

31 January 2024



Kia ora

Your Official Information Act request, reference: GOV-029971 and GOV-029972

Thank you for your emails of 14 and 15 January 2024, asking for information under the Official Information Act 1982 (the Act). I have provided a response to each of your questions in turn, and have numbered the questions for ease of reference.

Email 1, 14 January 2024 (GOV-029971)

- Please supply the details within the ACC act that allows for retraining for up to 3 years at a diploma or degree level where a client is in receipt of Weekly Compensation.
 I read that ACC can fund retraining to diploma or degree level when reading documentation on the Royal Commission of Inquiry Abuse in care website.
- 2. Please also supply the promapp pages which relate to how ACC would carry out the procedures relating to retraining a person in receipt of a sensitive claim to diploma or degree level.
- 3. Please supply a table showing how many clients in receipt of weekly compensation have had ACC fund to a diploma or degree level. Broken down into various categories such as physical injuries or sensitive claims.

Response to Question 1

ACC can consider providing funding for qualifications for vocational rehabilitation purposes under section 87 of the Accident Compensation Act 2001 (the AC Act). Under this section, ACC can only provide vocational rehabilitation for three years, although ACC has discretion to provide this entitlement for a longer period under specific circumstances.

ACC must have regard to whether the type of vocational rehabilitation is appropriate in the circumstances. It will not usually be appropriate to fund a diploma or degree if the client is already equipped for other alternative employment, for example.

Response to Question 2

Our processes for vocational rehabilitation decisions apply to all types of claims. Please find the relevant documents on our website, which include:

- About Vocational Rehabilitation (VR) Policy <u>www.acc.co.nz/assets/Policy-and-procedure-documents/about-vocational-rehabilitation-vr-policy.pdf</u>
- Planning Vocational Rehabilitation (VR) post IOA/IMA Policy www.acc.co.nz/assets/Policy-and-procedure-documents/planning-vocational-rehabilitation-vr-post-ioa-policy.pdf
- Vocational Independence Medical Assessment (VIMA) Service Page <u>www.acc.co.nz/assets/Policy-and-procedure-documents/vocational-independence-medical-assessment-vima-service-page.pdf</u>
- Initial Occupational Assessment (IOA) Service Page <u>www.acc.co.nz/assets/Policy-and-procedure-documents/initial-occupational-assessment-ioa-service-page.pdf</u>
- Vocational Independence Occupational Assessment (VIOA) Service Page - www.acc.co.nz/assets/Policy-and-procedure-documents/vocational-independence-occupational-assessment-vioa-service-page.pdf



Please also find attached:

- Pathways to Employment (PTE) Services Service Page
- Back to Work (BTW) Services Service Page
- Vocational Rehabilitation Services Overview (VOC) Service Page

As staff names were not requested, they have been deemed out of the scope of your request and removed. *Response to Question 3*

Any decisions to provide funding towards a qualification for vocational rehabilitation purposes would be held on individual claim files, and are not recorded in a way that can be collated for statistical purposes. Due to this, we could only determine the number of times we have provided such funding through a manual search of individual ACC claim files.

Given the high number of ACC claims that have received vocational rehabilitation, it would not be possible to determine this information without substantial collation and research. For this reason, we are refusing this part of your request under section 18(f) of the Act.

In doing so, we considered extending our timeframe to respond and charging (as allowed under the Act). However, it was determined that the resources required to extract the data would have a significant impact on the everyday functions of the team(s) involved.

Email 2, 14 January 2024 (GOV-029971)

- 4. In addition to my earlier request today I also wish to ask ACC to provide the information on if it is recommended on ACC's website that a Library qualification is often required to get a job as a library assistant, the information relating to how the information on the Work type skills treat would allow for a person in receipt of weekly compensation to gain this qualification funded by ACC. Work type detail sheets (acc.co.nz)
- 5. I also request the information on when this job detail sheet was last updated as it makes reference to fines which a lot of NZ libraries have done away with.

Response to Question 4

The work type details sheet for Library Assistant that you have linked above, states that there are no specific entry requirements to become a Library Assistant, but some employers may prefer candidates with a relevant diploma. For more information about who created the work type details sheets and when they should be used, see page 15 and 11-12 of the Occupational Assessments Operational Guidelines on our website, here: www.acc.co.nz/assets/contracts/oa-og.pdf

Response to Question 5

The Library Assistant page has updates generated by a code each time the 'request a new sheet' link is clicked. However, the date of the last time this was done is not available to us. As such, we are refusing to respond to this part of the request as the information is not held by ACC. This decision has been made under section 18(g)(i) of the Act.

However, in the hope it is relevant to your enquiries, our work type details sheet search page was last updated on 31 May 2023. Also, the footnote for the Library Assistant work type details sheet states that the information on that page is based on ANZSCO 2013 version 1.3. Information about this can be found here: www.abs.gov.au/statistics/classifications/anzsco-australian-and-new-zealand-standard-classification-occupations



Email 3, 15 January 2024 (GOV-029972)

6. Please supply the standard policies and processes from CHIPS relating to how a person in receipt of weekly compensation for a sensitive claim can do a diploma or degree level course funded by ACC under Vocational Rehabilitation.

Response to Question 6

Please see our response to Question 2 above. We no longer use CHIPS, but the attached Appendix includes a document, 'Vocational Independence Journey.' As stated above, this process relates to all types of claims, not just sensitive claims, and it does not specifically mention the types of vocational rehabilitation (such as diplomas or degrees), because what is appropriate for each person will differ.

As this information may be of interest to other members of the public

ACC may publish a copy of this response on ACC's website. All requester data, including your name and contact details, will be removed prior to release. The released response will be made available www.acc.co.nz/resources/#/category/12.

If you have any questions about this response, please get in touch

You can email me at <u>GovernmentServices@acc.co.nz</u>. If you are not happy with this response, you can also contact the Ombudsman via <u>info@ombudsman.parliament.nz</u> or by phoning 0800 802 602. Information about how to make a complaint is available at <u>www.ombudsman.parliament.nz</u>.

Ngā mihi

Jason Hope

Acting Manager Official Information Act Services

Government Engagement

Pathways to Employment (PTE) Services Service Page v17.0



Summary

Objective

Pathways to Employment (PTE) services are for Clients with complex needs who are expected to achieve one or more of the outcomes under Stay at Work [SAW] or Back to Work [BTW].

Owner	[Out of Scope]	
Expert		

Procedure

1.0 Who is the PTE service for?

- a Pathways to Employment [PTE] service has been designed for Partnered Recovery Clients who need return to work services. Services for our Partnered Recovery Clients need more time and input from vocational rehabilitation providers (including coordination across other providers) than our usual Stay at Work and Back to Work services. The services provided will mirror those of SAW or BTW (dependent on the Client's rehabilitation goals) but there is an increased allowance in the pricing for greater provider inputs along the journey.

 Usually only Clients managed by ACC's Partnered Recovery team can be referred into this service.
- **b** Complex, for the purpose under Vocational Rehabilitation Service, is referenced as a claim being managed by the Partnered Recovery Team.

2.0 When should you make a PTE referral?

- a Not all our clients need specialised assistance to return to work. It is your role to ensure the right service is referred at the right time. A PTE referral should be considered early in the client's recovery if the expected outcome will be complex.
- **b** If a client is in the Partnered Recovery, however not a complex case, you can use SAW or BTW services to refer the client for Vocational Services.
- c Outside of Partnered Recovery teams, any referrals to PTE need to seek practice mentor guidance before referring.

3.0 How do you refer for a PTE?

a All clients enter the PTE service at 'stage 1' and move through stages depending on the complexity of their needs. To refer for a PTE service, generate a Purchase Order (completed by Admin under NGCM) using the entitlement type: VRP01.



Service Item Code	Service Item Description	Service Item Definition	Price (excl. GST)	Pricing Unit
Pathways to	Employment			
VRP01	Pathways to Employment One	Expected Outcomes as per Table 3 achieved within min of 10 business days	\$900.44	Set fee Paid on referral Max 1
VRP02	Pathways to Employment Two	Expected Outcomes as per Table 3 achieved within 10 weeks of start date	\$1,139.10	Set fee Paid on prior approval Max 1
VRP03	Pathways to Employment Three	Expected Outcomes as per Table 3 achieved within 6 weeks of start date	\$518.05	Set fee Paid on prior approval Max 1
VRP04	Pathways to Employment Exceptional	Expected Outcomes as per Table 3 achieved within 6 weeks of the start date per package payment	\$239.55	Set fee Paid on prior approval Max 3
VRP05	Pathways to Employment Initial Functional Rehab	Expected Outcomes as per Table 3 achieved within 6 weeks of start date	\$788.86	Set fee Paid on prior approval Max 1
VRP06	Pathways to Employment Follow up Functional Rehab	Expected Outcomes as per Table 3 achieved within 4 weeks of start date	\$450.78	Set fee Paid on prior approval Max 1

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PTE Codes and Pricing..JPG

- **b** PTE referral is sent using the ACC98 Referral for Vocational Service form. Generate the Purchase Order, complete all relevant fields including:
 - Expected claim outcome (ECO) date (see further information below)
 - Target date (see further information below)
 - Claim complexity (rating from 1-10 which is located on the [Insights] tab in Eos)
 - · Outcome sought (the reason for making the referral).

You should also provide the following information to assist the provider:

- background information regarding the injury
- barriers identified
- any relevant information about the employer (eg the employer has light duties available)
- any relevant medical information (eg expected recovery post-surgery (ARTP)).

Admin Template - ACC8004 Referral for vocational rehabilitation review – vendor

NOTE How do you set a target date?

The target date refers to the date you are expect the client to have returned to their pre-injury role or ready to return to work with a new employer. The date must be stated in the ACC98 ACC referral for Vocational Services form. To determine the target date, consider:

- expected claim outcome (ECO) dates
- from discussions with treating providers
- · psychosocial factors and co-morbidities.

The target date needs to be realistic. The provider will determine if the date is achievable after their initial assessments. They may request you change the target date and will contact you to discuss this. You should advise the provider if you change the target date at any time.

NOTE What is the Expected Claim Outcome (ECO) date?

The ECO dates are a guide of when the client is expected to have successfully returned to work and is based on a set of values taken from ACC data relating to New Zealanders and their recovery from injury. The following factors are considered when determining the ECO date:

- · injury diagnosis
- work type
- · age of client
- · previous claim history.
- C Before completing the referral for PTE, ensure the client and the employer (if returning to pre-injury job) is aware of the referral, the purpose and their obligations to participate. In most instances, it would useful for the treating provider to also be aware of the referral.

NOTE Which provider should you choose?

Select a provider from the list of available providers in the client's region. Consider:

- · any existing relationships between the client's employer and a provider
- · client's cultural or other needs
- whether a treating provider already seeing a client is aligned to a VOC Supplier and could provide the service.

NOTE How do you explain the PTE service to your client?

Explain to the client that you are going to ask a someone who specialises in supporting people to return to work to contact them. They will arrange a time to meet with them. The goal is that with their assistance they will be in a better position to either return to their pre-injury role or find new work. It would be an appropriate time to explain the expectations around participation.

NOTE What sort of information should be in a referral?

Key things to include in your referral are:

- the specific outcome sought (eg pre-injury role with pre-injury employer or new employer)
- · the return to work target date
- any return to work barriers identified that will need addressed
- any relevant medical information (e.g. surgeon has recommended no lifting over shoulder height)
- any relevant information about the place of employment that is known to ACC (e.g. the employer has said that they have light duties available)
- contact details and other information as per the referral form.

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4.0 What should you expect from the PTE provider?

- a If the client will stay with their current employer, the principles of Stay at Work will apply and the specific service elements the provider may/will deliver:
 - visit client's workplace (mandatory)
 - identify the functional requirements of the client's work
 - identify ways for the client to make an early return to work eg by modifying the pre-injury role, alternative work or having the client attend staff meetings/training.
 - · liaise with the certifying medical practitioner and the client's treating providers
 - provide the client with a return to work plan
 - provide the client with a work specific functional programme (if required)
 - modification of workplace environment (if required)
 - · education to address functional or psychological barriers to return to work eg pain, fatigue, motivation (as needed).
- b If the client will have a new employer, the service will be tailored to meet the client's specific needs, including identifying and addressing barriers to being able to work. The types of activities the provider will complete include:
 - CV preparation, interview preparation and other skill development to assist with obtaining employment,
 - arrange or provide training or skill development specific to the work types identified in the IOA,
 - services to address functional or psychological barriers to return to work identified in the IMA eg education on coping strategies or functional exercise programmes (as needed),
 - Where appropriate, sourcing work trials, obtaining acknowledgment of all parties' roles and responsibilities during the work trial (employer, client and provider) and monitoring work trial outcomes (see 6.0 Obtain Work Trial),
 - · workplace modifications to proposed workplaces and equipment trialling to facilitate work trials,
 - job placement resulting from a work trial,
 - · real or simulated work activities,
 - · case conferences, where needed.

- c The PTE provider will provide ACC with an initial, progress and completion report (mandatory). The provider will send an initial report (ACC7982) within two working days of the initial assessment. This plan should include:
 - assessment of the workplace
 - · confirmation of the target date
 - · client goals and timeframes to achieve the outcome
 - activities to reach the desired outcome
 - a communication plan

Progress reports are submitted to ACC at a point of upgrade between a stage or more frequently if there are exceptions, such as non-compliance or events which affect the outcome date. A progress report should include a summary of the interventions so far, progress the client has made towards goals to date, whether these goals are still reasonable or need updating, and a clinical rationale as to what further interventions are needed.

A completion report is sent to ACC shortly after the client has achieved the outcome of the PTE service or completed the PTE programme. The completion report should include the goals and outcomes achieved and the activities completed. If the client has not achieved an outcome of a full return to work, then the reasons why and any recommendations for ongoing support.

NOTE PTE stages and funding

Stage 2 funding does not require prior approval. If a Client needs further assistance above what is covered under Stage 1, the provider will send a progress report detailing what has been achieved however the provider can continue to access Stage 2 funding without further approval.

If, after completing Stage 1 and Stage 2 the client requires further assistance, the provider will send a progress report to ACC to request additional services. If approved, advice the provider and update the purchase order with the Stage 3 code (VRP03).

If, in rare circumstances, the client requires further assistance after they have completed Stages 1, 2 and 3, the provider may request further vocational rehabilitation services. Approval of additional resources under Exceptional Circumstances should be considered carefully. If in doubt of the appropriateness of the exceptional funding request, the Recovery Team Member (RTM) should seek clinical guidance. If approved, advise the provider and update the purchase order with the Exceptional Code (VRP04).

Clients can receive Work Specific Functional Rehabilitation in addition to existing vocational services provided. The Supplier may make a request to ACC to provide Initial or Follow Up Functional Rehabilitation Services.

Service	Service Item	Service Item Definition	Price (excl.	Pricing
Item Code	Description		GST)	Unit
Pathways to	Employment			10
VRP01	Pathways to Employment One	Expected Outcomes as per Table 3 achieved within min of 10 business days	\$900.44	Set fee Paid on referral Max 1
VRP02	Pathways to Employment Two	Expected Outcomes as per Table 3 achieved within 10 weeks of start date	\$1,139.10	Set fee Paid on prior approval Max 1
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PTE Codes and Pricing..JPG

ACC7982 PTE Initial and Progress Report

ACC7981 PTE Completion Report

NOTE Additional Exceptional codes requests

A second exceptional code might be required. The recovery team member should:

- 1) seek internal clinical advice and if necessary other information such as a VMA/VRR.
- 2) do a thorough review of the current vocational rehabilitation and its ongoing appropriateness to the client's recovery

If a second exceptional code is approved, you should add a second exceptional code to the same PO and not create a new PO.

NOTE PTE Timeframes

The PTE provider needs to adhere to the attached timeframes.

Table 4 - Client Report Requirements

Service Type	Description of report	Due
Standalone Assessment	Worksite assessment report	Within 2 days of assessment
Stay at Work and Back to Work	Initial Report (stay at work plan or back to work plan)	Within 2 days of the initial assessment
Services	Progress Report: Request for further Service level (if required) e.g. Stay at Work Two	5 days prior to the next service level start date
	Completion report	The same day as discharge
Pathways to Employment	Initial Report (return to work plan or back to work plan)	Within 10 days of the initial assessment
	Progress Report: Request for further Service level (if required) e.g. Pathways to Employment Two	5 days prior to the next service level start date
	Completion Report	The same day as discharge
Work Specific Functional Rehabilitation	Discharge summary	The same day as discharge
Job Search	Job search plan	Within 1 day of the initial assessment
	Completion report	The same day as discharge

Client Report Requirements.JPG

Pathway to	Pathway to Employment services are for Clients with complex needs who are		
Employment 1, 2,	expected to achieve one or more of the following outcomes:		
3 and	1. Same job, same employer;		
Exceptional.	2. Modified job, same employer;		
	3. New job, same employer;		
	4. Similar job, new employer;		
	5. Modified job, new employer;		
	6. New job, new employer;		
	7. Work ready and vocationally independent;		
	8. Maximum employment participation.		
	This service will be referred to the Supplier by ACC.		
	Timeframes:		
	 Clients will remain in Pathway to Employment One for a minimum of 10 business days. 		
	Clients will remain in Pathway to Employment Two for up to a further 10 weeks.		
	Clients will remain in Pathway to Employment Three for up to a further 6 weeks.		
	Clients will remain in Pathway to Employment Exceptional for up to a further 6		
	weeks: ACC can approve a maximum of three Pathway to Employment		
	Exceptional.		
	For further detail see clauses 5.14 – 5.18.		

PTE - Service types, purpose and timeframes.JPG

5.0 Work Specific Functional Rehabilitation

a For clients receiving Stay at Work, Back to Work and Pathway to Employment Services, clients can also receive Work Specific Functional Rehabilitation in addition to the vocational services provided.

NOTE Who provides this service?

This service is provided by a Physiotherapist. Support personnel can be utilised to support the delivery of Services, Personal Trainers and Gym Instructors may be utilised to monitor an existing programme but not progress a treatment plan

NOTE Purpose

The purpose of the Work Specific Functional Rehabilitation Service is to provide Clients with timely access to specialist functional assessment and rehabilitation services to address work specific barriers preventing a sustainable return to work. Functional Rehabilitation should not be provided within Stay at Work, Back to Work or Pathways to Employment Services.

NOTE Eligibility

- The client is currently receiving services within a Stay at Work, Back to Work or Pathways to Employment programme; and
- A work specific functional barrier has been identified and cannot be addressed through gradually introducing work tasks over time, a work trial, alternative duties or with the support of a treating provider; and
- A request for Work Specific Functional Rehabilitation has been approved by ACC.
- Functional rehabilitation may be referred for with the initial referral alongside PTE1. This would only require another line to be added to the purchase order (initial functional rehab code: VRP05).

NOTE Additional considerations

- Work Specific Functional Rehabilitation and specific exercises/cardiovascular programmes can be provided as part of the VRS Contract.
- The VRS service cannot be used to provide 'free' physiotherapy.
- Functional rehabilitation programmes may also be called functional strengthening, functional exercise or cardiovascular programmes.

NOTE What if my Client has resumed employment, but still need Functional Rehabilitation?

In cases where the Client has resumed employment but is still participating in a functional rehabilitation programme, the functional rehabilitation programme may continue past the completion of the PTE programme. A new functional rehabilitation programme cannot be started after a Client has completed a PTE programme.

If the Client started an initial functional rehab whilst under a SAW, BTW or PTE, but has now completed the SAW, BTW or PTE, the same provider can be approved for a follow up functional rehab to immediately follow the initial functional rehab if this is needed to complete the amount of Functional Rehab required to achieve a return to work or vocational independence.

NOTE What if the client has a Care Indicator?

If your client has a Care Indicator or you consider them to pose a potential risk to the assessor's safety, then you need to clearly outline this in the referral letter and have a conversation with the assessor prior to them contacting the client. You should clearly document this in Eos using the standard template.

6.0 Obtain Work Trial

a Clients receiving Back to Work and Pathway to Employment Services Stage 2 and above can also receive the Obtain Work Trial Service in addition to the vocational services being provided.

NOTE Who provides the service

This service is provided by a Vocational Consultant, Occupational Therapist or Physiotherapist. Support personnel can be utilised to support the delivery of services.

NOTE Purpose

The purpose of the Obtain Work Trial service is to test a Client's capacity for work in an actual workplace which can also lead to permanent employment options or demonstrating work readiness.

NOTE No prior approval is required for the first Obtain Work Trial

No prior approval is required by the Supplier for utilising the first Obtain Work Trial set-up and Obtain Work Trial monitoring codes per service. Any subsequent use of codes will require prior approval by ACC. Additional set up codes should only be provided for a new Obtain Work Trial. Obtain Work Trials should not be provided within the package funding for Back to Work or Pathways to Employment, the separate codes should be utilised by the Supplier.

NOTE Eligibility

The Client is currently receiving services within:

- Back to Work Level 2 or above
- Pathways to Employment programme

The Obtain Work Trial must be in a work-type specified in the Client's Initial Medical Assessment as currently medically sustainable or likely to be medically sustainable.

NOTE What if the Client has already had an Obtain Work Trial?

In cases where the client has already had an Obtain Work Trial Service before, additional services require ACC approval.

If approval is requested, the review the request from the provider:

- Check if any barriers identified in the previous Obtain Work Trial have been addressed. If not, these barriers should be addressed prior to approval of an additional Obtain Work Trial.
- Check the Obtain Work Trial job us a work-type stated in the Initial Medical Assessment as medically sustainable or likely to be medically sustainable and the client is in BTW stage 2 or above.
- Check medical certification has been received from the client's medical practitioner.

If the above points have been considered and the eligibility criteria has been met, consider approving the additional Obtain Work Trial.

7.0 Useful information and tips

NOTE Your provider has requested to change the target date?

If the provider wishes to change the outcome target date, they will seek your agreement. They should be doing this whenever it differs from what you had on the referral. They should provide a clear rationale and their clinical reasoning. In most cases, they will have a better understanding of the workplace and what the target date should be. However, you may guery timeframes and the planned interventions and/or renegotiate the target date and planned activities. It is expected that you reach an agreement within two days of the request.

NOTE What is an Obtain Work Trial?

An Obtain Work Trial can be utilised during a Back to Work or Pathways to Employment service. It is a short period of work experience with a designated employer in a specific work type assessed as appropriate for the client in the Initial Medical Assessment. The Obtain Work Trial will provide an opportunity for the client to trail the suitability of some job options, provide an environment where the client can apply their work skills and abilities, allow the client to reestablish work routines and provide an opportunity for the client to develop new skills. During a work trial ACC continues to provide weekly compensation.

NOTE When should the PTE be put on hold?

You may place a client's vocational rehabilitation on hold for a period. Possible reasons why:

- the workplace assessment has been completed, but rehabilitation is not able to commence.
- exacerbation of the covered injury
- unexpected treatment for covered injury (eg minor surgery)
- new injury
- equipment is needed for a safe return to work
- · exceptional personal circumstances.

When putting a client's vocational rehabilitation on hold, it is recommended that you:

- Only put the service 'on hold' once per claim
- The time applied to the 'on hold' be for a minimum of four weeks and a maximum of three months.

Where more than one 'on hold' is required, or your agreed timeframes are outside of the recommended timeframes above, please talk to your manager. Provided the client, provider and you agree, you can work outside of these recommendations.

When a client resumes their vocational rehabilitation after being on hold, the client re-commences where they left off. The service does not start from the beginning again.

How do you place the service on hold?

Discuss with the provider putting the service on hold. If you agree to put the service on hold, follow up with an email to the provider stating the date the case will be put on hold and the timeframe for how long the case will be put on hold.

- Add to the Purchase Order, entitlement type: VRSTOP and enter the period for which the vocational rehabilitation service is on hold. You do not need to add any costs to this entitlement type.
- · Add the VRGO entitlement type with the start date of when the vocational rehabilitation is expected to come off hold. The end date should be the date the vocational rehabilitation service is expected to end. You do not need to add any costs to this entitlement type.

NOTE Can the PTE report be sent to an employer?

For privacy reasons ACC can only release information related to the client's functional limitations and return to work plan to the employer. The client's private health information must not be disclosed. This being the case, do not send the full PTE reports to employers. Providers are aware of this and have their own templates that they use to inform the employer of a client's return to work plan. For more information on the rules around what client health information ACC can disclose to employers, please see Disclosure of clients' health information to employers.

NOTE Gym Memberships and Pool Passes

It is expected that functional rehabilitation is delivered at the Client's workplace, in the community or home where possible. A provider can choose to deliver Functional Rehabilitation at a gym or pool, but this will be at the Provider's

	own cost. Any associated pool pass or gym membership should be funded by the Client, and not under the Vocationa Rehabilitation Services contract. Please check the 'Other' Social Rehabilitation Policy Promapp page for further information on requests to fund 'other' social rehabilitation.
Sta	ay At Work (SAW) Service Page
Ва	nck To Work (BTW) Services Service Page
VC	DC - Vocational Rehabilitation Service Schedule
VC	DC - Vocational Rehabilitation Operational Guidelines

Back to Work (BTW) Services Service Page v37.0



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Objective

The Back to Work (BTW) service supports clients to regain capacity for the pre-injury work type, obtain employment, become vocationally independent, or achieve maximum employment participation. These clients have either lost their pre-injury job or need to move to a different work type because of their injury.

Owner	
Expert	

Out of S	Scope]	

Procedure

1.0 Who is the BTW service for?

a Back to Work service is for those clients who have lost their pre-injury role, but need assistance to regain capacity for the pre-injury work type, obtain new employment, become vocationally independent, or increase their employment participation.

The provider will tailor the service to accommodate each client's specific needs and address any barriers to achieving the outcome stated on the referral. This service is only for those entitled, or likely to be entitled to weekly compensation.

2.0 Managing Back to Work Programmes

a To manage Back to Work Programmes, refer to the quick guide.

Managing Back to Work Programmes - A Quick Guide for Recovery Team Members

3.0 When should you make a BTW referral?

a If your client has lost their pre-injury job and requires further rehabiliation or cannot maintain or return to their role due to their injury, then you should consider a BTW referral.

When your client cannot return to their pre-injury role due to injury, an Initial Occupational Assessment (IOA) and Initial Medical Assessment (IMA) should be undertaken before the service commences. However, you may make the referrals concurrently.

If your client has lost their pre-injury role but should make a full recovery you do not need to complete an IOA and IMA before the BTW referral.

The IOA and IMA will confirm whether the client can return to their pre-injury role and what other work types would be suitable. It will also identify the barriers preventing the client from being able to work. If you do make a BTW referral without an IOA and IMA, you will need to consider making these referrals in the coming weeks.

NOTE Your client has lost their pre-injury role, but should make a full recovery

If your client has lost their pre-injury job, but is expected to make a good recovery, you may use a BTW service to request assistance with returning the client to their pre-injury work type. You should evidence in your referral that the client is expected to make a full recovery from their injury and this is the focus of the BTW service.

You should include relevant information with the referral so that the BTW provider is able to document the range of tasks and activities required in the client's pre-injury role.

Your referral should request that the BTW provider assesses and comments upon the client's current functional capacity to return to their pre-injury work type, and lists the expected timeframes and any other activities (such as a Functional Rehabilitation programme) required to support the client to regain capacity for their pre-injury work type.

Finally, the referral should indicate that if the provider ascertains that the client currently has the capacity to return to their pre-injury role, they should write a letter to the certifying medical practitioner to request the appropriate medical clearance.

Before making the referral, you may wish to discuss the client's needs with the treating providers (Physio, GP etc.).

NOTE Your client just needs assistance with placement into a new role

If your client only requires assistance with placement into a new role then a BTW service is appropriate without an IOA/IMA. The types of assistance required may include arranging workplace modifications, trialling equipment and providing a graduated return to work plan.

NOTE When is an IOA/IMA required?

When Vocational Independence is the rehab outcome, then an IOA/IMA is required. The Provider needs to notify ACC that an IOA /IMA will be required to give ACC time to arrange these assessments. If a Section 103 will be the outcome, then no IOA/IMA is required

4.0 How do you refer for a BTW service?

- a All clients enter the BTW service at 'stage 1' and move through stages depending on the complexity of their needs. To refer for a BTW service, generate a Purchase Order using the entitlement type: VRB11. A list of service codes are available in the service schedule.
 - Vocational Rehabilitation Service Schedule
- **b** A BTW referral is sent using the ACC98 Referral for Vocational Service form. Generate the Purchase Order, complete all relevant fields including:
 - Expected claim outcome (ECO) date (see further information below)
 - Target date (see further information below)
 - Claim complexity (rating from 1-10 which is located on the [Insights] tab in Eos)
 - Outcome sought (outline the rehabilitation recommendations in the IMA and IOA that you would like addressed if the client has had these assessments).

You should also provide the following information to assist the provider:

- · background information regarding the injury.
- · barriers identified
- any relevant vocational information (eg previous SAW reports, IOA and IMA)
- any relevant medical information (eg expected recovery post-surgery (ARTP)).

NOTE How do you set a target date?

The target date is the date in which you expect the provider to achieve the outcomes of the BTW service. It must be stated in the ACC98 ACC referral for Vocational Services form. To determine the target date consider:

- Expected Claim Outcome (ECO) dates
- Information from discussions or reports from treating providers (including IMA)
- · Psychosocial factors and co-morbidities
- The type of barriers that need to be addressed by the BTW provider.

The target date needs to be realistic. The provider will determine if the date is achievable after their initial assessments. They may request you change the target date and will contact you to discuss this. You must advise the provider if you change the target date at any time.

NOTE What is the Expected Claim Outcome (ECO) date?

The ECO dates are a guide of when the client is expected to have successfully returned to work and is based on a set of values taken from ACC data relating to New Zealanders and their recovery from injury. The following factors are considered when determining the ECO date:

- · injury diagnosis
- work type
- · age of client
- previous claim history.

The ECO dates are located on the "Insights" tab in Eos. Where there is a change in the client's injury or diagnosis, the Recovery Team Member will update the read codes which will update ECO dates. The ECO dates are only valid up to 182 days' post injury.

c Before completing the referral for the BTW service, ensure the client is aware of the referral, the purpose, and their obligations to participate. In most instances, it would useful for the treating providers to also be aware of the referral.

NOTE Which provider should you choose?

Select a provider from the list of available providers in the client's region. Consider:

- any existing relationships between the client and previous providers involved in their rehabilitation
- · client's cultural or social needs

NOTE How do you explain the BTW service to your client?

Explain to the client that you are going to ask a someone who specialises in supporting people to return to work to contact them. They will arrange a time to meet with them. The goal is that with their assistance the they will be in a better position to find new work. They will arrange the training, licences or work trials that they might need and provide them with assistance putting together their CV and getting ready for interviews. It would be an appropriate time to explain the expectations around participation.

Getting back to work after an injury (ACC.co.nz)

NOTE Your client has a Care Indicator?

If your client has a Care Indicator or you consider them to pose a potential risk to the assessor's safety then you need to clearly outline this in the referral letter and have a conversation with the assessor prior to them contacting the client. You should clearly document this in Eos using the standard template.

ACC > Claims Management > Manage Claims > Service Pages > Specialist Care and Rehabilitation > Vocational, Pain and Assessment Services > Vocational Rehabilition > Vocational Rehabilitation Services (VOC) > Back to Work (BTW) Services Service Page Uncontrolled Copy Only: Version 37.0: Last Edited Wednesday, 10 January 2024 3:41 pm: Printed Tuesday, 30 January 2024 1:49 pm

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5.0 What should you expect from the BTW provider?

- a The BTW service is tailored to meet the client's specific needs, including identifying and addressing barriers to being able to work. The types of activities the provider will complete include:
 - CV preparation, interview preparation and other skill development to assist with obtaining employment
 - arrange or provide training or skill development specific to the work types identified in the IOA
 - services to address functional or psychological barriers to return to work identified in the IMA e.g. education on coping strategies or functional exercise programmes (as needed)
 - Where appropriate, sourcing work trials, obtain acknowledgement of all parties roles and responsibilities during the work trial (employer, client and provider) and monitoring work trial outcomes. (See 7.0 Obtain Work Trial)
 - · workplace modifications to proposed workplaces and equipment trialling to facilitate work trials
 - job placement resulting from a work trial
 - real or simulated work activities
 - · case conferences, where needed.
- **b** The BTW provider will provide ACC with an initial, progress and completion report (mandatory). The provider will send an initial report (ACC7431) within two working days of the initial assessment. This plan should include:
 - Target date / goal completion date
 - · Client goals and timeframes to achieve the outcome
 - · Activities to achieve each goal
 - · Communication plan.

Progress reports are submitted to ACC at a point of upgrade between a stage or more frequently if there are exceptions, such as non-compliance or events which affect the outcome date. A progress report should include a summary of the interventions so far, progress the client has made towards goals to date, whether these goals are still reasonable or need updating, and a clinical rationale as to what further interventions are needed.

A completion report is sent to ACC shortly after the client has achieve the outcome of the BTW service or completed the BTW programme. The completion report should include the goals and outcomes achieved and the activities completed. When you receive a report, you should review it and contact the provider with any questions. Be sure to arrange any additional support being requested eg taxis, training etc.

NOTE BTW stages and funding

Stages 2 does not require prior approval and providers can invoice for stages one and two upfront without prior approval. The provider should still send a progress report detailing what has been achieved in Stage 1 however they are able to access Stage 2 funding without prior approval

If, after completing Stage 1 and Stage 2 the client requires further assistance, the provider will send a progress report to ACC to request additional services. If approved, advise the provider and update the purchase order with the Stage 3 code (VRB13).

If, in rare circumstances, the client requires further assistance after they have completed Stages 1, 2 and 3, the provider may request further vocational rehabilitation services. Approval of additional resources under Exceptional Circumstances should be considered carefully. If in doubt of the appropriateness of exceptional funding, the Recovery Team Member (RTM) should seek clinical guidance. If approved, advise the provider and update the purchase order with the Exceptional Code (VRB14).

Clients can receive Work Specific Functional Rehabilitation in addition to existing vocational services provider. The Supplier may make a request to ACC to provider Initial or Follow Up Functional Rehabilitation Services.

ACC7431 BTW Initial and Progress Report

ACC7980 BTW Completion Report

NOTE Additional Exceptional code requests

Second or third exceptional code/s may be required. The recovery team member should:

1) seek internal clinical advice and if necessary other information such as a VMA/VRR.

2) do a thorough review of the current vocational rehabilitation and its ongoing appropriateness to the Client's recovery plan

If an additional exceptional code is approved, you should add the additional code to the same PO rather than creating a new PO.

NOTE BTW providers need to adhere to specific timeframes. These timeframes are outlined in the Service Schedule.

6.0 Work Specific Functional Rehabilitation

a For Clients receiving Stay at Work, Back to Work and Pathway to Employment Services, Clients can also receive Work Specific Functional Rehabilitation in addition to the vocational services provided.

NOTE Who provides this service?

This service is provided by a Physiotherapist. Support personnel can be utilised to support the delivery of Services. Personal Trainers and Gym Instructors may be utilised to monitor an existing programme but not progress a treatment plan

NOTE Purpose

The purpose of the Work Specific Functional Rehabilitation Service is to provide Clients with timely access to specialist functional assessment, and rehabilitation services to address work specific functional barriers preventing a sustainable return to work. Functional Rehabilitation should not be provided within Stay at Work, Back to Work or Pathways to Employment. Packages of care are billed separately.

NOTE Eligibility

- The client is currently receiving services within either a Stay at Work, Back to Work or Pathways to Employment programme; and
- A work specific functional barrier has been identified and cannot be addressed through gradually introducing work tasks over time, a work trial, alternative duties or with the support of another treating provider; and
- A request for Work Specific Functional Rehabilitation has been approved by ACC.
- Functional rehabilitation may be referred for with the initial referral alongside BTW 1. This would only require another line to be added to the purchase order (initial functional rehab code VRB15).

NOTE Additional

- Work Specific Functional Rehabilitation and specific exercises/cardiovascular programmes can be provided as part of the VRS Contract.
- The VRS service cannot be used to provide 'free' physiotherapy.
- Functional rehabilitation programmes may also be called functional strengthening, functional exercise or cardiovascular programmes.

NOTE What if my client has resumed employment, but still need Functional Rehabilitation?

In cases where the client has resumed employment but is still participating in a functional rehabilitation programme, the functional rehabilitation programme may continue past the completion of the BTW programme. A new functional rehabilitation programme cannot be started after a Client has completed a BTW programme.

If the client started an initial functional rehab whilst under a SAW, BTW or PTE, but has now completed the SAW, BTW or PTE, the same provider can be approved for a follow up functional rehab to immediately follow the initial functional rehab if this is needed to complete the amount of Functional Rehab required to achieve a return to work or vocational independence.

7.0 Obtain Work Trial Service

a Clients receiving Back to Work and Pathway to Employment Services Level Two and above, they can also receive the Obtain Work Trial Service in addition to the vocational services being provided.

NOTE Who provides the service?

This service is provided by a Vocational Consultant, Occupational Therapist or Physiotherapist. Support personnel can be support the delivery of services.

NOTE Purpose

The purpose of the Obtain Work Trial Service is to test a client's capacity for work in an actual workplace which can also lead to permanent employment options or demonstrating work readiness.

NOTE Eligibility

The client is currently receiving services within one of the following:

- · Back to Work Stage 2 or above
- Pathways to Employment

The Obtain Work Trial must also be in a new work type specified in the clients' Initial Medical Assessment as medically sustainable or likely to be medically sustainable.

NOTE What if the client has already had an Obtain Work Trial?

In cases where the client has already had an Obtain Work Trial Service before, additional services require ACC approval.

If an approval is requested, review the request from the Provider.

- Check if any barriers identified in the previous Obtain Work trial have been addressed. If not, these barriers should be addressed prior to approval of an additional Obtain Work Trial
- Check the Obtain work Trial job is a work type stated in the Initial Medical Assessment as currently medically sustainable or likely to be medically sustainable and the client is in the BTW stage 2 or above
- Check the medical certification has been received from the Client's medical practitioner.

If the barriers have been addressed and the eligibility criteria met, consider approving the additional Obtain Work Trial.

8.0 Useful information and tips

NOTE What is an Obtain Work Trial?

An Obtain Work Trial can be utilised during a Back to Work or Pathways to Employment Service.

It is a period of work experience with a new designated employer in a specific work type assessed as appropriate for the Client in the Initial Medical Assessment. The Obtain Work Trial will provide an opportunity for the Client to trial the suitability of some job options, provide an environment where the Client can apply their work skills and abilities, allow the Client to re-establish work routines and provide an opportunity for the Client to develop new skills. During an Obtain Work Trial ACC continues to provide weekly compensation.

NOTE When should the BTW service be put on hold?

You may place a client's vocational rehabilitation on hold for a period. Possible reasons why:

- Exacerbation of the covered injury
- Unexpected treatment for covered injury (eg minor surgery)
- New injury
- · Exceptional personal circumstances.

When putting a client's vocational rehabilitation on hold, it is recommended that you:

- · Only put the service 'on hold' once per claim
- The time applied to the 'on hold' be for a minimum of 4 weeks and a maximum of 3 months.

Where more than one 'on hold' is required, or your agreed timeframes are outside of the recommended timeframes above, please talk to your manager.

When a client resumes their vocational rehabilitation after being on hold, the client re-commences where they left off. The service does not start from the beginning again.

NOTE How do you place the service on hold?

Discuss with the provider putting the service on hold. If you agree to put the service on hold, follow up with an email to the provider stating the date the case will be put on hold and the timeframe for how long the case will be put on hold.

- Add to the Purchase Order, entitlement type: VRSTOP and enter the period for which the vocational rehabilitation service is on hold. You do not need to add any costs to this entitlement type.
- Add the VRGO entitlement type with the start date of when the vocational rehabilitation is expected to come off hold. The end date should be the date the vocational rehabilitation service is expected to end. You do not need to add any costs to this entitlement type.

NOTE Gym Memberships and Pool Passes

It is possible to deliver functional rehabilitation at a local gym, pool or recreational facility but ACC does not pay extra for these.

NOTE Can the BTW report be sent to an employer?

For privacy reasons ACC can only release information related to the client's functional limitations and return to work plan to the employer. The client's private health information must not be disclosed. This being the case, do not send the full BTW reports to employers. Providers are aware of this and have their own templates that they use to inform the employer of a client's return to work plan. For more information on the rules around what client health information ACC can disclose to employers, please see Disclosure of clients' health information to employers.

Stay At Work (SAW) Service Page
Pathways to Employment (PTE) Services Service Page
VOC - Vocational Rehabilitation Service Schedule
VOC - Vocational Rehabilitation Operational Guidelines

Vocational Rehabilitation Services Overview (VOC) Service Page v25.0



Sı	ımmary
Voo not Ow	jective cational Rehabilitation Services (VOC) is a range of services that are designed to assist a client to return to work or where this is possible, prepare the client for employment. [Out of Scope] pert
Pr	ocedure
1.0	Overview of the different Vocational Rehabilitation Services (VOC)
	 Vocational Rehabilitation consist of the following services: Standalone Workplace Assessment – assesses the demands of a client's pre-injury job Stay at Work (SAW) Service – supports clients to return to their pre-injury job Back to Work (BTW) Service – supports clients who are no longer employed to become work ready Pathways to Employment (PTE) – support clients who have complex needs (Usually only partnered recovery). Job Search service – offered to clients to support them to find employment when they are assessed as vocationally independent.
2.0	Key principles of VRS
	 a • Rehabilitation and recovery are best achieved at work. • Early intervention leads to faster recovery. Services are provided with urgency and intensity to achieve optimal rehabilitation outcomes. • Services delivered are flexible and can be tailored to meet the individual needs of each client. Identification and removal of barriers to return to work is essential. In more complex cases, providers use a team to delivery services. • Recovery team members use a collaborative approach that involves the vocational rehabilitation provider, the employer, medical practitioner and any other treating health provider. Good communication between ACC, providers, employer, GP and the client are a cornerstone to working collaboratively towards agreed outcomes. • Services are "outcomes based". It is vital that all treatment and rehabilitation efforts are targeted towards functional outcomes which return to the client to employment or independence.
2.0	NATION IN ADDRESS FOR STATE OF THE PROPERTY OF
3.0	 Who is the service for? a Most clients can return to work without being referred to Vocational Rehabilitation. In these cases, the recovery team members takes responsibility for liaising with the client, employer and other providers to assist the client to return to work.
	However, we can consider providing vocational rehabilitation to any client who has a covered personal injury and is either: • entitled to weekly compensation or Loss of Potential Earnings (LOPE) • likely to be entitled to weekly compensation if we don't provide vocational assistance • no longer entitled to weekly compensation because they've reached the NZ Superannuation Qualifying Age (NZSQA) • on parental leave. This is determined by ACC as requiring a vocational rehabilitation service in order to achieve a specific agreed outcome. We must consider vocational rehabilitation as soon as we decide that a client is likely to be eligible. If a client needs the sup-
	port, we can provide vocational rehabilitation until the client achieves their vocational outcome eg returns to their pre-injury role.
	If the client is not eligible for weekly compensation, and does not meet the above criteria, the client is not eligible for vocational rehabilitation. You can consider referring the client under other services, such as the Training for Independence contract to ad-

dress their rehabilitation needs, as appropriate.

About Vocational Rehabilitation (VR) Policy

4.0 Who is involved in providing Vocational Rehabilitation?

- a Vocational rehabilitation suppliers can use a range of different health or non-health professionals to deliver Vocational Rehabilitation. The wider team includes the certifying medical practitioner, the treating health provider, employer, ACC and any other rehabilitation providers. The supplier's team may consist of the following professionals:
 - · occupational therapist
 - physiotherapist
 - · registered nurse
 - medical practitioner
 - psychologist
 - social worker
 - · career practitioner
 - vocational counsellor
 - · recruitment consultant.
- **b** Roles and responsibilities of the vocational rehabilitation team:
 - Client: is responsible for their own rehabilitation, required to participate.
 - Employer: provides flexibility in terms of modified duties and work hours.
 - Treating provider (GP, physio etc): provides treatment and participating in and supporting the return to work plan.
 - ACC recovery team member: coordinates the overall management of the client's rehabilitation and managing entitlements.
 - Vocational rehabilitation provider: develops a return to work plan in coordination with other members of the team, providing advice on how to achieve the return to work, the benefits of work and facilitating any equipment, modifications and other treatment if required. Vocational rehabilitation providers are expected to build capacity in the client to enable them to manage their own ongoing recovery in the workplace.

5.0 What VRS should you refer for and when?

- **a** Every client is different and we need to take into consideration their individual circumstances and injury related needs when deciding on when to refer for Vocational Rehabilitation Services. Consider the following:
 - the client's injury, their current symptoms and the demands of their role
 - · upcoming treatment such as surgery
 - the client employment eg size of employer, environment, client's job security etc
 - psychosocial factors eg motivation to return to work, fear avoidance etc
 - the client's cultural needs such as Rongoā, the Client may need to address these before commencing vocational rehabilitation
 - not all clients require vocational rehabilitation and we should initially give our clients a chance to recover on their own.
- b If your client is returning to the same type of employment with their same employer use the SAW service.
 - If your client is returning to a temporarily modified job with their current employer use the SAW service.
 - If your client is returning to a different type of employment with their same/previous employer use the SAW service.
 - If your client is returning to the same type of employment with a different employer use the BTW service.
 - If your client is using as many of their pre-injury skills as possible to get employment use the BTW service
 - If your client has complex needs and will require specialised input to achieve one or more of the above outcomes, use the PTE service.

•	If your client is using as many of their pre-injury skills as possible to get employment use the BTW service.
Ž	Stay At Work (SAW) Service Page
1	Back To Work (BTW) Services Service Page
	Pathways to Employment [PTE] Service Page
	,,

6.0 Alternative and related services

- a Clients can and often must participate in other services while receiving vocational rehabilitation. Providers will liaise with the other service providers and ACC to ensure that the client receives consistent messages about their rehabilitation.
 - Listen to the client and their treatment providers to understand if the client needs additional rehabilitation or treatment. If they do, arrange this at the same time as the vocational rehabilitation.
 - If the client is having difficulty managing pain and scores more than 50 on the Orebro, then consider pain management services, but only if the vocational rehab provider agrees this is required.
 - If the client needs help at home due to their injury, then consider social rehabilitation assessments, home help, equipment or training for independence programmes.
 - If the client needs other treatment related to their injury continue to fund other treatment that is required because of the injury, eg surgery, physiotherapy etc.
 - If the client has complex issues that are affecting their return to work, consider the other vocational medical services eg Vocational Rehabilitation Review (VRR) in consultation with the vocation rehab provider.

 If the client may not return to their pre-injury role, consider refe 	erring for an IOA and IMA.
Vocational Independence Journey	

Vocational Medical Services Overview	(VMS) Service	Page

	b Where a client has suffered a mild to moderate traumatic brain injury, the Concussion Service is the lead provider until the client's cognitive symptoms have improved and it is determined that the client is medically able to participate in vocational rehabilitation. You should delay referral to Vocational Rehabilitation Services [VOC] until the Concussion Service Supplier identifies that the client is ready.
7.0	Travel Costs
	a There are travel codes available in the VOC contract for certain services (VRTD5 and VRTT2), but Recovery Team Members do not need to add these to Purchase Orders. 'Contribution to Exceptional Travel Time and Distance' is done automatically if the round trip of a worksite visit exceeds 150km.
	We trust our suppliers to use the closest available provider to the client and to proportion their travel costs when seeing multiple clients. If you have concerns, talk to your supplier to discuss the circumstances.
3.0	VRS related content
	Admin Template - ACC8004 Referral for vocational rehabilitation review – vendor
	a The service schedule and operational guidelines for the Vocational Rehabilitation Services [VOC] contract are available on https://www.acc.co.nz/resources/#/
	Standalone Workplace Assessment Service Page
	Job Search Service Page
	VOC - Vocational Rehabilitation Service Schedule
	VOC - Vocational Rehabilitation Operational Guidelines



REFERENCE

Vocational Independence Journey

Published 6/12/2023

Tīmatanga kōrero | Introduction

Audience: Assisted, Supported and Partnered Recovery

Summary: This page provides the end-to-end view of the Vocational Independence journey with links to helpful resources available to support Recovery Team Members support a client through this journey. If you have any feedback regarding this page, please provide us feedback by filling the form at the bottom of this page.

Click on a link below to take you to a section of the Vocational Independence Journey

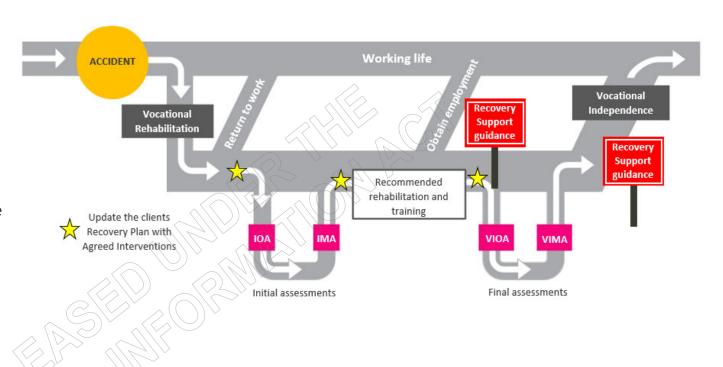
Vocational rehabilitation planning tool Review the Claim Starting Vocational Rehabilitation - t...

Evaluate IOA and IMA Agree on Vocational Rehabilitation a... Evaluate BTW/ PTE services and next...

Request approval to enter Vocational... Vocational Independence entry and...

What is Vocational Independence and why should we use it?

Most clients will be able to recover enough from an injury to return to their pre-injury work, but a small number of clients will need to consider alternative work types due to the lasting effects of the injury on their ability to do the work. In these instances, we may need to help prepare them to be 'work ready' for alternative employment. We call this Vocational Independence. On the right is a visual of the client's Vocational Independence Journey!



Navigate to a section and select the drop-down button for more information on the Vocational Independence Journey

Review the Claim

Before starting the Vocational Independence journey, it is really important that we understand the client's situation and details of their pre-injury employment (job tasks, demands and functional requirements). This information can be found in Welcome Conversation transcripts, Stay at Work reports, or using a Work Type Details Sheet. If clarification is required, consider obtaining a <u>Standalone Workplace Assessment</u>.

We also need to consider if the client should commence Vocational Independence, or whether a different <u>Pathway to Independence</u> is right for your client. Legislation indicates we should refer to IOA/IMA if a pathway other than 'maintain employment' is needing to be considered, (and are otherwise incapacitated), as the first step in preparing the updated rehabilitation plan

If you have identified your client needs support to be 'work ready' for alternative employment, and therefore requires an assessment of their vocational rehabilitation needs, review the <u>Guidelines for when to refer for the IOA and IMA</u> and <u>Initial Occupational Assessment</u> (<u>IOA) Service Page</u> Process Manager page for guidance around when to begin the Vocational Independence journey.

It is important to note we can begin the Vocational Independence journey for a client while still supporting them to return to their preinjury employment.

During this journey, the client can return to work or obtain employment at any point. We also need to confirm at each step that any ongoing incapacity is due to the covered injury. We also need to confirm at each step that any ongoing incapacity is due to the covered injury.

Starting Vocational Rehabilitation - the initial assessments

There are three critical elements to this stage of the Vocational Independence journey. The <u>Vocational independence assessment</u> checklist can be used as a reference at this point to ensure the key steps are completed:

1. Discussing the end-to-end process with the client

2. Updating and providing the client a copy of their Recovery Plan

It is a requirement that the Recovery Plan is updated to record the referral to the IOA and IMA as agreed interventions, and if appropriate update the Recovery goal (ie. it has been

This discussion is critical to setting good expectations up front about what the journey looks like for the client. Using the "Assessing the Vocational Pathway" Guided conversation in Salesforce will ensure you work through the important information with your client.

The client should understand the following:

- Their <u>Rights and Responsibilities</u> while being supported by ACC.
- The potential end to end journey including each assessment that they could have completed (IOA, IMA, VIOA and VIMA).
- The intention of each of these assessments (IOA, IMA, VIOA, VIMA) in the vocational rehabilitation journey and how these are completed.
- An assessment will be arranged of their vocational rehabilitation needs to identify their potential rehabilitation paths and suitable employment options.
- Internal advice (Recovery Support) will be sought during the Vocational Independence journey and why.
- The final assessments in the Vocational Independence journey: Vocational Independence Occupational and Medical Assessments.
- Implications for their weekly compensation if they achieve Vocational Independence.

You may find reviewing the information in the <u>Vocational</u> <u>Independence Factsheet</u> before starting the conversations helpful for having this discussion.

It's important that your conversation with the client is clearly documented in Salesforce and reference to this made in the Life Areas; Using the "Assessing the Vocational Pathway"

determined that the client is not likely to regain the functional ability to return to their pre-injury employment).

The clients agreement to this plan, where this has been discussed, is to be noted in Salesforce. A copy of the updated <u>Recovery</u> <u>Plan</u> needs to be sent to the client (via their preferred method of communication).

Recovery Plan For: Jemima Puddleduck

Claim number: ACC Team Member: Joe Bloggs
Date of accident: Recovery Goal: Return to my pr

Recovery Goal: Return to my pre-injury

Occupation: (if applicable): Vineyard Worker

Recovery Goal target date: 14/08/2022

juries:

Personal Goal: To spend 2 days a week at the park

Open wound of finger(s) or thumb

Personal goal target date: 14/08/2022

Agreed Intervention	Description and Outcome	Expected Outcome Date	Status
Initial Occupational Assessment	Description: To identify which job types I could do based on my skills and work history		Open
Initial Medical Assessment	Description: To identify which jobs from the Initial Occupational Assessment are currently / likely medically sustainable		Open

3. Arrange the Vocational Rehabilitation referrals

- To arrange an Initial Occupational Assessment (IOA) refer to the Process Manager page <u>Arrange Initial Occupational</u> <u>Assessment (IOA)</u>.
- To arrange an Initial Medical Assessment (IMA) refer to the Process Manager page <u>Arrange Initial Medical Assessment</u> (IMA).

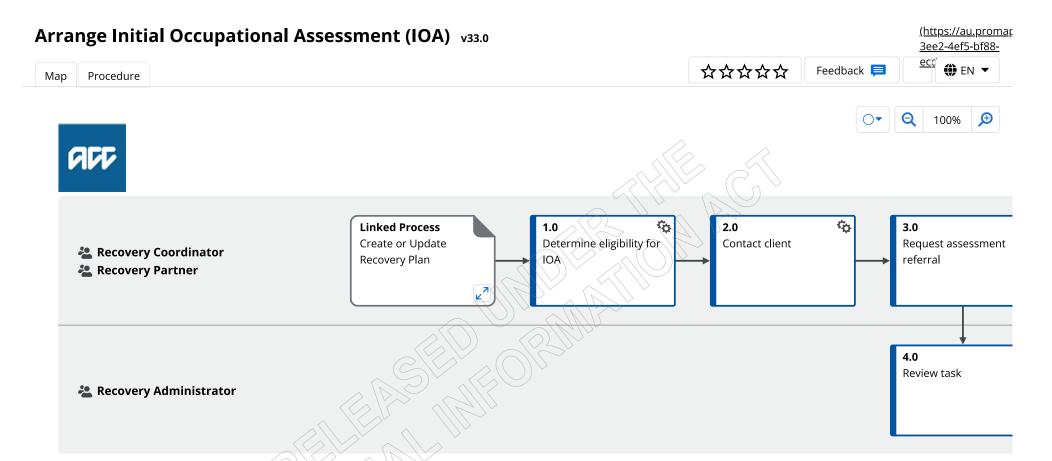
guided conversation in Salesforce will help ensure these keys points are discussed and documented correctly.

Note: If an Initial Occupational Assessment is approved and arranged then this fact sheet will be sent out to the client with the approval letter.

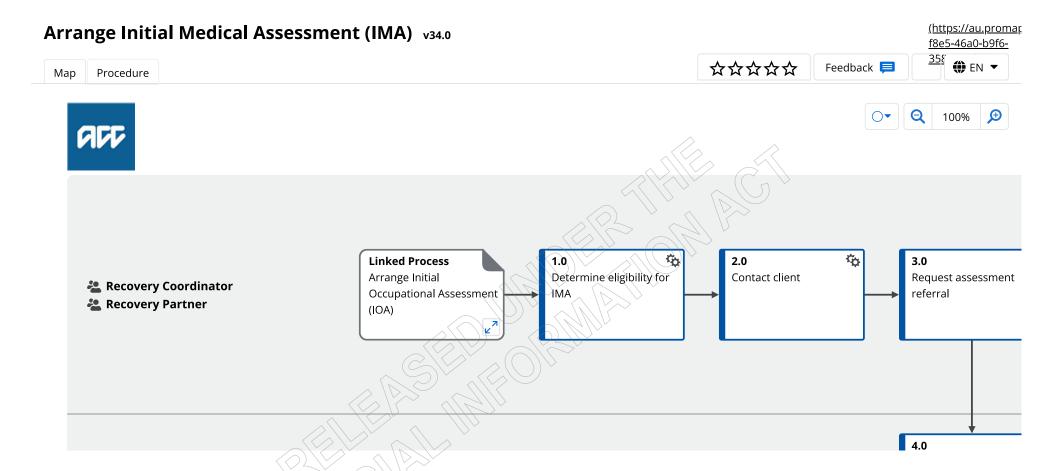
Evaluate the Initial Occupational and Medical Assessments

Here you will review the Initial Occupational Assessment (IOA) and the Initial Medical Assessment (IMA) reports and start completing the "Confirming the Vocational Pathway" Guided Conversation to note down all recommendations for the medically sustainable, or likely sustainable jobs.

Upon receipt of the IOA refer to section 6.0 on the <u>Arrange Initial Occupational Assessment (IOA)</u> Process Manager page to review and evaluate the report.



Upon receipt of the IMA refer to section 6.0 on the <u>Arrange Initial Medical Assessment (IMA)</u> Process Manager page to review and evaluate the report.



Once you have reviewed the Initial Occupational Assessment (IOA) and Initial Medical Assessment (IMA) reports, generate the "Confirming the Vocational Pathway" Guided conversation in Salesforce to summarise the outcome of the IOA and IMA to assist with planning vocational rehabilitation (VR) with the client. Once completed, follow the guided conversation to discuss the outcome with your client.

Use the <u>Vocational Rehabilitation Planning Tool</u> as a guide to confirm each key step is completed.

Vocational Rehabilitation Planning Tool

Use this tool to summarise the outcome of the Initial Occupational Assessment (IOA) and Initial Medical Assessment (IMA) and to assist with planning vocational rehabilitation (VR) with the client.

Summary of IOA/IMA			
Has the IMA assessor indicated that the client has rega employment?	ained fitness for their pre-injury		
If yes, consider if a section 103 assessment is appropri	iate.		
See - 5.0 \$103 referral following an IMA			
(https://qo.promapp.com/accnz/Process/Minimode/Permalink/DIOLkxFXEd1vwcmHAyTRMn)			
Work types identified in the IMA as <u>currently</u> medically sustainable	VR needs (identified in the IOA/IMA) specific to each work type		
Cafe Worker (ANZSCO 431211)	Is vocationally ready for this work type option		
Waiter (ANZSCO 431511)	Is vocationally ready for this work type option		
Secretary (ANZSCO 521211)	Computer assessment / training Computer assessment / training, EFTPOS training, Sales Training Course		
General Clerk (ANZSCO 531111)			
Receptionist (General) (ANZSCO 542111)	Computer assessment / training, Telephony Course		
Medical, Receptionist ANZSCO 542114	Computer assessment / training, Audio Transcription		
Data Entry Operator (ANZSCO 532111)	Computer assessment / training		
Work types identified in the IMA as <u>likely to be</u> medically sustainable			
Work Processing Operator ANZSCO 532113	Is vocationally ready for this work type option		
Other vocational barriers and/or recommendations identified in the IOA (e.g. literacy, criminal convictions			
	r's license (currently on a restricted licence) which ma		
A forklift licence may also be beneficial to aid with General Clerk roles.			
Other vocational barriers and/or recommendations idea	ntified in the IMA (e.g. pain, low mood)		
	erked ner back. I recommend that the functional		
"Jemimah would also benefit from gaining her full driver's license (currently on a restricted licence) which increase her employment potential. A forklift licence may also be beneficial to aid with General Clerk roles". Other vocational barriers and/or recommendations identified in the IMA (e.g. pain, low mood) "She is currently undergoing a gym programme which she says is helping and is due for a follow up with XXXX in September and possibly may require a further epidural injection as the effect of the one that she had was counteracted when the dog she was walking jerked her back. I recommend that the functional strengthening continue for Jemimah".			

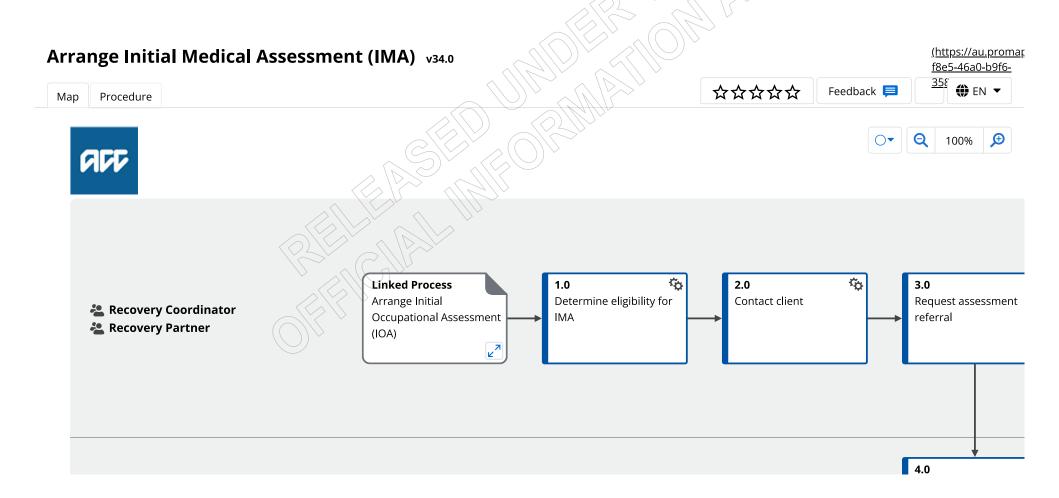
Not all clients will proceed through the full Vocational Independence journey, some clients will gain full employment or their entitlement may end for other reasons.

^ Agree on Vocational Rehabilitation and updated Recovery Plan

There are three critical elements to this stage of the Vocational Independence journey:

1. Discussing the outcome of the assessments and recommended rehabilitation and training with the client

The outcomes of the IOA/IMA should be discussed with the client using the "Confirming the Vocational Pathway" Guided conversation. The Recovery Plan (RP) and which Vocational Rehabilitation needs we agree to support should be negotiated with the client and recorded in the client's <u>Recovery Plan</u>. This should contain clear details of what has been agreed. Refer to section 7.0 on the <u>Arrange Initial Medical Assessment (IMA)</u> Process Manager page for information to be discussed with the client.



2. Updating and providing the client a copy of their Recovery Plan

It is important (and a legislative requirement) that the client's agreement to participate in the agreed vocational rehabilitation is noted in Salesforce, recorded on their <u>Recovery Plan</u> and a copy of the Recovery Plan is sent to the client (via their preferred method of communication).

After being updated, the printed copy of the Recovery Plan should look like the following:



Recovery Plan For: Jemima Puddleduck

Claim number: LEGACY_CASE_ID ACC Team Member: Joe Bloggs

Date of accident: [DOA] Recovery Goal: Return to an alternative

work type

Occupation: (if applicable): Vineyard Worker

Injuries:

Recovery Goal target date: 14/08/2022

Personal Goal: To spend 2 days a week at the park

Open wound of finger(s) or thumb

Personal goal target date: 14/08/2022

Agreed Intervention	Description and Outcome	Expected Outcome Date	Status
Initial Occupational Assessment	Description: To identify which job types I could do based on my skills and work history Outcome Summary: The Initial Occupational Assessment identified suitable work types based on skills, training and work experience	01/12/2021	Complete
Initial Medical Assessment	Description: To identify which jobs from the Initial Occupational Assessment are currently / likely medically sustainable Outcome Summary: The Initial Medical Assessment identified suitable work types from my Initial Occupational Assessment which are, or are likely to be, medically sustainable: Cafe Worker ANZSCO 431211 Waiter ANZSCO 43151 1 Secretary (General) ANZSCO 521211 General Clerk ANZSCO 531111 Work Processing Operator ANZSCO 532113 Receptionist (General) ANZSCO 542111 Medical, Receptionist ANZSCO 542114 Teachers Aid ANZSCO 422116 Data Entry Operator ANZSCO 53211	19/01/2022	Complete
Back to Work	Description: To support me to regain capacity for my pre-injury work type, obtain employment, or to become vocationally independent		Open

3. Arrange the appropriate vocational rehabilitation referral

To determine the most appropriate Vocational Rehabilitation Service - refer to the Process Manager pages <u>Back to Work Services</u> or <u>Pathways to Employment Services</u>.

- To arrange Back to Work Services refer to the Process Manager page Set Up Back to Work Support.
- To arrange Pathways to Employment Services refer to the Process Manager page Set Up Pathways to Employment Support.

Evaluate Back to Work / Pathways to Employment Services and next steps

Review and discuss the Back to Work (BTW) or the Pathways to Employment (PTE) Services Initial Plan report with your client to ensure the recommended vocational rehabilitation has been tailored to meet the client's specific needs (as noted within the as noted within the "Confirming the Vocational Pathway" Guided conversation) to assist the client to become 'work ready' in the medically, or likely medically, sustainable roles.

If you have implemented a:

Back to Work (BTW) Services	Pathways to Employment (PTE) Services
The provider will outline the type of activities to be completed and goals achieved as per section 5.0 on the Back to Work (BTW) Services Service Page.	The provider will outline the type of activities to be completed and goals achieved as per section 4.0 on the Pathways to Employment (PTE) Services Service Page.

If the client has regained their fitness for their pre-injury employment, follow the <u>Arrange Section 103 Assessment</u> Process Manager process.

If the client has not regained fitness for their pre-injury employment, review the claim thoroughly to consider if Vocational Independence is appropriate for your client. Use the <u>Vocational independence assessment checklist</u> to help with this.

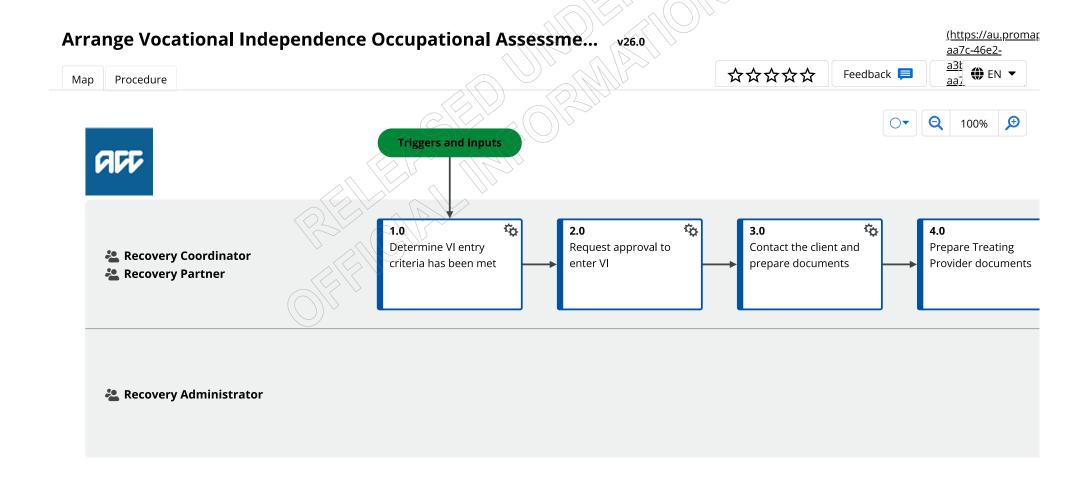
If Vocational Independence is the next appropriate step, explain to the client that internal Recovery Support guidance will be obtained to determine if their vocational rehabilitation is complete and approval sought to enter Vocational Independence.

Refer to section 1.0 on the <u>Arrange Vocational Independence</u> <u>Occupational Assessment (VIOA)</u> Process Manager page.

Request approval to enter Vocational Independence

Once you have completed a claim review, and had a client discussion and updated the <u>Recovery Plan</u>, seek approval from <u>Recovery Support</u> (by completing the ACC191) to enter Vocational Independence.

Refer to section 2.0 on the <u>Arrange Vocational Independence Occupational Assessment (VIOA)</u> Process Manager page to request approval.



Vocational Independence entry and referrals

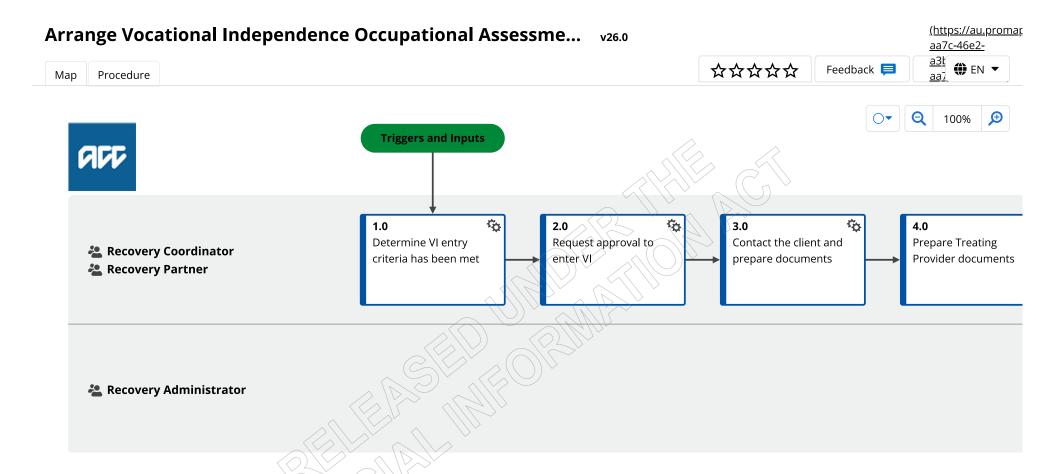
If you have received approval to enter Vocational Independence for your client, you will now be able to implement the Vocational Independence Occupational and Vocational Independence Medical Assessments.

Important steps to cover during this step of the journey include:

1. Discuss understanding of the full process with the client

Contact the client to discuss entry into <u>Vocational Independence</u>, reiterate the full end to end Vocational Independence journey, including the implication that their weekly compensation may cease if they are found to achieve Vocational Independence, and discuss the documents as per section 3.0 on the <u>Arrange Vocational Independence Occupational Assessment (VIOA)</u> Process Manager page.

The Vocational Independence Medical Assessment can also be scheduled for the client at the same time.



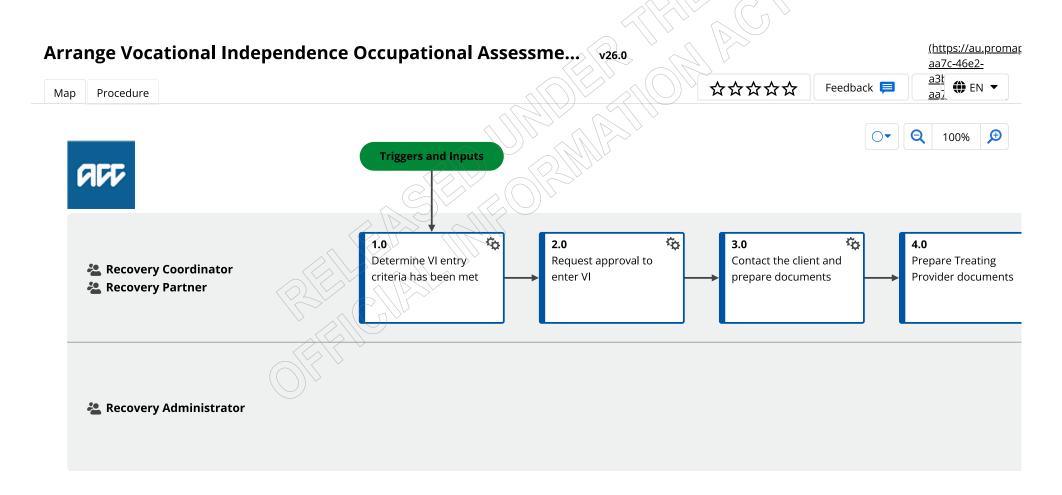
2. Complete the appropriate Vocational Independence referrals

- To arrange an Vocational Independence Occupational Assessment (VIOA) refer to the Process Manager page <u>Arrange Vocational Independence Occupational Assessment (VIOA)</u>.
- To arrange a Vocational Independence Medical Assessment refer to the Process Manager page <u>Arrange Vocational Independence Medical Assessment (VIMA)</u>.

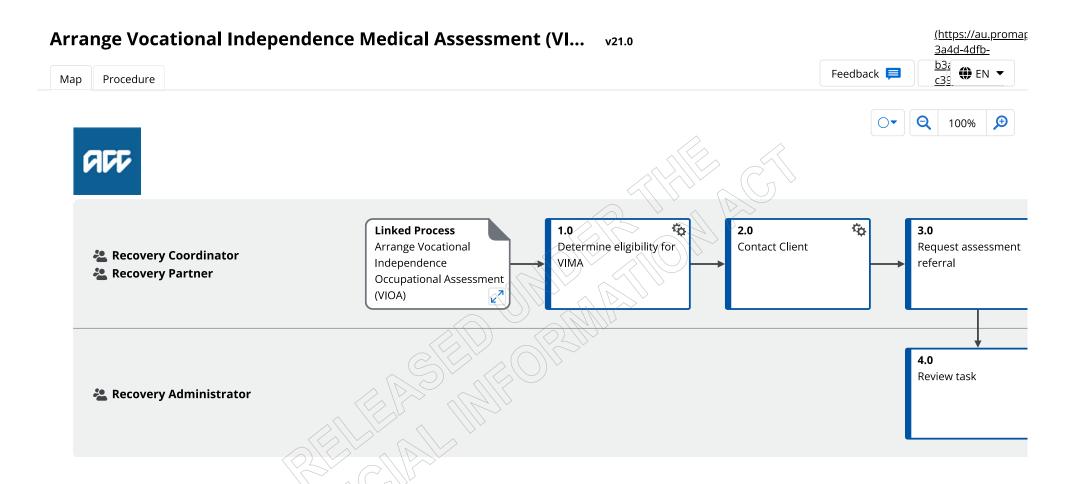
Evaluate the Vocational Independence Occupational and Medical Assessments

Here you will review and evaluate the Vocational Independence Occupational Assessment (VIOA) and Vocational Independence Medical Assessment (VIMA).

Upon receipt of the Vocational Independence Occupational Assessment click on section 9.0 of the process below to review and evaluate the report.



Upon receipt of the Vocational Independence Medical Assessment click on section 6.0 of the process below to review and evaluate the report.

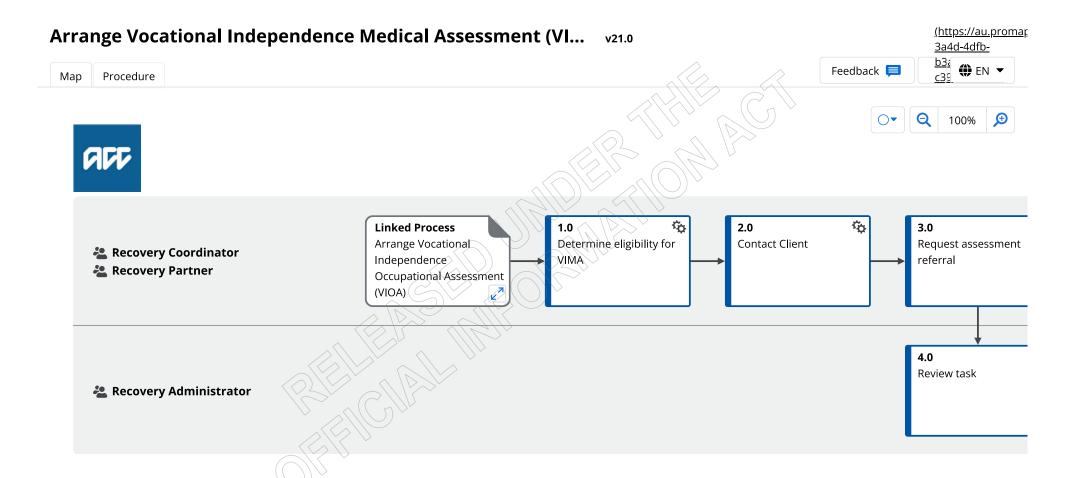


Request approval to exit Vocational Independence

Once you have reviewed the Vocational Independence Assessments (VIOA and VIMA), you need to seek sign off from <u>Recovery Support</u> (by generating the ACC198) that the client is vocationally independent before issuing a decision to the client.

Before seeking sign off ensure all key steps have been completed by reviewing the Vocational independence assessment checklist.

Refer to section 7.0 on the <u>Arrange Vocational Independence Medical Assessment (VIMA)</u>. Process Manager page to request an approval for a Vocational Independence exit.



Once the Recovery Support guidance has been completed you will discuss the next steps with your client and issue the Vocational Independence decision.

Issue Vocational Independence decision

Here you will discuss the completed Vocational Independence Occupational and Medical Assessments (VIOA and VIMA) and the Vocational Independence outcome with your client as per section 8.0 on the <u>Arrange Vocational Independence Medical Assessment (VIMA)</u> Process Manager page.

It may be helpful at this point to refer client back to the <u>Vocational Independence Factsheet</u> to discuss the supports available during their 3 months' notice period of Weekly Compensation.

