

Managing kiritaki with additional injury claims

For ICP Navigators

 Read time: 4 mins

It is important when looking after kiritaki you consider all aspects of their wellbeing. This can include if they have another current injury or a previous injury that may require additional support. The following information provides some tips on managing additional injury claims and what should continue to be managed alongside ICPMSK or by ACC.

Your role

You may discover that the kiritaki has an additional injury as part of your conversations with them, or the ACC ICP Team may let you know.

In these situations, as the ICP Navigator, you need to ensure the kiritaki receives the support they need for all claims.

Client Management

Tips for managing multiple claims

- Check that supports requested outside of the ICPMSK service bundle are made on the right claim (e.g. the request for an ankle brace is made against the covered ankle claim rather than the ICPMSK lower back injury claim)
 - Check that support requests are not doubled-up (e.g. help in the home)
 - Keep all providers, supporting the kiritaki across all claims, up to date on the needs of the kiritaki and remind them to adjust supports appropriately
 - Remember to re-evaluate the ICP Recovery Plan goal dates and activities when there has been a new injury, or a flare up or an old injury
 - Treatment under Cost of Treatment Regulations
- can be delivered concurrently for the other injury claim. Where possible, try to use the same provider who is already involved with the kiritaki. This avoids conflicting treatment plans being implemented or kiritaki receiving different information about their recovery journey. It's also less overwhelming for the kiritaki to work with a smaller group of providers
- As much as possible support the kiritaki to access supports themselves using [MyACC](#).

ICPMSK Operational Guidelines section 14.19

Further guidance on when the kiritaki remains within your ICPMSK service

The ICPMSK Operational Guidelines provides examples of what you might see and guidance on the action you need to take. Below we have included further guidance on whether the kiritaki would remain within your ICPMSK service.

(Note that these are generalised examples, and decisions should be made based on the unique circumstances of the kiritaki).

Situation	Action	Remains within ICPMSK
While completing their exercise programme as prescribed by the ICPMSK supplier, the kiritaki falls and badly sprains their wrist and lodges a new claim.	ICP supplier continues to support the kiritaki with rehabilitation under the ICP pathway, and also treats their wrist sprain under the Cost of Treatment Regulations. The ICP Navigator supports them to apply for equipment and domestic support via MyACC, ensuring these are applied for in relation to the new accident.	Yes





Client Management

Situation	Action	Remains within ICPMSK
The kiritaki is under the ICPMSK pathway, and is involved in a car accident, sustaining a concussion.	<p>The IDT monitors concussion symptoms whilst they continue to provide rehabilitation to the kiritaki.</p> <p>The ICP Navigator has a clinician arrange a Concussion Services referral if treatment for the concussion is needed. The ICP supplier continues to support the kiritaki with rehabilitation concurrently under ICPMSK.</p>	Yes
The kiritaki is engaged in their ICPMSK pathway, but has a reaggravation of a mental health diagnosis related to a previous physical injury claim that is covered by ACC. The symptoms are not so severe that they cannot engage in their pathway, but they do require support relating to these.	The ICP Navigator notifies the ACC ICPMSK Team about the need for additional support relating to a previous claim. The ICPMSK Team sent a referral for psychological services on this claim. The ICPMSK supplier continues supporting the kiritaki with their ICP Recovery Plan and monitors the impact of their psychological needs on this.	Yes
The kiritaki is engaged in their ICPMSK pathway and they reach a significant anniversary which sets them back in their recovery from mental health diagnosis relating to a sensitive claim. The symptoms require treatment and the kiritaki are reluctant to share further treatment details with you.	The ICP Navigator notifies the ACC ICPMSK Team about this significant change and discusses early exit. ACC agree and an early exit is then submitted. The ACC ICP team will ensure the kiritaki is managed with an appropriately trained recovery team member. When early exit is noted, please ensure you select 'other' as the reason and note the injury's complexity in the rationale as the reason for an early exit. You are welcome to also indicate what would need to be resolved for the kiritaki to be considered for re-entry at a later stage.	No. All clients requiring active or renewed support for a mental health diagnosis attached to a sensitive claim, that would not be considered stable – should be exited from ICPMSK due to ACC's policy on supporting kiritaki to be cared for through whole person management.
While reaching the end of their recovery plan, the kiritaki takes the opportunity to take their family on a long weekend when they are involved in a devastating and severe car accident which leaves them in a serious condition in hospital.	<p>The ICP Navigator contacts ACC's ICPMSK Team to discuss the injuries of the kiritaki and to agree next steps.</p> <p>The ACC ICPMSK team agree that considering the serious nature of the injuries an early exit is appropriate and 'other' is selected as the early exit reason while including the new injury's complexity as your rationale for the early exit. If you are aware of additional supports that should be required by ACC, these should also be noted in your exit data.</p>	No. Any serious injury that will significantly impact the recovery plan for our kiritaki should be exited and cared for by ACC.

