

9 August 2023





Your Official Information Act request, reference: GOV-026364

Thank you for your email of 12 July 2023, asking for the following information under the Official Information Act 1982 (the Act):

Please supply the information on when the information discussed under the Integrated Services for Sensitive claims is going to be made into actual changes for survivors of sexual abuse.

<u>Evolving the Integrated Services for Sensitive Claims (acc.co.nz)</u>

We're improving outcomes for survivors of sexual violence (acc.co.nz)

Please supply the information on what work has been done within ACC to look at whether the weekly compensation letter that goes out to claimants could be improved for clients who have a sensitive claim.

Please supply the information on how the search function on the ACC website is reviewed to see if it brings up information in a way that a person does not need to understand ACC jargon.

ISSC glossary (acc.co.nz)

Please supply the guidelines for guidance that an ACC recovery partner would use to determine when a client in receipt of weekly compensation has to have a further incapacity assessment by an ACC approved psychiatrist. psychiatric functional assessment (Clinical Psychiatrist - Sensitive Claim Assessment CPSS1).

The sensitive claims evolutions programme is a work in progress

The progress of the sensitive claims evolution programme is available on ACC's website. The most recent update was the feedback ACC heard from stakeholders on potential solutions and ideas for change: www.acc.co.nz/for-providers/evolving-integrated-services-for-sensitive-claims/. Slide 28 of the May 2023 session includes information about the timeframes and implementation of this work: www.acc.co.nz/assets/provider/issc-feedback-summary-july-2023.pdf.

Work on the weekly compensation letter is ongoing

Work is underway through the evolution of sensitive claims to update client letters, including the weekly compensation letter. This includes ensuring that the letter is fit-for-purpose, by removing the reference to maternity leave and explaining key terms.

The ACC website search function allows users to use keywords to find information

Search results take users to content pages written by communications practitioners across ACC. ACC does not review the search function for every process. However, to the best of our ability, the content across the website is accessible and written in plain English. Where an acronym exists, words are written in full the first time the acronym is used. The ISSC glossary was created for easy access to all terms and acronyms used within sensitive claims. A link to the ISSC glossary is also now available on www.findsupport.co.nz website to support people looking to seek help through ACC and sensitive claims.



ACC needs to be satisfied that a client receiving weekly compensation has ongoing incapacity

This is the case for all clients, including clients who have a sensitive claim. Once a client with a sensitive claim is in receipt of entitlements such as weekly compensation, ACC may assess and re-assess the level of need. An assessment with a psychiatrist might be necessary to determine how the injury continues to impact their ability to function and engage in employment.

We have identified and attached ACC's Assess Weekly Compensation for Sensitive Claims policy. As staff names were not requested, they have been deemed out of the scope of your request and removed from this document.

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 www.acc.co.nz/resources/#/category/12.

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

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

Ngā mihi

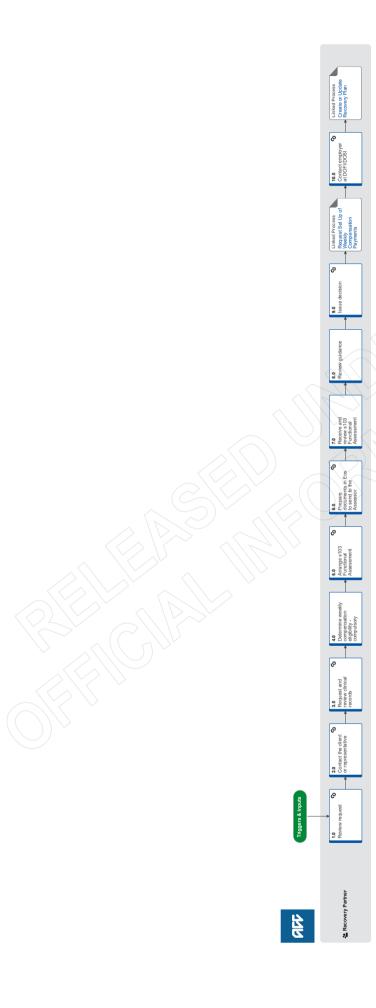
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Acting Manager Official Information Act Services

Government Engagement

Assess Weekly Compensation for Sensitive Claims v3.0





Assess Weekly Compensation for Sensitive Claims v3.0

2.0



Summary **Objective** To assess weekly compensation entitlement for sensitive claims. **Background** The purpose of Weekly Compensation is to reduce the financial consequences of an injury, by providing some replacement for lost earnings (80% of pre-injury earnings) for as long as the covered injury prevents the person from working. Weekly Compensation is only available to people who were in paid employment at their Deemed Date of Accident (DDOA) AND at the Date of First Incapacity (DOFI). They must also be an earner at the Date of any Subsequent Incapacity (DOSI). People who were injured before they were old enough to enter the workforce (that is aged under 18) may instead be eligible for Loss of Potential Earnings.

Owner **Expert Procedure** 1.0 Review request

Recovery Partner

[Out of Scope]

a Confirm there is a valid ACC18 on file and that the incapacity is related to an injury that is covered on the clients claim.

NOTE What if there is not a valid ACC18 on the claim? Decline the request due to insufficient information and advise the client to see their primary health care provider. This process ends. PROCESS Issue Recovery Decision

b Review the claims history and check for a duplicate claim to determine if there are there other Sensitive Claims, to ensure that cover is sitting on the right claim.

NOTE What if you find a duplicate claim? Link the duplicate claim. Go to Identify and Link Duplicate Claims :: Complex M.I. process. PROCESS Identify and Link Duplicate Claims:: Identify and link duplicate Sensitive claims

NOTE What should you consider in the medical records?

Check the medical records to understand:

- · What additional medical records may be needed to support the assessment?
- Check to see if there is an earlier Deemed Date of Accident (DDOA) based on the notes on file.
- c Review any medical records already on the claim.

	NOTE	What if there is an earlier DDOA on the claim?
		Seek hotline advice from Recovery Support, specifically Technical Services. PROCESS Seek Internal Guidance
d		check the Consent tab for a recent ACC6300, at DHB's require new ones every six months.
	NOTE	What if there is not a recent ACC6300 (signed within six months)? Obtain a new ACC6300 and send to the client or the provider. Go to Obtain Client Authority to Collect Information process. PROCESS Obtain Client Authority to Collect Information
е		check the Indicators tab for a physical file and rit needs to be requested.
	NOTE	What if you need to request a physical file? Go to Retrieve Archived Physical Claim Files process. PROCESS Retrieve Archived Physical Claim Files
	NOTE	What if you are unsure if a physical file needs
		to be requested? Check in with your Team Leader to determine if need you need to request.
	NOTE	What if the claim is held or a soft decline? Refer the client for a Supported Assessment and include the s103 Functional Assessment questions.
	ontact ecovery	the client or representative Partner
	Determi	ine the appropriate person to contact, ie the client uthority to Act (ATA).
	NOTE	What if you need to add/update the ATA? Go to Obtain Authority to Act (ATA) process. PROCESS Obtain Authority to Act (ATA)
b		the client or ATA by their preferred method of nication.
	Ide	ntity Check Policy
С	Weekly	t the CMI Welcome Conversation or the CMI Compensation Script (if the Welcome Conver- as already been completed).
	NOTE	Where do you find the CMI Welcome Conversation and CMI Weekly Compensation Script? Refer to the link below. PROCESS Conduct CMI Welcome Conversation
d	DDOA. against.	sation the clients pre-injury role immediately prior to This is to define the role we are testing incapacity Use the weblink below to locate the job descrip- ork types details sheets) and then confirm role

requirements/job tasks with the client.

Work type detail sheets

NOTE What if you can't confirm the client's preinjury role?

Send the client an ACC188 Job Task Analysis form to complete. This will provide you with a breakdown in work tasks and functional demands. Obtain the appropriate work detail sheet from the ACC external website.

e Ensure that the client understands why ACC needs to request notes and that they are aware of what period we are requesting for.

NOTE What if the client has not granted ACC authority to collect medical and other records? Obtain verbal or written authority from the client so that we can collect relevant medical or other records.

See Obtain Client Authority to Collect Information process for further guidance.

PROCESS Obtain Client Authority to Collect Information

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

Obtain advice from Recovery Support and make a decision based on the information on the claim.

PROCESS Seek Internal Guidance

NOTE What if the request is for payment of a back-dated period of 180 days or more?

Go to Assess Backdated Weekly Compensation Request. Once you have completed the Assess Backdated Weekly Compensation Request process return to this process and continue with the below tasks.

PROCESS Assess a Backdated Weekly
Compensation Request

f Advise the client that it's likely we may request updated clinical records and will contact their employer. Confirm that the client is OK with this and that they are comfortable with us discussing their claim with their employer.

NOTE Where there is a sensitive claim we must follow directions by the client and not involve the employer unless requested to do so. Ensure you do not show or discuss any sensitive client information with the employer.

NOTE What if there are no notes available or you don't need to be request them?

after completing the task below, go to Activity 4.0 Determine Weekly Compensation Eligibility - Compulsory.

NOTE What if you need to request updated clinical records?

Ask the client for relevant health provider who we may need to obtain medical records from.

G Check the claim for a signed ACC165 Your Rights & Responsibilities form.

NOTE What if there is no signed ACC165 on the claim?

Discuss the client's rights and responsibilities and confirm that the client understands these. Record this discussion in Salesforce and send an ACC165 to the client.

ACC165 Declaration of rights and responsibilites

3.0 Request and review clinical records

Recovery Partner

a Contact the relevant health provider, to confirm that the client is registered with the practice, prior to making a request for any updated clinical records.

NOTE What if the client is not registered with the practice?

The practice may still hold notes for the client, or enquire where the client is actually registered. Contact that practice to see if they hold any information on file.

b Request all mental health records from the periods of incapacity the client is requesting financial support for.

NOTE How do you request clinical records? Refer to Request Clinical Records process. PROCESS Request Clinical Records

c Review the received clinical records and complete claim and client relevancy check.

We get a lot of information coming in from third parties like GPs and DHBs, and mostly that information is just what we asked for. However sometimes we get information we don't need and don't want, even information about unrelated people. Getting unwanted, excessive or irrelevant information from a third party provider isn't a privacy breach, but sending it on later very much is. We have a responsibility to make sure we only send out relevant information and to ensure that, we need to check information as it comes in - if it's not what you need or want, either return to the provider and ask them to resend, or redact the unnecessary information and delete the unredacted version.

Privacy Check Before Disclosing Information Policy
NG SUPPORTING INFORMATION Inbound and
Outbound Document Checks

d Confirm the earliest DDOA based the covered injury and issue a decision letter and in Eos generate a CM03 Blank letter to claimant.

NOTE Add the following template into the CM03 Blank letter to claimant. [Subject] Your claim has been updated [Letter content] Thank you for your patience while we consider your claim. We have now received further information, which shows that your date of injury has changed. Based on the information provided, we consider that the date you first received treatment for your mental injury, to be your date of injury. In your case your date of your injury has been determined to be [new DDOA date]. Therefore, ACC has updated your Date of injury from [old date] to [new DDOA date] The date the client first receives treatment for a mental injury is regarded as their Deemed Date of Accident, as per section 36(1) of the Accident Compensation Act 2001, rather than the date the events occurred. We're here to help If you'd like to talk about this decision or have any questions, please just get in touch with me using the contact details below. I've also enclosed an information sheet that describes what to do if you disagree with our decision. There are a number of ways we can work with you to resolve things, so please just get in touch and we can talk about it. If we can't resolve things easily you may want to have our decision reviewed. To do this you'll need to apply in writing within three months of the date of this letter. In some circumstances we can accept late applications, such as if events outside of control prevent you from applying in time.

NOTE What if the claim is declined or held?

- Do not make a decision on DDOA until cover has been established.
- In Salesforce, create a Reminder Task and document the earliest date the client has been treated for any mental injuries;
- add the consultation date (eg 15/04/2018)
- client received treatment for 'diagnosis' (eq depression)
- notes location (eg see pg3 of notes).
- · Set the due task date to the expiration date of the assessment purchase order.

NOTE

What if the claim is accepted and the clinical records indicate an earlier DDOA?

Request Real Time Earnings (RTE) information to determine if the client has been in receipt of earnings or to confirm the client earners status at both DDOA and DOFI/DOSI. This requires client consent beforehand.

Please only collect the period for the month of the confirmed date. For example: DDOA or DOFI/DOSI has been confirmed as 15/03/2020. You would request period for 01/03/2020 to 31/03/2020.

Ensure that you are only requesting the RTE for the dates in question. Requesting information from DDOA to DOFI/DOSI is an over request and a potential breach of the clients privacy.

- · Create a 'General Task' with the heading RTE **REQUEST**
- · Add Reason i.e. to confirm earner status at DDOA or DOFI/DOSI
- Period required
- · transfer the General Task to the Department Queue: Centralised Weekly Compensation

NOTE What if the task is about a sensitive claim? If the claim is sensitive, transfer the task to Weekly Compensation Sensitive Claims queue

NOTE What if you are unsure of the earliest DDOA

Request guidance from Technical Service via Recovery Support.

PROCESS Seek Internal Guidance

CM03 Blank letter to claimant

4.0 Determine weekly compensation eligibility compulsory

Recovery Partner

a Confirm that the correct DDOA is on file and that the client is an earner.

NOTE How do you confirm earner status?

If you need to confirm earner status at DDOA or DOFI/DOSI, request the clients Real Time Earnings (RTE) for the period/date required. Only request what is needed to confirm earner status and this requires client consent beforehand.

Please only collect the period for the month of the confirmed date. For example: DDOA or DOFI/DOSI has been confirmed as 15/03/2020. You would request period for 01/03/2020 to 31/03/2020.

Requesting information from DDOA to DOFI/ DOSI is an over request and a potential breach of the clients privacy.

- · Create a 'General Task' with the heading RTE **REQUEST**
- · Add Reason i.e. to confirm earner status at **DDOA**
- Period required
- transfer the General Task to the Department Queue: Centralised Weekly Compensation

NOTE What if the task is about a sensitive claim?

If the claim is sensitive, transfer the task to Weekly Compensation Sensitive Claims queue

Definition of an Earner

NOTE What if the client is not an earner at DDOA?

Decline the request for support and issue a decision letter

The process ends.

PROCESS Issue Recovery Decision

b Confirm that DOFI or DOSI is correct and that the client is an earner.

NOTE What if the client is not an earner at DOFI or

Decline the request for support and issue a decision letter.

The process ends.

PROCESS Issue Recovery Decision

c Confirm that there is certification for all periods of incapacity.

NOTE		NOTE	what if the client meets the criteria for extension of earner status? Refer to Extension of Employment Status		Prepare documents in Eos to send to the Assessor Recovery Partner	
			process below.		-	
			PROCESS Extension of Employment Status Policy		Functio	create a document group and name it: s103
		NOTE	What if the client meets the criteria for LOPE?		NOTE	What information do you add to the document group?
			Refer to Assess Loss of Potential Earning			Signed ACC6300 formMedical certificates
			(LOPE) - Sensitive Claims process.			Relevant clinical records
			PROCESS Assess Loss of Potential Earnings (LOPE) - Sensitive Claims			 Pre-injury employment details (ACC188 Job Task Document)
		NOTE	pacity?			Any relevant documents (medical, psychological, counselling reports)
			Review the consultation notes to support inca-			Any relevant assessments
			pacity, and consider if a case owner extension is appropriate. Refer to the Delegations Framework		NOTE	What do you need to consider before re
			spreadsheet (worksheet P. Weekly Comp). If you		NOTE	What do you need to consider before re- leasing any information to the Assessor?
			are unsure obtain guidance from a Medical Advisor.			Refer to the Prepare and Complete Sensitive Claims Document Release and follow the
		<u> </u>	PROCESS Seek Internal Guidance			process. PROCESS Prepare and Complete Sen-
		De	legations Framework			sitive Claims Document Re- lease (Provider Only)
5.0	Aı	rrange	s103 Functional Assessment		NOTE	What if you need to collect clinical notes?
			Partner			Go back to step 3, Request and Review Clinical
	a Consider including a Supported Assessment before arranging a s103 Functional Assessment.				<u> </u>	Records
		NOTE	What if you are unsure if a Supported	7.0	Receive	and review s103 Functional Assess-
			Assessment is required?	7.0	ment Re	
			Obtain guidance to determine if a Supported		Recovery	
			Assessment is required. PROCESS Seek Internal Guidance		a Review	the report carefully and determine if all the ques-
	b	Identify	who can undertake the s103 Functional Assess-		tions ha	ave been answered. What if the assessor has not answered all the
		ment.	What if you are unsure who can undertake a		NOTE	questions? Contact the assessor, request the missing infor-
			s103 Functional Assessment?			mation and ask for an amended report.
			Use a Clinical Psychologist or Psychiatrist who		b Perform	n Privacy checks on the report.
		holds an ISSC contract or a Clinical Psychiatric contract. If possible, use a Clinician who has treated the client previously, if they meet the above criteria. Contracted Suppliers by Geographic Area of Coverage				SUPPORTING INFORMATION Inbound and utbound Document Checks
					Pri	ivacy Check Before Disclosing Information Policy
					c Obtain	guidance from Recovery Support.
	С		from the Recovery Plan subcase, select and		NOTE	What if you receive a Supported Assessment
		advise	Admin of the correct task. Select Partnered MI			and a s103 Functional Assessment?
			n Assessment. If its for ISSC use add activity			Obtain combined advice. Psychology Advisor - regarding cover or additional diagnosis and a
			- Admin Request task, if its for the psychiatric t use manage referrals >mental injury assessment			Medical Advisor - regarding period(s) of inca-
		task.	it use manage referrals /memarinjury assessment			pacity.
			What information do you need to add into the			PROCESS Seek Internal Guidance
		NOTE	referral task? Refer to the Partnered and Assisted Mental		NOTE	What if you only require advice on Incapacity?
			Injury Task Template document.			Ensure you get Medical Advisor advice on incapacity. Refer to Seek Internal Guidance process
			rtnered and Assisted Mental Injury Task Template			for further guidance.
		NOTE	How do you add the s103 questions to the referral?			PROCESS Seek Internal Guidance
			Refer to the Partnered and Assisted Mental			
			Injury Task Template document above. Indicate in the task to Recovery Admin that the	8.0		guidance
					Recovery	
			referral is for an s103 incapacity assessment so			the guidance and action any of the recommen- provided by Recovery Support.
			that the appropriate questions can be added to the SCU60 letter.			What if you are unsure about the guidance?
					NULE	vinat ii you are ulibure about tile uulualice (

Discuss with your Team Leader.

	NOTE	What if there is a period of more than 180 days incapacity? Complete the ACC6217 form and request Technical Guidance. Refer to Assess Backdated Weekly Compensation Request (BDWC)	PROCESS	Request Set Up of Weekly Compensation Payments Recovery Partner
		process. PROCESS Assess a Backdated Weekly Compensation Request	10.0 Contact Recovery	employer at DOFI/DOSI Partner
	NOTE	·	a Contact	the employer to introduce yourself.
	NOTE	What if there are recommendations to be actioned?	b In Sales	force, complete the employer contact transcript.
		Action the guidance and continue. If unsure discuss with your Team Leader.	NOTE	What if the client is Fit For Selected Work (FFSW)?
9.0	a In Eos	y Partner , create the WC14 Accept application for weekly		Discuss opportunities for a graduated return to work or return to work services with the employer, refer to Set Up Pathways to Employment Support process. PROCESS Set Up Pathways to Employment Support
		ensation letter. C14 Accept application for weekly compensation	NOTE	What if the employer wants to discuss the client's injuries?
	NOTE	What if the decision is to decline? Discuss with your Team Leader how best to communicate the decision to the client, if required.		Do not discuss the clients injuries with the employer without obtaining prior consent from the client to do so.
		Create SPD999 Decline Entitlement Decision - Client letter. PROCESS Issue Recovery Decision		Refer to the NG GUIDELINES Client Welcome Conversation - Weekly Compensation and Employment document below, about obtaining
	□ si	PD999 Decline entitlement decision - client		consent.
		What if the clients preferred communication method is by post?		GUIDELINES Client Welcome Conversation - ekly Compensation and Employment
		Follow the guideline in Sending Letters in NGCM.	PROCESS	Croate or Undate Beggvery Plan
		end letters from Client Recovery and Claims	FROCESS	Create or Update Recovery Plan Recovery Partner
	gether	, generate the ACC255Kōrero mai - Working To- and the FSWC05 Earning while on weekly ensation.		
	A(CC255 Kōrero mai - Working together		
	FS	SWC05 Earning while on weekly compensation		
		ct the client or ATA by their preferred method of unication to explain the decision.		
] Id	entity Check Policy		
	d Explain	n the seven day stand down period to the client/		
	NOTE	If you need to do BDWC we are reliant on information from third parties eg MSD or IR which means there could be delays on receiving the information required to make the entitlement calculations.		
	NOTE	MSD? Advise the client that ACC will reimburse MSD if they have been in receipt from MSD or any periods of incapacity. Note not all support is reim-		
		bursed fully. If unsure speak to your Team Leader. n to the client that it is essential that ongoing med-		

any delays or part payments.

f In Salesforce, record your discussion with the client.