

Online update session

Concepts included are as of 31st October 2023

Combined pack for presentations held on 28 Feb, 1 March and 25 March





Karakia

Whakataka te hau ki te uru Whakataka te hau ki te tonga Kia mākinakina ki uta Kia mātaratara ki tai

E hī ake ana te ātākura He tio, he huka, he hau hū

Tihei mauri ora!

Cease the winds from the west
Cease the winds from the south
Let the breeze flow over the land
Let the breeze flow over the ocean
Let the red tipped dawn come with
a sharpened air
A touch of frost, a promise of a

glorious day

w Zealand Telehealth Services//

Housekeeping



The session will be recorded for note taking purposes only



Microphones should be muted (helps to reduce background noise!)



Please use the chat function to ask any questions or make comments



Please have your camera turned on and name visible (where possible)

Today's session (90 minutes)

- Opening, Housekeeping and your Hosts
- Whakawhanaungatanga
- Quick refresh of the problem and work so far
- Overview of the design concept as of Feb 2024
- ☐ Waharoa Design Working Group
- ☐ Feedback session

For the session on 25 March, attendees were given an overview of the feedback themes from 28 Feb and 1 March session as well.

Recap

Whakarongorau Aotearoa has been contracted to complete design options for a 'Front Door' to ACC's Integrated Services for Sensitive Claims (ISSC), embedded within Safe to talk.

- > Create an effective entry point for Survivors into the ISSC process
- > Improve the Survivor experience accessing ISSC support
- Connect Survivors with ISSC Suppliers/Providers



Launched in 2018, Safe to Talk offers support via phone, text, webchat & email.

Staffed by a team of dedicated traumainformed professionals experienced in the sexual harm sector, the service provides survivor centred brief emotional & crisis support.

Current volume is approx. 10K contacts per year which are funded through the Ministry of Social Development (MSD).

We identified 'Communities of Need', whose needs have been / will be considered during phases one and two:



- Women
- Men
- Children and young people
- Tāngata whenua
- Pasifika communities
- Refugee communities

- Disabled communities
- LGBTQIA+ communities
- Whānau/significant others
- People from rural communities
- Survivors of Intimate Partner Violence
- Communities impacted by socio-economic challenges

Concept design- The Front Door / Waharoa

The **Survivor Portal** offers online access to support options via Safe to talk through various communityspecific pathways as an entry-point into the ISSC process.

Kaiāwhina

The **Kaiāwhina** are non-clinical trauma trained support staff, who guide and assist Survivors and their whānau while they use the Waharoa (includes signposting, referral request support, wait service options).

The **Supplier Portal** helps suppliers and providers to maintain their Survivor online profile showing their **Portal** capability and capacity, and to manage requests from Survivors for initial or follow-up sensitive claims contact.

PONO

Data Mart

Supplier Provider Portal

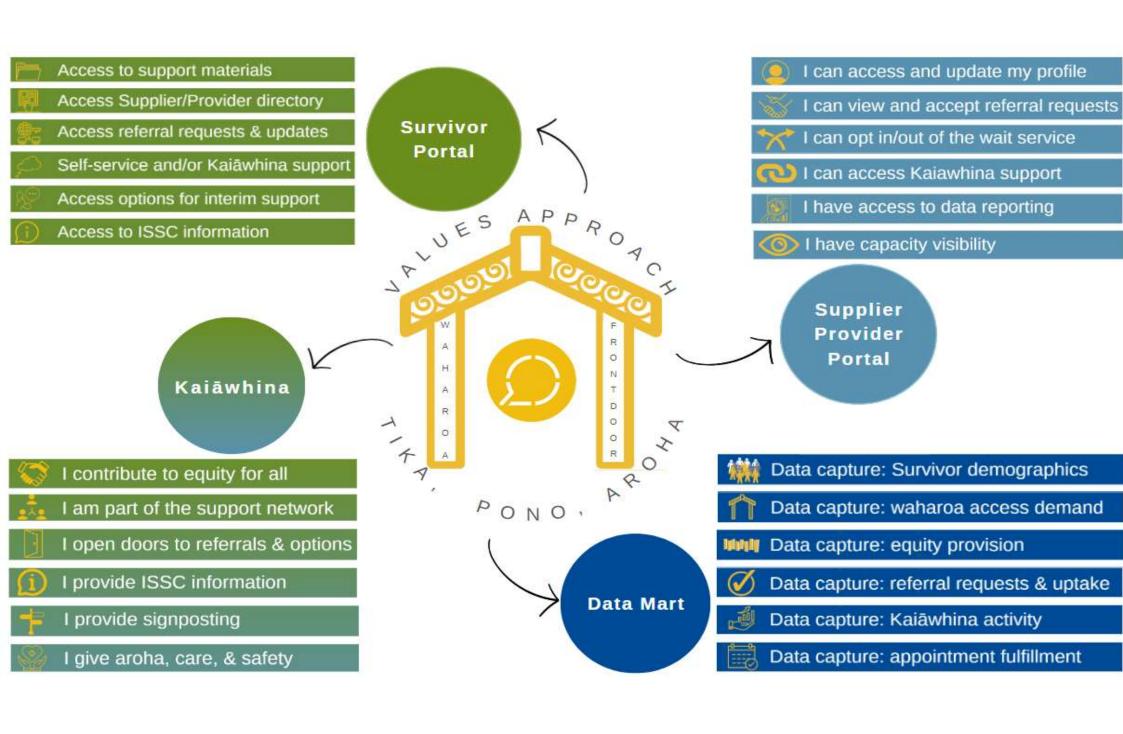
The **Data Mart** allows ACC to report on the performance of the portal activity, Kaiāwhina support, supplier response to referrals, backlogs of unresolved referral requests, Key Performance Indicators (KPIs), and system demand trends.

'Waharoa' replaces the term 'Front Door', as the entrance / gateway to accessing support where the Survivor is welcomed and supported.

Central to the design are the integral pillars of: Tika (right action) Pono (honesty and transparency)

Aroha (compassion and love)

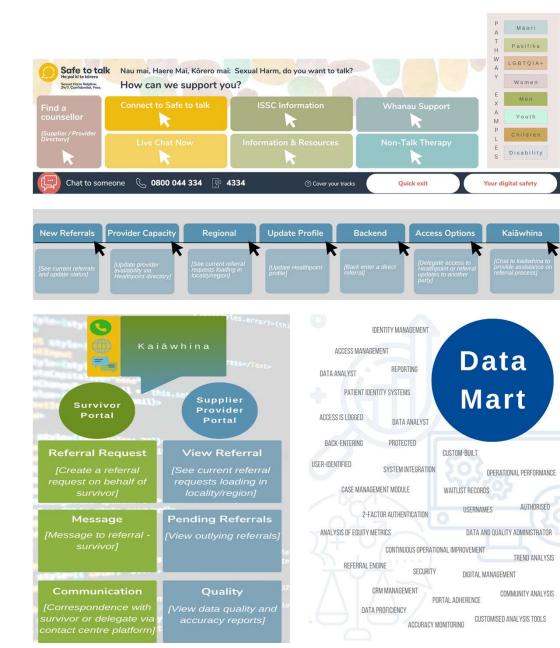
These are intertwined together; one does not exist without the other and are strengthened by each other.



Work so far ... Phase Two

"The design is to be informed by active and extensive engagement"

- ✓ Continual prototyping ideas and feedback from suppliers/providers, SVCAP (ACC Customer Advisory Panel), ACC and internal clinical staff.
 - ✓ Customer journey mapping
 - ✓ User prototyping
 - ✓ Waitlist management
 - ✓ Capacity visibility
 - ✓ Technical integration
- ✓ Established the 'Waharoa Working Group' for further development of prototypes and final deliverables.
 - ✓ In-person workshop
 - ✓ On-line fortnightly sessions (ongoing)
- ✓ External stakeholder engagement and input.



Waharoa Design Working Group

The **Waharoa Design Working Group** include voices from various communities and specialties, helping to ensure the design options remain true to our design principles and values model.

Work begun with a two-day in-person workshop session on the 8th and 9th February where members had the opportunity to Whakawhanaungatanga with each other and the design team, alongside stakeholders from ACC and MSD.

Design work included:

- User profiles
- Walkthrough feedback
- Customer journey mapping
- Prototype walkthrough
- Concept discussions

The Working Group is now working through various design challenges, meeting fortnightly via online sessions ...

How does the Kajāwhina* role work?

Challenge

We have a basic overview of the kaiāwhina role.

- Naming and responsibilities (and what it will not do)
- The rational for the hours and times (Safe to talk, Find Support, ACC ISSC calls)
- Identify the escalation process and handover
- The training, cultural safety and support requirements for the role
- How does the role work with the other Safe to talk positions
- · Agreed definitions on trauma informed, and what we mean by lived experience for recruitment







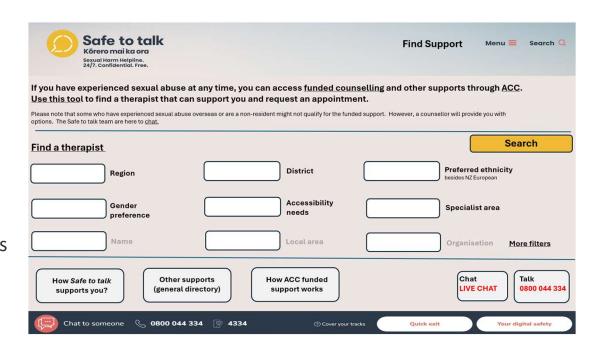
Survivor portal - Directory and making a request for appointment

In the survivor portal (website), we are proposing an online tool for users to:

- View a Supplier/Provider directory
- Make a selection based on their preferences
- Request an appointment

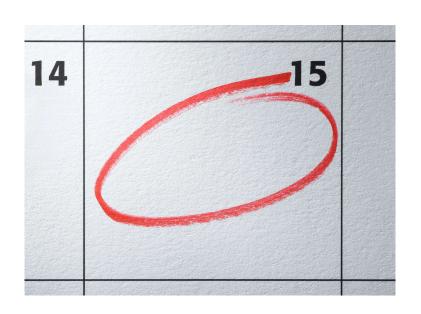
Our current prototype allows selection filters based on what is important to the Survivor (but not too many choices), which then populates a list of matches. Providers that can be saved or be submitted as an appointment request.

Within the current prototype design, Survivors will be offered a regular check-in while they are on the waitlist, which is either delivered through the Kaiāwhina role or Suppliers can provide waitlist support themselves.



It is work in progress......

There is lots to unpack for all users, from the survivor experience, to the supplier, and provider experience. We are currently working on feedback from the Waharoa Design Working Group on the next iteration of the prototype and going through a customer journey to work out the details and steps.



Availability – Why and definitions

Current assumption

To provide an empowering experience and reduce traumatisation for the Survivor, we need to provide Survivors with choice, control and power within the options available for support.

Therefore, the directory will need to provide information about **availability** and the **anticipated wait time**.

Definitions

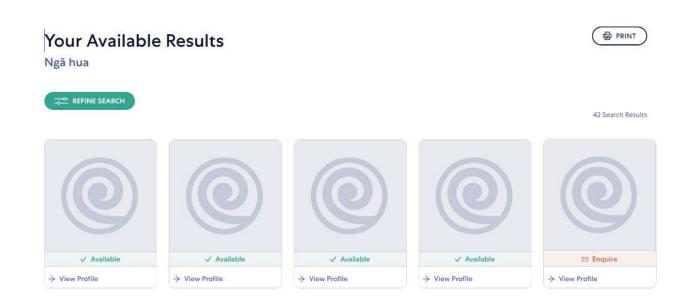
Currently availability /capacity have been talked about interchangeably. For this design work, our current working definition is;

- Availability: Is where a provider has available appointment times within a period of time. and has the capacity to take on another client within their caseload.
- Capacity: A supplier has the staffing hours to meet the demand of people currently wanting appointments.



What are your thoughts on the way this site shows availability?

- 1. What do you like?
- What do wonder about?





My availability for your month due



Availability (feedback)

What are your thoughts on the way this site shows availability?

- What do you like?
- What do wonder about?

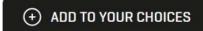


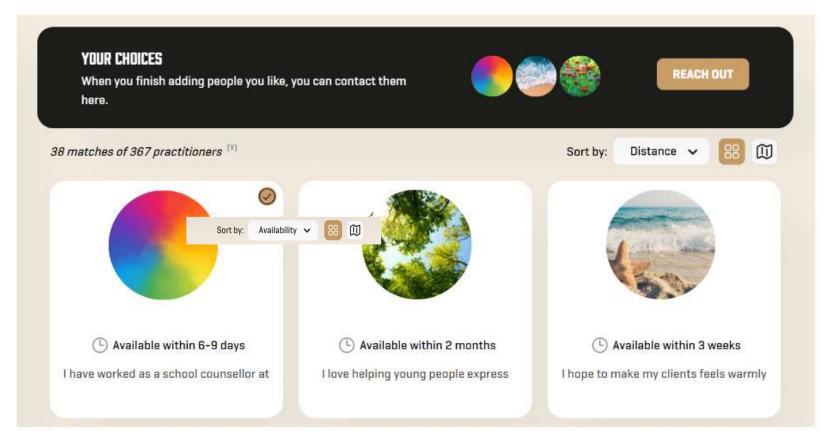
Ethnicity: NZ European

Language: English

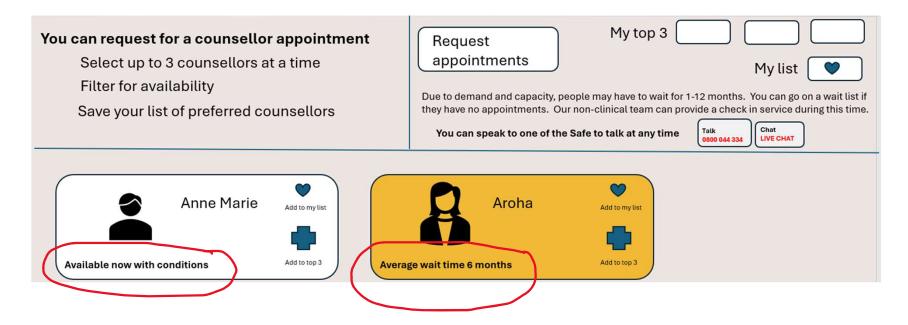
Available within 6-9 days

Average response time is 108 hours





Availability (feedback)



What are your thoughts on the way this page shows availability?

Prototype 3/ Feb 2024 tested with Waharoa Working Group



Feedback themes from 28 Feb and 1 March session

- **1. About design aspects.** "Use of colour is helpful.... Simple and clear text... icons... ask people if they have had counselling before"
- 2. Use of availability. "I like I don't have to give a date.. Available in period of time seems helpful....Could we show inactive when we have no capacity......what happens when availability changes".
- **3. Complexity of clients and triage**. "To complete assessment we need to understand complexity and needs.....triage is important to help provider."
- **4. Workload demand**. "Whose role will be to update it?each supplier works differently.....provider centric puts too much work on them."
- 5. Other ideas "Is there something we offer to support people to be ready for the counsellor......would it be friendly for advocates?... have lived experience involved and they need to be assured their feedback will be implemented.."

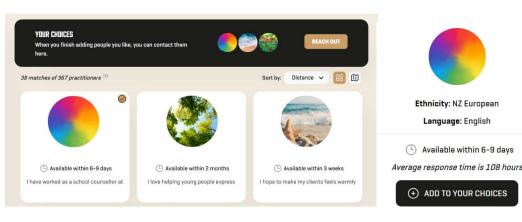
From Online sessions held 28 Feb and 1st March



My availability for your month due



Design from Findyourmidwife



Design from Gumboot Friday



Prototype 3/ Feb 2024 tested with Waharoa Working Group



"I need some indication of when I will get an appointment... I need some indication of how long I will be on the wait list".



Within 4 weeks for initial appointment only











What is the time period we should NOT show a therapist 's listing



Waitlist



How might this work for you as a supplier or provider?

With the Waharoa design, it will have the ability to manage a national wait list.

This might include having:

- ✓ A national view of demand and availability that comes through the Waharoa.
- ✓ A regional, urban or local view of demand and availability.
- ✓ A view of the survivor needs and demographics.
- ✓ A view of supplier and their providers.
- ✓ A kaiāwhina team to provide information and guide people to the best support pathway e.g. clinical escalation, wait service, prioritisation or non-ACC pathways e.g Safe to talk AND support the management of the waitlist.

Scenario:

After a discussion with a survivor, the Kaiāwhina team assesses that they have been on the wait list far too long, has some immediate needs, and new information indicates she might need a different therapist.

- 1. The Kaiāwhina hands over the survivor to clinical team of Safe to talk.
- 2. The Kaiāwhina uses the online system to identify availability options and fit and then calls a supplier to discuss options.
- 3. Kaiāwhina goes back to Survivor with an update, request permission to change therapist, and that a supplier will now ring to confirm an appointment time.

WHAT'S NEXT?

We will be taking the feedback from today into the design to share with the Working Group. We will also send you a copy of the presentation for your reference.

If you'd like further information please visit: ACC/

https://www.acc.co.nz/for-providers/provider-contracts-and-services/evolving-integrated-services-for-sensitive-claims/

Contact via email:

Waharoa.design@whakarongorau.nz

Subject line: Waharoa Feedback

Ehara taku toa i te toa takitahi. Engari he toa takitini. 'My strength is not the strength of one. It is the strength of many'



CLOSING



KARAKIA

Whakawaatea te noa i a mātou
Whakawaatea te hau otaota i runga i a au mātou
Whakawaatea te taurekarekatanga i runga i a mātou
Kia maranga mai au ki runga
Ui e, taiki e!

Clear away and free us from the negative noa Clear away and free us from the winds of rubbish Clear away and free us from the state of being a slave So we may rise above