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He Whakaora.  
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# The Sensitive Claims Service

## Supplier Workshop

## Resource Pack

There is no real Personal Identifiable Information (PII) in this document to maintain privacy. This document is for ACC training purposes only.





## Agenda



### Agenda

- Welcome
- Summary of Changes
- Contract Management
- Annual Declaration
- Invoicing and Payments
- Transition
- Wrap-up



Whāia, whāia  
Whāia te tika  
Whāia te pono  
Whāia te aroha  
Mō te oranga tangata  
Kia puta ki te whai ao,  
Ki te ao mārama  
Haupiri e, hui e, tāiki e.

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ACC's Purpose Karakia can be used to begin and end meetings and can be interpreted as follows:

- Striving to do what is right
  - Undertaking to act justly
  - Being considerate of everyone
  - That it may improve the lives of all
-

## Choosing a Cover and Treatment Pathway



### Choosing a Cover and Treatment Pathway

Cover and Wellbeing Plan	Specialist Cover Assessment
The kiritaki does not have a significant mental health history outside of the sexual abuse or sexual assault.	The kiritaki has a complex mental health presentation or a significant history of engagement with mental health or addiction services.
The Lead Service Provider is confident that the kiritaki can achieve their recovery goals within a maximum of 80 hours of treatment over up to 24 months (under Tailored Support to Wellbeing Package A).	The kiritaki has significant substance abuse issues, active eating disorders, personality disorders, or mental health conditions that need specialist input from a psychiatrist or similar professional.
The Lead Service Provider can clarify the injury-related presentation and plan relevant treatment without input from an assessor.	The kiritaki is applying for financial or vocational support from ACC.
The Lead Service Provider does not identify any significant risks.	The kiritaki requires other highly specialised ACC entitlements (e.g. residential rehabilitation).

Click here to enter text.

# Annual Supplier Declaration Form



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As a Supplier delivering services under the Sensitive Claims Service Contract, an annual declaration is required to confirm compliance with all or any part of the Contract or to disclose information to ACC relevant to the Supplier's viability or suitability to deliver the Services.

We ask you to complete the following declaration for your organisation, so we know you're complying with the terms of the Contract.

This form will need to be completed by an authorised signatory for your organisation. If you do not have this delegation, please forward the form to the appropriate person.

Please refer to the relevant Clauses of the Service Schedule for the Sensitive Claims Service for more detail about Supplier requirements.

## Confirmation of compliance with the Sensitive Claims Service Contract

By making this declaration, you are letting us know whether your organisation is complying with the terms of the Sensitive Claims Service Contract.

### Authorised Signatory Name (Name of person completing the declaration)

Free Text Box

### Authorised Signatory Position Title (Position title of person completing the declaration)

Free Text Box

### Supplier Legal Name (Name of the organisation you are declaring on behalf of)

Free Text Box

### Supplier Vendor ID (Your organisation's ACC Vendor ID)

Free Text Box

## Confirmation of compliance with the terms of the Sensitive Claims Service Contract.

At the time of this annual declaration, do you confirm:

### Personnel management

\*Please note this section does not replace other declarations required by ACC.

- All Named Service Providers and Service Providers have the appropriate qualifications and experience, maintain current and valid annual practising certificates, and comply with any relevant conditions in their delivery of services including supervision requirements.
- All personnel have completed the 'Introduction to Sensitive Claims induction and development' module available on ACC's Learning Management System.
- All personnel have undertaken Police Vetting, and ACC have been informed of any adverse findings (if any).
- Your annual Children's Worker Safety Check declaration has been submitted for the current year (if applicable).

# ACCNUMBER Form name

Please attached a list of all Named Service Providers and Service Providers under your Supplier contract.

Add attachment link

## Health and Safety

- All Services delivered under my Sensitive Claims Service Contract are in line with the health and safety legislative requirements, including those mandated in the Health and Safety at Work Act 2015.
- All health and safety incidents, events and risks associated with providing the Services have been identified, monitored, managed and notified to ACC via ACC's online health and safety form.

## Policies, protocols, guidelines and procedures

- All quality assurance systems and processes in accordance with Good Industry Practice are up to date and in place to identify and monitor competency levels, training needs and compliance with supervision and training requirements for all personnel that provide the Services.

The following policies, protocols, guidelines, and procedures are up to date and maintained:

- Contract Management Checklist
- Provider Operating Procedures
- Service Governance Operating Procedures
- Privacy Policy
- Conflict of Interest Policy
- Health and Safety Risk Management Plan
- Business Continuity Plan
- Working with Maori Strategy
- Transition Plan

## Declaration

By completing this declaration, you confirm you are the authorised signatory for your organisation or have the delegation to complete this declaration.

- To the best of my knowledge the information provided in this declaration is true and accurate.
- I have the authorisation to make the declaration on behalf of my organisation.

Please type your name to confirm you accept the above declaration.

Free Text Box

ACC collects, and uses information supplied, to assess compliance with the Accident Compensation Act 2001 and related regulations. Information is collected and used to ensure that ACC takes necessary and reasonable steps to prevent injury, and to ensure that the rehabilitation and treatment ACC provides is necessary and appropriate and of the quality required. ACC may disclose any information it receives relating to a provider (whether through an Employer Verification Form, CV Check (NZ) Ltd assessment or otherwise) to relevant authorities including relevant professional or licensing bodies. Individuals have the right to request access to and correction of personal information that ACC holds about them. In the collection, use, disclosure, and storage of information, ACC will at all times comply with the obligations of the Privacy Act 2020, the Health Information Privacy Code 2020 and the Official Information Act 1982. For more details see ACC's privacy notice at [Our privacy notice \(acc.co.nz\)](https://www.acc.co.nz/our-privacy-notice)



## Performance Indicators

### Timeliness

Objective	Indicator	Calculation	Target
Kiritaki receive timely treatment and rehabilitation services.	<p>The percentage of Reports:</p> <ul style="list-style-type: none"><li>• Early Supports Plans</li><li>• Cover and Wellbeing Plans</li><li>• Specialist Cover Assessments; and</li><li>• Wellbeing Plans</li></ul> <p>are received within expected timeframes and that meet accepted quality criteria as defined in the Operational Guidelines.</p>	The number of Reports that meet the quality criteria and are submitted to ACC within the required timeframes shown as a ratio of all Reports submitted during the reporting period.	To be monitored and benchmarked against other Suppliers.



## Quality

Objective	Indicator	Calculation	Target
<p>Kiritaki receive treatment and rehabilitation services that are tailored to their specific injury and needs (cultural or other), based on clinical best practice.</p>	<p>The ratio of Kiritaki accessing each of the different service pathways (including accessing multiple service pathways) identified through the Early Supports Plan.</p>	<p>The number of claims entering each service pathway during the reporting period, shown as a ratio of overall sensitive claims; and</p> <p>The number of claims that utilise more than one service pathway shown as a ratio of overall sensitive claims.</p>	<p>To be monitored and benchmarked against other Suppliers.</p>





## Sustainability

Objective	Indicator	Calculation	Target
Services are appropriate to the needs of the Kiritaki, delivered at an appropriate point of recovery for the Kiritaki, and by the provider best suited to deliver that treatment to ensure services are financially sustainable now and in the future.	The average cost and number of hours and services used to treat and support the Kiritaki and their identified injury needs.	<p>The total number of hours invoiced on a claim where a partially completed report, Closure Notice or a Completion Report has been submitted, shown as an average and median for:</p> <ul style="list-style-type: none"><li>• Tailored Support to Wellbeing Package A;</li><li>• Tailored Support to Wellbeing Package B.</li></ul> <p>The correlation between hours invoiced for services, types of services invoiced and service costs for specific cohorts, compared with rate of outcomes achieved or exceeded for those cohorts.</p>	To be monitored and benchmarked against other Suppliers.



## Kiritaki Outcomes

Objective	Indicator	Calculation	Target
Kiritaki have improved health, independence, and overall quality of life (to the maximum extent practicable).	Primary and secondary outcome measures show improved health related quality of life at service exit.	The average and median change between first and subsequent, and first and final primary measure, and first and subsequent and first and final secondary outcome measure scores.	To be monitored and benchmarked against other Suppliers.
	The proportion of Kiritaki who achieve or exceed their recovery goals at service exit.	The ratio of Kiritaki goals set during assessment and treatment that are reported as achieved or exceeded in Completion Reports.	To be monitored and benchmarked against other Suppliers.

## The Role of the Supplier

**ACC**

### The Role of the Supplier

As a Supplier, you are responsible for:

- Meeting the objectives of the Sensitive Claims Service
- Managing referrals to the service
- Delivering the full range of pre and post-cover core services within your geographical areas
- Maintaining the policies, protocols, guidelines, and procedures outlined in the contract (supplier requirements)
- Submitting contract reports as per service level agreements
- Monitoring your own performance against the performance indicators
- Managing the performance of all providers and personnel delivering services to kiritaki
- Ensuring clinical reports, plans and assessments are submitted to ACC on time and of good quality

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## Service Utilisation

**ACC**

### Service Utilisation

**Included**

The below services must be included in the hours available under Tailed Support to Wellbeing (A or B):

- Support from Named Service Providers
- Support from Service Providers (including Social Work)
- Whānau Support
- Adjunct therapies (e.g. equine therapy).

**Additional**

The below services are available in addition to the hours available under Tailored Support to Wellbeing (A or B):

- Cultural Support and Advice
- Group-based therapy and DBT group-based therapy
- Active Liaison
- Function Assessment
- (when not completed as part of the Specialist Cover Assessment).

**Not Included**

Services and entitlements not part of the Sensitive Claims Service and must be considered by an ACC Recovery Team Member before approving:

- Financial compensation (e.g. Weekly Compensation)
- Vocational Rehabilitation
- Social Rehabilitation (e.g. childcare)
- Rongoa Māori.

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## Reporting Quality Criteria



### Reporting Quality Criteria

Clinical reports, assessments and plans need to be:

- Submitted on time
- On the right template
- Meet the quality standards outlined in the operational guidelines.

You can only invoice for report writing services after the report has been accepted by ACC.

### Quality Criteria

Reports must:

- Be understandable by a reader who may not have a clinical background
- Provide clear clinical rationale
- Only include the necessary information, and any information must be relevant to the report question being answered
- Include the date of the last meeting with kiritaki
- Include the provider declaration
- Include supporting documentation as specified in report templates (e.g. copies of psychometric assessment measures used in the Cover & Wellbeing Plan).

**From:** [Engagement and Performance Manager](#)  
**To:** [Supplier](#)  
**Subject:** Quality Review  
**Date:** Tuesday, 6 August 2024 3:56:21 pm  
**Attachments:**

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Kia ora <Supplier Name>,

Thank you for speaking to me earlier. As discussed, this email is to confirm that following concerns about report quality, ACC has undertaken a Quality Review process for one of your Named Service Providers, <Provider Name> (<Provider ID>). Below is a Quality Review Report summarising the concerns with <Name>'s work that have required a Quality Review, the reasons why these have led to the Quality Review process being used, and what the next steps in the process will be.

Concerns:

- <Name> has submitted three Early Supports Plans to ACC over the past two months. These reports have been for claims XX (submitted on 03 April 2025) YY (submitted on 17 April 2025), and ZZ (submitted on 01 May 2025).
- In each of these Early Supports Plans, <Name> has provided a causal link between the Schedule 3 events and the presentation of the kiritaki and has advised that there are no other potential factors that could explain the presentation. However, in each report, ACC have noted information that contradicts this explanation:
  - Claim XX: The Early Supports Plan notes a significant history of engagement with mental health services through Te Whatu Ora.
  - Claim YY: The Early Supports Plan notes current drug and alcohol comorbidities with an unclear link to the Schedule 3 events.
  - Claim ZZ: The Early Supports Plan notes that the event that has occurred may not meet the definition of a Schedule 3 event.
- Furthermore, <Name> has used the same rationale, word for word, in each of these Early Supports Plans when explaining the causal link between the Schedule 3 events and the presentation of the kiritaki.
- Each of these reports have been returned to <Name> and yourself to address the concerns, but ACC has continued to see the same issues occur in the subsequent reports we have received from <Name>.

Rationale for Quality Review process:

The above concerns indicate that <Name> requires support to correctly determine the most appropriate cover pathway for a kiritaki, and what factors might influence that decision to perhaps use the Specialist Assessment pathway instead. The use of the same wording across multiple reports indicates that <Name> is not considering individual kiritaki circumstances but is taking the same approach for each kiritaki.

If this continues, it is likely that <Name> will suggest incorrect pathways for the kiritaki working with them, and potentially cause the need for reassessment or a change in

pathway for those kiritaki. This would interfere with the recovery of the kiritaki and goes against the principles of the Sensitive Claims Service.

- Next Steps:

As discussed, please work with <Name> to develop a plan for addressing these concerns and send me a copy of the plan by <date>. The plan will need to include the step that will be taken to support <Name>, and the outcomes that will occur if improvements are not seen. I will be in contact over the duration of the plan to check on progress.

Ngā mihi nui,

**Engagement and Performance Manager**  
ACC



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## Administration and Management Fee



### Administration and Management Fee

The Administration & Management fee is paid to cover the supplier for:

- Receiving and managing referrals
- Setting up claims
- Supporting personnel
- Overseeing the workforce
- Administering the contract
- Ensuring timely reports
- Meeting performance indicators.

#### During Transition

- Paid once on the completion of the engagement Form
- If client moves to a new supplier, Admin fee payable by ACC
- If client returns to same supplier, Admin Fee is not payable.



## Transition



The transition page on the ACC website provides all the information you need to safely transition kiritaki onto the Sensitive Claims Service, including the interactive transition decision making tool. If you need support during transition, please follow the escalation pathway.

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



## Post Workshop: Choosing the Right Codes Invoicing Activity

You are a Supplier. Your contract code for Named Service Providers is XX5567 and your contract code for Service Providers is YY7890.

A Psychotherapist, Amy, subcontracts to your organisation. Amy is the Lead Service Provider for a kiritaki, Mark.

Mark had cover approved via the Cover and Wellbeing Plan and Amy outlined the services and treatment duration required for Mark under a Tailored Support to Wellbeing Package A which was approved by ACC.

The purchase order provides approval for 56 hours of Tailored Support to Wellbeing Package A over an 18-month period as per Amy's recommendation in the Cover and Wellbeing Plan.

Amy has allocated the hours in Mark's Tailored Support to Wellbeing Package A as follows:

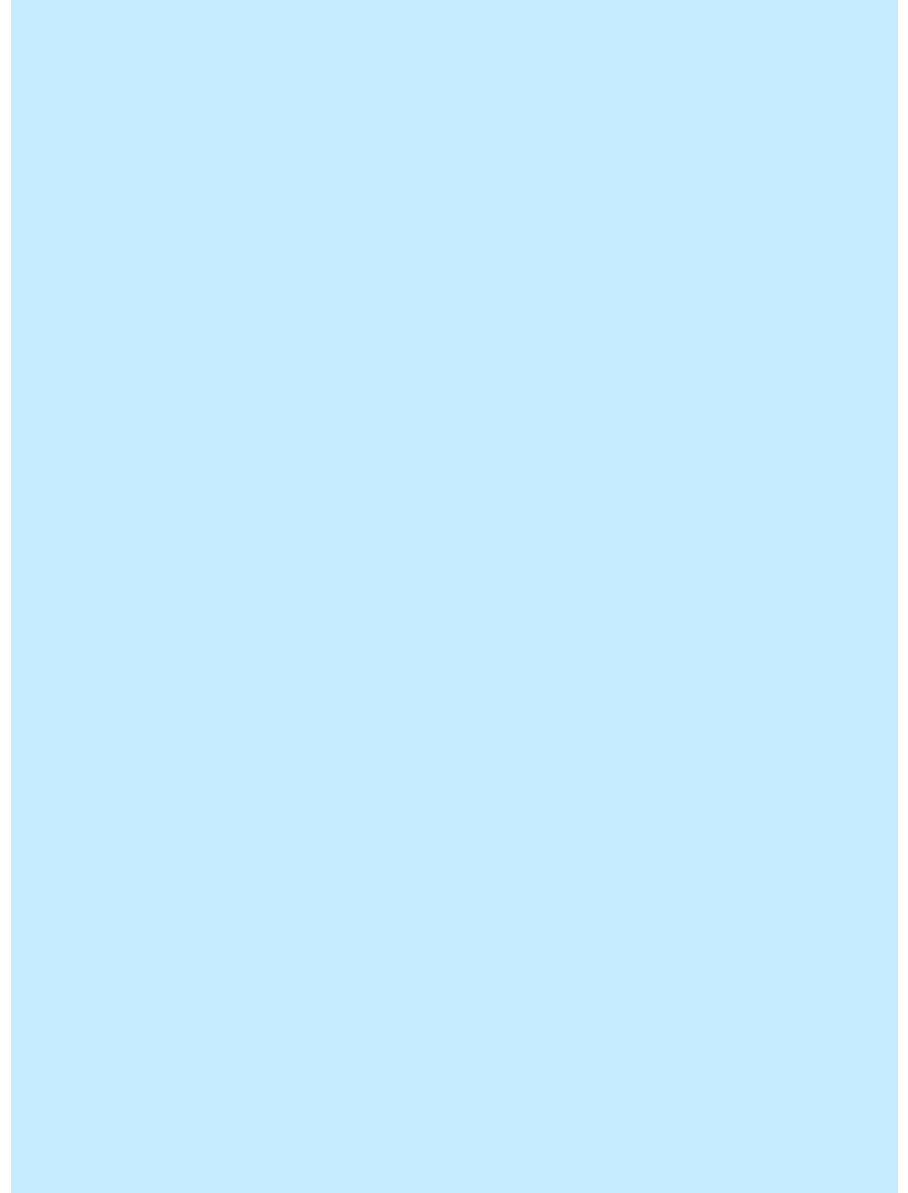
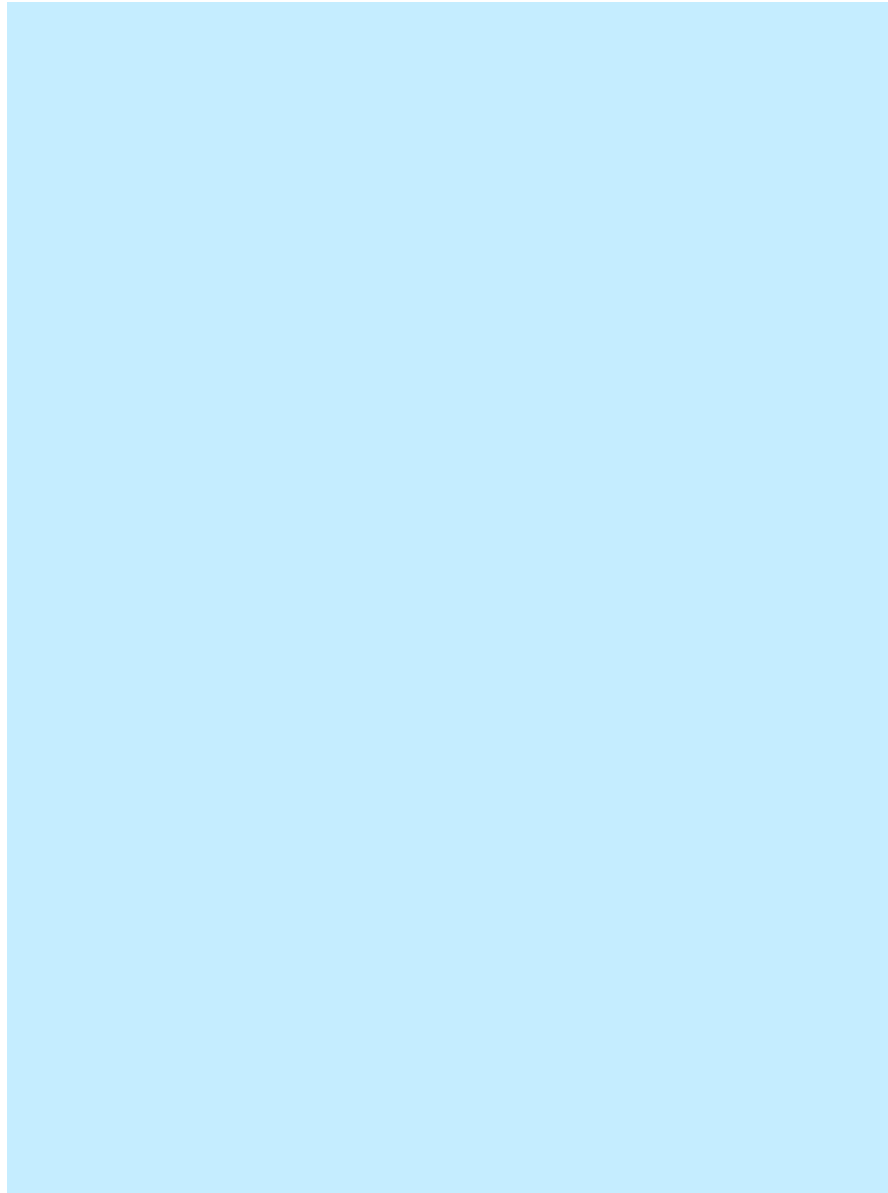
- 40 hours with the Lead Service Provider (Psychotherapist)
- 5 hours Social Work
- 5 hours Occupational Therapy
- 2 hours Registered Nurse
- 4 hours Whānau Support with a Counsellor Level 6 colleague.

In addition to the above, Amy has utilised:

- 3 hours Active Liaison
- 2 hours to write the Progress Report
- 1 hour triage for Group-based therapy
- 16 hours Group-based therapy
- 2 hours total for Progress Check-Ins.

Mark also failed to arrive for 2 scheduled appointments during treatment; one with Amy, and one with a Social Worker.

Referring to the list of codes for post-cover in the Sensitive Claims Service Schedule, what service item codes, suffixes and contract codes would you use to invoice ACC for each of the above service items. Use the space below to write your answer.





## Post Workshop: Transition Scenarios

**Scenario 1:** Both the Provider and Supplier are transitioning.

Gregor, a Counsellor, works for a Supplier, XYZ Rehab Ltd. Both Gregor and his Supplier are transitioning onto the Sensitive Claims Service.

<p><b>Kiritaki 1:</b></p> <p>Tane a 47-year-old kiritaki, has been working with Gregor since he engaged with ISSC. He last met with Gregor 3 weeks ago. He is 10 months into a Support to Wellbeing Long Term package under ISSC and the purchase order will expire on 2 Feb 2025. Gregor believes that Tane will need further treatment beyond the end of current purchase order.</p>	<p>What actions do Gregor and his Supplier need to take?</p>	<p>Does Tane need to transition onto the Sensitive Claims Service? If so, at what natural milestone would the transition take place?</p>
	<p>ANSWER</p>	<p>ANSWER</p>
<p><b>Kiritaki 2:</b></p> <p>Paige, 26, has been seeing Gregor under Short Term Support to Wellbeing. Paige did not arrive at her last 2 appointments, and last saw Gregor 9 weeks ago. Gregor tries several times to contact Paige but is unable to make contact.</p>	<p>What actions do Gregor and his Supplier need to take?</p>	<p>Does Paige need to transition onto the Sensitive Claims Service? If so, at what natural milestone would the transition take place?</p>
	<p>ANSWER</p>	<p>ANSWER</p>



**Scenario 2:** Supplier is transitioning but Provider is not (end by 31 May).

Leah, a Psychologist, has decided not to deliver services under the Sensitive Claims Service, but is happy to continue under ISSC until 31 May 2025. Her Supplier, ABC Recovery Group, is continuing to the new contract.

<b>Kiritaki 1:</b>  Claire, 41, has been working with Leah for 7 weeks, and has just started a Supported Assessment. Leah last saw Claire 2 weeks ago. The Supported Assessment will be completed by January 2025, but Claire will need to enter long-term treatment following the assessment, assuming that cover is accepted.	What actions do Leah and her Supplier need to take?	Does Claire need to transition onto the Sensitive Claims Service? If so, at what natural milestone would the transition take place?
	ANSWER	ANSWER
<b>Kiritaki 2:</b>  Jackson, 11, has been seeing Leah for 18 months and Leah last saw him 3 days ago. Jackson has made excellent progress and Leah expects him to complete services at the end of Support to Wellbeing Long Term, which expires on 15 March 2025.	What actions do Leah and her Supplier need to take?	Does Jackson need to transition onto the Sensitive Claims Service? If so, at what natural milestone would the transition take place?
	ANSWER	ANSWER



**Scenario 3:** Supplier is transitioning but Provider is not (end by 30 Nov).

Cory, a Psychotherapist, has decided not to deliver services under the Sensitive Claims Contract. They will cease to provide services on 30 November 2024. Cory’s Supplier, 123 Therapy Services, is continuing onto the new contract.

<p><b>Kiritaki 1:</b></p> <p>Nigel, 55, has recently engaged with ISSC and last saw Cory a few days ago. Cory is getting ready to submit an Early Planning Report advising ACC that Nigel’s needs are highly complex and further assessment will be required to determine what treatment will be best for Nigel.</p>	<p>What actions do Cory and their Supplier need to take?</p>	<p>Does Nigel need to transition onto the Sensitive Claims Service? If so, at what natural milestone would the transition take place?</p>
<p><b>Kiritaki 2:</b></p> <p>Amaia, 21, has been working with Cory for just over a year and had her last session with Cory a week ago. She has just had a cover approved by ACC, and Cory is developing a Wellbeing Plan. The Wellbeing Plan will recommend at least 12 months of treatment.</p>	<p>What actions do Cory and their Supplier need to take?</p>	<p>Does Amaia need to transition onto the Sensitive Claims Service? If so, at what natural milestone would the transition take place?</p>
	<p>ANSWER</p>	<p>ANSWER</p>
	<p>ANSWER</p>	<p>ANSWER</p>



**Scenario 4:** Provider is transitioning, Supplier is not (ending 31 May).

Harpreet, a Clinical Psychologist, is moving to the new service. Her current Supplier, Resilience Rehabilitation Associates, will not be moving to the Sensitive Claims Service but will continue to deliver services under ISSC until 31 May 2025.

<p><b>Kiritaki 1:</b></p> <p>Anika, 8, has been seeing Harpreet under ISSC. She last met with Harpreet 10 days ago. Harpreet was planning to start Anika’s Supported Assessment on 1 November 2024 as she believes Anika will need approximately 12 months of treatment to meet her needs. Harpreet has reviewed the new Sensitive Claims Services contract and thinks that the Cover and Wellbeing Plan will be the most appropriate cover assessment pathway for Anika.</p>	<p>What actions do Harpreet and their Supplier need to take?</p>	<p>Does Anika need to transition onto the Sensitive Claims Service? If so, at what natural milestone would the transition take place?</p>
<p><b>Kiritaki 2:</b></p> <p>Sione, 35 has recently had cover accepted following a Supported Assessment and is getting ready to start Support to Wellbeing Long-Term. Sione has highly complex needs. Harpreet has not submitted the Wellbeing Plan yet – the Wellbeing Plan is due on 25 October 2024. Harpreet expects that Sione will need extensive long-term treatment over the next 2-4 years to best meet his needs.</p>	<p>What actions do Harpreet and their Supplier need to take?</p>	<p>Does Sione need to transition onto the Sensitive Claims Service? If so, at what natural milestone would the transition take place?</p>
<p><b>ANSWER</b></p>	<p><b>ANSWER</b></p>	<p><b>ANSWER</b></p>
<p><b>ANSWER</b></p>	<p><b>ANSWER</b></p>	<p><b>ANSWER</b></p>

**Scenario 5:** Neither the Supplier or the Provider are transitioning (both end 30 November).

Peter and Mei are both counsellors. They operate as a small Supplier where they are the only providers. They are retiring at the end of 2024, and will close their business. Neither of them will continue to deliver services, either as a Supplier or Provider beyond 30 November 2024.

<p><b>Kiritaki 1:</b></p> <p>Fiona, 19, has been working with Mei on and off for 5 years. She is part way through her third Support to Wellbeing Long-Term package, and the next progress report is due on 19 September 2024. She last met with Mei 2 weeks ago. Mei believes that Fiona will continue to need treatment well beyond 30 November.</p>	<p>What actions do Peter and Mei need to take?</p>	<p>Does Fiona need to transition onto the Sensitive Claims Service? If so, at what natural milestone would the transition take place?</p>
	<p>ANSWER</p>	<p>ANSWER</p>



## Transition Timeline

This timeline shows the key dates and activities that will take place during the transition period.

### September 2024 – Transition Support

ACC release advice and tools to support Suppliers and Providers transition kiritaki to the new service.

### 4 October 2024 – Named Service Providers

Named service providers must be named and confirmed on a Suppliers contract by this date to be able to deliver services from 1 December 2024 under the new contract.

### 20 November 2024 – Final ISSC Purchase Orders requested

This is the final date Suppliers can request a new or amendment to a purchase order under the ISSC contract.

### 30 November 2024 – Final ISSC Purchase Orders Issued ISSC Contract ends

The ISSC contract ends, and this is the final date new or amended purchase orders can be issued.

No purchase orders under the ISSC contract can be issued beyond this date.

### 1 December 2024 – Go-Live!

The Sensitive Claims Service contract starts. Any new or re-engaging kiritaki will be supported under the Sensitive Claims Service moving forward.

### 1 December 2024 – 31 May 2025 (A) – Transition Period – Non transitioning Providers

Providers not intending to continue under the Sensitive Claims Service can support existing kiritaki to complete services between 1 December 2024 – 31 May 2025 (under an existing Purchase Order issued under ISSC).

### 1 December 2024 – 31 May 2025 (B) – Transition Period – Transitioning Suppliers & Providers

ACC will work with Suppliers and Providers to transition existing kiritaki to services under the new contract at natural milestone transition points in their recovery journey. These natural points will be the next check-in or reporting point in the recovery plan for the kiritaki.

### 8 February 2025 Named Service Providers – Group-based therapy and DBT Group-based therapy

Applications to:

- Establish any group-based therapy; or
- Be a Named Service Provider under the Sensitive Claims Services contract opens.

### 31 May 2025 – Transition period ends

All kiritaki should now be safely transitioned onto the Sensitive Claims Service.

No further services can be delivered under ISSC.

No purchase orders under the ISSC contract can be honoured after this date.



## Additional Resources

### Further Learning

A series of short eLearning modules has been developed for providers and other personnel to support delivery of the new Sensitive Claims Service.

You'll find these modules on [learning.acc.co.nz](http://learning.acc.co.nz)

### Links to key documents

<https://www.acc.co.nz/resources#/subcategory/372>

On the link above you will find:

- Service Schedule
- Operational Guidelines
- Annual Declaration
- Report Guidelines
- Report Templates

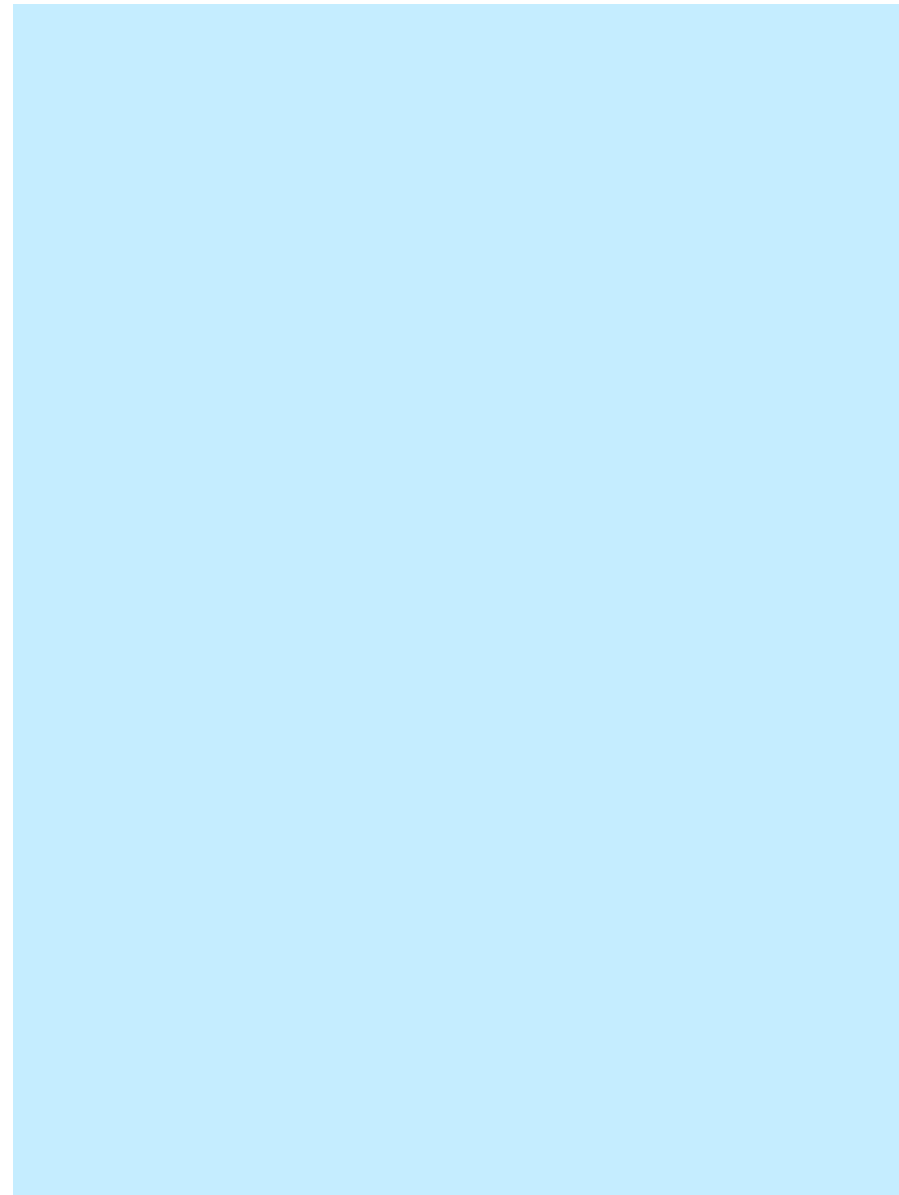
### Reminder About Transition:

Everything you need to know about transitioning kiritaki from the ISSC to the Sensitive Claims Service is available on [acc.co.nz](http://acc.co.nz)

This includes the transition guide.

### Further questions?

If you have any questions please contact the evolution team on [ISSCevolution@acc.co.nz](mailto:ISSCevolution@acc.co.nz).





## Notes

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## Notes

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