

09 March 2022

Kia ora



#### Your Official Information Act request, reference: GOV-016741

Thank you for your email of 14/02/2022, asking for the following information under the Official Information Act 1982 (the Act):

- 1. The Accident Compensation Act 2001 has specific requirements for ACC in regard to Individual Rehabilitation Plans. (Sections 75-78 and Schedule 1 Parts 7-10.)
- 2. Please provide the policy, guidelines, any claim management processes and any client forms/letters for Individual Rehabilitation Plans including preparation, development, agreement and maintenance.

#### Please find attached the following policy documents related to your request.

These documents have been sourced from our policy and process software, Promapp.

- Track Recovery policy
- Recovery Plan policy
- Create or update Recovery Plan policy
- Conduct Recovery Check-in conversation policy
- Issue Recovery decision policy
- Individual Rehabilitation Plans policy
- About Vocational Rehabilitation policy
- Arrange Vocational Rehabilitation review assessment
- Planning Vocational Rehabilitation post IOA/IMA policy
- Needs assessment for Social Rehabilitation policy
- Arrange Social Rehabilitation Needs Assessment
- Manage non-compliance

We have also provided for you the following Next generation case management guideline documents:

- Recovery plan baseline
- Completing a recovery plan

We have also provided you with the following claim forms:

- ACC1501 Individual Rehabilitation plan form for lifetime rehabilitation
- ACC091 Initial Individual Rehabilitation Plan form

On 23 February 2022, you confirmed you did not require staff names; therefore, these have been removed from the documents.

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

ACC has decided to proactively release 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 <a href="https://www.acc.co.nz/resources/#/category/12">www.acc.co.nz/resources/#/category/12</a>.



#### If you're concerned about this response, please get in touch

You can email me at <a href="mailto:GovernmentServices@acc.co.nz">GovernmentServices@acc.co.nz</a>.

If you are not happy with this response, you can also contact the Ombudsman via <a href="mailto:info@ombudsman.parliament.nz">info@ombudsman.parliament.nz</a> or by phoning 0800 802 602. Information about how to make a complaint is available at <a href="https://www.ombudsman.parliament.nz">www.ombudsman.parliament.nz</a>

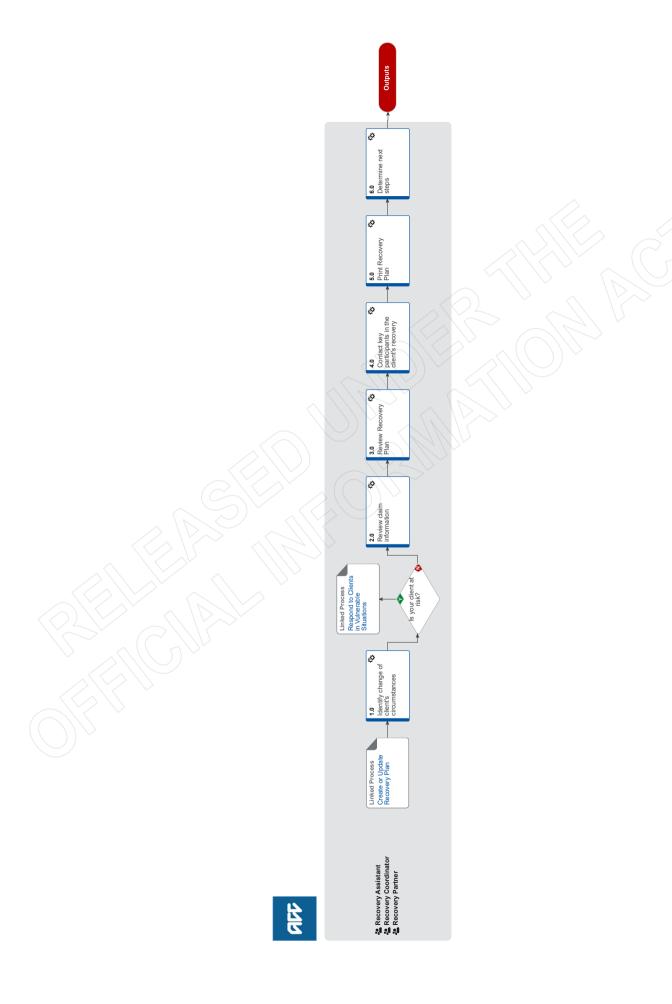
Ngā mihi

Sara Freitag

**Acting Manager Official Information Act Services** 

Government Engagement & Support





### Track Recovery v35.0



#### Summary

#### Objective

To ensure we are effectively tracking how a client's recovery is progressing. The process identifies the steps to determine if and what intervention is required to progress a client's recovery when their circumstances change.

It allows us to be proactive in a client's recovery, including identifying if a client is in a vulnerable situation, eg there is a potential threat to their safety, health, or wellbeing. If you're working on someone's claim and recognise the signs that they may be in a potentially vulnerable situation, you must immediately report your concerns to your manager so decisions can be made about reducing the chances they will come to harm.

#### Background

Track recovery identifies changes that occur during the different stages of recovery. Injury recovery can proceed through four key stages: acute, rehabilitation, adaption and stable. Healing can progress backward or forward depending on internal and external factors.

In many circumstances when the Recovery Plan is created, the client circumstances change, for example the client is not coping with job loss, is suffering pain, or there are concerns and/or requests for supports or information. Track recovery identifies the triggers that will help us to proactively respond to a client's needs and take the required action or interventions. There are many different types of referrals and assessments and each one of these has an opportunity to proactively inform when intervention is required. Examples include treatment reports, vocational rehabilitation and independence reports, social rehabilitation, inbound contact, eg regarding a change of circumstances, such as not managing, job loss, pain, concerns and/or requests for supports, or information received indicating ACC or a client may be in breach of legislative compliance, such as code complaints, review, fraud, etc.

While providing support to our clients, we may identify that they are at risk. It is important to understand how to respond to vulnerable situations. Vulnerable situations for clients come in many forms. Sometimes the potential for harm comes from the addictions, mental health conditions, or aggressive or anti-social behaviours the person exhibits. Sometimes it is the person's poor health or medical conditions in combination with the conditions they're living in. Sometimes the potential harm comes from others the person is living with.

Owner [Out of Scope]
Expert

**Procedure** 

PROCESS

Create or Update Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner

#### 1.0 Identify change of client's circumstances

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Receive information for changes in circumstances via email, fax, inbound mail, digital, face to face or phone call from the client, providers, vendors, general practitioner (GP), employer, family members, whanau, associates, safe contact person, clinical staff member or advocate.

### NOTE What information can indicate a change in circumstances?

- recovery milestones are not met
- · updated or new supports required
- · change in diagnosis
- additional diagnosis
- needs and level of support from ACC has increased or decreased
- · client is planning to return to work
- change in employment circumstances
- recovery complication, ie infection.
- a new ACC18 has been received post the client returning to work
- client has been transitioned to a different Recovery Team
- · new claim received

## NOTE What if the change of client circumstances is a new claim being received that requires cover to be assessed?

Refer to the GUIDELINES Assessing claim for cover in Recovery Team to identify the actions you will need to complete on both claims.

## NOTE What if you receive information that confirms a client is no longer entitled to receive a support or entitlement?

Go to Stop Supports.

PROCESS Stop Supports

GUIDELINES Assessing claim for cover in Recovery

### NOTE What if the client's claim is in Enabled Recovery?

Clients streamed to Enabled Recovery do not require a Welcome Conversation and can self manage by either using MyACC or by calling us when they need support.

If a client calls us to set up weekly compensation or supports, you can set up these for them by completing (only) the relevant sections of the Welcome Conversation in Salesforce, however please encourage them to continue to self-manage via MyACC.

If a client is having trouble with MyACC, go to MyACC for Client process to support them.

#### Task management

It is not mandatory to have an open task or Recovery Plan on Enabled claims. If you receive a task via Salesforce such as MyACC or Electronic Medical Certificate, you would action the request appropriately and then close the task in Salesforce.

If you are unclear on whether the client should be in Enabled or Assisted Recovery, refer to the transition guidelines in Transition Claim process.

PROCESS MyACC for Client

### NOTE What if you receive information from Integrity Services?

Integrity Services might pass on information they receive about a client that doesn't warrant an investigation from them but may be useful for the management of the client's recovery.

In these cases, you will receive a "Contact Party" task from Integrity Services, requesting that you contact them to discuss the information. After discussing with Integrity Services, you can continue to follow the Track Recovery Process to determine how to proceed, as with any new information received about a client.

It is crucial that you do make and maintain contact with Integrity Services when acting on information that they have passed on. While it may not be a matter as serious as fraud, there still may be a delicate situation that Integrity Services can advise you how to handle. For example, it is important that you do not breach the anonymity of whoever has provided the information when in contact with the client.

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#### Is your client at risk?

Recovery Assistant, Recovery Coordinator, Recovery

YES....

PROCESS Respond to Clients in Vulnerable

NO.... Continue

#### 2.0 Review claim information

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Decide if the client is being supported in the most appropriate way for their goals and needs.

## NOTE What if information indicates the claim needs to be transitioned to another Recovery Team?

Go to Transition Claim process to determine if the claim should be transitioned.

PROCESS Transition Claim

- **b** Review client information:
  - · Check if the client has an identified language need.
  - Confirm who is the best person to speak with. If your client has a complex injury, this may be family/whanau, a clinical staff member or a safe contact person.
  - Review recent contacts to minimise the client repeating themselves.
- **c** Review the medical certificate details:
  - Check if the client is employed, and whether they are off work or currently working.
  - Review medical certificates and understand how their recovery is progressing.
  - Understand the Expected Claim Outcome (ECO) for the client's injury.

Refer to the information below - Supporting Recovery at work - to consider how to support your customer at work.

Supporting Information - Supporting Recovery at

## What if the medical certificate indicates a change to your client's ability to work, including a return to full-time work?

In Eos, update the incapacity details to ensure weekly compensation payments are correct. For details about eligibility and steps to follow, go to the Maintain Weekly Compensation process.

PROCESS Maintain Weekly Compensation

### NOTE What if the client is planning to return to work part-time?

In Eos, review and update the incapacity details to adjust weekly compensation details. Review income and weekly compensation details to adjust amount paid going forward. Go to the Manage Abatement in Eos process.

PROCESS Manage Abatement in Eos

### NOTE What if the medical certificate indicates this is a subsequent incapacity?

Refer to the Policy below to determine this is a 'Date of Subsequent incapacity.

If eligible, go to Conduct Recovery Check-in Conversation process.

PROCESS Conduct Recovery Check-in Conversation

Subsequent Inability to Work (Subsequent Incapacity)

# NOTE What if the provider indicates on the medical certificate 'Support needed to stay at work/ return to work'? (Task 'AUTO Alert: RTW Request - ACC18 Incapacity' or 'AUTO Alert: RTW Request - ACC18 No Incapacity)

- Contact provider to discuss request if it isn't clear what they are asking for
- Check the claim to see if vocational rehabilitation support is already in place and that client is eligible.
- If the client already has vocational support in place then you do not need to do anything else with

this request and the task can be closed with no further action.

Consider the following actions and decide which is most appropriate for your client:

• If there is no support in place and the client and employer are managing a return to work between

themselves, consider checking in on how this is going and whether they need further support.

 If this is a change in incapacity for the client; if they have moved from 'fully unfit' to 'fit for selective

work' then this could suggest vocational rehabilitation is ready to begin. Consider whether they need our support to do this.

 If the client has the functional capacity to engage in return to work activities. Do the client and

employer need support to explore this?

- Consider whether your client still holds employment. This will determine what type of vocational support we put in place if any is needed.
- Ensure to close the loop with the certifying treatment provider via email if you haven't had contact

yet to say what you've done following their med cert

If Stay at Work support is required:

	NOTE	What if the provider indicates on the medical		C	Review	v open tasks.
		certificate 'Clinical Review of Patient's fitness for work needed'? (Task 'AUTO Alert: RTW Request - ACC18 Incapacity' or 'AUTO Alert: RTW Request - ACC18 No Incapacity')			NOTE	What are the Task Management Principles? Refer to the Recovery Management Guide for these principles.
		• Review the cover on the claim and whether we are clear on the reason for the clients ongoing			NC	G GUIDELINES Recovery Management
		incapacity.  • Contact the certifying treatment provider to understand what their concerns are and what they	4.0	Re		key participants in the client's recovery Assistant, Recovery Coordinator, Recovery
		feel needs to be addressed.  • Once the concerns/barriers are clear, consider		а	Receiv	e tasks.
		what ACC interventions might overcome these barriers.			NOTE	What to consider for outgoing call interactions?
	NOTE	<ul> <li>certificate 'ACC to contact me'?</li> <li>Contact the provider to understand their request</li> <li>In Salesforce, create a contact action</li> </ul>				Almost all our outgoing call interactions are planned, and we are reminded to have these interactions through tasks. These are often scheduled contact tasks, with information to support the interaction.
		<ul> <li>Record outcome of the conversation in the contact action</li> </ul>		b	Prepar	e for interaction.
		What if you are unable to contact the provider?     In Salesforce, create a future contact action			NOTE	Why do we need to prepare before holding a interaction?
		- Record the provider name and reason for the contact, ie 'ACC18 indicated ACC to contact (insert provider name), unable to contact provider,				Before we speak with a key participant it is important to ensure we have authority from the client and have checked the safe contact, this helps us to start thinking about:
		follow up contact with provider required - Set due date for 5 working days.				1) the information we want to share     2) the information we need to collect
	d Davienn					3) what we might want to ask during the call
•		or confirm existing cover decision(s). Cover must ewed whenever you receive new information or a				4) what support the client might need at this
	request	for an additional entitlement. This can occur at				stage in their recovery 5) check if there is an alternative or a safe con-
	any sta	ge during the life of a claim.				tact.
	NOTE	What do you need to consider?				If you need to gather further information, refer to
		Understand what the injury is and how it happened.      Use there been a change in diagnosis?				the web link below.
		<ul><li> Has there been a change in diagnosis?</li><li> Is there an additional injury on an existing</li></ul>				ather Additional Information or Advice
		claim?		С		nine if a face-to-face meeting is required.
		For more information on the 'Confirm existing			NOTE	What are the guidelines if the conversation is to be a face-to-face conversation?
		cover decision', refer to the web link below.				Assess the suitability of having a face to face meeting. Go to the process below, and refer to
		nfirming Existing Cover Decision				Client Face to Face Meetings guidelines to determine if a meeting is required.
3.0 I	Review I	Recovery Plan				PROCESS Arrange Face to Face Client
F		Assistant, Recovery Coordinator, Recovery		4	In Colo	Meeting sforce, if you have identified that you will be col-
	a In Sales	sforce, review the Recovery Plan details and he client is in their recovery, eg the client's goals,		u	lecting	medical or other information, confirm that the last provided authority.
	Recove	ry status life area details including their current				ew Client Consent
		ent plan, supports, work status, medical certificates				What if the client has not granted ACC au-
	check o	y potential recovery obstacles that you will need to on.			NOIL	thority to collect medical and other records?
ı	journey	any obstacles. During the client's rehabilitation, there may be flags or barriers that can potentially on their recovery pathway. When we identify				You will need to obtain the client's authority to collect medical and other records. Go to the process below.
	these, t	hey are known as obstacles. These should be n the Life Areas in Salesforce.				PROCESS Obtain Client Authority to Collect Information
	NOTE	How do you identify flags and barriers?		е		t the participant and initiate the interaction. If con-
		Refer to the 'Identifying obstacles to recovery' section of the Recovery Management Guide for details.			(ATA) f	a participant or a person with Authority to Act or them, perform the relevant identity check to n you are speaking to the right person.
	□ NG	GUIDELINES Recovery Management			∐ ld€	entity Check Policy
	NOTE					
		Go to Transition Claim process for further information.				
		PROCESS Transition Claim				

# NOTE What if the participant advises they are unable to have the conversation now, or during the conversation they are unable to continue?

Agree a date to continue, and update the due date in the task to this date. Add a note in the description field of the task advising the conversation was paused and needs to be completed.

## NOTE What if the client's employer is a Third Party Administrator or an accredited employer? Go to the process below.

PROCESS Transfer Claim to Accredited Employer (AE) or Third-Party Administrator (TPA) Service

#### NOTE What if you can't establish contact?

- Attempt a maximum of 2 contacts over 2 full working days before leaving a voicemail or sending a notification to request client contact.
- If you are unable to reach the client, extend the task for additional 2 working days and note in the task description that this is the 2nd attempt to contact the client.
- On the task due date and if there is been no response from the client to the voicemail or notification, send the CM04 Advise client that you were unable to reach then by phone letter.
- Extend the task date as appropriate to take into account postal delivery and note in the task description this is the 3rd attempt to contact the client and the CM04 letter has been sent.
- On the task due date and if there is no contact from the client and they are continuing to receive support, seek internal guidance to determine next steps.
- If you're in Partnered and no contact is made with the client after three attempts, you must contact the provider, GP or other verified contact on the claim.

What to say in a voicemail message
Decline Entitlement When Client is Non-compliant Policy
CM04 Advise claimant that you were unable to reach them by phone

#### NOTE How can you confirm client contact details?

Consider the following options:

- check details on the ACC45
- check the latest ACC18
- · contact the client's treating provider
- contact the client's employer.
- f Identify any obstacles.

Obstacles may be identified during a conversation with a client, provider or employer or via correspondence received, such as medical reports, provider assessment reports or emails. We can also identify psychosocial obstacles through asking the 'How are you coping gauge' questions.

#### NOTE Identifying obstacles during interactions

Client – Each communication with our client, either verbal or written, is an opportunity to identify any obstacles that have arisen during the client's journey. Our interactions with our clients need to be proactive and outcome focused, not process driven, so that we can build a valuable relationship with our clients. This results in them getting the right support from us at the right time to address any obstacle.

Provider – Providers play an essential role in a client's recovery. We empower the provider and give them a clear understanding of the client's treatment and support. Providers, as part of their role, are continually assessing and treating clients. They gather valuable information by identifying obstacles. From time to time we will refer to providers to help us address the obstacle.

Employer – Employers play an essential role in being the gatekeeper to re-entering the place of employment. By encouraging the employer to become involved in the rehabilitation planning, they can communicate with us any past and/or present examples of obstacles they have encountered.

#### 5.0 Print Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner

a If your client has requested a copy of their Recovery Plan, confirm how they want to receive this.

Ensure that the client has agreed to each specific intervention in the Recovery Plan. Agreement to interventions must be evidenced in contact notes either following discussions with the client/ATA or email. This means that the client's signature is not required on the printed Plan.

An employer must be given an opportunity to participate in the preparation of the Recovery Plan, however it does not mean they need to see a copy of the plan. Ensure you do not show any sensitive client information to the employer. Check all auto-populated fields and remove data as necessary. Where there is a sensitive claim we must follow directions by the client and not involve the employer.

**b** Generate a copy of the Recovery Plan for the client.

### NOTE How do you generate a copy of the Recovery Plan?

Click Send PDF to Eos on the Salesforce Recovery Plan.

Result: This will generate ACC7979 form.

**c** Arrange to send your client a copy of their Recovery Plan.

### NOTE What if the client wants the Recovery Plan sent to them by email?

Follow the Emailing from Eos – System Steps.

NGCM - FINAL Emailing from Eos - System Steps

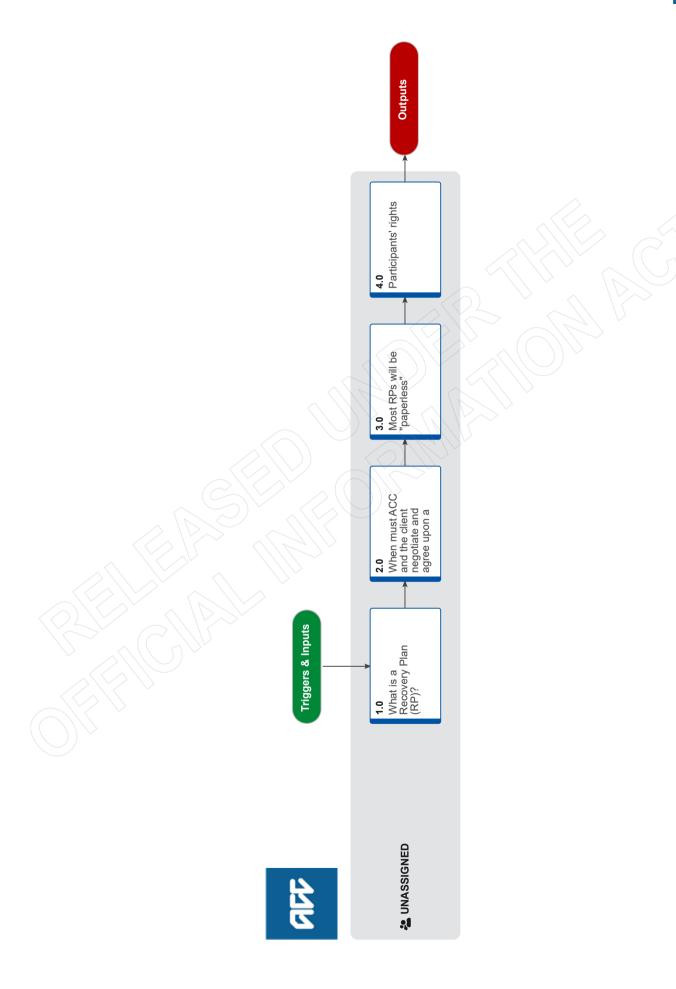
### NOTE What if the client wants the Recovery Plan sent to them by mail?

Refer to the NG GUIDELINES Sending Letters in NGCM.

NG GUIDELINES Sending Letters in NGCM

6.0	Determine next steps Recovery Assistant, Recovery Coordinator, Recovery Partner			NOTE	What if you need to set up weekly compensation for the client?  Go to the Request Set Up of Weekly Compen-	
	In Salesforce, update the plan with the new information or outcome of the interaction.				sation Payments process.  PROCESS Request Set Up of Weekly Compensation Payments	
	NOT	How do you update the Recovery Plan? Go to Create or Update Recovery Plan process.  PROCESS Create or Update Recovery Plan		NOTE	What if you need to reinstate Weekly Compensation? In Eos, at ACC45 level, complete the reinstatement information in the Non Standard WC	
	mine NOT	ss the information in the Recovery Plan and deterif the next step is clear and obvious.  What if you need help to determine next steps of the client's recovery?  Talk to your Team Leader first, then use the Recovery Support Decision Tree to help with next steps.  Recovery Support Decision Tree		their po	Setup Eform, (documents tab, stand alone efor category). Then create a Setup weekly comp Entitlement task (the eform is linked automatically). The task auto routes to the Centralised Weekly Compensation queue.  mine if your client is unlikely to be able to return to pre-injury occupation due to their injury, or if they a signally independent.	
	NOT	complete the client's recovery plan? Go to Request Clinical Records process.  PROCESS Request Clinical Records		NOTE	How do you arrange an IOA to identify the types of work that may be appropriate for the client?  Go to Arrange Initial Occupational Assessment process.	
	NOT	What if your client requires an assessment to allow more information to be gathered about their injury or recovery needs?  Go to Arrange Medical Single Discipline Assessment process.  PROCESS Arrange Medical Single Discip-	f		PROCESS Arrange Initial Occupational Assessment (IOA) termine if your client no longer needs support.  TE What if the client has confirmed they don't r quire any supports? Go to Stop Supports.	
	team their	line Assessment sider if your client needs to be transitioned to another as your client is either tracking ahead or behind Recovery Plan.  E What if your client needs to be transitioned to another team? Remember to align the due date for Recovery Check-in conversations with key milestones. Go to Transition Claim process.	9	You ma	PROCESS Stop Supports  nd to a notification that the client has passed away ay be notified that the client has passed from con- th either a family member, provider or via death no-	
	to ac bility. Reco To fir of fin mapp paym	PROCESS Transition Claim  rmine the type of support required to help your client hieve their recovery goal(s) and confirm their eligi- Consider our Decision-making principles in the overy Management Guide.  Indicate the support of the support type in Pro- to (eg lump sum, independence allowance, HCSS ments).		NOTE	PROCESS Record Date of Death	
	NOT	What if you need to set up supports for the client?  If you need to: • set up social supports for the client, go to Manage Social Interventions / Supports web link. • set up vocational supports for the client, go to Manage Vocational Interventions / Supports web link. • respond to a treatment request, go to Manage Treatment Interventions / Supports web link.			tact details) and what you have been notified as being the cause of death).  Go to Stop Supports process to stop any supports.  Send a task from the Eos Party Record to the 'Accidental Death' department queue advising them to please get in touch with the family contact (and their contact details) for a potential new claim.  PROCESS Stop Supports	
		Manage Social Interventions / Supports				
		Manage Vocational Interventions / Supports				
		Manage Treatment Interventions / Supports				





### Recovery Plan Policy v5.0



#### **Summary**

#### **Objective**

Refer to this guidance to understand what a Recovery Plan is, when ACC and clients must negotiate and agree on the Recovery Plan, and how ACC record this agreement.

- 1. What is a Recovery Plan (RP)?
- 2. When must ACC and the client negotiate and agree upon a Recovery Plan
- 3. Most RPs will be "paperless"
- 4. Participants' rights

Owner

Expert



#### **Procedure**

#### 1.0 What is a Recovery Plan (RP)?

**UNASSIGNED** 

a While not referred to as an IRP, RPs are required to follow the same legislative requirements for developing an IRP. The RP is therefore a legal document as identified in the Accident Compensation Act 2001 (AC Act).

An RP is an agreement between the client and ACC that details vocational and social interventions to assist in a client's recovery.

The RP outlines the actions required to help the client reach key milestones in their recovery; it contains when the action will happen, and who is responsible for completing them.

When discussing the RP, ACC and the client should identify any obstacles to recovery and develop actions or interventions to address them. This should be included in the RP.

A Recovery Plan must be updated when the client's circumstances change, and the agreed interventions no longer apply or cannot be completed.

### 2.0 When must ACC and the client negotiate and agree upon a Recovery Plan

UNASSIGNED

a Recovery Team members and the client will discuss and create a Recovery Plan.

Legislatively, a Recovery Plan (called an IRP in the AC Act) must be prepared for all claims where social or vocational rehabilitation is being provided and where a claim is expected to exceed 13 weeks duration.

b A Recovery Plan is not required for clients that require a one-off treatment and who self-manage in Enabled up to 13 weeks. c All social and vocational rehabilitation assistance provided must be included in the Recovery Plan.

Recovery Plans are developed in agreement with the client. Agreed interventions, supports and goals are added and updated through regular conversations and check-ins.

The client's signature is not required to confirm their agreement; however, their agreement should be documented in a contact note following a discussion of the plan.

Once the Recovery Plan is agreed, the actions can be implemented.

- Where the client does not provide verbal agreement to either one or more parts or all of the RP, ACC will either:
   await an email response from the client confirming the
  - plan, or send a copy of the proposed plan to them, seeking their

After a reasonable period, the case owner must follow up with the client before the plan is finalised as agreed. In these cases, a copy of the finalised plan with review rights will be sent to the client.

e If the plan is that the client will return to their employment or other employment, an employer can be given an opportunity to participate in the preparation of the recovery plan. This does not mean they need to see a copy of the plan, nor do they have the right to review.

#### 3.0 Most RPs will be "paperless"

UNASSIGNED

agreement.

- a Recovery Team members do not need to send hardcopies of the RP to clients unless:
  - the client specifically requests a copy; or
  - the client has not verbally agreed to the RP and we seek the client's agreement; or
  - the RP is 'agreed as finalised'; or
  - the client has attended their Initial Occupational Assessment (IOA) and Initial Medical Assessment (IMA) appointments, indicating that the Vocational Independence (VI) process may commence
- **b** Recovery Team members must inform clients that they can request a copy of their RP at any time. The RP can be sent electronically or as a hard copy.

The client has the right to review the plan, even it had been previously agreed.

#### 4.0 Participants' rights

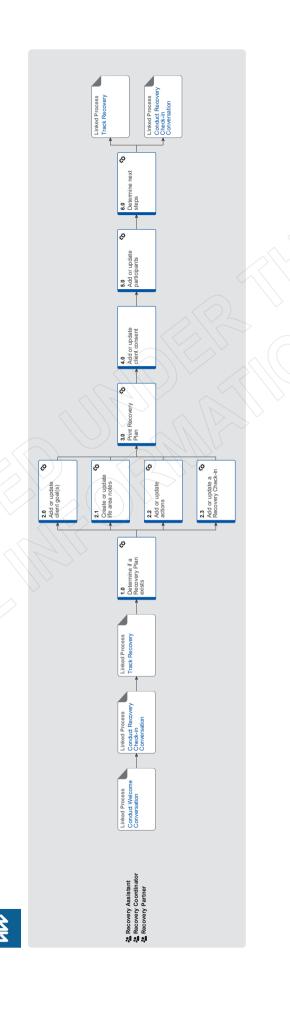
**UNASSIGNED** 

- **a** Schedule 1, clause 7 of the AC Act relates to participants' rights, including:
  - the client's right to information about the rehabilitation they are entitled to, including the vocational independence process and the Recovery Plan process
  - the right to have a support person present when preparing a Recovery Plan
  - the consequences of agreeing to the Recovery Plan
  - the lead health practitioner's and employer's right to participate in preparing the Recovery Plan
  - ACC's responsibility to meet the costs of preparing an Recovery Plan

The client can disagree with or challenge anything that is proposed in their Recovery Plan, including any decisions made about their rehabilitation. If this happens the Recovery Team member must make every effort to reach agreement with the client.

### Create or Update Recovery Plan v54.0





### Create or Update Recovery Plan v54.0



#### Summary

#### **Objective**

To capture information in the client's Recovery Plan gathered during the Welcome Conversation, Recovery Check-in, or at any time new key information is received. The actions we add to the Recovery Plan are agreed with the client.

#### Background

Recovery Plans are fundamental to the effective and proactive end-to-end management of claims. Having a Recovery Plan ensures consistency in the set up and support of a client and their recovery.

It provides a clear and concise snapshot of what has / is currently happening on the claim, ensures the client receives the right support from ACC at the right time and in the right way, and enables us to have client interactions that are proactive, and outcome focused.

A Recovery Plan must also identify any obstacles and how to address these.

The benefits of a Recovery Plan are:

- · Consistency in claim set-up and management
- · Provides a clear and concise snapshot of what has and is currently happening on the claim
- · Ability to understand the client's situation quickly, and build rapport easily
- Allows ACC to develop a relationship with the client
- Client receives the right support from ACC at the right time and in the right way
- · Clients have a fit for purpose level of service
- · Client interactions are pro-active and outcome focussed, not process driven
- Claim outcomes guided by Expected Claim Outcome (ECO) with agreed expectation and date

Owner **Expert** 

**Procedure** 

**PROCESS** 

**Conduct Welcome Conversation** 

Recovery Assistant, Recovery Coordinator, Recovery Partner

**PROCESS** 

Conduct Recovery Check-in Conversation

Recovery Assistant, Recovery Coordinator, Recovery Partner

**PROCESS** 

**Track Recovery** 

Recovery Assistant, Recovery Coordinator, Recovery Partner

#### 1.0 Determine if a Recovery Plan exists

Recovery Assistant, Recovery Coordinator, Recovery **Partner** 

a From Claim on a Page in Salesforce, navigate to the client's Recovery Plan.

If the Recovery Plan is in Salesforce, go to Activity 2.0 Review Recovery Plan.

If you receive an error message that the Recovery Plan does not exist in Eos, go to next step.

- **b** Create a Recovery Plan sub-case in Eos:
  - From the ACC45 Claim, select the Add Activity tab
  - Select Transfer to NGCM
  - · Select the Recovery Team your claim is in
  - Select OK.

#### NOTE What if a duplicate claim exists?

In Eos, label the claim as duplicate and any relevant data they hold, such as contacts, tasks or documents must be transferred to the master claim.

Go to Identify and Link Duplicate Claims: Standard process.

PROCESS Identify and Link Duplicate Claims :: Standard

#### What if a Launch Pad Recovery Plan (LPRP) subcase exists?

From NGCM roll out, all claims previously managed in the Launchpad will have a read only LPRP and must be managed from the Recovery Plan in Salesforce. Review the information on the LPRP to understand the client and claim information.

When a closed claim previously managed in the Launch Pad is reopened, a Recovery Plan subcase should be automatically created when it is transferred from NGCM-Actioned Cases to one of the Recovery Teams.

#### 2.0 Add or update client goal(s)

Recovery Assistant, Recovery Coordinator, Recovery **Partner** 

- a Read the guidelines below for further information about Recovery Management and completing a Recovery Plan.
  - NG GUIDELINES Recovery Management
- b In Salesforce, add a Recovery Goal by Selecting 'Goals' > 'Create New Goal?' > 'Recovery Goal' > 'Next'.

#### NOTE What are the Recovery Goal options?

All client's in Assisted, Supported and Partnered must have a Recovery Goal. Either:

- · Be able to look after myself
- · Be independent with some help
- · Get back to school
- · Manage my life
- Regain my independence
- · Return to an alternative work type
- · To live my best life
- Return to my pre-injury role
- · Work and manage my life
- C Set the Target Date and record a Rationale for the Recovery Goal.

#### NOTE What target date should you set?

Target dates should be agreed with the client during your conversation with the client and based on the Expected Claim Outcome (ECO) or the treatment providers recommendation eg a medical certificate, surgery notes, General Practitioner (GP) notes or an intervention completion report (ie housing modifications, transport for independence).

For clients who are engaged in ACC funded treatment for mental injury, target dates should align to available information or reports submitted by treating providers e.g. in Wellbeing Plan, an indication is given about how long treatment will be needed for and this should be the overall target date for recovery.

Recovery goals are only set once a cover decision has be made therefore it may not be suitable to set a recovery goal with your client at this time.

### NOTE What should you include in the rationale? What the Recovery Goal target date is based on.

d Personal Goal(s) are optional and are used to personalise the Recovery Plan for the client.

#### **NOTE** What are examples of a Personal Goal?

- Be able to walk the dog
- · Be able to run 5 kms.

#### NOTE How do you add a Personal Goal?

Select 'Goals' > 'Create New Goal?' > 'Personal Goal' > 'Next'.

e Update a Recovery Goal when the target date is reached or the goal has been achieved as agreed with the client.

### NOTE What if the Recovery Goal is only partially achieved by the target date?

Update the original goal with a new target date agreed with the client.

### NOTE What if the Recovery Goal is no longer relevant?

Update outcome to indicate that the Recovery Goal is no longer relevant. Add a new Recovery Goal. For example, the client can no longer return to their pre-injury role, however they may be able to return to a job with lighter duties. If you are unsure about the creating new Recovery Goal(s) go to Seek Internal Guidance process.

PROCESS Seek Internal Guidance

#### 2.1 Create or update life area notes

Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Salesforce, enter information into the appropriate life

### NOTE What information is important to capture in the Life Areas?

Refer to the Life Areas section of the Recovery Management Guideline.

NG GUIDELINES Recovery Plan Baseline

NG GUIDELINES Recovery Management

### NOTE What if you add notes relating to another client by mistake?

You can edit or delete any life areas that you create as long as you do so on the same day it was created.

If you are wanting to change any life area notes at a later date you will need to email your Recovery Leader:

- ask them to remove the incorrect information from the Life Area notes in Salesforce
- · identify what information needs to be removed
- refer to the claim number.

#### 2.2 Add or update actions

Recovery Assistant, Recovery Coordinator, Recovery Partner

- a In Salesforce, assess information captured and consider the actions required to help the client achieve their next milestone and overall Recovery Goal.
- **b** Click Action to add or update actions to the relevant life area.

#### **NOTE** What are agreed actions?

- reminders
- contacts
- · agreed Interventions.

For more information, refer to the Actions section of the Recovery Management Guide.

- NG GUIDELINES Recovery Management
- c Add or update an Agreed Intervention on the Recovery Plan.

### NOTE How do you add or update an agreed intervention?

To add an Agreed Intervention:

- 1) On the Recovery Plan, in Salesforce, select 'Actions' > 'Create New Action?' > 'Agreed Intervention'.
- 2) Select the appropriate agreed intervention based on the life area it aligns with and the specific name before selecting 'Next'.
- 3) Complete the required fields before selecting 'Next'.

To edit an Agreed Intervention:

- 1) On the Recovery Plan, in Salesforce, click on the agreed intervention once to open the 'View / Edit Agreed Intervention' window.
- 2) Update appropriately then select 'Next'.

### NOTE What date should you set the 'Expected Outcome Date' to?

This should be set to the date that we anticipate receiving the completion/assessment report related to the agreed intervention.

### NOTE What could you include in the 'Next Action / Referral Details' field?

Include information in this field that will provide context to the referral:

- The purpose of the assessment
- Name of the provider or vendor
- Date, time and location of assessments
- Purchase order number, end dates and updates
- Expected outcome / Next steps i.e. expecting a reduction in home help needs Understanding next steps when the agreed intervention is completed

To automatically copy the information from this field to the Life Area select the 'Copy to Life Area' tick box. You will be able to edit this life area note as long as you do so on the same day you created it.

#### NOTE What if the client is receiving ISSC support?

Upon receipt of the Early Planning Report, consideration needs to be given to the recovery stage the client is proceeding with:

- If the client is proceeding with Supported Assessment, a 'Mental Injury Assessment' or 'Psychiatric Services' Agreed Intervention should be added to the Recovery Plan.
- If the client is proceeding with Support to Wellbeing (short-term), no Agreed Intervention is required until receipt of the Completion Report, at which point the Agreed Intervention of 'Therapy' should be added. This should include the date the service concluded and the outcome that has been achieved.

## NOTE What if a client has agreed to participate in an Agreed Intervention during the phone call?

If your client has verbally agreed to participate in treatment, support and assessments, you must record this as a contact in Salesforce.

Be specific about each intervention and the client's agreement to that specific intervention; this helps to marry the discussion to the intervention and the client's agreement to engage in it

For example: Work ready programme: Cath agreed to attend from 4/7/19 to improve her fitness for work and on completion commence GRTW early August.

## NOTE What if the client wants to agree to the Agreed Intervention in writing rather than verbally?

- 1) Add Agreed Intervention in Salesforce, ticking the Sent for Agreement box.
- 2) Once you have finished filling out Recovery plan, generate copy of Recovery Plan and send to client as per section 3.0 below.

#### NOTE What should you do when you're assigned a 'Follow-up Recovery Plan Action: Agreed Intervention' task?

 In Eos or Salesforce, check the tasks and documents on the claim to see if we have received the report about the Agreed Intervention.
 In Outlook, check your personal or shared

inbox to see if we have received the report about the Agreed Intervention.

If report has been received, go to the 'What if you need to record an outcome for an agreed intervention?' note below or 'How do you add or update the agreed intervention to the Recovery Plan?' note.

If report has not been received:

- 1) Check if there has been any correspondence from the provider.
- 2) Contact the provider to follow-up if appropriate.
- If you have spoken to the provider or received correspondence advising there needs to be a new date for the Agreed Intervention (for example, extension required, time to send the report required), set the new due date as per request.
- If you have attempted to speak to the provider and there is no correspondence or updates, set a new expected outcome date for when you expect to hear back from the provider with an update.

### NOTE What if you need to record an outcome for an agreed intervention?

If the agreed intervention is completed, open the agreed intervention by clicking the action once from the Recovery Plan in Salesforce. Select 'Complete' then set an appropriate 'Outcome Date'. The Outcome Summary will be automatically populated and will be editable to make any necessary adjustments.

If the agreed intervention can no longer be achieved (ensure a record of the conversation has been saved noting who you spoke with and the reason(s) for this change) then you can select 'No Longer Relevant' on the agreed intervention then 'Next'. This will remove the agreed intervention from the clients Recovery Plan in Salesforce and however it will still appear on the printable Recovery Plan.

If the agreed intervention has been added in error, you can select 'Cancel' on the agreed intervention then 'Next'. This will remove the agreed intervention from the clients Recovery Plan in Salesforce and from the printable Recovery Plan.

NG GUIDELINES Agreed Interventions

**d** Add or update a Reminder Action on the Recovery Plan.

#### **NOTE** What are reminders used for?

Reminders are used as a prompt for a Recovery team member do something e.g. send notifications to clients, set up some supports in the future or extend a support when it is due to expire. When a Medical Certificate is about to expire there is an automatic notification set 7 days before expiry. However, if your client has requested to stop notifications, it may be appropriate to use a contact action to discuss this with them.

#### NOTE What notifications can you send to a client?

Refer to the Client Notifications section in the Recovery Management guide.

Refer also to the Manual Notification Types list in the Create a Notification system steps.

NG GUIDELINES Recovery Management

Create a Notification - System Steps

#### NOTE How do you update a reminder?

From the Recovery Plan, in Salesforce, click the reminder action once and update appropriate before selecting 'Next'.

e Add or update a Contact Action on the Recovery Plan. When you add a contact, this creates a task to contact a key participant.

We must add an outcome summary to the contact action when we have completed a conversation with a key participant.

### NOTE What if the participant you were trying to contact is not available?

If a contact action already exists for this call, click the action once then update the description to include the date of this contact attempt and reschedule to an appropriate date to attempt the call again.

If a contact action doesn't exist for this call, create a new contact action by selecting 'Actions' > 'Create New Action?' > 'Contact' > 'Next' > 'Schedule Future Dated Contact'. Select a 'Contact With' option, add who needs to be contacted and why into the 'Description' field then choose a due date before selecting 'Next'.

### NOTE What if the client calls and asks for their Recovery Coordinator to call them back?

Create a new contact action by selecting 'Actions' > 'Create New Action?' > 'Contact' > 'Next' > 'Schedule Future Dated Contact'. Select a 'Contact With' option, note the reason for call back and who and how to contact them in the 'Description' field then choose a due date before selecting 'Next'.

#### NOTE What if you entered a contact in error?

You will be able to edit a completed contact as long as you do so on the same day that you created it. From the Recovery Plan, in Salesforce, select the 'Completed' Toggle to view completed items on the Recovery Plan timeline. Locate the contact action that you need to edit and click it once to open the 'View / Edit Contact' window. The Outcome Summary field will now be editable and when updated and 'Next' is selected, the associated contact in Eos will reflect the changes.

## NOTE What if you capture additional information about the client during conversations with participants?

Add the new information to the appropriate Life Area on the Recovery Plan.

NG GUIDELINES Recovery Management

#### **NOTE** Do Supports appear on the Recovery Plan?

Supports such as ancillary are not entered as actions on the Recovery Plan, they are tasks which go to Admin. Supports can be viewed from Claim on a Page or the Recovery Plan screen.

### NOTE What if you need to set up Supports for your client?

Go to Activity 6.0 Determine next steps.

#### 2.3 Add or update a Recovery Check-in

Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Saleforce, determine the milestone. Schedule Recovery Check-ins at key milestones and stages in the client's recovery journey.

#### NOTE What should you consider?

When considering an appropriate milestone think about the wider context of the client's recovery, eg regarding work type - a sedentary worker's Recovery Check-in may be at a different stage when compared with someone in a very heavy work type. An example could be going from non-weight bearing to weight bearing.

PROCESS Conduct Recovery Check-in Conversation

#### **NOTE** What is a Milestone?

Milestones are significant changes and achievements in the client's recovery pathway.

When considering an appropriate milestone, consider the wider context of the client's recovery eg their work type – a sedentary worker's Recovery Check-in may be at a different stage when compared with that of someone in a heavy work-type occupation.

- When is the next significant change in the client's recovery likely to occur (eg increased independence, noticeable strengthening, a phased return to work duties).
- When is it likely that the client's needs will change significantly?

Milestone Timing Examples:

WHEN	WHY
Client was using crutches and a moonboot can now weight bear	Client is now able to start strengthening
Client should be ready to get back into work, based on a specialist report	Begin planning on what a return to work would look like for this client
At completion of a programme (e.g. Concussion Services) and the report suggests further needs	Understand progress and plan for the next recovery period
Client's injury-state dramatically changes (e.g. injury complicated with infection, bone not healing)	Impacts on what we have previously planned, it is likely that we will need to understand the new recovery
Report has unexpected recommendations (e.g. report advises longer recovery timeframe based on new information impacting recovery)	pathway and plan accordingly

What isn't a milestone?

A new medical certificate within the expected recovery period which we were anticipating	We'd like to know how a recent appointment went (i.e. how was their physiotherapy appointment this morning)
We need to check on some details (i.e. whether a client still needs taxis)	Compliance discussions – these can be treated as Actions to ensure compliance in recovery.

•

Milestone Timing Examples.PNG

#### NOTE What is a stage?

Injury recovery can proceed through four key stages, acute, rehab, adaption and stable. Healing can progress backward or forward depending on internal and external factors.

- Acute This is the initial response stage following an accident, in which activity focuses on stabilising the injury and treating any inflammation (irritation, swelling or pain).
- Rehab The period of treatment that is needed to enhance and restore functional ability and quality of life after an injury. This tends to be the longest of the stages and includes a client's gradual return to work a critical component of rehabilitation and recovery.
- Adaptation We support our clients to adapt to changes that will help them with their recovery.
   For some clients, we might be enhancing existing skills and knowledge to adapt to a new vocation after an injury, and supporting them towards Vocational Independence.
- Stable We continue to support our client when their injury is stable, and we expect little further change in their recovery status. We consider if they need ongoing management or if we should close their claim.
- Close Claim; we have now considered it is ok to close the claim from active management and are closing the claim (refer to the closed claim page for criteria)

Close Claim - Promapp Page https://au.promapp.com/accnz/Process/ac14995c-28

**b** From the Recovery Plan, in Salesforce, click the Recovery Check in action once and update the description and date as required before selecting 'Next'. When the Recovery Plan is created from the Welcome Conversation, a Recovery Check-in will automatically be added to the Recovery Plan timeline.

### NOTE What relevant information do you need to in-

When completing a Recovery Check-in with the client/ATA, enter:

- · your next Recovery Check-in
- things to consider during the next Recovery Check-in (ie, the key milestone, etc which you will add into the conversation).

### NOTE What if the claim is of a serious or sensitive nature?

Usually Partnered Recovery clients sustain life changing injuries. These clients and their support networks (family, whanau and others) require intensive support while they remain in rehabilitation facilities and when they have returned to their communities.

The Recovery Partner will cover the client's transition from acute care to active rehabilitation, part of which includes gathering information from multiple parties including employers, social workers and other entities.

#### 3.0 Print Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Salesforce, generate a copy of the Recovery Plan for the client if required.

### NOTE How do you generate a copy of the Recovery Plan?

Click Send PDF to Eos on the Salesforce Recovery Plan.

Result: This will generate ACC7979 form

**b** Arrange to send your client a copy of their Recovery Plan.

### NOTE What if the client wants the Recovery Plan sent to them by email?

Follow the Emailing from Eos – System Steps.

NGCM - FINAL Emailing from Eos - System Steps

### NOTE What if the client wants the Recovery Plan sent to them by mail?

- 1) Create a RPL04 letter and Working Together -Kōrero mai (ACC255) to accompany the Recovery Plan.
- 2) Follow the Send Confidential Information by Courier using Pre-alert process.
- PROCESS Send Confidential Information by Courier using Pre-alert

# What if you need to send a copy of the finalised Recovery Plan to the client as the client has not agreed their Recovery Plan at finalisation date?

- In Salesforce, add a note that the Recovery Plan is regarded as 'agreed under Clause 8 of Schedule 1 Agreement to plan without the client's actual agreement'.
- Create a copy of the Recovery Plan.
- Create a copy of the RPL08 Deemed plan after mediation – client letter to the client explaining that the IRP is regarded as agreed. Include a clear rationale for why that measure has been taken.
- Note on the Recovery Plan being sent to client 'Regarded as finalised'.
- Send the Recovery Plan to the client using the method the client agreed to have the initial Recovery Plan sent to them - post or email.

F	RPL08	Document	Template
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#### 4.0 Add or update client consent

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Add the client's verbal authority to collect information to the Recovery Plan tab if obtained during the conversation.

### NOTE How do you add the client's verbal authority to collect information?

Follow the Add, Edit, or View Client Consent system steps.

Add Edit or View Client Consent

### NOTE What if the client does not provide verbal authority to collect information?

Go to the process below.

PROCESS Obtain Client Authority to Collect Information

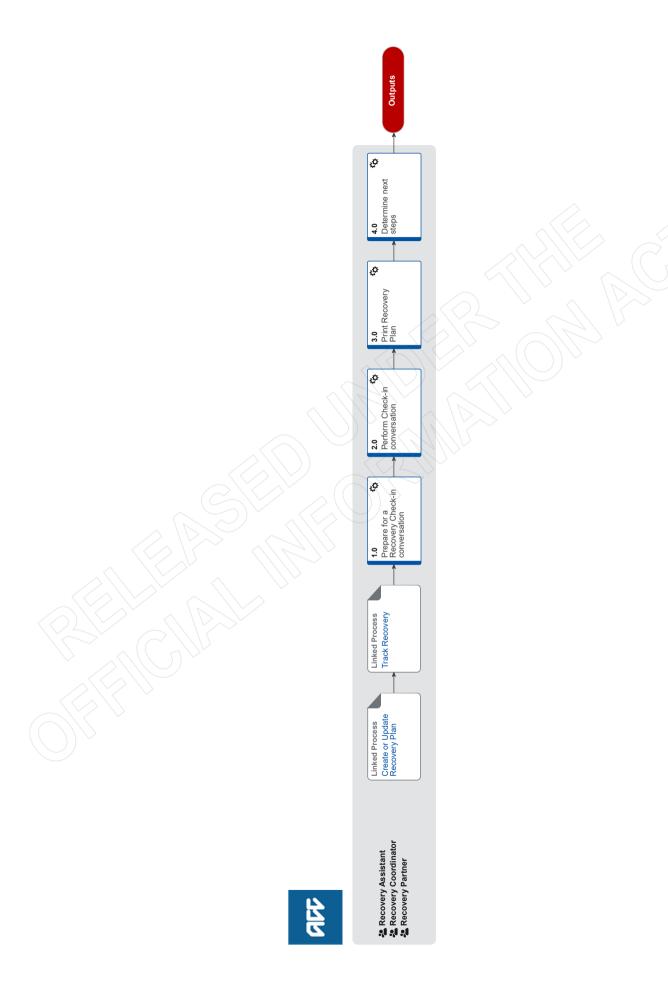
	NOTE	What if the client withdraws their authority to collect information?				anage Vocational Interventions / Supports ps://go.promapp.com/accnz/Process/Group/ff8eb0l
		At any stage a client can decline or withdraw their authority. Go to the process below for further information.				anage Treatment Interventions / Supports ps://go.promapp.com/accnz/Process/Group/1bbffb
		PROCESS Decline or Withdraw Client Authority to Collect Information				anage Ancillary Services ps://go.promapp.com/accnz/Process/Group/0846c <sup>.</sup>
5.0	Recovery Partner a In Eos, contact	update participants y Assistant, Recovery Coordinator, Recovery add participants to the ACC45 level, including t details for the main contact person/people for the	d	Con Mar To f of fi map	erm firm nsid nag ind nan op (	nine the type of support required for your client and a their eligibility.  er our Decision-making principles in the Recovery ement Guide.  details about how to create tasks for other types in supports, search for the support type in Proeg lump sum independence allowance, HCSS
		recovery. anage Participants		pay		nts). G GUIDELINES Recovery Management
	<b>b</b> Ensure	e you remove participants that are no longer inin the client's rehabilitation.		NO.		What if you need to set up supports for the client? If you need to set up:
6.0		ine next steps / Assistant, Recovery Coordinator, Recovery				<ul> <li>social supports for the client, go to Manage Social Interventions / Supports web link.</li> <li>vocational supports for the client, go to Manage Vocational Interventions / Supports web link.</li> </ul>
		s the information in the Recovery Plan and deter- the next step is clear and obvious.				anage Social Interventions / Supports ps://go.promapp.com/accnz/Process/Group/fde996
	NOTE	Who are the key participants a contact could be with?				anage Vocational Interventions / Supports ps://go.promapp.com/accnz/Process/Group/ff8eb0l
		Contact with Advocate     Contact with Claimant     Contact with Employer		NO.	TE	What if an assessment to fund treatment is required?
		Contact with Employer     Contact with Family/Whanau     Contact with Provider				Go to Manage Treatment Interventions / Supports web link.
	NOTE	What if you need internal advice to determine next steps of the client's recovery?		<b>D</b>		anage Treatment Interventions / Supports ps://go.promapp.com/accnz/Process/Group/1bbffb
		Go to the process below.  PROCESS Seek Internal Guidance		NO.	TE	What if you need to set up weekly compensation for the client?
	NOTE	What if you need clinical information to help complete the client's recovery plan? Go to the process below.				Go to the process below.  PROCESS Request Set Up of Weekly Compensation Payments
		PROCESS Request Clinical Records		NO.	TE	What if you need to maintain an existing weekly payment for the client?
	NOTE	What if you need diagnosis(es) and the cause of a client's injury or current condition clarification as well as recommendations for further investigations, treatment or rehabil-				If you're updating existing weekly compensation, go to the process below.  PROCESS Maintain Weekly Compensation
		itation? Go to Arrange Medical Case Review (MCR) Assessment process.		NO <sup>°</sup>	TE	What if you need to reinstate Weekly Compensation? In Eos, at ACC45 level, complete the reins-
		PROCESS Arrange Medical Case Review (MCR) Assessment				tatement information in the Non Standard WC Setup Eform, (documents tab, stand alone eform
	team a	ler if your client needs to be transitioned to another s your client is either tracking ahead or behind ecovery Plan.				category). Then create a Setup weekly comp Entitlement task (the eform is linked automat- ically). The task auto routes to the Centralised Weekly Compensation queue.
	NOTE	What if your client needs to be transitioned to another team?  Go to Transition Claim process.  PROCESS Transition Claim	е	thei	r pr	nine if your client is unlikely to be able to return to e-injury occupation due to their injury, or if they are nally independent.
		ler if an assessment to gather more information the client's injury or recovery needs is required.		NO.	TE	How do you arrange an IOA to identify the types of work that may be appropriate for the client?
		How do you arrange the assessment? Go to the relevant web link below, then select the assessment process.				Go to Arrange Initial Occupational Assessment process.  PROCESS Arrange Initial Occupational
		anage Social Interventions / Supports tps://go.promapp.com/accnz/Process/Group/fde996	f			Assessment (IOA)  ine if you are waiting on information from the Lead Health Practitioner and/or other Health

practitioners in the planning of the client's Recovery Plan.

•	e if you are waiting on information from the nployer to help with the planning of the client's Plan.
Indiv	idual Rehabilitation Plan Policy
<b>h</b> Determin	e if your client no longer needs support.
c	What if the client has confirmed they don't require any supports? So to Stop Supports process.  PROCESS Stop Supports
PROCESS	Track Recovery Recovery Assistant, Recovery Coordinator, Recovery Partner
PROCESS	Conduct Recovery Check-in Conversation Recovery Assistant, Recovery Coor- dinator, Recovery Partner

### **Conduct Recovery Check-in Conversation v55.0**





### Conduct Recovery Check-in Conversation v55.0



#### **Summary**

#### Objective

To identify when key recovery milestones have been achieved, and to gather information to ensure the client has the right level of support from us to reach the next milestone toward their recovery goal during the Recovery Check-in conversation.

#### **Background**

The Recovery Check-in conversation framework has been created to support our new ways of working, ensuring we have quality conversations and are contacting our clients at the right time, for the right reasons, and in the right way – every time.

During Recovery Check-in conversations, we identify any outcomes to current goals and actions since the previous Recovery Check-in, and add new goals and actions. We then update the Recovery Plan and check the client is still being supported by the best team for their needs, and finally set up the next Recovery Check-in (unless the client has reached their final Recovery Check-in point).

It also helps us identify when a client's recovery is not tracking as planned and to proactively remind clients of agreed key target dates within their recovery plan.

Recovery Check-ins provide a conversational framework to ensure our clients' needs are met and that they have a consistent experience with ACC. When successfully conducted and accurately recorded, ACC will have additional information for a particular client including:

- how they are feeling about progress towards their recovery and their level of confidence towards reaching their goals
- at what point they see themselves on their recovery path in terms of next steps, rehabilitation, treatment and progress towards their goals
- · what support the client needs from ACC.

Owner

**Expert** 



#### **Procedure**

► PROCESS

Create or Update Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner

PROCESS

**Track Recovery** 

Recovery Assistant, Recovery Coordinator, Recovery Partner

#### 1.0 Prepare for a Recovery Check-in conversation Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Salesforce, check the timing of the Recovery Check-in conversation.

### NOTE When should a Recovery Check-in conversation be scheduled?

The timing of any Recovery Check-in conversation should align to a key milestone in the client's recovery.

This is primarily based on whether we think we can add value to the client's recovery – we'll contact them when they reach a recovery milestone to determine what level of support they need to reach their next milestone.

- If it's not the right time to have a Recovery Check-in task:
- For claims in Assisted team, change the target date for the Recovery Check-in task and transfer the task back into the Assisted Recovery Department queue.
- For claims in the Supported or Partnered team, change the target date for the Recovery Check-in task.

EXCEPTION: For claims where we are not providing any entitlement or intervention as there is no cover or claims that are open to complete a review process a Contact Action Task should be on the claim to ensure the client is kept updated about the progress and next steps are monitored.

Examples of key milestones for Recovery Check-ins

## NOTE What factors can determine the number and frequency of Recovery Check-in conversations?

The timing for each Recovery Check-in is unique for each client, based on an assessment of all currently available key information, which means that some clients may need more or less Recovery Check-in conversations than others.

For example, if a client's recovery is steadily on track, and there is no evidence of any obstacle to their recovery and they seem to be progressing well – then only a minimal number of Recovery Check-in conversations may be needed. Conversely, a client who has multiple or more complex injuries will likely require more Recovery Check-in conversations.

### NOTE What if the client initiates contact before a scheduled Recovery Check-in?

If it is appropriate to have the Recovery Check-in now, go to 2.0 Perform Check-in conversation.

**b** Determine the purpose of the conversation.

When planning a Recovery Check-in conversation, be very clear on which milestone you plan to discuss and the stage of the client's recovery.

## NOTE What if the claim has been re-opened and requires an assessment that is not related to Weekly Compensation?

You need to acknowledge to the client that we are assessing their request, including but not limited to entitlement and/or cover.

Go to Activity 2.0 Perform Check In conversation.

### NOTE What if you need to discuss a recent medical certificate relating to subsequent incapacity?

Perform a subsequent Welcome Conversation.

If the client requires Weekly Compensation and they are eligible, complete the Weekly Compensation section of the subsequent Welcome Conversation in Salesforce. You will only need to complete the Weekly Compensation section, and override the other mandatory questions once you have selected "Save" in the close-out section. The Welcome Conversation transcript will be automatically sent to Eos.

Once you have all the information for weekly compensation, Go to 'Request Set Up of Weekly Compensation Payments'.

For more information about subsequent incapacity, refer to the policy below.

PROCESS Request Set Up of Weekly Compensation Payments

Subsequent Inability to Work (Subsequent Incapacity)

## NOTE What other key factors should you consider before conducting a Recovery Check-in conversation?

- Does any new information (reports, action updates, or other conversations), mean that the timing is no longer appropriate for this Recovery Check-in?
- Is the client's recovery still underway as planned?
- Is there anything you can do at this point to improve the client's journey?

### NOTE What if the client has been transitioned from Enabled?

You will need to discuss and agree with the client an overall Recovery Goal, actions and set up their Recovery Plan. Go to Create or Update Recovery Plan process.

PROCESS Create or Update Recovery

### NOTE What if you need to prepare for a CMI Recovery Check-in conversation?

Refer to the CMI Recovery Check-in Conversation guidelines to help you have a Recovery Check-in conversation with a provider and/or an Assisted Complex Mental Injury (CMI) client.

CMI Recovery Check-in Conversation guideline

## NOTE What if you need to prepare for a CPI or a Long term stable Recovery Check-in conversation?

Refer to the CPI and Long term stable Recovery Check-in Conversation guidelines.

These guidelines are for Complex Physical Injury (CPI) clients who are in:

- the Partnered Recovery team, or
- those clients who have transitioned from Partnered Recovery to the Assisted Recovery team.

Review the claim so you have the knowledge of the client's circumstances before making the call. The language we use when talking with clients who have sustained a lifelong injury should reflect that.

For example, it is not appropriate to ask someone with a permanent disability how their recovery is progressing. If in doubt or unsure, talk to the Team Leader or Practice Mentor.

- NG GUIDELINES: CPI Recovery and Long Term stable Check-in Conversation
- c Determine the correct (or best) person to have the conversation with.

### NOTE How do you determine the correct or best person?

When planning a Recovery Check-in conversation, it is important to first identify the most appropriate person to conduct the conversation with (and check if there is a safe contact and their relationship they have to the client) and also to be very clear on which milestone you plan to discuss

Recovery team members need to determine who should be involved and which conversation guide to use.

The preferred option may be a case conference with the provider and the client.

# NOTE What factors should you consider when planning your approach on the type of conversation to pursue in the Recovery Check-in conversation?

- Complex Physical Injury claims many conversation variations are available for these injury types, including situations where the client has returned to work on a part-time basis, (which is a significant achievement and milestone point)
- Sensitive claims which may require manual set up along with pre and post cover workaround options.
- The early planning of stages linking to ISSC engagement or the most recent documentation.
   Review cover status (ie is there an assessment pending)
- If you're in Partnered, consider the following aspects of their lives where they live, the support needed to live independently, their confidence in living an every day life, support in their community and the support people around them, and if anything has changed.

### NOTE What if the client is only able to communicate via email?

It is always best practice to conduct a recovery check in via phone so that we are able to gather as much information as possible to confirm the recovery is on track or to consider what additional services we may need to discuss. However, in exceptional circumstances, there will be some clients who are only able to communicate via email. This could be due to a range of factors such as:

- A client who lives overseas
- · A client who has a hearing impairment
- An already established management plan which means they are unable to call ACC, or
- Because this has been identified as the only appropriate method to communicate with the client.

If you are considering recovery check ins via email for a client and they do not match this exceptional criteria, consult your team leader in conjunction with a practice mentor prior to using this method. Once confirmed, record the rationale in the Engagement life area.

#### 2.0 Perform Check-in conversation

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Open the relevant guidelines to refer to during the Recovery Check-in conversation.

### NOTE What are the guidelines for a CMI Recovery Check-in Conversation?

Refer to NG GUIDELINES CMI Recovery Check In Conversation guidelines to help you have a Recovery Check-in Conversation with:

- a provider, and/or
- an Assisted Complex Mental Injury (CMI) client.

# NOTE What if the purpose of the conversation is due to an assessment on a re-opened claim? Tailor the Recovery Check In conversation to the clients current circumstances.

The purpose of this conversation is not to agree Recovery Goals or agree further Recovery Check Ins. These are not required while the request is being assessed. Advise the client what the next steps are and agree a date for your next contact.

In Salesforce, create a Reminder or Contact action on the claim, ensure the target date is the date agreed with the client. Go to Activity 4.0 Determine next steps.

	٦	CMI Recovery	/ Check-in	Conversation	quideline
l		CIVII L'ECOVEI	/ CHECK-III	Conversation	guidellile

- **b** In Salesforce, establish contact with the client or relevant stakeholder, the provider or the participant and confirm you are speaking with the right person by asking ACC's identity check questions.
  - Identity Check Policy

#### NOTE What if you can't establish contact?

- 1) Attempt a maximum of two contacts over two full working days before leaving a voicemail or sending a notification to request client contact.
- 2) If you are unable to reach the client, extend the task for an additional two working days and note in the task description that this is the second attempt to contact the client.
- 3) On the task due date and if there has been no response from the client to the voicemail or notification, send the CM04 Advise client that you were unable to reach them by phone letter. The CM04 letter will be populated with client injury details, however you need to update the letter as follows:

'We recently tried to contact you about your injury that happened on [date of accident auto]. I tried calling you to talk about how we may be able to help you recover from your injury/injuries, but haven't managed to get in touch. It would be good to hear from you on how you are progressing or discuss what other support we could offer, please give me a call or email me to arrange a convenient time for me to call you back.'

- 4) Extend the task date as appropriate to take into account postal delivery and note in the task description this is the third attempt to contact the client and the CM04 letter has been sent.
- 5) On the task due date and if there has been no contact from the client and they are continuing to receive support, seek internal guidance to determine next steps.
- 6) If you're in Partnered and no contact is made with the client after 3 attempts, you must contact the provider, GP or other verified contact on the claim.

PROCESS	Seek Internal	Guidance

#### NOTE What if you're unable to contact a CPI client?

Follow the instructions as detailed in the [What if you can't establish contact?] note above. In the CM04 letter, update with the following: We recently tried to contact you to see how you are managing your injury and if you need any additional assistance from ACC. If you would like to discuss your ongoing needs to assist your recovery, please call us on the number below.

NO	TF How can you confirm client contact details?
	CM04 Advise claimant that you were unable to reach them by phone
	Decline Entitlement When Client is Non-compliant Policy
	What to say in a voicemail message
	recovery, please call us on the number below.

Consider the following:

- details on the ACC45
- latest ACC18
- contact the client's treating provider
- · contact the client's employer.

## NOTE What if they are reluctant or not comfortable to directly participate in a Recovery Check-in conversation?

In some cases, providers such as Social Workers can be nominated as a representative in situations where the client doesn't want to talk to ACC directly - for example, a complex physical injury case.

## NOTE What if the client advises they are unable to have the conversation now or during the conversation they are unable to continue?

- 1) If possible, agree the next actions with the client and an alternative time to call back that suits them.
- 2) Update the target date in the task with this date.
- 3) Add a note in the description field of the task advising the conversation was paused, noting the components that weren't completed.

### NOTE What do you need to consider before arranging a face-to-face conversation?

Go to Arrange Face to Face Client Meeting process.

PROCESS Arrange Face to Face Client
Meeting

## NOTE What if the description in the task advises the recovery check in is to be conducted over email?

Confirm the following before creating the email:

- Check that the clients situation has been identified as being suitable to recovery check ins via email (see Activity 1.0c and the Engagement life area).
- Check that the clients email address has been verified.
- Consider what the milestone is and whether the timing is still correct. Review Claim on a Page, the Recovery Plan actions and life area notes along with recent contacts and documents before proceeding.

The description field should indicate if there are specific questions that need to be asked during this recovery check in. If not, consider the questions that are in the salesforces guided conversation (by double clicking the action) and tailor these to the clients current circumstances. le:

- Do we need to review progress towards the recovery goal? (With Partnered Physical Injury clients or Long Term Service Clients this may not be appropriate)
- Do we need to review progress of treatment?
- Do we need to review progress of social supports?
- Do we need to review progress of vocational supports?
- •Are there any agreed interventions that have now been completed and have they achieved the intended outcome?
- Is there anything else we can do to help progress the recovery path for this client?

Once the email has been sent, edit the recovery check in action in Salesforce and note in the change reason that an email has been sent then move the due date out a week to allow the client to reply before we follow up.

## NOTE What if the Client advises you they have resigned, been terminated or received redundancy?

Refer to information link below for guidance.

- Client resigns, loses job / termination, is made redundant
- C From the Recovery Plan, open and complete the Recovery Check-in Conversation. Use the To Do List to record post call actions.

### NOTE What if the recovery check in was conducted via email?

Consider whether we need further information/ agreement from the client prior to completing the recovery check in action in Salesforce. If we need more information, request this from the client by replying to their email and then edit the recovery check in action in Salesforce that a reply email has been sent then move the due date out a further week to allow the client to reply before we follow up.

If all actions have been completed/agreed to and we have advised the client of their next recovery check in date, complete the next steps

- 1) Ensure all emails are filed away and the properties have been updated accordingly.
- 2) Set up/edit any supports or requests that were requested/agreed to.
- 3) Update the recovery plan in salesforce with key information from this interaction.

### NOTE What if you receive a request for a Lump sum payment or Independence Allowance (LSIA)?

- 1) Advise the client they are eligible to apply, and an application pack will be sent to them.
- 2) Create a 'Send LSIA application pack task'. This will automatically route to the Treatment & Support team to generate and send to the client.

For further information refer to the link below.

- Independence allowance & lump sum (IALS)
- d Discuss Client's Rights and Responsibilities if needed.

## NOTE How do you determine if you need to discuss sending the ACC165 Client Rights and Responsibilities?

In Salesforce, the Recovery Check-in Conversation will display the Clients Rights and Responsibilities section if the client does not have an active Client's Rights and Responsibilities Indicator.

Advise the client that you need to share with them information about their rights and responsibilities and confirm they understand these. Check how the client would like to receive this information (eg, email, post) and note this in the Rights and Responsibilities section of the Welcome Conversation.

To-Do List items will be automatically created for the following:

- Post or email the ACC165
- Follow up reminder set for 10 working days to follow up with the client if not received

### NOTE Where can you find more information about Recovery Check-in?

Refer to the Recovery Check-ins section of the Recovery Management Guide.

#### **NOTE** Where can you find more information about scheduling a Recovery Check-in? Go to Create or Update Recovery Plan process, then refer to Activity 2.3 Add or update a Recovery Check-in. PROCESS Create or Update Recovery Plan NG GUIDELINES Recovery Management NOTE What if this is the final Recovery Check-in? Refer to Close Claim process. PROCESS Close claim e Finish the call with the client, ensuring you've gathered all the information you need and the client verbally agrees to the updated information for their Recovery Plan. NOTE What if the client doesn't provide verbal agreement to an intervention or the plan we have identified as being reasonably required?

Confirm with the client:

- how they want to receive a copy of their Recovery Plan so they can review it
- a suitable time for them to review their Recovery Plan. We must give them a reasonable time to review and agree to a Recovery Plan. It's expected that a client is given 10 working days but a longer timeframe may be appropriate in some cases. They can also seek support from their Lead Health Practitioner, other Health Practitioner, other support person(s), or employer to participate in the development of their Recovery
- · a date to finalise the Recovery Plan
- they can seek advice from their Lead Health Practitioner, other Health Practitioner, other support person(s), or employer to help with the preparation of their Recovery Plan
- they can phone us to discuss their Recovery Plan and/or provide verbal agreement of their Recovery Plan
- they can send their Recovery Plan back via email or post with feedback and/or agreement
- we'll follow up with them before the finalisation date agreed if we've not heard from them
- if we don't reach an agreement at the finalisation date, we'll send them copy of the Recovery Plan again with a decision advising the client the Recovery Plan has been finalised as 'agreed'.
- f In Salesforce, work through the actions in the To Do List. Complete the actions that must be done at that time.

### NOTE What if you are unable to complete an action?

Click the 'Transfer To Do Items' button. This will automatically transfer the open item to the Recovery Plan as an 'Action to be followed up' on the specified Target Date.

**g** If you are unable to complete an action, click the 'Transfer To Do Items' button. This will automatically transfer the open item to the Recovery Plan as an 'Action to be followed up' on the specified Target Date.

## NOTE What happens automatically in Eos when you've completed the Recovery Check-in Conversation?

A Recovery Check-in Conversation transcript is created and a contact is added to the Recovery Plan. Note that due to a system error it is currently saved as a 'decision letter' with the description as 'mailhouse letter'. A fix for this is pending, in the meantime the contact must be manually amended.

#### 3.0 Print Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner

a If the client has requested a copy of their Recovery Plan, confirm how they want to receive this.

Ensure that the client has agreed to each specific intervention in the Recovery Plan. Agreement to interventions must be evidenced in contact notes either following discussions with the client/ATA or email. This means that the client's signature is not required on the printed Plan.

An employer must be given an opportunity to participate in the preparation of the Recovery Plan, however it does not mean they need to see a copy of the plan. Ensure you do not show any sensitive client information to the employer. Check all auto-populated fields and remove data as necessary. Where there is a sensitive claim we must follow directions by the client and not involve the employer.

**b** Generate a copy of the Recovery Plan for the client.

### NOTE How do you generate a copy of the Recovery Plan?

Click Send PDF to Eos on the Salesforce Recovery Plan.

Result: This will generate ACC7979 form.

**c** Arrange to send the client a copy of their Recovery Plan.

### NOTE What if the client wants the Recovery Plan sent to them by email?

Follow the Emailing from Eos – System Steps.

NGCM - FINAL Emailing from Eos - System Steps

### NOTE What if the client wants the Recovery Plan sent to them by mail?

Refer to the NG GUIDELINES Sending Letters.

NG GUIDELINES Sending Letters in NGCM

#### 4.0 Determine next steps

Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Salesforce, create or update the plan with the new information or outcome of the conversation.

### NOTE How do you create or update the Recovery

Go to Create or Update Recovery Plan process.

PROCESS Create or Update Recovery
Plan

**b** Assess the information in the Recovery Plan and determine if the next step is clear and obvious.

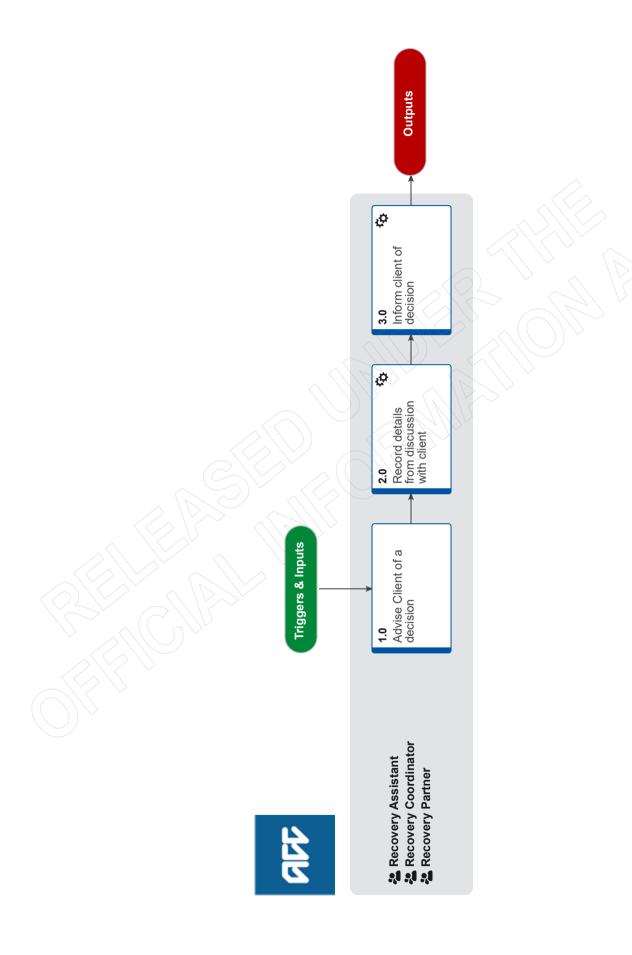
### NOTE What if you need internal advice to determine next steps of the client's recovery?

Go to Seek Internal Guidance process.

PROCESS Seek Internal Guidance

		at if you need clinical information to help nplete the client's recovery plan?	NOTE	What if you need to reinstate Weekly Compensation?
	Go	to Request Clinical Records process.		In Eos, at ACC45 level, complete the reinstatement information in the Non Standard WC
		PROCESS Request Clinical Records		Setup Eform (documents tab, stand alone eform
С		rour client needs to be transitioned to another r client is either tracking ahead or behind ery Plan.		category). Then create a Setup weekly comp Entitlement task (the eform is linked automatically). The task auto routes to the Centralised
		at if your client needs to be Transitioned inother team?		Weekly Compensation queue.
		nember to align the due date for Recovery		dd a Non standard WC set up Eform
	Che Go	ck-in conversations with key milestones. to Transition Claim process.	lowing	
d		PROCESS Transition Claim assessment to gather more information about	NOTE	What if your client is unlikely to be able to return to their pre-injury occupation due to their injury?
	the client's in	njury or recovery needs.		Go to Arrange Vocational Assessment web link,
	Go	w do you arrange the assessment? to the relevant web link below, then select the essment process.		<ul> <li>and then select these processes:</li> <li>Arrange Initial Occupational Assessment process, and</li> <li>Arrange Initial Medical Assessment process.</li> </ul>
	_	e Social Interventions / Supports jo.promapp.com/accnz/Process/Group/fde996	NOTE	
		e Vocational Interventions / Supports jo.promapp.com/accnz/Process/Group/ff8eb0l		If your client is undertaking Initial Occupational Assessment/Initial Medical Assessment (IOA/
	_	e Treatment Interventions / Supports po.promapp.com/accnz/Process/Group/1bbffb		IMA), Vocational Independence Occupational Assessment/Vocational Independence Medical Assessment (VIOA/VIMA), then arrange to send
	_	e Ancillary Services po.promapp.com/accnz/Process/Group/0846c		your client a copy of their Recovery Plan, requesting their signature to confirm the agreed
е	Determine th	ne type of support required to help your client heir recovery goal(s) and confirm their eligi-		interventions. Go to Activity 3.0 Print Recovery Plan.
	bility. Consider our Decision-making principles in the			nine if your client no longer needs support.
	Recovery IVI	anagement Guide.	NOTE	What if the client has confirmed they don't re quire any supports?
	of financial s	Is about how to create tasks for other types supports, search for the support type in Promp sum, independence allowance, HCSS		Go to Stop Supports.  PROCESS Stop Supports
	payments).			
	payments).	IDELINES Recovery Management		
	payments).  NG GUI  NOTE What clie	at if you need to set up supports for the nt?		
	payments).  NG GUI  NOTE What clie  If you have the see Mare have link.	at if you need to set up supports for the nt? ou need to: t up social supports for the client, go to nage Social Interventions / Supports web link. t up vocational supports for the client, go to nage Vocational Interventions / Supports web		
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	payments).  NG GUI  NOTE What clie  If you see Mare see Mare link.  • resonance Treatments of the control of th	at if you need to set up supports for the nt? ou need to: t up social supports for the client, go to nage Social Interventions / Supports web link. t up vocational supports for the client, go to nage Vocational Interventions / Supports web		
	payments).  NG GUI  NOTE What clie of your seem of your s	at if you need to set up supports for the int?  ou need to: t up social supports for the client, go to nage Social Interventions / Supports web link. t up vocational supports for the client, go to nage Vocational Interventions / Supports web spond to a treatment request, go to Manage atment Interventions / Supports web link.		
	payments).  NG GUI  NOTE What clie  If you see Mare see Mare see Mare link.  Treat Treat Manage https://g  Manage https://g  Manage https://g	at if you need to set up supports for the int?  ou need to: t up social supports for the client, go to nage Social Interventions / Supports web link. t up vocational supports for the client, go to nage Vocational Interventions / Supports web spond to a treatment request, go to Manage atment Interventions / Supports web link.  e Social Interventions / Supports go.promapp.com/accnz/Process/Group/fde996  e Vocational Interventions / Supports		
	payments).  NG GUI  NOTE What clie If you see Mare Ink. Ink. Irea Manage https://g  Manage https://g  NOTE What Manage https://g	at if you need to set up supports for the int?  ou need to: It up social supports for the client, go to hage Social Interventions / Supports web link. It up vocational supports for the client, go to hage Vocational Interventions / Supports web spond to a treatment request, go to Manage atment Interventions / Supports web link.  Social Interventions / Supports yo.promapp.com/accnz/Process/Group/fde996  Vocational Interventions / Supports yo.promapp.com/accnz/Process/Group/ff8eb01  Treatment Interventions / Supports		





### Issue Recovery Decision v28.0



#### **Summary**

#### Objective

To record recovery decisions that we've made on a claim, so that in the future these decisions can be easily located by the business.

#### **Background**

When documenting our decisions, we need to show a clear rationale and include key details. This is particularly important for decisions where we have not been able to approve a request.

Owner Expert

[Out	of So	cope		

#### **Procedure**

#### 1.0 Advise Client of a decision

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Check the client's preferred communication channel (SMS, email, etc), and if the client has a safe contact.

### NOTE What if the decision is to Decline cover for a Complex Mental Injury claim?

Contact the Lead Provider to discuss the decision and determine the best way to deliver the decision (consider if there are any safety issues).

Complex Mental Injury Decline and Disengagement Best Practice Guide

### NOTE Does the provider need to receive a decision letter?

Notifying the provider varies depending on the decision or support that is affected. If a support is being changed the provider is notified when the purchase order is updated. Other circumstances when a provider needs to be notified are addressed in the relevant process. Including but not limited to 'Stop Supports' and 'Maintain Supports'.

PROCESS Stop Supports

### NOTE What if the client has already been contacted?

Go to Activity 2.0 Record details from discussion with the client

**b** Contact the client. Confirm you are speaking with the right person by asking ACC's identity check questions. For CMI claims, refer to the policy below.

Identity Check Policy

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	Comaciino	Sensilive	CIAIMS	CHENIS	POIIC)

#### NOTE What if you are unable to contact the client?

- If you are unable to reach the client on your first attempt, leave voicemail message and send a call back notification if appropriate. Create a Contact Action on the Recovery Plan to contact the client again in 3 days' time (unless urgent). Note in the task description that this is the first attempt to contact the client. If you are in Assisted Recovery also provide decision rationale in the task description field.
- 2nd attempt in 3 days: leave voicemail message and send another call back notification if appropriate. Consider contacting other stakeholders for an update and to confirm client contact details. Push out the task for another 5 days.
- 3rd attempt in 5 days: send the decision letter. If you are unsure about sending the decision letter, contact a Practice Mentor to discuss.

Create a Notification - System Steps
Recovery Plan - Create Contact Actions - System
Steps

### NOTE What if the client requests the Recovery Team Member to discuss the treatment request with another person?

Refer to the process below

PROCESS Obtain Authority to Act (ATA)

c Discuss the decision with the client and if required ensure you have the client's agreement.

#### 2.0 Record details from discussion with client

Recovery Assistant, Recovery Coordinator, Recovery Partner

- **a** In Salesforce, if relevant record the details of the discussion with the client on the claim.
  - NG Principles Decision Making
- **b** Create a new contact. Record the following in the description field:
  - Decision type [APPROVED/ADVERSE/DECLINED/ PARTIALLY APPROVED] DECISION
  - Provide in detail what was requested [eg. 6 hours home help per week over next 4 weeks]
  - · Who made the request and when
  - · The final decision
  - Who was consulted [eg. Recovery Support hotline guidance from Practice Mentor received 10/03/19]
  - Rationale for the final decision [(e.g. Partially approved home help of 2 hours per week to support Helen with cleaning bathroom, laundry, making beds and vacuuming. Did not approve 6 hours per week as agreed with PM that it is likely the agency could achieve the necessary support tasks within 2 hours]

\_\_\_\_\_

#### 3.0 Inform client of decision

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Create and complete the relevant decision letter.

NOTE: The letter you use will depend on the decision to be made. What is important is that we add the below comment to the decision letter that we use to refer back to the decision that is being revoked.

= this letter revokes and replaces the previous letter

of ../../....

NOTE What if there is a decision to Revoke an injury and replace with a new injury?

Follow the Revoking Cover process below

PROCESS Revoking Cover

### NOTE What if cover for a Complex Mental Injury is declined?

Generate and issue the SCU999 letter. Amend as appropriate and remove the following paragraph.

'Our ability to approve claims has been set out in ACC's legislation. We've said we're unable to approve your claim, this does not mean we saying that what you have experienced has not affected you, or that what is happening to you is unimportant, only that we can't cover it.'

# NOTE What if the decision is confirming cover for Mental Injury - for either Mental Injury caused by Physical Injury (MICPI) or for Work Related Mental Injury (WRMI)?

For both instances send the 'CVR51 Approve cover mental injury' letter

Amend the letter appropriately to reflect the individual situation.

### NOTE What if the decision is not to cover all injuries for a mental injury?

Issue the MIS12 - Approve Mental Injury and include the following after the paragraph which mentions the client's date of injury.

'Based on Assessment information we have received, we are unable to approve the following injury/injuries The report indicates that the event (s) you experienced didn't cause the mental injury/injuries.

[Add Mental Injury diagnosis]

#### NOTE What if the preferred option is email?

Follow the system steps for Emailing from Eos using a template and attach the 'ACC255 Working Together' document.

NGCM - FINAL Emailing from Eos using a Template - System Steps

### NOTE What if the preferred communication is by post?

Generate the appropriate decision letter. At Recovery Plan level 'Add Activity' and select 'NGCM - Send Letter' task. Attach the letter to the task, include a note to print and include the "ACC255 Working Together" document.

NG GUIDELINES Sending Letters in NGCM

### NOTE How do I know when a decision letter is required?

Refer to the Business Rules below to understand when we need to communicate a decision relating to support(s) for a client in writing.

### NOTE How do I know what supporting information to send with a written decision?

This is dependent on the decision itself and consideration is on case by case basis – dependant on the client, the nature of the decision and the amount of information we had considered.

The reason for the decision should be sufficiently clear in the letter that providing supporting information will generally not be required. However, if you have a case where you feel that providing supporting information may be appropriate, then you could check this with our Practice Mentor support.

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- **b** Update the Recovery plan with the outcome.
- c This process ends.

### Individual Rehabilitation Plans Policy vs.0



#### Summary

#### Objective

The IRP contains information about the treatment, social rehabilitation and vocational rehabilitation a client needs to restore their health, independence and participation in society to the highest possible level.

An IRP is a legal document under the Accident Compensation Act 2001 (AC Act), ie:

- ACC must provide or do what has been agreed to in an IRP
- the client cannot unreasonably refuse to complete an intervention that has been agreed in the plan.

An IRP must be updated when the client's circumstances change and the agreed interventions no longer apply or cannot be completed.

- 1) Individual Rehabilitation Plan (IRP)
- 2) When ACC and the client must negotiate and agree upon an IRP
- 3) Recording social rehabilitation on the IRP
- 4) Providing assistance without an IRP
- 5) Exclusions
- 6) Paperless IRPs
- 7) Participant's Rights
- 8) 8. Legislative Requirements

Owner [Out of Scope]

Expert

#### **Policy**

#### 1.0 Individual Rehabilitation Plan (IRP)

a An IRP is an agreement between the client and ACC that details vocational and social interventions (and may also include treatment) to assist in a client's recovery.

The IRP must be comprehensive and look at the client as a whole person, in the context of their family, whānau and culture.

An IRP is a legal document under the Accident Compensation Act 2001 (AC Act).

ACC must provide or do what has been agreed to in an IRP.

The client cannot unreasonably refuse to complete an intervention that has been agreed in the plan.

An IRP must be ongoing and active.

An IRP must be updated when the client's circumstances change, and the agreed interventions no longer apply or cannot be completed.

### 2.0 When ACC and the client must negotiate and agree upon an IRP

a An IRP is required for claims where social or vocational rehabilitation is being provided and the claim is expected to exceed 13 weeks duration (see Section 75 of the AC Act)

Claims held in the Short Term Claims Centres (STCC) do not have IRPs. All claims transferred from an STCC to a branch for case management must have an IRP developed in the branch.

#### 3.0 Recording social rehabilitation on the IRP

- a In addition to all the normal requirements for IRP content and how it is prepared and modified, a client's IRP must also include:
  - the social rehabilitation outcome to be achieved and the expected date for achieving that outcome
  - the results of the social rehabilitation assessment, either:
  - identifying that a package of care has been put in place
  - listing the identified needs
  - stating that 'No social rehabilitation needs were identified' for the individual client.

#### 4.0 Providing assistance without an IRP

a We can provide social and vocational rehabilitation assistance to a client without an established IRP for the first 13 weeks from the date we've accepted a claim for cover (see section 76 of the AC Act).

### NOTE What if an IRP is developed during or after that period:

- the IRP must consider the client's social and vocational rehabilitation needs
- all social and vocational rehabilitation assistance provided must be included in the IRP.

#### 5.0 Exclusions

a If the only rehabilitation the client will receive is treatment, an IRP is not legally required, even if the treatment extends beyond 13 weeks.

The following claims do not require an IRP:

- claims open only to pay weekly compensation to the employer as reimbursement (i.e. an Employer Reimbursement Agreement)
- claims awaiting a cover or entitlement decision
- claims open only for payment of an independence allowance
- · accidental death claims
- claims declined under section 60, if they are only receiving weekly compensation
- claims open only for fraud, review or appeal.

#### 6.0 Paperless IRPs

a Paperless IRPs can be used for short-term, noncomplicated claims. In these scenarios, the case owner and client can verbally agree to the IRP goals and rehabilitation actions, along with an appropriate outcome date.

The case owner must explain to the client, the purpose of a rehabilitation plan and offer the choice of how to agree to the plan (by phone, in a meeting, by email, or by signing a paper copy).

The case owner must advise the client of their review rights.

- b Use a paperless IRP when:
  - the claim has a rehab outcome of Return to Work (RTW), same job;
  - the Expected Claim Outcome (ECO) is under 365 days;
     and
  - the client has a sound relationship with ACC and they are happy to proceed this way.
- C Do not use a paperless IRP in cases where:
  - the rehab direction is not RTW, same job;
  - · the client requests a written IRP;
  - the case owner decides a written IRP is preferable; or
  - the client intends to leave New Zealand.

### NOTE A paperless IRP must not be used when any part of it is not agreed to

Where the IRP does not contain or does not provide rehabilitation as requested by the client, do not use a paperless IRP. There can be no situation where a paperless IRP is used when declining or not providing what has been applied for

#### 7.0 Participants' rights

- a Schedule 1, Part 1 (7) relates to participants' rights, including:
  - the client's right to information about the rehabilitation they are eligible for, including the vocational independence process and the IRP process
  - the right to have a support person present when preparing an IRP
  - the consequences of agreeing to the IRP
  - the lead health practitioner's and employer's right to participate in preparing the IRP
  - ACC's responsibility to meet the costs of preparing an IRP.
  - AC Act 2001, Schedule 1, Clause 7 Preparation of individual rehabilitation plan http://www.legislation.govt.nz/act/public/2001/0049/lat
- b The lead health practitioner and employer should be invited to participate in the preparation of the IRP, however this does not mean they need to see a copy of the plan. They also do not have the right to review.

#### 8.0 Legislative Requirements

- a Section 77 states that the IRP must identify the:
  - client's needs for rehabilitation, including any social and vocational rehabilitation
  - assessments to be done
  - services appropriate to those needs and whether ACC is liable to provide any or all of those services
  - the services ACC will pay for or contribute to.
  - An IRP must be updated from time to time to reflect the outcome of assessments done and progress made under the plan. See Section 78 and Schedule 1, Part 1, (10).
  - ACC is required to ask the client to agree to the IRP and if after a reasonable time the client does not agree, ACC can advise the client the IRP is 'regarded as finalised'. See Schedule 1, Part 1, (8). An IRP must only be 'regarded as finalised' as a last resort, after every reasonable effort to gain the client's agreement has failed.
  - A client has the right to review an IRP after agreeing to it, or it being 'regarded as finalised'. See Schedule 1, Part 1, (9).
  - ACC is required to fund the services it agreed to provide in the IRP. See Schedule 1, Part 1, (8).

#### **NOTE** Signing the IRP

It is not a legislative requirement that the client signs the IRP, however this is current policy as it is the best evidence of a client's agreement.

### About Vocational Rehabilitation (VR) Policy v11.0



#### Summary

#### **Objective**

This policy defines vocational rehabilitation. Use this policy to understand:

- 1. What is vocational rehabilitation
- 2. Eligibility to vocational rehabilitation
- 3. Vocational Rehabilitation and the Recovery Plan (RP) / Individual Rehabilitation Plan (IRP)
- 4. Preferred vocational rehabilitation options
- 5. Requirements for vocational rehabilitation
- 6. Duration of vocational rehabilitation
- 7. Legislation Reference

Owner

**Expert** 

#### **Policy**

#### 1.0 What is Vocational Rehabilitation

a We define Vocational Rehabilitation (VR) as the assistance necessary to achieve a meaningful and sustainable vocational outcome, whether this be to assist a client to return to work or where this is not reasonably practical. prepare the client for work readiness.

The goal of VR is to assist the client to:

- · Maintain employment ('Return to my preinjury role'); or
- · Obtain employment ('Return to a lighter work type'); or
- · Regain or acquire vocational independence ('Work and manage my life')

#### 2.0 Eligibility to Vocational Rehabilitation

- a We must provide VR 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.

We must start to consider VR as soon as we decide that a client is likely to be eligible.

#### 3.0 Vocational Rehabilitation and the Recovery Plan (RP)

a All clients who could be entitled to VR must have a Recovery Plan (RP).

You must develop the RP within 13 weeks of the client's injury being accepted for cover.

When determining a client's VR you must take into account the VR outcome agreed in their RP.

For more information see:

Recovery Plan Policy

Create or Update Recovery Plan

#### 4.0 Preferred Vocational Rehabilitation options

- a You must determine whether the client can return to the same employment and employer they had before their incapacity. If this isn't possible, decide which of the following is the most reasonable and practical option for the
  - return to a different kind of employment with their previous employer
  - · return to the same kind of employment with a different employer
  - use their experience, education, or training in a different kind of employment with a different employer
  - help the client to use as many of their pre-injury skills as possible to get employment.

#### 5.0 Requirements of Vocational Rehabilitation

- a The vocational rehabilitation provided to a client must meet the following criteria:
  - · be likely to achieve the vocational goals recorded in the client's RP
  - · cost-effective and perhaps help to reduce other costs, such as weekly compensation
  - · appropriate in the client's circumstances
  - · sustainable by the client in the long term
  - · tailored to the client's needs and abilities, especially if they have a serious injury

#### **NOTE** Examples

A client's pre-injury work required them to have a specific tertiary qualification. They can't return to that particular type of work. We can provide rehabilitation assistance to support them in doing other similar work that also uses that qualification

A client's brain injury means they can never return to their previous level of employment. We aim to return them to the closest equivalent level of employment that their injury will allow them to sustain

#### 6.0 Duration of Vocational Rehabilitation

a We must provide VR for the minimum period necessary to achieve the client's vocational outcome in their RP, but typically must not provide it for longer than 3 years (which needs not be consecutive).

ACC can provide VR for longer than 3 years at its discretion if it still fulfils the requirements of VR. Technical guidance should be sought in this circumstance.

We must resume VR, with the client's agreement, if they

	dine	ess after the initial VR. You must note the agreement neir RP.
7.0	Links	to Legislation
		Accident Compensation Act 2001, Section 85 - Corporation liable to provide vocational rehabilitation http://legislation.govt.nz/act/public/2001/0049/latest/D
		Accident Compensation Act 2001, Section 86 - Matters to be considered in deciding whether to provide vocational rehabilitation http://legislation.govt.nz/act/public/2001/0049/latest/D
		Accident Compensation Act 2001, Section 87 - Further matters to be considered in deciding whether to provide vocational rehabilitation http://legislation.govt.nz/act/public/2001/0049/latest/D
		Accident Compensation Act 2001, Section 88 - Voca-

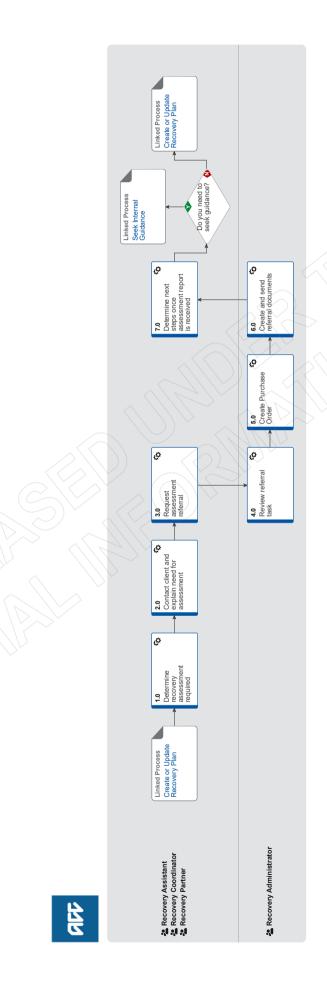
tional rehabilitation may start or resume if circums-

http://legislation.govt.nz/act/public/2001/0049/latest/D

tances change

### Arrange Vocational Rehabilitation Review Assessment va.o





### Arrange Vocational Rehabilitation Review Assessment value



#### Summary

#### Objective

The purpose is to create and send a Vocational Rehabilitation Review referral in order to provide the most appropriate support for our clients throughout their recovery.

#### **Background**

A Vocational Rehabilitation Review (VRR) is a brief clinical assessment to assist people returning to work following an injury.

The VRR service is designed for anyone who is currently receiving a Stay at Work (SAW) or Back to Work (BTW) service and medical aspects of 'fitness for work' are unclear, or rehabilitation has stalled. It is designed to be readily available and easy to access for case owners, vocational rehabilitation providers and GPs.

Use this service when you need an expert clinical opinion and recommendations from a medical specialist on the client's fitness for work, medical certification and/or their ability to participate in a Vocational Rehabilitation Service (VOC) programme.

The VRR can be done at any point in the client's vocational rehabilitation (up until they begin Vocational Independence Assessments).

Owner Expert



#### **Procedure**



Create or Update Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner

#### 1.0 Determine recovery assessment required Recovery Assistant, Recovery Coordinator, Recovery

Recovery Assistant, Recovery Coordinator, Recovery Partner

**a** Confirm client's eligibility for the Vocational Rehabilitation Review (VRR) assessment.

### NOTE When would you consider referring for a VRR?

If any of the following criteria are met:

- momentum and confidence in the rehabilitation process has been lost
- a difference in opinion between the Vocational Rehabilitation Services (VOC) provider and General Practitioner (GP) about a proposed return to work plan
- a clearly defined medical opinion on fitness for work is required
- a client doesn't have a GP and needs medical clearance to undertake a return to work programme with a VOC provider
- because the client fears re-injury or pain when undertaking extended duties
- a client is experiencing an increase in pain during a work trial and it is unsure if it is safe
- the employer is reluctant to extend the client's duties in case they aggravate their injury
- medical leadership is required to restore a team approach.

To confirm eligibility criteria seek internal guidance from an advisor from Recovery Support. Refer to (NGCM) Seek Internal Guidance.

PROCESS Seek Internal Guidance

#### NG Principles Decision Making

#### NOTE What are the types of referral?

- standard
- complex

#### NOTE When would you refer for a complex VRR?

- a client who is unable to return to their preinjury role
- a client whose case relates to a complex physical injury
- a client who has a covered complex mental injury
- where the covered injury is for a moderate to severe traumatic brain injury
- where the claim is older than 6 months at the time of the referral.

## NOTE What if a Vocational Rehabilitation Service (VOC) provider is requesting prior approval for a VRR referral?

VRS providers can ask for up to, and including, three VRRs before seeking approval from ACC. Check Eos to confirm the number of previous VRR services the client has had.

If the request made is for VRR number:

1, 2 or 3: The VOC provider can make a direct referral to the VRR provider using the ACC6245 provider referral form. They do not need prior approval but they must let the client's Recovery Team/member and GP know. Let the VOC provider know that they can arrange the referral. Add the Agreed Intervention to the Recovery Plan. No further action is required by ACC until the report is received.

4 or greater: Recovery Team/member should consider the request:

If you approve the request:

· Continue with this process

If you decline the request:

- Generate and send the following decline letters:
- VR14 Additional vocational rehabilitation review
- decline client
- VR15 Additional Vocational rehabilitation review decline GP

#### NOTE How does a GP request a VRR?

- · phoning the Recovery Team/Member
- ticking the relevant option on the eACC18 Medical certificate

The Recovery Team/Member will make the referral on their behalf.

#### **NOTE** Timeframes

If the service has been initiated during VR, then the VRR component must end before the client enters the Vocational Independence process. No further assistance can be offered past this point as this may be perceived as providing on-going rehabilitation.

#### NOTE What are alternative services to consider?

For clients with complex diagnostic issues, consider Medical Case Review (MCR) or Medical Single Discipline Assessment (MSDA). Go to (NGCM) Seek Internal Guidance, for the best option.

PROCESS Seek Internal Guidance

**b** Ensure current medical notes are on file so they can be sent to the VRR provider.

### NOTE What if the current medical notes are not on

You will need to obtain these before the referral is sent to the provider. Go to (NGCM) Request Clinical Records.

PROCESS Request Clinical Records

#### 2.0 Contact client and explain need for assessment

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Check that the client has granted ACC the authority to collect medical and other records.

View Client Consent

### NOTE What if the client has not granted ACC authority to collect medical and other records?

You will need to obtain the client's authority to collect medical and other records. Refer to (NGCM) Obtain Client Authority to Collect Information.

PROCESS Obtain Client Authority to Collect Information

- **b** Open Group VMS SharePoint site and identify potential providers that the client can use for this service. Suitable providers will be geographically close to the client and capable of providing the assessment. Take the client's cultural or other needs into consideration.
  - Service Contracts and Contracted Providers MFP spreadsheet
  - Group VMS SharePoint site

#### NOTE What if want to seek a second opinion?

If you're looking for a second opinion regarding diagnosis or treatment, then the VRR is not the right service. Alternatively, a GP can refer to another doctor for a second opinion using the clinical services contract or other contracted services such as the MCR or SDA contracts, which may be more appropriate.

A doctor can also refer to another doctor for advice using the Clinical Services contract for a standard or complex second opinion assessment

- Arranging an additional medical assessment referral
- c Contact the client and confirm you are speaking with the right person by asking ACC's identity check questions.
  - Identity Check Policy
- **d** Explain that you are referring them to this service and what the service will do, as well as what their responsibilities are. For more guidance on how to discuss the service with your client see note below.
  - Vocational Rehabilitation Review (VRR) Service Page
  - Client Legislative Rights and Responsibilities Policy
  - Client choice of providers Policy
- Advise the client of potential providers you have identified in their location or in the area closet to them, in the VMS tool.

### NOTE What else do you need to discuss with the client?

- the time, place and name of the assessor. Make sure that your client can attend, explain to them the benefits of attending the appointment and their responsibilities to participate in their rehabilitation.
- Explain that there is no cost, that we can contribute or arrange travel and that they can bring a support person with them.
- Let them know that the specialist will send us a report which we will send them a copy of.
- Ensure your client understands the purpose of the assessment and the possible outcomes.

### NOTE What if there are no providers at the Client's location?

Send a request to the Recovery Administration Team to set up taxi or transport.

<b>PROCESS</b>	Arrange Ancillar	y Taxi Service
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#### NOTE What if the client does not agree to participate? Find out why the client does not want to participate and consider their reasoning and alternatives. Go to (NGCM) Seek Internal Guidance, if your unsure how to proceed. PROCESS Seek Internal Guidance Choose the next available appointment in the Group VMS SharePoint site . When you receive confirmation of the appointment from the Provider, record a contact. Go to Group VMS SharePoint site to confirm the VMS booking. Group VMS SharePoint site NOTE Do ACC receive a confirmation of the booking? For the Group VMS SharePoint site, you won't get any confirmation from the provider that the assessment is booked. However, of your client's name and claim number are recorded in the spreadsheet, then it is considered that you have that booking confirmed. When the referral documents are emailed to the provider, you will usually get an email back confirming receipt. If the provider cancels the clinic, ACC will be informed. What if the provider does not appear as a NOTE current participant? Load the "vendor/provider" as a participant. This enables the Recovery Administration Team to validate the email and then email the purchase order directly from Eos if required. The Recovery Team Member must ensure all known participants are loaded on the file and then removed when no longer relevant. For information on how to manage participants, refer to Manage Participants (Eos Online Help). Manage Participants (Eos Online Help) **Q** Create a reminder action to notify the client of appointment details the day prior to the appointment. Enter the date, time and location of the appointment in the description field. h In Salesforce, add a contact note as a record of the conversation. Add the agreed intervention to the Recovery Plan. NOTE How do you update the Recovery Plan?

#### 3.0 Request assessment referral

Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Eos, find all the documents that need to be sent along with the referral.

Plan

Go to (NGCM) Create or Update Recovery Plan.

PROCESS Create or Update Recovery

#### NOTE What documents do you need to include?

- · Current medical certificate
- Previous or most recent Stay at Work (SAW) report
- Previous or most recent Back to Work (BTW) report
- Previous or most recent WSA report
- · ACC188 Job Task Analysis form if on file
- GP notes
- Specialist notes
- Imaging notes
- Physio notes
- DHB notes
- Signed ACC6300 or ACC6300D Authority to collect medical and other records. NOTE: If verbal consent was provided please note this in the task eform for Recovery Admin.

## NOTE What do you do if you don't have all the information to complete the referral?

Once you have requested the additional information required, create a reminder action, set the target date for when you expect to receive the information. If you require further information, refer to Gather Additional Information or Advice.

- Gather Additional Information or Advice
- b Perform privacy checks on documents.
  - Privacy Check Before Disclosing Information Policy

#### NOTE What do you need to check?

Check documents:

- · are relevant to the referral
- do not contain any third party information
- do not contain any other information that needs to be withheld.

For details on what checks you need to complete before sending documents out, refer to NG SUP-PORTING INFORMATION Inbound and Outbound Document Checks.

NG SUPPORTING INFORMATION Inbound and Outbound Document Checks

## NOTE What if you find information that needs to be redacted?

Send an email to Recovery Administration and include the document to be redacted plus your redaction instructions, before adding the document to the document group.

- NGCM Redact information from PDF documents
- C Create a referral-specific document group and enter 'Vocational Rehabilitation Review' and todays date in the document group description field.
- d Add the documents to the group.

## NOTE What if there are documents from other claims that are relevant to the assessment?

When a request for a referral is required and the supporting documents are on another claim, it is important to transfer the documents to the relevant claim. This will ensure the right documents support the recovery decisions for each claim.

To transfer documents from one claim to another:

- Create a bulk print of all documents on the other relevant claim and complete mandatory fields and description
- · Open PDF document from email link
- File the PDF away to the relevant claim
- Repeat these steps if there is relevant documents on multiple relevant claims

The PDF should also be renamed something short but relevant, and identify which claim number the information came from, so it is included/printed in further referrals or copy files. E.g. Medical records and reports from claim: 100XXXXXXXX

Please do not create a bulk print on one claim and then move it to another claim, renaming it and using it in a referral for advice as it will not appear in any file copy subsequently used.

- 1	7			
		N /	document	
		Manage	aocument	arouns

e Generate a Vocational Rehabilitation referral task for Recovery Administration for a 'Vocational Rehabilitation Review'.

## NOTE How do you refer a task to Recovery Administration?

Please see Referring Tasks to Recovery Administration - Principles for further information and guidance.

Referring Tasks to Recovery Administration - Principles

## NOTE How do you generate and send a referral task to Recovery Administration?

Go to NGCM Create a Referral Task.

Creating Manage Referral Tasks - System Steps

# NOTE What do you do if Mental Injury Claim information needs to be sent with a Referral from a Physical Injury Claim?

In Eos, manually transfer the Referral Task generated to the Recovery Administration department with the Sensitive Claims Administrator

## NOTE What information do you need to include in the referral task?

- VMS booking sheet region used (eg Southern folder>Dunedin>Dr ABC)
- · Date and time of the booking
- Vendor preference, if applicable
- Type of assessment (standard/complex)
- Rehabilitation interventions and outcomes (past, present and planned)
- Any recommendations (medical) from Recovery Support
- Employment details (including, if relevant and known, any pre-injury jobs, work type and reasons for leaving pre-injury occupation)
- · Relevant provider contact details
- Any known or potential barriers to rehabilitation (e.g. transportation, childcare etc.)
- Provide the correct service code. Refer to the Purchase Order guidelines.

NG GUIDELINES Purchase Order Details - Voca	1-
tional Rehabilitation Review	

#### NOTE Will extra time be required?

Inform Recovery Administration that extra time is required and to add to the purchase order the VMR02 service code to cover the time taken for the VRR provider to communicate their recommendations with each party.

Vocational Rehabilitation Review (VRR) Service
Page

Service Contracts and Contracted Providers - MFP spreadsheet

## NOTE What if the request is urgent and needs to be completed that day?

- Call Recovery Administration
- Give the Recovery Administrator who answers the call the claim number
- The Recovery Administrator will open the claim in Eos and find the task on the claim
- Transfer the task into the Recovery Administrator's name. This will move it to their personal Eos queue and stop it from being reallocated by Salesforce.

#### NOTE What if the request is required in the future?

If the request is required in the future, set a reminder task for the future date when the service will be required. When the reminder task comes up send a task to Recovery Administration to continue with the process. Consider the contract timeframes and SLAs as specified in the service page

#### NOTE What are the SLAs?

The referral tasks route to the Recovery Administration team with an SLA of 24 hours.

f Complete all the mandatory fields and any additional information to be included in the referral form including questions received via written guidance or hotline advice from Recovery Support and the standard questions supporting reason for referral or assessment request. For guidance see the link below.

#### NOTE What if your client has a Care indicator?

You need to clearly outline this in the e-form.

Refer to Disclosure of Care Indicator Information to Third Parties Policy for more information on how information is disclosed.

Disclosure of Care Indicator Information to Third Pa	ır.
ties Policy	

**g** Ensure you inform the GP of the referral, if required. Note task if a VR13 should be sent to GP to advise of the referral.

#### 4.0 Review referral task

**Recovery Administrator** 

**a** Following the task assignment in Salesforce, navigate to Eos and select 'Do Task' from your task queue.

#### **NOTE** What if you cannot open the task?

If you pull a task through that you cannot open, transfer it back into the relevant Recovery Administration queue to be allocated to an Administrator who has the Secured Action to complete the task.

Ensure all tasks related to sensitive claims are transferred back to the Recovery Administration Department for the Sensitive Claims Administrator, all other claim tasks should go to the Recovery Administration Department queue with the Recovery Administrator role.

You may also have pulled through a task with a claim that was managed in the Launch Pad Recovery Plan (LPRP) subcase before 12 August 2019.

Only certain Recovery Administrators have the Secured Action to complete these tasks.

**b** Review the task to ensure it has all the information you need to proceed.

#### **NOTE** What if the target date needs clarification?

Target date clarification may need to be sought in the following situations:

- · Target date has passed
- Target date is in 0-6 weeks time
- You are unsure of the target date based on the information provided.

If this is the case, go to NG PRINCIPLES Working in the Administration Team in below Note.

#### NOTE What if you don't have all the information you need?

If required information is missing from the task, or you need guidance on working within the Administration Team, go to NG PRINCIPLES Working in the Administration Team.

NG PRINCIP	LES Work	ing in the	Administratio	'n
Team				

#### 5.0 Create Purchase Order

**Recovery Administrator** 

a	In Eos,	generate a	Purchase	Order for the	specified
	referral				

Creating purchase orders using general + QE

NG GUIDELINES Purchase Order Details - Vocational Rehabilitation Review

Purchase Order - Handy Hints on how to create and edit POs

- b Identify and select the vendor as specified by the Recovery Team Member.
- c Locate the contracted vendor via the Geographic Location search, once selected add the vendor as a 'Vendor -Contracted' participant in Eos.
- d Approve the purchase order.

#### NOTE What if the purchase order requires a higher delegation?

Refer to the 'Request Authorisation for a Purchase Order - System Steps'.

Request Authorisation for a Purchase Order -System Steps

#### NOTE What if you get a limited payment error message when authorising the purchase order?

If you have received a request to amend a purchase order or create a purchase order for client reimbursements, change the limited payment

- 1). In Eos, go to the 'Validations' tab, select 'Edit' and update the Limited Payment List Indicator to
- 2). Select 'OK'.
- 3). Go back to the purchase order to authorise.

Once you have authorised the purchase order and notified the vendor please remember to change the Limited Payment List Indicator to 'Yes'.

#### 6.0 Create and send referral documents

**Recovery Administrator** 

- a Create the referral document for the service.
  - ACC98 ACC referral for Vocational Services
- **b** Populate with extra information noted on the referral task.
- c Check the task to ensure all relevant information is captured before you exit the document.

#### NOTE What does a quality referral look like?

Refer to the Admin Template - Vocational Rehabilitation Review Referral.

- Admin Template Vocational Rehabilitation Review Referral
- d Ensure you have completed the document (to convert the document into a non-editable pdf).
- e Link the referral to the document group 'Vocational Rehabilitation Review'.
- Perform privacy checks using NG SUPPORTING INFOR-MATION Inbound and Outbound Document Checks.
  - NG SUPPORTING INFORMATION Inbound and **Outbound Document Checks**
- **q** Update the VMS booking sheet with the date the referral is sent.

NOTE For information and instructions to open a Update the VMS booking sheet, go to Book an appointment through the Centralised booking system (CBS).

<b>PROCESS</b>	Book an appointment through
	the Centralised booking system
	(CBS)

h Create and send an email using 'Requests and referrals' template and attach the documents.

#### NOTE What if the document is too large to send in a single email?

Contact the vendor and ask if the referral can be sent by courier. If yes, confirm correct physical address, go to Prepare and Send Client Information by Courier then return to this process. Otherwise, send by email.

<b>► PROCESS</b>	Prepare and Send Client Infor-
	mation by Courier

- NGCM FINAL Emailing from Eos using a Template - System Steps
- i Send the referral to the vendor.

		NOTE	What if the Vendor requires the document be sent via courier?  Go to Prepare and Send Client Information to Courier process.  PROCESS Prepare and Send Client Information by Courier	у	NOT	What should you expect from the VRR report?  The medical assessor will conduct a brief clinical examination of the client and provide their opinion and recommendations, focusing on the client's fitness for work.
	j	went - o Vocatio if requir VR clie	ne VR11 Vocational rehabilitation review appoclient letter to the client include a VOCIS131 anal rehabilitation review - client information stred.  R11 Vocational rehabilitation review appointment  OCIS131 Vocational rehabilitation review - client  Alternatively you can send the following letter.  • VR13 Vocational rehabilitation review notification - GP with a VOCIS132 GP information	eet nt - nt		You should expect:  • brief face-to-face assessment with very rapid turn-around time  • determine restrictions and fitness for work relating to the covered injury and/or other conditions  • explain to the client their current condition, injury recovery process and fitness for work  • provide the next rehabilitation steps (the service should complement the VOC being provided)  • identifying any other factors affecting recovery  • the assessor will clarify the diagnosis.  However, the service is not designed for clients
	k	GP Email o	sheet if needed.  R13 Vocational rehabilitation review notification  or phone employer (if authority given) and let to  f the assessment.			with complex diagnostic issues  Following the VRR, the provider will complete a short report.
		Alternat • VR12 ployer VR	tively you can send the following letter:  Vocational rehabilitation review notification –  R12 Vocational rehabilitation review notification			The provider will also:
7.0		In Sales	sforce, close the assigned referral task.  ne next steps once assessment repo	rt		for recommendations
	R		Assistant, Recovery Coordinator, Recover	<b>y</b> ())\>		NG GUIDELINES VMS Report Expectations
	a		e notification that the ACC6245 and VRR repo en received and is attached to the claim.	rt	NOT	What if the client fails to attend and/or participate in the VRR?  If the client fails to attend or take part in the VRR you should find out why. In some cases you may need to consider implementing the noncompliance process, seek guidance from Recovery Support and refer to Decline Entitlement When Client is Non-compliant Policy.
						Decline Entitlement When Client is Non-compliant
				b	repo	NG SUPPORTING INFORMATION Inbound and
				c	Obta to co	Outbound Document Checks in guidance from an advisor from Recovery Support nfirm next steps. This will ensure a robust decision is g made prior to issuing any formal decision.
						E Go to (NGCM) Seek Internal Guidance.
						PROCESS Seek Internal Guidance
				d	right	act the client and confirm you are speaking with the person by asking ACC's identity check questions.
				е	Disci face-	dentity Check Policy uss report and next steps with client. Consider if a to-face meeting is required, refer to NG GUIDE- S Client Face to Face Meetings.
						NG GUIDELINES Client Face to Face Meetings

#### NOTE What else do I need to discuss?

- remind them why the assessment was needed
- discuss the content of the report
- explain what will happen next, any entitlements that may be affected and the various options available.
- f Provide copy of the report to client and key stakeholders as per their preferred contact method.

## NOTE What if the client requests that the report is changed or incorrect?

A client can request that information held by ACC is changed or updated if it is factually incorrect (ie: wrong DOB, incorrect name spelling etc). If it is the opinion of an assessor or provider, the client can supply a 'statement of correction' to ACC which is then included with the report. This means that any time the report is sent out, the statement of correction must be sent as well.

Go to Managing a client's request to change personal information (CHIPS).

- Managing a client's request to change personal information
- g In Salesforce, add a contact note as a record of the conversation.
- h Update the agreed intervention in the Recovery Plan.

### ? Do you need to seek guidance?

Recovery Assistant, Recovery Coordinator, Recovery Partner

YES.... PROCESS Seek Internal Guidance

NO.... Continue

#### PROCESS Create or Update Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner

## Planning Vocational Rehabilitation (VR) post IOA/IMA Policy v4.0



#### Summary

#### Objective

This policy defines the requirement for provision of vocational rehabilitation (VR) once an Initial Occupational Assessment (IOA) / Initial Medical Assessment (IMA) have been completed. Use this policy to understand:

- 1. Planning vocational rehabilitation
- 2. Vocational Rehabilitation Planning Tool
- 3. Meeting with the client to agree on vocational rehabilitation
- 4. Dual plan/pathways option
- 5. Changes to the agreed vocational rehabilitation
- 6. Completion of vocational rehabilitation

#### **Background**

Determining and planning vocational rehabilitation following the IOA/IMA is a crucial step for client's where regaining fitness for their pre-injury employment is unlikely.

Use this policy to guide you with planning vocational rehabilitation after receiving the IOA and IMA reports.

Owner



**Expert** 

#### **Policy**

#### 1.0 Planning vocational rehabilitation

a ACC is required to provide vocational rehabilitation that meets the vocational rehabilitation needs of the client.

Planning vocational rehabilitation is about determining the most appropriate vocational options for a client and identifying the interventions or supports required to remove any barriers to enable the client to return to work or work readiness.

The information contained in the IOA and IMA reports will help determine which types of work to focus vocational rehabilitation towards. To help evaluate this information use the Vocational Rehabilitation Planning Tool (see below) to understand the vocational needs specific to each identified work type to help the client return to work or work readiness.

#### 2.0 Vocational Rehabilitation Planning Tool

a This tool has been designed to assist you with vocational rehabilitation planning. It should highlight all the medically sustainable, or likely to be, work types for the client, as specified in the IMA report. It will summarise the rehabilitation recommendations and vocational needs specific to each work type.

Having an outline of the viable work types and vocational needs specific to each work type should give you an informed starting point for a discussion with the client.

_ C				
	Vacational	Rehabilitation	Dlanning	Tool
	vocational	Renabilitation	riaiiiiiiu	100

#### Meeting with the client to agree on vocational rehabilitation

a It is important to take the client's views into consideration when agreeing on what vocational rehabilitation to provide. The vocational rehabilitation needs to provide a sustainable outcome within the legislative framework.

When considering what vocational rehabilitation we might agree to provide, the following matters should be taken into consideration:

- · whether the vocational rehabilitation is likely to achieve the goals in the client's Recovery Plan (RP) / Individual Rehabilitation Plan (IRP): and
- · whether the vocational rehabilitation is likely to be costeffective, having regard to the likelihood that costs of any entitlements the client is receiving will be reduced as a result of providing the vocational rehabilitation; and
- · whether the vocational rehabilitation is appropriate in the circumstances.
- **b** When you meet with the client, discuss:
  - the IOA and IMA assessments and answer any guestions they may have
  - whether a return to, or regaining fitness for, their preinjury employment is realistic and whether a change in VR goal is more appropriate (See 'Guidelines for managing the transition from maintain employment to obtain employment')
  - the alternative work type options to focus vocational rehabilitation towards and the vocational needs to address to return to work / work readiness
  - any other rehabilitation recommendations
  - · all of the likely services required to provide the agreed vocational rehabilitation (e.g. Back to Work programme)
  - · the VI rehabilitation pathway, if regaining fitness for the pre-injury employment is unlikely or not the focus of vocational rehabilitation (See 'About Vocational Independence (VI)' below)
  - an RP/IRP with the outcome of the IOA and IMA, any new goals and the agreed vocational rehabilitation. It is also recommended that if it is agreed to not implement any of the recommended rehabilitation identified by the IMA assessor that this is recorded in the plan with the reason/s for not doing so

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	About Vocational Independence Policy
	Guidelines for managing the change in targeted vocational outcome

#### 4.0 Dual plan/pathway option

a For some client's, the IMA might indicate that returning to, or regaining fitness for, their pre-injury employment might still be possible depending on their recovery progress. However, it might also be appropriate to concurrently focus vocational rehabilitation toward return to work / work readiness for alternative types of work.

In this circumstance, the client's RP/IRP might consist of a primary goal and secondary goal with agreed vocational rehabilitation focusing on achieving either outcome.

The primary goal might be the main focus for the client, however, having this dual focus will allow the client to seamlessly transition between goals if it later becomes more apparent that the primary goal is no longer suitable or achievable.

#### 5.0 Changes to the agreed vocational rehabilitation

ACC is obligated to provide a client with all rehabilitation recorded in the RP/IRP. If, at a later date, it is mutually agreed to not undertake any vocational rehabilitation recorded in the plan, this agreement should be updated on the plan clearly documenting the rationale for no longer providing it.
Individual Rehabilitation Plan Policy

**Create or Update Recovery Plan** 

#### 6.0 Completion of vocational rehabilitation

a Vocational rehabilitation is considered complete once all the agreed vocational rehabilitation recorded on the RP/ IRP has been completed and has achieved its purpose (i.e. towards the vocational rehabilitation goal). This is measured not just by completion of the funded service or rehabilitation programme but also includes looking at whether the identified barriers have been addressed.

#### **NOTE** Example 1 - Pain Management

If a pain management programme was recommended in order to equip the client with the skills and understanding to self-manage their pain, consideration at the end of the programme should be given as to whether outcome this was achieved.

#### **NOTE** Example 2 - Computer Training

If it was agreed that ACC would provide computer training to acquire the computer skills typically required for a particular work type/s, consideration should be given at the end of the training as to whether the client has successfully acquired these skills.

## Needs Assessment for Social Rehabilitation Policy vs.o



#### **Summary**

#### Objective

Social rehabilitation needs assessments identify:

- · the client's ability to do everyday living activities after the injury
- what needs they have, as a result of not being able to carry out any of those activities
- the most effective options and alternatives for meeting those needs.

Owner Expert [Out of Scope]

#### **Policy**

#### 1.0 Legislation about assessments

a The attached table shows the impact of the relevant sections of the Accident Compensation Act 2001 (AC Act 2001).

W

Legislation about assessments.docx

#### 2.0 Who can make assessments

a The assessment does not always need to be done by an external assessor from the Contracted providers and contact lists.

Recovery Team members can consider the assessment requirements in Section 84(4) if they do an internal assessment of the client's needs by either:

- having a conversation with the client to discuss their needs
- reviewing the ACC705 Referral for support services on discharge(169K) form.

ACC705 Referral for Support Services on Discharge

#### 3.0 When to make an internal needs assessment

- a Assess (or reassess) a client's social rehabilitation needs in the following situations, using the considerations of AC Act 2001, Section 84(4):
  - on first contact between the client and ACC, usually when a client first asks or applies for social rehabilitation assistance
  - · whenever a client's needs or circumstances change.

#### 4.0 All assistance must be based on assessment

- a AC Act 2001, Section 76 allows us to provide social rehabilitation assistance, if it is 'necessary and suitable in the circumstances' before:
  - a Recovery Plan (RP) is prepared.
  - an assessment is completed.

To decide whether the assistance is 'necessary and suitable', it must be:

- assessed as being needed under Section 84(4)
- necessary, appropriate, and of the quality required to help restore the client's independence
- · needed as a direct result of the covered personal injury
- of a type normally provided by a rehabilitation provider.

The assistance must meet all the criteria of Section 81 (4). Before any social rehabilitation assistance is provided, an assessment must be done by us or an external provider, regardless of the provisions of Section 76. This particularly affects claims where there is no RP, or where it has not yet been developed.

AC Act 2001, Section 76 https://www.westlaw.co.nz/maf/wlnz/app/document?&

#### 5.0 What assessments need to cover

- a Section 84 lists the areas that all social rehabilitation assessments need to cover:
  - the activities that the client was able to perform before their injury
  - the activities they can perform following the injury
  - the limitations they suffer as a result of their injury
  - the appropriate types of social rehabilitation assistance that would minimise or eliminate these limitations
  - results achieved by providing these types of assistance, the rehabilitation outcome relating to a functional area of independence in daily living activities
  - how options and alternatives for providing the assistance would achieve the rehabilitation outcome in the most cost effective way
  - if the client is eligible for vocational rehabilitation, any social rehabilitation interventions that would also help them participate in employment
  - any issues relating to the geographical location where the client lives
  - any recorded changes in the client's condition
  - if the client has already been provided with other interventions, particularly equipment, any changes in the suitability of those interventions.

#### 6.0 When to refer for external assessment

- a Refer the client for an external assessment of their social rehabilitation needs in any of the following situations:
  - · client requests an assessment
  - client suggests that a package of care is not meeting their needs.

Note that packages of care are not available in all areas

- client has a complex injury that falls outside the normal boundaries for a package of care, or the client requires a multi-disciplinary assessment under a serious injury contract
- client requests assistance for any of the following types of support:
- child care
- education support
- equipment
- housing modifications
- training for independence
- transport for independence
- other social rehabilitation
- client's progress is not as expected, or the case manager is unsure whether the support being provided is meeting the client's needs
- rehabilitation exceeds the expected duration, as per the outcome date, and the client still needs social rehabilitation assistance

#### 7.0 Providing information to the assessor

- a AC Act 2001, Section 84(5) states that ACC must provide the assessor with all information it holds, that is relevant to the assessment. This includes:
  - the relevant assessment referral form containing client details and reason for referral
  - any previous assessment report(s), if this is a reassessment
  - medical reports about the nature of the client's personal injury
  - the client's Recovery Plan, if they have one
  - a copy of the client's current, signed authority to collect relevant records
  - information to enable the assessor to undertake the assessment in an appropriate and safe way, such as:
  - cultural considerations
  - living environment, eg the number of people living with client, access to house, dogs
  - any behaviour exhibited by the client or household members that indicates potential for aggression, violence or other risk to the assessor.

AC Act 2001, Section 84(5)
https://www.westlaw.co.nz/maf/wlnz/app/document?s

# 8.0 Deciding eligibility for social rehabilitation and types of support

- a We can pay for or contribute to the cost of social rehabilitation assistance, if the proposed assistance meets all these criteria, as listed in AC Act 2001, Section 81(4):
  - an assessment identifies the client has a need for the assistance
  - the need for the assistance has arisen as a direct consequence of an injury, and the injury has cover
  - the assistance is for the purpose of restoring the client's functional independence in one or more of the areas listed in of AC Act 2001, Schedule 1 Clause 12, to the maximum extent practicable
  - the option or alternative for assistance meets all the following criteria for restoring the client's independence:
  - necessary, ie the client cannot achieve the outcome without this assistance, and it is essential, rather than desirable
  - appropriate, ie the assistance is in line with the scope of our responsibilities, and takes the client's individual situation and needs into account
  - of the required quality, ie it is of suitable quality to achieve an effective result
  - the type of assistance is usually provided by a rehabilitation provider. That is, the assistance is:
  - provided by a provider for the purpose of rehabilitation, as defined in AC Act 2001, Section 6
  - of a type provided by a provider that ACC has contracted

— the area of	need that this assistance will meet is of	-uoot
mented in the	client's RP (if they have one).	

AC Act 2001, Section 81(4) https://www.westlaw.co.nz/maf/wlnz/app/document?8
AC Act 2001, Schedule 1 Clause 12 https://www.westlaw.co.nz/maf/wlnz/app/document?c
AC Act 2001, Section 6 https://www.westlaw.co.nz/maf/wlnz/app/document?co

#### 9.0 After considering the criteria

**a** If the assistance is a 'key aspect of rehabilitation', then consider it under the relevant criteria.

#### 10.0 If decision is to decline

a If we are not responsible for providing the service or item, the Recovery Team member must provide advice or information to the client about what other agencies might be able to provide it.

#### 11.0 Determining who is responsible for assistance

**a** A client's rehabilitation is not solely ACC's responsibility. This attached table shows where responsibilities lie for the client's social rehabilitation, according to ACC legislation and policy.

Party	Scope of responsibility
client	doing everything they can to assist with rehabilitation, within the limitations that have resulted from the injury, such as:     attending assessments     participating in programmes and services     maintaining their own health and fitness as much as they are able     avoiding activities that aggravate or worsen the injury     contributing to the cost of any service or liem if they choose something more expensive than is strictly required to meet their assessed injury-related needs
ACC	providing or contributing to entitlements in accordance with the legislation, to meet the client's assessed injury-related needs     co-ordinating and managing the rehabilitation process, and linking and integrating     with other agencies
client's household family (whanau)	childcare, home help and attendant care for the injured family member, provided this does not unreasonably disrupt their employment or other activities
other agencies, services or community groups	providing anything not supplied by the above parties, that the client is eligible for, according to the agency or group's own criteria and restrictions

**A** 

Determine who is responsible for assistance.PNG

#### 12.0 Encourage client to take responsibility

a The Recovery Team member must lead the client to explore the ways they might contribute to their own rehabilitation.

#### **NOTE** Example

A client's hobbies outside of work are sedentary. The Recovery Team member encourages the client to discuss with their treatment provider a suitable regime of regular exercise, so that the client can build their fitness, which will contribute to their own rehabilitation and recovery.

## 13.0 Funding gym memberships and pool fees for clients

a Clients are responsible for maintaining their own health and fitness as much as they are able, and would in most instances be responsible for costs such as gym memberships and pool fees. The justification to pay for gym memberships or pool fees therefore needs to be specific, eg strengthening or mobility and linked to achieving a clear rehabilitation outcome.

These costs could be considered under the vocational or 'other' social rehabilitation provisions of the legislation, if paying these costs is necessary to help a client:

- maintain or obtain employment or acquire vocational independence (Section 80)
- restore independence in one or more of the areas listed in clause 12 of Schedule 1 (Section 82)

We should only be paying for pool fees or a gym membership where they are:

- linked to a clear rehabilitation goal
- preapproved
- monitored, possibly through physiotherapist or personal trainer support
- · time-framed
- included in a Recovery Plan if the client is likely to need rehabilitation for longer than 13 weeks

#### 14.0 Limits on ACC's responsibility to provide

a ACC's responsibilities to provide or contribute to assistance have boundaries. This attached table describes how this affects decision making:

Limit	What this means in practice
provisions of legislation	The assistance must meet relevant decision-making criteria for a specific entitlement as either a 'key aspect of social rehabilitation', or as 'other social rehabilitation'.
	Examples:
	<ul> <li>We do not generally provide or contribute to the cost of a client's actual participation in a sports or leisure activity, such as attendance fees.</li> </ul>
	We do not usually provide or contribute to the cost of lawn-mowing or gardening.
injury-related need	The assistance must be provided specifically to meet an assessed, injury-related need. If the need does not arise from the injury, we are not responsible for meeting it.
	Example:
	If a client was a member of a sports club before the injury, then we would not consider contributing to their membership fees after the injury, because that cost has not arisen because of the injury.
	If there is a combination of causes behind the need, then we are only responsible for the proportion of the need that is injury related.
	©Example:
	A client has both age- and injury-related needs for rest home care. We contribute to the
	proportion of the care that is injury-related, based on an attendant care assessment, had they remained in their own home.
	aley remained in their own notice.
level of assistance to achieve outcomes	We're responsible for meeting the client's assessed injury-related needs and only need to provide the level of assistance required.
	If the client wants a more advanced or expensive type of assistance, then we are only responsible for the portion of the assistance that is the minimum required.
	Example:
	We have approved a request to provide the client assistance with their transport needs, in the form of a vehicle purchase and modifications. The client chooses a new vehicle, while
	the assessor has identified a range of cheaper models that would meet their injury related needs. The client contributes the difference in cost.

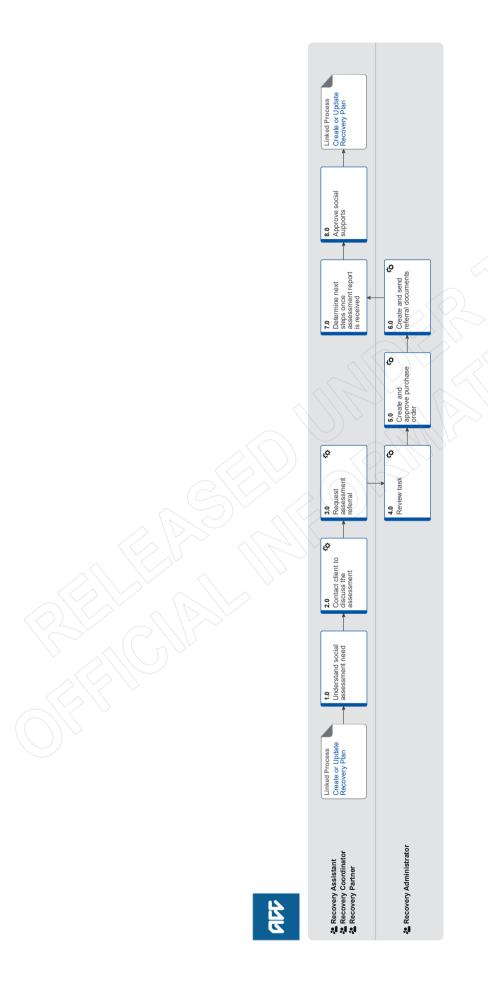
Limits on ACC.PNG

#### 15.0 Paying for social rehabilitation

- **a** AC Act 2001, of Schedule 1 Clause 23 states that, when ACC pays a client for social rehabilitation services it provides or contributes to, ACC is not responsible for either:
  - making sure the client pays those funds to the provider
  - paying the provider directly, if the client does not pay them.
- AC Act 2001, of Schedule 1 Clause 23 https://www.westlaw.co.nz/maf/wlnz/app/document?d

## **Arrange Social Rehabilitation Needs Assessment v9.0**





## **Arrange Social Rehabilitation Needs Assessment v9.0**



0	NOTE What do you need to consider when the
Summary	entitlement request is received and deemed cover exists?
Objective To arrange a social rehabilitation needs assessment.	Refer to the Deemed Cover and Entitlements Policy for considerations to determine client entitlement eligibility while in deemed cover
This assessment gives an overall picture of the client's social rehabilitation needs.	period.  Deemed Cover and Entitlements Policy
If a full assessment is not required this assessment can also be used to provide more detailed information about one aspect the client's social rehabilitation needs eg mobility, activities of daily living, communication, or complex equipment.	2.0 Contact client to discuss the assessment Recovery Assistant, Recovery Coordinator, Recovery Partner
Background The Social Rehabilitation Needs Assessment (SRNA) service is for clients who need a comprehensive assessment to identify all	a Confirm you are speaking with the right person by asking ACC's identity check questions.
their rehabilitation needs.	Identity Check Policy
In Eos this option is called the Integrated Rehabilitation Assessment (IRA).  Owner  Out of Scope	NOTE What if the client requests the Recovery Team Member to discuss the treatment re- quest with another person? Refer to Obtain Authority to Act (ATA).  PROCESS Obtain Authority to Act (ATA)
Expert	<b>b</b> Ensure your client understands and agrees with being re
Procedure	ferred for the assessment, along with any provider preference and their rights and responsibilities.
PROCESS Create or Update Recovery Plan	Client Legislative Rights and Responsibilities Policy
Recovery Assistant, Recovery Coor-	NOTE Does the client have a preferred Provider?
dinator, Recovery Partner	If the client has no preference of a preferred provider, we will select a provider as discussed.
1.0 Understand social assessment need Recovery Assistant, Recovery Coordinator, Recovery Partner  a Confirm the client's need for the assessment. Clarify if the request is for a Single Discipline or Integrated Rehabilitation Needs Assessment. For details about these assessments refer to the pages below.  Social Rehabilitation Needs Assessment (SRNA) Service Page When to reassess a clients social rehabilitation needs Policy  Needs assessment for social rehabilitation Policy	with the client (we need to show that we have kept our client fully engaged and informed).  • If the client has a preference, load the vendor and provider as a participant. Ensure the vendo and provider are contracted for this service by using the Geographic Location search. This enables Recovery Administration to validate the email and then email the purchase order directly from Eos if required.  • The Recovery Team Member must ensure all known participants are loaded on the file and then removed when no longer relevant. For info mation on how to manage participants, refer to Manage Participants (Eos Online Help).
	Manage Participants (Eos Online Help)
NOTE What are the other types of social assessments?	Client choice of providers Policy
To see other types of social assessments refer to the additional information below.	<ul> <li>Contracted Suppliers by Geographic Area of Coverage</li> </ul>
The following are included: • Single Discipline Assessment • Housing	<ul> <li>C Check that the client has provided consent to collect and share information.</li> <li>View Client Consent</li> </ul>
<ul> <li>Wheelchair, Seating and Postural</li> <li>Communication Assistive Technology</li> <li>Education Based Rehabilitation</li> <li>Transport for Independence (TFI)</li> </ul>	NOTE What if the client has not provided consent?  Go to Obtain Client Authority to Collect information.  PROCESS Obtain Client Authority to Col-
Highly Specialised Transport for Independence (Serious Injury)	lect Information
Social Rehabilitation and Individual Rehabilitation Plans Policy	d In Salesforce, record the details of the discussion with the client.
Types Of Assessment Service Page	<ul> <li>Ensure to add the Social Rehabilitation Needs Assess- ment actions as agreed Interventions to the Recovery</li> </ul>
About Social Rehabilitation Assessment Suppliers Service Page	Plan."
Social Rehabilitation Assessment Service Page	

<b>f</b> Contact sary) to send to	Refer to the Create or Update Recovery Plan process below  PROCESS Create or Update Recovery Plan process below  PROCESS Create or Update Recovery Plan plan  Plan  The cite the client's GP or relevant specialist (if necessor request relevant medical information needed to be the assessor, refer to the process below.  How do you request medical records?  Refer to Request Clinical Records.	NOTE	What if there are documents from other claims that are relevant to the assessment?  When a request for a referral is required and the supporting documents are on another claim, it is important to transfer the documents to the relevant claim. This will ensure the right documents support the recovery decisions for each claim.  To transfer documents from one claim to another:  • Create a bulk print of all documents on the other relevant claim and complete mandatory
Recovery Partner a Create Social	t assessment referral Assistant, Recovery Coordinator, Recovery a referral-specific document group and name it Rehabilitation Needs Assessment. Refer to		fields and description Open PDF document from email link File the PDF away to the relevant claim Repeat these steps if there is relevant documents on multiple relevant claims  The PDF should also be renamed something short but relevant, and identify which claim number the information came from, so it is in-
	what document groups for further guidance.  anage document groups  What documents need to be included in the document group?  • Medical records, if relevant  • Prior Integrated Rehabilitation Assessment report, if one completed  • Current Integrated Home and Community ser-	M	cluded/printed in further referrals or copy files. E.g. Medical records and reports from claim: 100XXXXXXXX Please do not create a bulk print on one claim and then move it to another claim, renaming it and using it in a referral for advice as it will not appear in any file copy subsequently used. anage document groups
	vices plan, if support already in place • Any prior Housing Modifications information if relevant	<b>d</b> Genera Admini	arrage document groups ate a Social Rehabilitation Referrals task to istration for a 'Integrated Rehabilitation Assess- or 'Social Single Discipline Assessment'.
NOTE	What do you do if you don't have all the information to complete the referral?  To request further information, go to Gather Additional Information or Advice.  Once you have requested the information required, create a reminder action, set the target date for when you expect to receive the information.	NOTE	Which assessment would you select? Integrated Rehabilitation Assessment (SRNA) - to review a cross section of issues and potential supports for a general whole person approach ie home help, childcare, meal prep  Social Single Discipline Assessment (SDA) - for a more specific assessment that is generally
<b>b</b> Perform	ather Additional Information or Advice in privacy checks on documents. ivacy Check Before Disclosing Information Policy What do I need to check? Ensure documents: • are relevant to the referral • do not contain any third-party information • do not contain any other information that needs to be withheld.	NOTE	looking into one particular issue ie wheelchair assessment. An SDA may be referred to one of the following: - physiotherapy - occupational therapist - nurse - speech language therapist - dietician - social worker  What are the service codes for SRNA? Refer to the Purchase Order guidelines.
	For details on what checks you need to complete before sending documents out, refer to NG SUP-PORTING INFORMATION Inbound and Out-bound Document Checks.  G SUPPORTING INFORMATION Inbound and utbound Document Checks  What if you find information that needs to be redacted?		G GUIDELINES Purchase Order Details - Social ehabilitation Needs Assessment
	Send an email to Recovery Administration and include the document to be redacted plus your redaction instructions, before adding the document to the document group.  GCM - Redact information from PDF documents e documents to the group.	Co	The contract of the contr

	NOTE	What if your client has a Care indicator? State this clearly in the e-form and provide the following information:		N	OTE	What if you don't have all the information you need?  If required information is missing from the task or
		<ul><li>year the indicator was applied</li><li>insert incident or behaviour details</li></ul>				you need guidance on working within the Administration Team, refer to NG PRINCIPLES Working in the Administration Team.
		<ul> <li>frequency of incident or behaviour</li> <li>details of who was involved including family members/government agencies/other service providers</li> </ul>				G PRINCIPLES Working in the Administration eam
		Refer to the 'Disclosure of care indicator information to third parties' policy below for more	5.0			and approve purchase order y Administrator
		information on how information is disclosed. sclosure of Care Indicator Information to Third Par-		re	eferra	, generate a Purchase Order for the specified II. Refer to the below guidelines for purchase order ation.
		s Policy  How do you refer a task to Recovery  Administration?			S	ervice Contracts and Contracted Providers - MFP preadsheet
		Refer to Referring Tasks to Recovery Administration - Principles for further information and guidance.				urchase Order - Handy Hints on how to create and dit POs
	D D			L	C	reating purchase orders using general + QE
	cip	eferring Tasks to Recovery Administration - Prin- bles			_ ^ \	G GUIDELINES Purchase Order Details - Social ehabilitation Needs Assessment
	NOTE	How do you generate and send a referral task to Administration?  Go to NGCM Create a Referral Task.		N	OTE	What if you receive a referral for an SNA instead of an SRNA?
	Cr	eating Manage Referral Tasks - System Steps				In Eos, check the SI injury tab, if the client has this indicated go to (NGCM) Arrange Supports
		What do you do if Mental Injury Claim information needs to be sent with a Referral from a Physical Injury Claim?				Needs Assessment :: SNA, step 5.0. Only Partnered or Supported team members can request an SNA.
		In Eos, manually transfer the Referral Task generated to the Recovery Administration depart-				PROCESS Arrange Support Needs Assessment
		ment with the Sensitive Claims Administrator Role.		b L	ocate	e contracted vendors via the Geographic Location
	NOTE			р	rovid	n, this must be done even if the vendor details are ed in the task. Once selected add the vendor as a or - Contracted' participant in Eos.
		<ul><li>Call Recovery Administration</li><li>Give the Recovery Administrator who answers</li></ul>		N	OTE	What if the reason for assessment includes childcare?
		the call the claim number     The Recovery Administrator will open the claim in Eos and find the task on the claim				Contact potential vendors in the clients geographical location to check their availability to assess for childcare.
		• Transfer the task into the Recovery Administrator's name. This will move it to their personal Eos queue and stop it from being reallocated by				ontracted Suppliers by Geographic Area of Covage
		Salesforce.			M	anage Participants (Eos Online Help)
	NOTE	What if the request is required in the future?		C A	ppro	ve the Purchase Order.
		If the request is required in the future, set a reminder task for the future date when the service will be required. When the reminder task comes		N	OTE	What if the Purchase Order requires a higher delegation?
		up send a task to Recovery Administration to continue with the process. Consider the contract timeframes and SLAs as specified in the service				Save the Purchase Order. Create and send a Request Authorisation task to a Recovery Leader for a Purchase Order approval.
	NOTE	page What are the SLAs?				Go to NGCM - FINAL Request Authorisation for a Purchase Order - System Steps.
		The referral tasks route to the Administration team with an SLA of 24 hours.				equest Authorisation for a Purchase Order - ystem Steps
4.0	Recovery	task ⁄ Administrator				
	a Followi	ing the task assignment in Salesforce, navigate to describe to describe the salest 'Do Task' from your task queue.				

**b** Review the task to ensure it has all the information you

need to proceed.

## NOTE What if you get a limited payment error message when authorising the purchase order?

If you have received a request to amend or create a purchase order for client reimbursements, change the Limited Payment List Indicator

- 1) In Eos, go to the 'Validations' tab, select 'Edit' and update the Limited Payment List Indicator to 'No
- 2) Select 'OK'
- 3) Go back to the purchase order to authorise.

Once you have authorised the purchase order and notified the vendor, change the Limited Payment List Indicator to 'Yes.

#### 6.0 Create and send referral documents

**Recovery Administrator** 

- a Generate the referral document for the Social Rehabilitation Needs Assessment.
  - ACC081 Social rehabilitation assessment referral
- Populate with any extra information noted on the referral task. Ensure you have checked that all the relevant information within the task has been captured.

## NOTE What does a quality referral look like?

Refer to the appropriate Admin Template.

Admin Template - Social Rehabilitation	on Asse	essment
Referral		

- Admin Template Training for Independence Referral
- Admin Template Social Rehabilitation Assessment Referral Driving Assessment Only
- Admin Template Housing Modification Grab Rail Request

## NOTE What if the Recovery Team member has advised the client has a Care Indicator?

Insert the following text in the email or letter to the Provider:

"As a partner of ACC, we are always looking at different ways to keep you safe when carrying out work on our behalf. Due to the nature of the work you do, sometimes you, your staff or subcontractors deal with ACC clients who have had a Care Indicator placed on their account.

A Care Indicator can mean many things but it usually implies there is some degree of caution advised when dealing with a particular client. The client you are going to see today has had a Care Indicator placed on their account since [insert year]. The Care Indicator relates to an incident involving [insert incident or behaviour details].

This incident happened [insert frequency] and involved [insert details of who was involved including family members/government agencies/ other service providers]. Please be advised to assert a degree of caution when dealing with this client. If you need any more information or support in dealing with this client please contact me on the details below."

C Create a contact at party level advising this advice has been given to the vendor using 'Claimant care notes' option.

- **d** Ensure you have completed the document (to convert the document into a non-editable pdf).
- Link the referral document to the document group already created.
- f Perform privacy checks using Inbound and Outbound Document Checks.
  - NG SUPPORTING INFORMATION Inbound and Outbound Document Checks
- g Create an email using the Requests and referrals template, attach the referral and document groups and select the most appropriate email address (commonly listed under General Purchasing).
  - NGCM FINAL Emailing from Eos using a Template System Steps
- h Send the referral to the vendor.

## NOTE What if the provider requires the documents to be sent via courier?

Go to Prepare and Send Client Information by Courier process.

PROCESS Prepare and Send Client Information by Courier

i In Salesforce, close the assigned referral task.

## NOTE What if you are advised by a Provider they are unable to accept a referral?

Go to Activity 5.0 (a) and complete a re-referral.

## 7.0 Determine next steps once assessment report is received

Recovery Assistant, Recovery Coordinator, Recovery Partner

- a Receive notification that the assessment on the claim and the Recovery Team Member who requested it will be notified
- **b** Perform privacy and relevancy checks on the received report.
  - NG SUPPORTING INFORMATION Inbound and Outbound Document Checks
- C Check the quality of the report. Request further information if required, and discuss the information lacking with the assessor. If the initial report was unsatisfactory, assessors must resubmit the report at no extra cost to ACC.

## NOTE What if the quality of the report(s) is still unsatisfactory?

Talk to the local Engagement and Performance Manager if there are ongoing issues with the quality of a Provider's reports.

**d** Review the assessment report and decide with the client the most appropriate cost-effective option based on the Assessor's report.

# NOTE What if you need additional information to make a decision to approve the services recommended?

Talk to your Team Leader first. Refer to the Recovery Support Decision Tree if you need to obtain further guidance.

Recovery Support Decision Tree

# NOTE What if an additional assessment is required? Confirm if this was recommended in the original assessment. If not, request this information from

assessment. If not, request this information from the assessor to ensure we are completing the correct type of assessment. Then refer to the appropriate assessment process.

## NOTE What if the assessor is requesting additional service codes?

Create the 'NGCM – Admin Request' task and request the original purchase order to be updated with the appropriate code.

Refer to the Purchase Order guidelines to ensure correct code is used.

NG GUIDELINES Purchase Order Details - Social Rehabilitation Needs Assessment

e Decide level of support needed to meet the client's injury-related condition, and send a service referral to the appropriate service provider for the provision of service (s).

#### NOTE How do you set up a support?

To set up the service or support go to the appropriate process.

#### 8.0 Approve social supports

Recovery Assistant, Recovery Coordinator, Recovery Partner

**a** Approve the supports recommended by the Assessor and set up the support

#### NOTE How do you set up social support?

To set up the service or support, refer to the process below and select the appropriate support

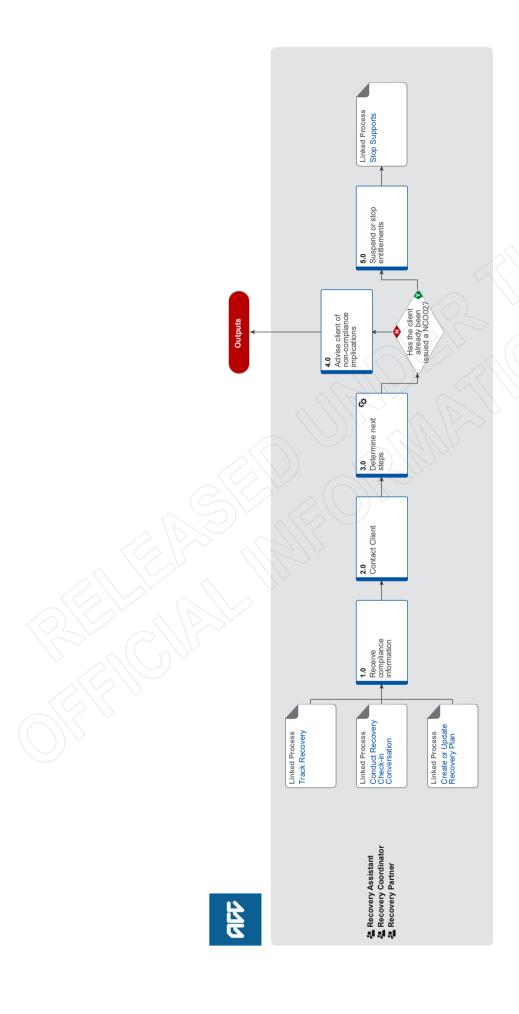
PROCESS Set Up Integrated Home & Community Support Service - Contracted

#### **PROCESS**

**Create or Update Recovery Plan** 

Recovery Assistant, Recovery Coordinator, Recovery Partner





## Manage Non-Compliance v11.0



#### Summary

#### **Objective**

To detail the steps involved for when a client unreasonably fails or refuses to comply with a reasonable request from ACC. Requests may include, but are not limited to:

- · attending appointments arranged by us
- participating in rehabilitation
- · providing information.

#### **Background**

We must warn clients about the impacts on their entitlements of not complying. If the failure or non-compliance continues, we can stop entitlement payments and send the client a decision letter. We can reinstate entitlements after the client has complied with our request, eg they attend a rescheduled appointment.

Owner **Expert** 

#### **Procedure**

**PROCESS** 

#### Track Recovery

Recovery Assistant, Recovery Coordinator, Recovery Partner

**PROCESS** 

#### **Conduct Recovery Check-in** Conversation

Recovery Assistant, Recovery Coordinator, Recovery Partner

**PROCESS** 

#### **Create or Update Recovery Plan**

Recovery Assistant, Recovery Coordinator, Recovery Partner

#### 1.0 Receive compliance information

Recovery Assistant, Recovery Coordinator, Recovery **Partner** 

a Receive information related to the client's compliance.

#### NOTE What information you might have received?

- DNA (Did Not Attend) from provider
- Client has refused to provide information
- Client did not comply with NCO02
- Client complied with NCO02
- · Client was non-compliant but has since become compliant
- Client is responding to a NCO01
- Reminder Action or Contact Action to contact client

#### NOTE What if the client has missed an appointment?

Providers generally have a contracted obligation to inform us of any non-attendance within 24

- · Phone the provider to check attendance if we have not received any advice
- · If the client didn't attend, ask if they made any contact with the provider

b Review the claim history.

#### NOTE What information should you look for?

Check whether we have already engaged with the client over non-compliance, including sending the client a NCO01 or NCO02, or marking the claim with a Non-Compliant indicator.

Look at the timeline of events and the process before the appointment or information request. Check that we gave clear notice of the client's rehabilitation obligations, rights and responsibilities and whether there is a language or some other barrier to their attendance.

Client Legislative Rights and Responsibilities Policy

#### NOTE What if you are unsure whether to proceed?

Refer to the (NGCM) Seek Internal Guidance process below for further information and assistance

PROCESS Seek Internal Guidance

c Confirm that the client has provided consent to collect and share information.

View Client Consent

### NOTE What if the client has not provided consent?

Go to the (NGCM) Obtain Client Authority to Collect Information process below.

If a client refuses to provide an authority to collect medical and other records and ACC is subsequently unable to obtain information to make a cover or initial entitlement decision, do not issue a decline decision on the basis of noncompliance.

The basis for the decline decision in those circumstances is ACC's inability to obtain the required information.

PROCESS Obtain Client Authority to Collect Information

#### 2.0 Contact Client

Recovery Assistant, Recovery Coordinator, Recovery **Partner** 

a Contact the client and confirm you are speaking with the right person by asking ACC's identity check questions.

**Identity Check Policy** 

#### NOTE What if you are unable to contact the client?

Attempt contact via as many means as are applicable; for example via phone including leaving messages, sending a letter, sending an eTXT and emailing. Check the party case roles to see if they can be contacted through any of these, such as their employer or treatment provider. If they have any upcoming appointments or regular contact with a treatment provider, request that a message is passed on to contact you.

Failing to stay in contact with ACC is not a basis to suspend entitlements. You can only suspend entitlement if, for example, necessary and planned appointments are jeopardised. For instance, deciding to require a client attend a Medical Case Review, without previously discussing it with them and then using their lack of contact to suspend entitlements is not appropriate. If we have previously provided written advice that an appointment (such as a Medical Case review or Vocational Rehabilitation Service) is required and non-contact jeopardises organising this, non-compliance can be considered upon discussion with a technical specialist.

If a client has missed an appointment and you are unable to contact them:

- 1) Generate and send the NCO01 'Missed Appointment unable to contact claimant' letter, with clear expectations as to what the client needs to do next.
- 2) Create a Contact action for 7 consecutive days from today, with a description of what needs to happen next.

  For example: "'NCO01 sent because (type of appointment) was missed. If no response will need to attempt contact and consider next steps"
- **b** Discuss the situation with the client and record details of the conversation.

## NOTE What if the client wants you to talk to another person on their behalf?

Refer to the 'NGCM) Obtain Authority to Act (ATA) process below for further information and guidance.

PROCESS Obtain Authority to Act (ATA)

c Explain to the client their obligations whilst in receipt of ACC entitlements.

ACC165 Declaration of rights and responsibilites

#### NOTE What if the ACC165 is not on file?

Send the form to the client and create a Contact on the claim to record that you have sent them the ACC165

**d** Create a Contact to document the client's explanation for their non-compliance

#### 3.0 Determine next steps

Recovery Assistant, Recovery Coordinator, Recovery

a Determine the next steps based on the claim and the reasons provided for the client's non-compliance.
If necessary, ask a Practice Mentor for advice.

## NOTE What if the Provider has advised of a DNA (Did Not Attend)?

Depending on the service, a Provider can invoice up to two DNAs for each referral the client does not attend. You must check the Service Page for the relevant service before sending a task to Admin to update the Purchase Order with the correct DNA code.

## NOTE What if the client has missed an appointment but provided a reasonable excuse?

Arrange another appointment or make sure the provider has scheduled a further appointment.

This process ends.

# NOTE What if the client has missed an appointment, but has not been able to provide a reasonable reason for the failed attendance?

Consider if issuing the letter 'NCO02 – Implications of non compliance – claimant' is now appropriate.

Ensure that you include details of the new appointment arranged and the entitlements that will be affected if they do not comply with this appointment.

# NOTE What if the client had been issued a NCO02 letter and has complied with the request or appointment?

- 1) Ensure you have discussed the ACC165 and expectations with the client.
- 2) Edit the 'Non-Compliance Indicator' to show that the client is compliant

This process ends.

#### NOTE What if the client was previously noncompliant but has since become compliant?

- 1) Determine if entitlement payments can be backdated by referring to 'Seek Internal Guidance' and 'Decline Entitlement When Client is Non-compliant Policy' for more information
- 2 a) Create the relevant 'Extend Entitlement' tasks for Recovery Administration. In the comments, include:
- The vendor
- The purchase order
- The date for the entitlements to restart either the date the appointment was attended or the date that information was provided, and the reason for this as it may not align with the day that entitlements were suspended
- Any other details about entitlements affected
- 2 b) For Reinstatement of Weekly Compensation.

Refer to "Reinstate Weekly Compensation' Promapp page, Procedure point '1.0 Review client payment request'

- 3) Generate and send the 'NCO04 Restart entitlements decision' letter.
- 4) In Eos, edit the 'Non-Compliance Indicator' to show that the client is now compliant.

rnis process en	us.	
<b>► PROCESS</b>	Seek Internal	Guidance

Decline Entitlement When Client is Non-compliant
Policy

## NOTE What if it's established Weekly Compensation can be restarted? In Eos, add a Follow Up Entitlement Task. The task will need to be transferred to the Centralised WC queue. For further guidance on weekly compensation refer to the process below. PROCESS Request Set Up of Weekly Compensation Payments Determine whether the client's non-compliance is an unreasonable failure or refusal or not. NOTE What constitutes an unreasonable failure or refusal? When a client does not meet their responsibility to achieve independence from ACC in a timely and appropriate way, including: · behaving in a way that grossly disregards the reasonable requirements imposed by ACC having unrealistic expectations within the intent of the rehabilitation provisions of the Accident Compensation Act 2001. Refer to the legislation linked below. Legislation - Suspending, Cancelling or Declining entitlements http://www.legislation.govt.nz/act/public/2001/0049/lat NOTE What if you are not sure how to proceed? Refer to 'Seek Internal Guidance' PROCESS Seek Internal Guidance c Create a Contact to document your decision Has the client already been issued a NCO02? Recovery Assistant, Recovery Coordinator, Recovery **Partner** YES.... Continue **NEXT ACTIVITY** 4.0 Advise client of non-compliance implications Recovery Assistant, Recovery Coordinator, Recovery **Partner** a Create the NCO02 - Implications of non-compliance claimant' letter. Edit the letter to include: details and date of the new appointment if one has been arranged • the entitlements that will be affected if the client does not comply. NCO02 - Implications of non-compliance - claimant b Create a Reminder action 1-2 days prior to the appointment, send a notification to help ensure attendance. Some clients may need a Contact action depending on communication needs. Update the Engagement Life area. C Create a Reminder action 1-2 days after the appointment to confirm whether the client attended.

5.0 Suspend or stop entitlements

the client's current entitlements.

Recovery Assistant, Recovery Coordinator, Recovery

a Review the client's current supports and entitlements.b Determine whether to suspend or leave active each of

## NOTE How do you determine whether to suspend each entitlement?

Refer to 'Seek Internal Guidance'

PROCESS Seek Internal Guidance

c Edit the Non-Compliance Indicator to show the client is non-compliant.

## NOTE How do you add the Non Compliance Indicator?

- 1. Click on "Add" to add an indicator
- 2. Select "Non Compliance Indicator" in the drop down box.
- 3. Set the Status to the appropriate selection and add any details in the "Details" box.
- 4. Enter in the appropriate "From Date"
- 5. OK.

**d** Go to Stop Supports.

### PROCESS

#### **Stop Supports**

Recovery Assistant, Recovery Coordinator, Recovery Partner





## CLIENT TRANSFORMATION NEXT GENERATION CASE MANAGEMENT

## **Recovery Plan Quality Baseline**

## **Purpose of document**

This document describes a quality baseline for information to be captured in a client's recovery plan i.e. the minimum information that constitutes an acceptable level of quality for a client's recovery plan. The document acts as a checklist that team members and team leads can use as they create, update or convert recovery plans.

#### NOTE: Claims being assessed:

If the client is currently receiving entitlements other than weekly compensation it is appropriate to create the recovery plan. If they are not receiving entitlements, wait until the assessment is complete and only create the recovery plan if appropriate.

## **Baseline for all claims**

## Client Goal and target date

All recovery plans must have at least one of the following Client Goals and related target date:

- Be able to look after myself
- Be independent with some help
- Get back to school
- · Manage my life
- Regain my independence
- · Return to my pre-injury role
- · Work and manage my life
- · Return to an alternative work type
- · To live my best life

## **Client Situation**

Using life areas, any recovery team member or team leader are able to **understand the client's situation** for each life area in the Recovery Status tab.

Treatment	Surgery dates
	Services recommended by Hotline or treating providers
	Current treatment (physio, acupuncture nursing etc.)
	Planned appointments
	Podiatry
	• Orthotics
	Specialist assessments
	Specialist unit follow-up e.g. Auckland or Burwood Spinal units, or ABI
	District Nursing Service
	Pharmaceuticals
	Psychology
	Therapy agreed intervention once cover has been accepted (for Partnered Mental Injury clients)
Vocational	Vocational assessments and services in place
	Alternative duties / hours available
	Hourly rate
	Work trial details
	Abatement details
	Weekly Compensation
	Medical Certificate details
	Employment details
	• LOPE
	NZSQA
	Section 60
Social	What they cannot do at present due to the injury, but could previously do before (driving, housework, personal cares etc.)
	<ul> <li>Personal Support – home help / attendant care / childcare, including details of support provided and provider details e.g. agency or non-contracted</li> </ul>
	Transport supports provided (eg, taxis)
	Equipment provided

- Implementation of Housing Modification and Transport for Independence processes
- Training for Independence or Training for Independence Advisory Services

NOTE: Even though Training for Independence Service or Training for Independence Advisory Services could be required for Treatment or Social reasons, when entering this as an Agreed Intervention this must be entered in the Social Life Area

- Consumables
- Support Needs Assessment details, or life milestone, or significant life change

NOTE: For clients with CPI status, we need to ensure we are offering a Support Needs Assessment every two years.

- · Living my Life details
- Medical or personal alarms
- Behaviour Support Services
- Education assessments (EBRA's)
- Educational Support e.g. Teacher Aide
- Transport for Independence

#### Cultural needs

- Cultural needs
- Communication plan: preferred contact and way of contact
- Language needs / need for interpreter
- Risk or vulnerability indicator
- Vulnerable circumstances (indicator criteria not met)
   Refer to (NGCM) Respond to Clients in Vulnerable
   Situations Activity 1.0 (d)

# Health factors or Diagnosis change

- Any changes in diagnosis
- Relevant injury and non-injury pre-existing conditions
- Obstacles to recovery (potential and actual)
- Current health concerns
- Pre-existing diagnosis or co-morbidities including: Mental Health diagnosis, Drug and Alcohol miss-use
- Subsequent injuries

#### Engagement

- Regular non-attendance / Non-compliance details
- Communication plan
- Client Employer engagement
- Authority to Act details

	PPP & R details	
Other	Incomplete weekly comp set up etc.	
	For Complex Personal Injury claims	
	Relevant history	
	Complex personal Injury or Grandparented Status	
	Personal details: living situation, family, hobbies	
	Brief summary	

## Agreed intervention, contacts and reminders

## **Agreed Interventions**

All **agreed interventions** currently in place must be added to the recovery plan with a target date for when the intervention is expected to be completed. Ensure there is a contact clearly documenting the client's agreement to participate or if the client has provided written or signed agreement. When entering an outcome for an intervention please refer to the guide below:

http://intra.ds.acc.co.nz/intra/groups/both informe/documents/resources and tools/ts181665.docx

#### Contacts

Contact Action Now: You will create a contact action task for any inbound calls you receive in the present.

Contact Future Action Task: Future contact action tasks are added onto your recovery plan explaining the purpose of the contact.

Contact outcomes should be written according to the note taking principles in the outcome summary box.

#### Reminders

Reminders are used as a prompt for a Recovery team member to complete a work task, e.g. send notifications to client, or request written guidance once a report has been received or extend a support when it is due to expire.

Remember when a Medical Certificates is about to expire there is an automatic notification set 7 days before expiry however if your client has requested to stop notifications it may be appropriate to set an action for a Contact with Client to discuss this with them.

## Recovery check-in task

There must be a Recovery check-in task with the next milestone entered in the task description.

## Consent

**Consent** – if the client has recently had a welcome conversation verbal consent should be added to the Recovery Plan, or if there is an ACC6300 on file this should be added to the consent tab. A client can also provide consent through MyACC – this will automatically populate on the consent tab.

## **Completing a Recovery Plan**



Guidelines

A client's recovery plan provides a clear and concise snapshot of what has happened or is currently happening on their claim. Recovery plans are recorded in Salesforce. They include a goal or goals, progress and outcomes. This document explains how to enter information into a client's recovery plan so that it's consistent and easy to follow.

During the Client Welcome Conversation, we agree an overall recovery goal and explore what other personal goals the client may want to achieve as they recover. These goals are captured in the Client Goals tab of the Client Welcome Conversation and updated via the Recovery Plan. Personal Goals are entered on the Recovery Plan. We use the Expected Claim Outcome date to predict our overall recovery achievement gate.

The Welcome Conversation and Recovery Check In conversations are where we capture the client's responses to the How are you Coping Gauge (HCG), the Personal Wellbeing Index (PWI) and the World Health Organisation Disability Assessment Schedule (WHODAS). PWI and WHODAS are used in Partnered claims only.

See the How are You Coping Gauge guidelines for more information on the HCG.

#### Recovery Planner

The Recovery Plan is designed to capture client information in a structured way. After each interaction, the Life Area notes must be updated with any information that has been confirmed. Below are examples of the information that should be captured.

#### Life Area: Treatment Plan

Surgery dates, services recommended by Recovery Support or treating providers, current treatment (physio, acupuncture etc.), planned appointments.

#### Life Area: Vocational Plan

Vocational services in place, alternative duties/hours available, hourly rate, work trial details, abatement details

#### Life Area: Support Plan

What the client can't do at present due to the injury, but could previously do before (driving, house work, personal cares etc.)

#### Life Area: Cultural Needs

Cultural needs, language needs

#### Life Area: Health Factors or Diagnosis Change

Any changes in diagnosis, relevant injury and non-injury pre-existing conditions, obstacles to recovery (potential and actual)

#### Goals & Actions

There are four types of actions (reminders, agreed interventions, recovery check ins. contacts) that must be created under the relevant Life Area - see examples below.

#### Life Area: Treatment

Action type		Description	Reminder Due	Status
Agreed Intervention	Medical Case Review			Open
Contact	Provider	Call to discuss Surgery Date	When you enter an Action Duwill be automatically created	
Life Area: Vocational				

Action type		Description	Reminder Due	Status
Contact	Employer	Call Manager, John to discuss light duties	12/06/2019	Completed
Agreed Intervention	Standalone Workplace Assessment	Agreed Interventions are all social and vicient and their providers. These need the Individual Rehabilitation Plan legislation	to be recorded on the Reco	overy Plan to meet electing an Agreed
Life Area: Support		morvemen, are decorpt	ion to datematically popula	tou.
Action type		Description	Reminder	Outcome Date

Action type	Description	Reminder Due	Outcome Date
Reminder	Send task to admin to set up HCSS and	21/10/2019	-
	taxi following surgery		



# **Individual Rehabilitation Plan**



Your Individual Rehabilitation Plan (for lifetime rehabilitation) outlines your goals and the agreed rehabilitation path, timeframes and services that will be provided to help you achieve them

PERSONAL DETAILS

	aff
PF	REVENTION. CARE. RECOVERY.

Name:	ACC claim no:
GOALS	
In the home (eg, relationships, moving home, flatting, being with family, friends, daily	v living activities):
Date you would like to achieve this:	
In the community, with recreation and leisure activities (eg, voluntary activities, going clubs, health and fitness):	g out and about, hobbies, interests, sport,
Date you would like to achieve this:	
In employment and/or education (eg, getting a job, attending school/further training,	looking at new opportunities, participation):
Date you would like to achieve this:	
Vocational outcome to be achieved (eg, return to school or employment):	Date to be achieved:
Social outcome to be achieved (eg, in the home, mobility):	Date to be achieved:
SUMMARY OF OBJECTIVES TO BE ADDRESS	ED IN THIS PLAN
Lifetime plan re-evaluation date:	
Reason for re-evaluation date:	

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#### WHAT SUPPORT DO YOU NEED TO ACHIEVE YOUR GOALS?

#### This section covers:

- What support ACC (or other providers) will give you
- What action you will take to achieve your goals
- The reasons you will get support
- The results of the support and your actions

Agreed action to achieve goal:  Purpose for this support/action:  The results of this support/action:  The results of this support/action:  Agreed action to achieve goal:  Date started/referred:  Agreed action to achieve goal:  Date started/referred:  Responsibility:  To be achieved by:  Purpose for this support/action:  Initials:  Actual date action completed:  Date results of this support/action:  Initials:  Actual date action completed:  Date results of this support/action:  Purpose for this support/action:  Initials:  Actual date action completed:  Responsibility:  To be achieved by:  Purpose for this support/action:  Initials:  Actual date action completed:  Responsibility:  To be achieved by:  Purpose for this support/action:  Initials:  Actual date action completed:  Date results of this support/action:  Initials:  Actual date action completed:  Date results entered:	PLAN DETAILS		
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Claim #:

## CONTACT INFORMATION

Name	Role	Participated in the development of this plan?	Address and contact number
		•	
			$\nearrow$
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## Your agreement to this individual rehabilitation plan (for lifetime rehabilitation)

#### **Rehabilitation Declaration**

I understand that ACC will:

- · Help me as much as possible to meet the goals in this plan.
- Provide the rehabilitation support I need as a result of my injury, to help me restore my health, independence
  and participation as much as possible.
- Meet my rehabilitation needs in accordance with the Accident Compensation Act 2001 (the Act).

I will:

- Do as much as I can to achieve the goals in this plan.
- Take an active part in my rehabilitation.

I agree that this plan:

- · Describes my entitlements, needs and suitable rehabilitation services that ACC will provide.
- Is binding once I have signed it and it has been accepted by ACC. However, I understand that if ACC and I both agree, the plan may change in the future, and this will be recorded with further signatures.

If my plan includes vocational rehabilitation (rehabilitation to help get me back to work), I understand that once the vocational rehabilitation is complete, ACC may require me to attend a Vocational Independence Assessment and that this may mean I will be no longer eligible for weekly compensation payments.

My lifetime rehabilitation planner has given me information explaining the relevant sections of the Act, my review rights and privacy legislation. This was discussed with me during the preparation of this plan.

I understand that if I unreasonably refuse or fail to agree or comply with this plan, ACC may decline to provide entitlements.

### SIGNATURES - SHOWS AGREEMENT WITH ABOVE

Claimant's signature:	Date:
OR Legal guardian's/representative's signature:  Relationship to claimant (if applicable):	Date:
Lifetime Rehabilitation Planner's signature:	Date:
Case Manager's signature:	Date:

The information collected on this form will only be used to fulfil the requirements of the Accident Compensation Act 2001. In the collection, use and storage of information, ACC will at all times comply with the obligations of the Health Information Privacy Code 1994 and the Privacy Act 1993

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Claim number: LEGACY\_CASE\_ID

Case Manager: [Staff\_Name]

# **Individual Rehabilitation Plan**

Client name: [Full client name]

Date of accident: [DOA]

Occupation: (if applicable) [Occupation]		
Primary injury: [Primary Injury]		
Goal of rehabilitation:		
Estimated date of goal completion: [Date ]		
Actions (\M\beta \lambda \mathbb{N}\beta \lambda \mathbb{N}\beta \mathbb{N}\end{array}	Date to complete	Action completed?
(What & Why)	$\supset$	
Please sign both copies and return one signed copy to ACC in the envelope or questions regarding your plan, please feel free to call me		
of questions regarding your plan, please feel free to call free	on (phone number).	
Signed:		
	Date:	
Case Manager:	Date:	
Employer: (if applicable)	Date:	_
Treatment provider: (if applicable)	Date:	



## **Individual Rehabilitation Plan**

Client name: [Full client name] Claim number: LEGACY\_CASE\_ID

Your Individual Rehabilitation Plan outlines all the steps to assist with your recovery and has been agreed between yourself and your Case Manager. It identifies the recovery goals you want to achieve, the actions you will take to reach those goals and the help and support ACC will provide. Where appropriate, it sets an expected return to work date or the recovery time needed to prepare you for work.

Your Individual Rehabilitation Plan helps identify your needs and the ways we can help. ACC is committed to providing you with the assessments and services you need for your recovery. Your Case Manager will inform you of the assessments and services you are entitled to and these could be included in your plan. This plan is designed to be flexible, so it can be changed or updated depending on how your recovery is progressing.

Your participation in the plan is key to the success of your rehabilitation. As part of the rehabilitation process, you may be asked to attend assessments. We may also ask you to attend training programmes or undergo treatment recommended by your treatment provider/specialist. When preparing this plan you have the right to involve a support person, this person could be a family member or friend, an advocate, your GP/health professional and/or employer.

Prior to signing the plan you have the right to seek independent advice.

Once your Individual Rehabilitation Plan has been signed, we will implement the steps agreed to in the plan to help you move forward in your recovery. At the completion of the plan, ACC may require you to undertake a vocational independence assessment to measure the outcomes of the plan and determine whether you continue to be entitled to weekly compensation.

#### RIGHT OF REVIEW

If you are not satisfied with this Individual Rehabilitation Plan, or there is something you do not understand you should contact your Case Manager immediately to discuss your concerns. The decision and your right to ask that the decision be reviewed will be explained. If you require the plan reviewed a written request must be made within three months from the date the plan was signed, or from the sign date of any additions to the plan. This deadline may be extended when situations outside of your control have prevented you from applying.

Signed:	
Client/representative:	Date:
Case Manager:	Date:

<sup>\*</sup> Please sign/date and return in the envelope provided.