

24 September 2020

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Tēnā koe ██████████

Your Official Information Act request, reference: GOV-006565

Thank you for your email of 1 September 2020, asking the following:

Can you please provide me with a copy of the Policy / Process document for ACC's handling of Psychological Services

On 14 September 2020, we wrote to you clarifying the scope of your request. You confirmed you were happy for us to provide 'high level' policy documents. As such, provided are the policy and process documents directly under the 'Psychological Services' category in our resource system, 'Promapp'.

Our response

The relevant documents from ACC's Promapp system are:

- *About Pre and Post Services for Work Related Mental Injuries Service Page*
- *About Psychological Services Service Page*
- *Psychological Services Initial Assessment Service Page*
- *Psychological Services Referrals Service Page*
- *Psychological Services Service Page*
- *Request for Further Psychological Service Sessions Service Page*
- *Work Related Mental Injury Early Intervention Service Referral Process Service Page*

Please find copies of these documents attached. Please note that the staff named in the policy document are named as subject matter contacts for internal queries and are not those staff who created or updated the policy.

Questions about our response

If you have any questions or would like further details, please email me at GovernmentServices@acc.co.nz.

Nāku iti noa, nā



Sasha Wood
Manager Official Information Act Services
Government Engagement & Support

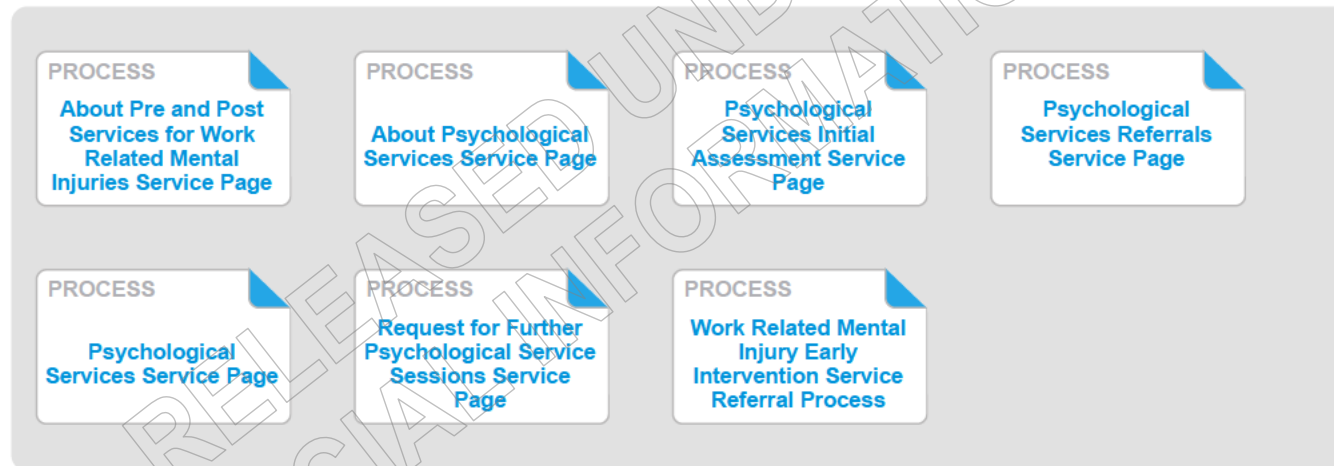
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Psychological services



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Psychological services

Summary

Objective

Information about Psychological services

Champion



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Summary

Objective

The Work Related Mental Injury (WRMI) services include Pre-cover WRMI Early Intervention and Pre cover WRMI Post Assessment Therapeutic Sessions.

Owner

[REDACTED]

Expert

[REDACTED]

Procedure

1.0 Who are the services for?

- a The Pre-cover WRMI Early Intervention Service is available to all WRMI clients showing evidence they've suffered a significant event. It can be offered before the cover decision is made. If the client's cover is declined they won't need to reimburse ACC for the service.

The Pre cover WRMI Post Assessment Therapeutic Sessions are only for clients who progress to cover. The service is designed to allow time for ACC to decide on WRMI cover.

2.0 Key features

- a To find a provider see contracted providers contact list. If there is no available psychologist in the client's region and/or there are clinical reasons to support a referral to a registered counsellor, please contact Specialised Treatment Services Category Advisor.

The provider can provide a maximum of up to:

- four hours for the Pre-cover WRMI Early Intervention service
- two hours for the Pre cover WRMI post assessment therapeutic sessions service

3.0 The aim of these sessions are to:

- a 1) provide early psychological intervention to reduce the psychological impact of the traumatic event on clients and assist in preventing a mental injury. The sessions are likely to consist of psychological first aid and/or trauma focussed cognitive behavioural therapy
- 2) gather information which can be used in a mental injury assessment if the client decides to progress to a WRMI cover decision

4.0 Payments

- a Providers should send invoices directly to ACC:

Hutt Processing Centre
ACC
PO Box 31587
Lower Hutt

Summary

Objective

Information About psychological services

Owner



Expert



Procedure

1.0 What do psychological services involve?

a Psychological services provide:

- cognitive-behavioural therapy, such as training or programs in:
 - pain management
 - relaxation
 - assertiveness
 - stress management
 - problem solving
 - social skills
 - behaviour management, including anger management
 - coping strategies to enable independence
 - goal setting
- other evidence-based psychological therapies to help the client adapt to their injuries
- information about mental injury and its effects, including traumatic brain injury (TBI).

Psychological services also include:

- educating the client's family or whānau, as part of the client's session, about psychological problems or mental injury, and appropriate rehabilitation strategies
- monitoring goals and discussing progress
- monitoring clinical outcomes of the services provided
- ensuring the client has sufficient support in place once psychological services are no longer necessary
- providing reports to the client's General Practitioner (GP) and case owner.

2.0 Availability

- #### a Psychological services are available during normal working hours.

3.0 Frequency

- a The service provider cannot carry out more than one psychological service session per week for the same client without prior approval from the case owner.

4.0 Duration

- a Each session should be no shorter than a therapeutic hour which comprises at least 45 minutes of client contact, with the remainder of the allocated time used for writing up clinical notes on the session.

5.0 Withdrawal from service

- a The service provider can recommend the client's withdrawal from the service due to poor progress or non-compliance. The recommendation must be made in consultation with the case owner.

6.0 Non-compliance withdrawal

- a If the service provider recommends withdrawal because of non-compliance, they must provide a report including:
 - details of attempts to contact the client
 - letters written to the client
 - measures taken to address non-compliance, including any options explored
 - the client's response to withdrawal

7.0 Payments

- a Service providers should send invoices directly to ACC:

Hutt Processing Centre
ACC
PO Box 31587
Lower Hutt

8.0 Non-Attendance Fee

- a PSYDNA - payable for the missed face to face assessment or treatment if a Client fails to attend a scheduled appointment without giving 24 hours prior notification, and the supplier has taken all reasonable steps to ensure they attend, including reminding the Client of the appointment 2 days before the scheduled time.
- b Max 2 per claim (payable once per DNA)

Summary

Objective

Information about Psychological services initial assessment

Owner



Expert



Procedure

1.0 Initial assessment consultation and report

- a The service provider must complete the initial assessment consultation and report within the expected timeframes. The provider uses their own format for the report and submits it to ACC along with the ACC266 Psychological services action plan.

 ACC266 Psychological services action plan

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2.0 Contents of consultation and report

a The initial assessment consultation and report should:

- explain the purpose of the psychological services to the client and cover confidentiality issues and any other concerns the client may have, at the beginning of the assessment
- include a detailed history of the client, in particular their:
 - presenting mental injury or psychological problem and its causal link to the original physical injury, or work related mental injury
 - medical and psychiatric history
 - personal, educational, social and occupational history
- include a functional enquiry into the client's current mental status, mood and other compromising psychological or psychiatric symptoms
- examine the client's goals and motivation
- identify the client's coping strategies and resources
- examine the impact of the psychological problems on the clients physical, social, cognitive and educational or vocational functioning.

The report should also:

- include the service provider's Plan of Action and state how expected outcomes will be met
- comment on the suitability of the referral and confirm the number of sessions recommended
- if the client has had an independent assessment, include the client's written agreement with the contents of this initial assessment report or explain any differences between the findings of the two assessments.

If the service provider disagrees with another provider's assessment we must approve any changes in the service before psychological services continue and as soon as possible, to ensure the client's rehabilitation is not compromised.

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3.0 Mental injury reports

a Mental injury reports must:

- answer any specific questions asked in the referral letter
- meet all of the standard report writing requirements set out by the NZ College of Clinical Psychologists, the NZ Psychological Society, and ACC
- show evidence of a comprehensive assessment and classification of mental injury, establishing a clinically significant cognitive, behavioural, or psychological dysfunction. See AC Act 2001, Section 27. This diagnosis should include the assessor's opinion of a causal link to the mental injury.

Classification systems may be used in isolation or in combination but a clinical formulation is also required. Some of the classification models that may be used are:

- Psychodynamic Diagnostic Manual (PDM)
- Diagnostic and Statistical Manual for Mental Disorders – Fourth Edition – Text Revision (DSM-IV-TR)
- Diagnostic and statistical manual of mental disorders - fifth edition (DSM-5)
- International Statistical Classification of Disorders and Related Health Problems 10th Revision (ICD-10)
- DC:0-3R Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood: Revised Edition
- Multivariate statistical and psychometric approaches.

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Summary

Objective

ACC refer clients for psychological services after getting a recommendation from the Psychology Advisor (PA), and/or an initial assessment from a:

- neuropsychologist
- psychiatrist
- clinical psychologist
- pain specialist.

All referrals must be in writing.

We will not pay the service provider if ACC has not made a referral.

Owner



Expert



Procedure

1.0 Access to psychological services

- a** To be eligible for Psychological Services, clients must either have cover for a personal injury or have lodged a claim for Work related Mental Injury (WRMI).

If the assessment is being used to determine mental injury cover, a PA must sign off the referral.

2.0 Service item codes and assessment hours

- a** The service item codes and prices, including Travel and the Non-Attendance Fee are included in the Service Schedule and can be found on the ACC website.
- b** The service item code for purchasing an assessment that is not required to determine mental injury cover and can be approved up to a maximum of four hours is:

- PSY50 Assessment without MICPI (Mental Injury Caused By Physical Injury) cover

Note: an assessment for cover may not be required if the client already has cover for a mental injury, and requires treatment only.

c The service item codes for purchasing an assessment that is required to determine mental injury cover and can be approved up to a maximum of 16 hours is:

- PSY51 Assessment for MICPI (Mental Injury Caused By Physical Injury) cover
- PSY52 Assessment for WRMI (Work Related Mental Injury) cover

When assessing MICPI or WRMI cover only (PSY51 or PSY52), you can approve a purchase order referral in Eos up to a maximum of 16 hours. Please seek PA advice on this if required.

The service provider can use the hours as follows:

- up to five hours of face to face assessment time
- up to four hours for preparation and reading time, and
- up to six hours to write the assessment Report.

It is preferable that the service provider uses the additional one hour to review the assessment report with the client, except when the assessment has taken place with the client outside of the provider's facility eg a remote clinic.

When this exception applies, the service provider must ensure all information in their report is factual and correct.

Note: When an assessment without MICPI cover (PSY50) is required the purchasable service is still a maximum of up to 4 hours.

- 📄 Search Psychological Services Service Schedule for service codes
<https://www.acc.co.nz/resources/#/>

3.0 Choosing a psychologist

a Follow the link below to find a Psychologist with capacity to see clients by geographical location

- 📄 Contracted Suppliers by Geographic Area of Coverage

4.0 Mental injury assessment

a Not all psychological services providers have mental injury assessment training.

If the referral is for a mental injury assessment, the case owner must consult a PA regarding an appropriate service provider.

In some cases the client's previous assessment may recommend the preferred service provider.


5.0 Making the referral

a The case owner sends a written referral to the appropriate provider.


b If the referral is not for mental injury assessment then send the provider the below forms, including a copy of any prior assessments, the Individual Rehabilitation Plan (IRP), and any other relevant information

- 📄 ACC265 Referral for psychological services
- 📄 ACC266 Psychological services action plan

c If the referral is for mental injury assessment and the client has a covered physical injury then send the provider:

 MI01 Mental injury because of physical - request for assessment report

d If the referral is for mental injury assessment and the client has a work related mental injury then send the provider:

 PSY11 Psychiatric assessment (work related mental injury) request - vendor

 **PROCESS** **Assess and Fund Psychological Services**

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Summary

Objective

The aim of psychological services is to help the client achieve independence by:

- identifying barriers to rehabilitation
- providing evidence-based psychological interventions
- promoting behavioural change and maintenance through education towards self-management
- providing appropriate short-term psychotherapeutic interventions to resolve specific issues, as agreed with the claims manager
- educating the client's family or whānau, as part of the client's session, about psychological problems or mental injury and appropriate rehabilitation strategies
- providing early psychological intervention before cover is established for clients who lodge work related mental injury claims. The purpose is to reduce the psychological impact of the traumatic event on clients and to assist in the prevention of mental injury.

Owner



Expert



Procedure

1.0 Eligibility

- a** This service is for clients who have sustained or are suspected of having a mental injury or have psychological barriers to rehabilitation. A client is eligible for psychological services if they have:
- a physical injury and mental health issues which impact negatively on their ability to rehabilitate, but not necessarily a covered mental injury
 - a covered physical injury and need an assessment to determine cover for a mental injury
 - a covered treatment injury and need an assessment to determine cover for a mental injury
 - experienced a work-related trauma and require early psychological intervention before cover is established and/or need an assessment to determine cover for a work-related mental injury
 - cover for a work-related mental injury and need intervention.

2.0 Defining mental injury

- a** As defined in the Accident Compensation Act 2001 (AC Act) a mental injury is a physical injury or traumatic event that has caused a client to develop a clinically significant behavioural, cognitive or psychological dysfunction.

A work-related mental injury involves establishing that a client has directly experienced, seen or heard a 'traumatic event' that occurred in a client's employment. Note that a person does not experience, see, or hear an event directly if that person experiences, sees, or hears it through a secondary source, for example, by—

- (a) seeing it on television (including closed circuit television):
- (b) seeing pictures of, or reading about, it in news media:
- (c) hearing it on radio or by telephone:
- (d) hearing about it from radio, telephone, or another person.

The client does not need to have sustained a physical injury to have a work-related mental injury.

The types of mental injuries that clients may present with and require Psychological Services for include:

- Mental injury caused by physical injury (MICPI);
- Work-related mental injury (WRMI);
- Mental injury caused by a treatment injury (MICTI); or
- Mental injury caused by certain acts dealt with in Crimes Act 1961 (sexual violence).

For more information about how you determine mental injury cover please refer to the CHIPS page 'Assessing a claim for mental injury'.

- 📄 Assessing a claim for mental injury
<http://thesauce/team-spaces/chips/cover/cover-decision/process/assessing-mental-injury-cover/index.htm>
- 📄 Schedule 3 Cover for mental injury caused by certain acts dealt with in Crimes Act 1961
<http://www.legislation.govt.nz/act/public/2001/0049/latest/DLM105476.html>
- 📄 Link to Integrated Services for Sensitive Claims Overview
<https://go.promapp.com/accnz/Process/55f4bef6-7575-4bad-8ce0-c9b72684f405>

3.0 Key features





- a**
- Cognitive-behavioural therapy and other evidence-based psychological therapies
 - Information and education about mental injury
 - Monitoring goals, progress and outcomes and reporting to the client's General Practitioner (GP) and case owner
 - Ensuring the client has sufficient support following the service
 - Services and reporting requirements must be completed within expected timeframes
 - A service provider:
 - cannot carry out more than one psychological service session per week for the same client without prior approval from the case owner
 - can recommend the client's withdrawal from the service due to poor progress or non-compliance.
 - may request further psychological service sessions if they think the client needs them to achieve the rehabilitation outcome.

4.0 Timeframes

a See attached for expected timeframes

 Expected Timeframes.PNG

5.0 Service content

-  About psychological services
<https://go.promapp.com/accnz/Process/c5196a45-b1c5-4caa-a191-f9017f5fac63>
 -  Psychological services referrals
<https://go.promapp.com/accnz/Process/0369f071-8c33-43ee-a265-e681e6255706>
 -  Psychological services initial assessment
<https://go.promapp.com/accnz/Process/e500da23-b995-42bf-a5fa-add0c52782e4>
 -  Request for further psychological service sessions
<https://go.promapp.com/accnz/Process/2d12252c-befb-4f2f-9d45-99f6b68ffa0c>
-

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Summary

Objective

If the provider considers the client needs more psychological services to achieve the rehabilitation outcome they can request further sessions using the ACC267 Psychological services progress report form.

- They must do this at least two weeks before the initial set of psychological treatment sessions is completed
- They cannot provide any further sessions without the case owner's written approval.

Owner [REDACTED]

Expert [REDACTED]

Procedure

1.0 Contents of request

a The request must state the:

- functional objectives and outcomes of the proposed further services, and link these to the overall outcome in the client's Individual Rehabilitation Plan (IRP)
- outcomes achieved to date
- reason further psychological services are needed
- recommended number of further sessions (not exceeding 16 sessions)
- expected timeframe for services (not exceeding 16 weeks).

2.0 Assessing the need for further sessions

a In some cases, the Case Owner (CO) can seek a further assessment to confirm the need for more Psychological Services, e.g. when the Psychological Services are taking longer than expected to achieve the desired outcome.

Consultation regarding appropriateness of further assessment should be directed in the first instance to PA via Hotline.

If seeking a further assessment, the CO must tell the service provider they're seeking a second assessment and let them know the expected timeframe for a decision.

NOTE Psychology Advisor hotline

Physical injury (not sensitive claims): ext. [REDACTED] option 3

Sensitive claims: ext. [REDACTED]

3.0 Accept or decline request

a See the attached table to what to do if you accept or decline the request

 Accept or Decline request.PNG

b Accept

- 📄 ACC267 Psychological services progress report
- 📄 PS02 Psychological services - approve further sessions (CHIPS)

c Decline

- 📄 SCU998 SCU treatment decision - PO - client
- 📄 PS03b Psychological services - decline further session (provider) letter (CHIPS)

4.0 Service item codes

a To find the relevant service item codes, search for the Psychological Services service schedule on the ACC website. The website will always have the current version.

- 📄 See 2.0 Service item codes and assessment hours for more info
<https://go.promapp.com/accnz/Process/0369f071-8c33-43ee-a265-e681e6255706>
-

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Summary

Objective
A client can have up to four pre cover WRMI early intervention sessions and two pre cover WRMI post assessment therapeutic sessions as part of the Early Intervention Services (EIS).

Owner [REDACTED]

Expert [REDACTED]


Procedure

1.0 Who can be referred

- a Clients who lodge a Work Related Mental Injury (WRMI) claim.

2.0 EIS referral process

- a See attached process


 Assessing a claim for mental injury
<http://thesauce/team-spaces/chips/cover/cover-decision/process/assessing-mental-injury-cover/index.htm>


- b Related information

 EIS referral process.docx

 Mental Health Care
<http://thesauce/team-spaces/provider-service-delivery/health-sector-services/mental-health-care/index.htm>

 WRMI01 Referral for pre and post cover psychological services letter

 WRMI02 Approval for sessions with a specialist - client

 PS02 Psychological services - approve further sessions (CHIPS)

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