

Summary

Objective

To assist a client to return to their pre-injury role.

Background

The Stay At Work service is part of the Vocational Rehabilitation Services (VRS) contracts.

The SAW service is for those clients who need specialised assistance to return to work with their current employer.

Specialised assistance may be indicated when there are flags or barriers that can't be resolved with the client and employer, or with help from ACC (such as Beliefs or safety concerns preventing return to work, challenges negotiating medical certification, needing support to identify safe alternative duties or help to plan and arrange a return to work plan, or assessing for equipment that facilitates return to work).

The provider will tailor the service to accommodate each client's specific needs and address any barriers to achieving an early and sustainable return to work. The service can be delivered over 3 stages, but depending on their progress they may not have to advance beyond stage one. This service is only for those entitled, or likely to be entitled to weekly compensation.

Owner

[Name withheld]

Expert

Procedure

1.0 Confirm that SAW is the right service


Recovery Assistant, Recovery Coordinator, Recovery Partner

- a** Determine that SAW is needed based on the client's current circumstances, that the need is related to the covered injury and SAW is the best service to support Recovery at Work. Criteria for SAW are available in the SAW Service Page if you aren't sure if the SAW service is needed.

 Supporting Recovery at Work

NOTE Employers and GPs can refer for Stage One SAW and Initial Functional Rehabilitation

Employers and GPs can refer eligible clients for SAW programmes without prior approval from ACC. If Suppliers are not sure about a client's eligibility for vocational services, they will still need to contact ACC to request prior approval.

 Get extra support with our Stay at Work programme

- b** Check with the client if there is already a SAW service in place (and which Supplier is involved).

NOTE What if a SAW service is already in place?

Once we receive the initial report, we update the recovery plan with the SAW agreed intervention.

 Vocational Services Roadmap

NOTE What do you need to consider when the entitlement request is received and deemed cover exists?

Refer to the Deemed Cover and Entitlements Policy for considerations to determine client entitlement eligibility while in deemed cover period.

 Deemed Cover and Entitlements Policy

- c** Review the following to understand how SAW would benefit the client.

 Stay At Work (SAW) Service Page

 Vocational Rehabilitation Services Overview (VOC) Service Page

- d** Check the client meets one of the following criteria for Vocational Rehabilitation Services:

- they are 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.

NOTE What if the client doesn't meet the eligibility criteria?

Encourage the client and employer to discuss ways to recover at work or return to work, as this benefits their health and wellbeing. Consider other services which could benefit the client at this time. This process ends.

- e** Check there is sufficient information of the claim to determine if SAW service is appropriate for the client.

NOTE What if there is insufficient information to make this decision?

Contact the relevant stakeholders (Provider and/or Employer) to obtain further information. Then continue with this process.

NOTE What if you have determined SAW service is not appropriate?

Consider other services which could benefit the client at this time. This process ends.

f Based on the new information received determine if SAW is appropriate for the client.

NOTE What if you have determined SAW service is not appropriate?

Consider other services which could benefit the client at this time. This process ends.

g Determine the correct level of support required.

NOTE What if you consider your client will require a more complex VOC service?

Send the referral for stage one and two.

NOTE What if you are unsure if your client will require a more complex VOC support?

Send the referral for the initial set up only.

NOTE What if your client's employer won't allow your client to return to work until they are fully fit?

Send the referral for stage one and the initial work specific functional rehab.

2.0 Contact Client

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Contact the client or authority to act (ATA) by their preferred method of communication.

NOTE What if you are unable to contact the client?

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, email the client the CM04 letter if the client has a verified email address, if no verified email on file post the CM04 letter - 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.

b Confirm you are speaking with the right person by asking ACC's identity check questions.

 Identity Check Policy

c Check 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?

Go to (NGCM) Obtain Client Authority to Collect Information. Once received, return to this process.


 **PROCESS** Obtain Client Authority to Collect Information


d Discuss the following with your client:

- why you are recommending them for this service and a reminder of their rights and responsibilities
- the intended outcome of the service is for them to return to their pre-injury employment or a temporarily modified job with their current employer
- advise the client the service consists of tailored, flexible interventions to meet their needs
- a workplace assessment is required as part of the service
- the assessment includes engagement with their employer. Advise the client that you will be contacting their employer to discuss the SAW service. Advise the client that if you cannot reach the employer by phone, you will send this information by email if we have a verified email address for the employer

NOTE What if the client is returning to work and receiving income while receiving weekly compensation?

Refer to the Manage Abatement in Eos process

 **PROCESS** Manage Abatement in Eos

 Client Legislative Rights and Responsibilities Policy

e Confirm your client understands the purpose of the service and agrees to participate.

NOTE What if the client does not agree to participate?


Find out why the client does not want to participate, consider their reasoning and alternatives. If you are unsure how to proceed go to (NGCM) Seek Internal Guidance. Discuss their responsibilities while receiving ACC supports. Consider non compliance if they continue to refuse.

 **PROCESS** Seek Internal Guidance

NOTE What if you need to send an ACC165?

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

 Send letters from Client Recovery and Claims Assessment

 ACC165 Declaration of rights and responsibilities

f Advise the client:

- the Provider will contact them to schedule an appointment
- they are able to have a support person with them
- the Provider will send ACC a plan, progress and completion reports

g Check if the client requires a copy of the plan, progress report and completion reports.

NOTE What if the client wants to receive reports?

Record this in the Vocational Life area in the Recovery Plan.

h Check if the client has a preferred Provider.

NOTE What if the client has a preferred Provider?

Using the Contracted Suppliers by Geographic Area of Coverage doc, confirm the Provider is contracted for this service and add as a participant on the claim.

If they are not a contracted provider for this service advise alternative Providers to your client and add as a participant on the claim.

 Manage Participants (Eos Online Help)

 Contracted Suppliers by Geographic Area of Coverage

i In Salesforce, record the conversation as a contact on the claim.

3.0 Contact Employer

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Contact the client's employer to discuss the following:

- the client has agreed to participate in the SAW service
- the intended outcome of the service is for the client to return to their pre-injury employment or a temporarily modified job with their current employer
- advise the employer the service consists of tailored, flexible interventions to meet their needs
- a workplace assessment is required as part of the service

b Advise the Employer the Provider will contact them to visit the workplace and discuss how they can support return to work.

NOTE What if you are unable to reach the employer by phone?

- 1) Attempt a maximum of two contacts over two full working days.
- 2) If you are unable to reach the employer after two full working days, and if there is a verified email address for the employer party, email the employer with the information in points a and b along with an invitation to call or email ACC if they have any questions or concerns.
- 3) If there is no verified email address to notify the employer – but we are satisfied that the referral for Stay at Work is urgent ie. job is at risk, we can send the referral. When sending the referral we need to be very clear that the employer has not been notified so the Stay at Work Provider is aware.

c Check if the client and employer have a preferred Provider.

NOTE What if the client and employer have different preferred Providers?

The client's preference takes precedence. Advise the employer you are unable to accommodate their preference.

d In Salesforce, record the conversation as a contact on the claim.

NOTE What if the request is required in the future?

If the support is required in the future, set a reminder task for the future date when the support will be required.


When the reminder task is due return to Activity 4.0 Request service referral.

Review the contract timeframes and SLAs as specified in the service page.

e Add the Agreed Intervention to the Recovery Plan.

NOTE What if you are unsure how to add an Agreed Intervention?

Go to (NGCM) Create or Update Recovery Plan.

 **PROCESS** Create or Update Recovery Plan

4.0 Request service referral


Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Eos, check the following documents are on the claim:

- recent medical information
- current medical certificate
- ACC45
- Individual Recovery Plan

NOTE What if there is essential information missing?

- avoid delaying the referral unless completely necessary
- give the provider as much information as you can about the client's situation based on conversations with employer and client and any clinical information on the claim. The client may have, for example, mentioned they have seen a specialist, but we don't have a copy of the report yet – and we will send it once available.
- Go to (NGCM) Request Clinical Records. Once received, return to this process.

 **PROCESS** Request Clinical Records

b Check if there are documents on other claims relevant to the referral.


NOTE What if there are documents on other claims?

Create a copy and transfer to the other claim:

- Create a bulk print of documents on the other claim, complete mandatory fields and add a description
- Open PDF document from email link
- File the PDF away to the claim you are creating the referral on
- Repeat these steps if there are documents on other claims

Provide a short and descriptive title to the document properties in the PDF and state the claim number the information came from eg Medical records and reports from claim: 100XXXXXXXX.

Do not create a bulk print on one claim and move it to a different claim as it will not appear in any file copy requested by the client.

 Print documents

c Perform privacy checks on documents.

 Privacy Check Before Disclosing Information Policy

 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 (recoveryadmin@acc.co.nz) and include the document to be redacted plus your redaction instructions.

If the claim is a complex mental injury (CMI) claim and you are unable to do the redactions yourself, send an email to Recovery Administration (recoveryadmin1@acc.co.nz) and include the document to be redacted plus your redaction instructions. If you have Adobe Pro and are able to do the redactions yourself, ensure you redact all appropriate information.

d In Eos, create a document group titled 'Stay At Work' and add the applicable documents to the group.

 Manage document groups

e In Eos, generate a Vocational Rehabilitation referral task for a 'Stay At Work'. For further information refer to Referring Tasks to Recovery Administration - Principles.

 Creating Manage Referral Tasks - System Steps

 Referring Tasks to Recovery Administration - Principles


f Complete the mandatory fields in the e-form.

NOTE What information do you need to include in the task/e-form?

- Refer to Manage Referral Task Templates.
- Use the "Factors impacting Rehabilitation" section to specify if any obstacles have arisen during conversations with client or employer, for example, fears around workplace safety or reinjury, employment concerns

 Manage Referral Task Templates

 Service Contracts and Contracted Providers - MFP spreadsheet

 Disclosure of Care Indicator Information to Third Parties Policy

g Consider the timing of the task. The tasks route to the Recovery Administration team with an SLA of 24 hours.

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

Call Recovery Administration, provide the claim number and request the task is completed today.

5.0 Review task

Recovery Administrator

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

b Check if the task is NGCM - Send Vocational Referral.


NOTE What if this is a NGCM - Admin Request task?

Go to Activity 8.0 Edit or extend purchase order.

c Review the tasks to ensure it has the required information to complete the referral form .

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, refer to the link below.

 Principles of Working in the Administration Team


NOTE What if you receive a NGCM - Admin Request task for a re-referral as the Provider is unable to accept a referral?

Continue to Activity 6.0 Create Purchase Order.

6.0 Create purchase order

Recovery Administrator


a In Eos, generate a Purchase Order using referral type Stay At Work.

 NG GUIDELINES Purchase Order Details - Stay at Work

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

NOTE What if this is a re-referral?

Locate the original Purchase Order and continue with this process.

 Creating purchase orders using general + QE

b Identify and select a SAW vendor using the Geographic Location search.

NOTE What if this is a re-referral?

Update the original Purchase Order with the new Provider and continue with this process.

 Contracted Suppliers by Geographic Area of Coverage

NOTE What if a preferred vendor has been specified in the task?

Select the vendor from the Contracted Supplier by Geographic Area Coverage list. Go to task (d) Approve Purchase Order.


c Add the selected Vendor as a participant on the claim.

 Manage Participants (Eos Online Help)

d Approve the purchase order.


NOTE What if the purchase order requires a higher delegation?

Refer to the system steps below.

 Request Authorisation for a Purchase Order - System Steps

e Select 'Add documents' and generate the ACC98 referral for Stay At Work.

f Add additional information received in the task to the referral. For guidance refer to the Admin Template - Stay At Work.

 Admin Template - Stay at Work Referral

g Perform privacy checks on the documents in the group.

 NG SUPPORTING INFORMATION Inbound and Outbound Document Checks

 Privacy Check Before Disclosing Information Policy

h Complete the documents and convert them into non-editable PDFs.

NOTE What if there is a document group?

Open document group and link the ACC98 to the group and email to the vendor.

i Create and send an email using 'Requests and referrals' template.

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

NOTE What if the email is too large to send as a single email?

1) Document size can be reduced either:

Use Adobe Pro to

Reduce file size:

- Select Optimize PDF
- Select Reduce File Size

Or

Split document

- Select organize page
- Select Split
- Select Split by File Size (up to 10MB)

The document will save in the same location and the original document and will be name PART1, PART2 (depending in the size of the file being split).

2) If it is still too large to be sent as a single email:

Contact the vendor and ask if the referral can be sent by courier.

If yes, confirm correct physical address then go to Prepare and Send Client Information by Courier then return to this process.

Otherwise, send by multiple emails.

j In Salesforce, close the referral task.

7.0 Review Plan or Progress Report

Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Eos, open the ACC7430 Stay At Work initial and progress report.

Perform the following checks:

- It is clear what roles ACC, the client and the employer will play in the GRTW plan.
- If there are any recommended actions for ACC, for example, arranging transport, equipment, or other assessments or abatement – if there are, add these to the Recovery Plan (including contacting the Client to confirm).
- There is a clear return to work plan with rationale.

 ACC7430 SAW Initial and Progress Report

b Provide a copy to the GP and any other stakeholders as you consider appropriate (ensuring the client has given permission).

NOTE What if the Employer has requested a work trial?

Discuss with the Employer a timeframe for the work trial and ensure the Vocational life areas are updated with this information. Ensure the stop for abatement is removed from the client's weekly compensation for the period of the work trial. Ensure you have appropriate follow up in place with Employer prior to the end of the work trial to discuss payments. There is no need to send the ACC038 if a work trial is agreed.

NOTE What if the provider requests that the client would be more suitable for a Pathways to Employment?

Review the provider's rationale and check with the PTE criteria. Update referral if appropriate, or advise the provider that you consider the SAW referral as most appropriate for your client.

NOTE What if the Provider or client advised they failed to attend?

Go to Manage Non-Compliance.

 **PROCESS** Manage Non-Compliance


NOTE What if you are made aware that the client has resigned, been terminated or received redundancy?

Contact the client and employer to confirm this, and offer if ACC or SAW provider could provide any support to avoid this if possible.

Consider if the Back to Work Service is applicable.

Refer to information link below for guidance.

 **PROCESS** Set Up Back To Work Support

 Client resigns, loses job / termination, is made redundant


c Perform privacy checks on the report.

 NG SUPPORTING INFORMATION Inbound and Outbound Document Checks

 Privacy Check Before Disclosing Information Policy

d Determine the suitability of the recommendations or request.

Service Item Code	Service Item Description	Service Item Definition	Price (excl. GST)	Pricing Unit
Stay at Work				
VRS21	Stay at Work One	Expected Outcomes as per Table 3 achieved within min of 10 business days	\$717.45	Set fee Paid on referral Max 1
VRS22	Stay at Work Two	Expected Outcomes as per Table 3 achieved within 10 weeks of start date	\$832.36	Set fee Paid on prior approval Max 1
VRS23	Stay at Work Three	Expected Outcomes as per Table 3 achieved within 6 weeks of start date	\$518.05	Set fee Paid on prior approval Max 1
VRS24	Stay at Work Exceptional	Expected Outcomes as per Table 3 achieved within 6 weeks of the start date per package payment	\$239.55	Set fee Paid on prior approval Max 3
VRS25	Stay at Work Initial Functional Rehab	Expected Outcomes as per Table 3 achieved within 6 weeks of start date	\$563.47	Set fee Paid on prior approval Max 1
VRS26	Stay at Work Follow Up Functional Rehab	Expected Outcomes as per Table 3 achieved within 4 weeks of start date	\$450.78	Set fee Paid on prior approval Max 1

 SAW Codes and Pricing..JPG

NOTE What if you are unsure about recommendations made in the plan?

Contact the Provider to discuss and negotiate changes. Record this conversation as a contact on the claim. Once an amended report is received (if applicable) return to this process.

NOTE What if the Provider has contacted you to request the Stay At Work Service is put on hold?

Discuss the rationale for this request. Based on this discussion, if you decide to put the Service on hold, advise the provider of the decision and upload this correspondence to the claim. Update Salesforce accordingly.

Otherwise advise the Provider your decision to decline. Record this conversation as a contact on the claim.

NOTE What if the Provider has contacted you to request the Stay At Work Service is reinstated?

Upload this correspondence to the claim and update salesforce accordingly.

 NG GUIDELINES Purchase Order Details - Stay at Work

 Vocational Rehabilitation Services Operational Guidelines

- e Check if the plan has identified the client requires progression to Stage 2, 3 or exceptional or Initial Functional Rehabilitation or Follow up Functional Rehabilitation of the Stay At Work Service. Consider the Provider's rationale as to why Stage 2, 3 or exceptional or Initial Functional Rehabilitation or Follow up Functional Rehabilitation is required.

NOTE No prior approval is required for Initial Functional Rehabilitation under the Stay at Work Service however Follow up Functional Rehabilitation requires ACC approval.

NOTE Stage 1 is approved by Admin when the referral is created and sent. Both stage 1 and stage 2 do not need prior approval. Stage 3 and stage 4 (VRS24) will need prior approval. These stages can be approved by the Recovery Team Member.

NOTE What if you have determined Stage 2, 3 or exceptional or Follow up Functional Rehabilitation is appropriate?

Create a NGCM - Edit Manage Referral Purchase order task requesting the purchase order is updated as per the progress report.

- f Gather information from the client and their treating provider about reasons.
- g Determine if these are due to the injury (For example, infection or surgery), medical conditions or something else.

NOTE What If the client's ongoing incapacity isn't related to the injury?

Consider a review of incapacity under section 117.

NOTE What if the client's ongoing incapacity is injury related?

Start concurrent vocational independence pathway – the client may not be able to fully return to their pre injury work type

- h Consider if a Vocational Rehabilitation review will be helpful.
- i Check if the client has requested copies of the reports in the Vocational Life area of the Recovery Plan.

NOTE What if the client has requested copies?

Send the reports by the clients preferred method of communication.

NOTE What if the GP or another party requests copies of the report?


Provide a copy to the GP and any other stakeholders as you consider appropriate (ensuring the client has given permission).

NOTE What if you have determined Stage 2, 3 or exceptional or Initial Functional Rehabilitation or Follow up Functional Rehabilitation is not appropriate?

Contact the Provider to discuss their rationale. Based on this discussion, if you decide Stage 2, 3 or exceptional is required create a NGCM - Admin Request task requesting the purchase order is updated as per the providers rationale and progress report. Otherwise advise the Provider your decision to decline. Record this conversation as a contact on the claim.

NOTE What if the client advises there is information in the report which is factually incorrect?

Contact the Provider and request the incorrect is updated on the report and an amended report is provided. For further guidance refer to Managing a client's request to change personal information.

 Managing a client's request to change personal information

NOTE What if the client advises they disagree with the opinion provided the assessor in the report?

The client can supply a 'statement of correction' to ACC which is then included with the report. This means any time the report is sent out, the statement of correction must be sent as well.

8.0 Edit or extend purchase order

Recovery Administrator

- a Based on the type of request check the following has been provided in the task:

STAGE 2, 3 or exceptional:

- Purchase Order Number
- Purchase Order Code
- Date range

NOTE What if there is information missing?

Go to the 'Task clarification' section in NG PRINCIPLES Working in the Administration Team for instructions.

 Principles of Working in the Administration Team

- b In Eos, to locate the purchase order:

- click on "Search for a claim"
- select the "Purchase Order / ACC32 Number" tab
- paste the purchase order number into the 'purchase order number' field
- select "Open"

- c Update the purchase order using the following instructions:


- select "Add" to add a new line
- select the 'Intervention' then 'Ok'
- search for the purchase order code
- select 'Add to list' then 'Ok'
- add the information provided in the task then 'Ok'

 NG GUIDELINES Purchase Order Details - Stay at Work

- d Approve the purchase order.

NOTE What if the purchase order requires a higher delegation?

Refer to the system steps below.

 Request Authorisation for a Purchase Order - System Steps

- e Create and send an email using the 'Purchase Order Approval and Extension' template.

f In Salesforce, close the task.


9.0 Review Completion Report

Recovery Assistant, Recovery Coordinator, Recovery Partner

a In Eos, open the ACC7983 Stay At Work completion report.

 ACC7983 SAW Completion Report

b Perform privacy checks on the report.

 NG SUPPORTING INFORMATION Inbound and Outbound Document Checks

 Privacy Check Before Disclosing Information Policy

c Check if the client has requested copy of the report in the Vocational Life area of the Recovery Plan.

d Check the completion report includes:

- reporting on the goals and outcomes achieved and the activities completed, or
- any outstanding actions for ACC or the treating provider – if there are any, add reminder tasks for these.

NOTE What if the report does not include this information?

Contact the Provider to obtain this information. If necessary, request an updated completion report with this information added. Record this conversation as a contact on the claim. Once an updated report is received (if applicable) return to this process.

NOTE What if the client has requested a copy?

Send the reports by the clients preferred method of communication.

e If the client has not achieved a full return to work, review the providers' rationale for this and gather information from the client and their treating provider about reasons why full return to work wasn't achieved.

f Determine if these are due to the injury (For example, infection or surgery), medical conditions or something else. See internal clinical advice if this still isn't clear.

NOTE What if the client's ongoing incapacity isn't related to the injury?

Consider a review of incapacity under section 117

NOTE What if the client's ongoing incapacity is injury related?


Start concurrent vocational independence pathway – the client may not be able to fully return to their pre injury work type.

g Consider if a voc rehab review will be helpful.

h Open the Agreed Intervention in the Recovery Plan and add the outcome.

NOTE What if you are unsure how to add the outcome?

Go to Create or Update Recovery Plan.

 **PROCESS** Create or Update Recovery Plan

i Determine the next steps to progress the client's recovery.

 **PROCESS** Create or Update Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner
