. We have a team who can support you and your needs, now that you require less frequent contact from us. Your team is highly skilled and qualified to help, and there will always be someone from the team available to talk to you when you need us. While the way we support you is changing, the services you receive from us will stay the same.
- [If applicable] We will contact your provider (name of provider) and let them know about this change and how they can contact us if they need to.
- [For Complex Mental (previously SCU) if applicable] We have privacy controls in place, the only people who can see your information are those who absolutely need to in order to support you.
- We will continue to check in with you to see how you're doing. If at any time your situation changes, or you feel like you need more support from us, please call us on [NUMBER]. If we don't hear from you first, someone from your new team will contact you at your next recovery check in on [DATE].

For Providers (if applicable):

- I'm calling regarding [client's name] to discuss some changes to how we are supporting them. From now on, we will be supporting [name] in a team environment.
- The team who is looking after them is highly skilled and there will be someone available to you, and to you client, whenever you call.
- We have privacy controls in place so only those who can access [client's name]'s information are those who need to in order to support them. We will continue to check in with [client's name] to see how they're doing. However if at any time you or [client's name] feel like they need more support from us, please contact us on 0800 ACC HELP extension [XX]

Transitioning from one-to-one or team-based support to self-management (Supported/ Assisted to Enabled)

What you might say:

- ACC has changed how we support our clients so it's easier for you to interact with us in a way that works for you.
- We recognise that you're able to manage your own recovery and supports through MyACC and aren't needing the support of a Recovery team member.

- You can continue to do this, and if you are happy, we will stop checking in and leave it to you to contact us if your needs change.
- You can do this by calling us or through MyACC. Our contact details are in MyACC.
- If your needs change and the level of supports you need increase, we can go back to providing you with support from one of our teams.

Consistency is key!

- When speaking with clients that have recently transitioned, it's important that they don't feel like they're having to repeat themselves and that we understand their current needs.
- If you are having a conversation with a client who has recently changed teams, ensure you take the time to review their notes. Similarly, ensure your note-taking is always clear and concise, so others can get review key details about the case quickly.