

SERVICE SCHEDULE FOR INTEGRATED SERVICES FOR SENSITIVE CLAIMS

CONTRACT NO: «Contract_»

A. QUICK REFERENCE INFORMATION

1. TERM FOR PROVIDING INTEGRATED SERVICES FOR SENSITIVE CLAIMS

1.1 The Term for the provision of Integrated Services for Sensitive Claims is the period from 24 November 2020 (“Start Date”) until the close of 30 November 2024 (“End Date”) or such earlier date upon which the period is lawfully terminated or cancelled. This is the final term of the Contract.

2. SPECIFIED AREA AND SERVICE LOCATION (PART B, CLAUSE 4)

2.1 You agree to provide Primary Services and Assessment to determine cover and entitlement decisions in the following geographical areas:

«TLA_Information».

3. SERVICE ITEMS AND PRICES (PART B, CLAUSE 14.1)

3.1 The Supplier will provide Services in accordance with the following Service Items:

Table 1 - Service Items and Prices

Provider Code (Suffix)		1	2	3	4	5	6	N/A	
Service Item Code (Prefix)	Service Item Description- Please note that all prices are exclusive of GST	Counsellor Level 6	Counsellor /SW therapist Level 7+	Psychotherapist	Psychologist	Psychiatrist	Social Worker	Other (No suffix required)	Pricing unit
PRE-COVER PRIMARY SERVICES									
SCGS	Getting Started in-person sessions, in accordance with Part B, clause 5.3.1	\$106.87	\$127.92	\$148.38	\$186.48	\$186.48		N/A	Per hour (max 2 hours per Therapist the Client sees)
SCGST	Getting Started sessions via Telehealth, in accordance with Part B, clause 5.3.1	\$106.87	\$127.92	\$148.38	\$186.48	\$186.48		N/A	Per hour (max 2 hours per Therapist the Client sees)
SCEP	Early Planning in-person sessions, in accordance with Part B, clause 5.3.2	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 4 hours)
SCEPT	Early Planning sessions via Telehealth (refer to Part B, clause 16), in accordance with Part B, clause 5.3.2	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	

Provider Code (Suffix)		1	2	3	4	5	6	N/A	
Service Item Code (Prefix)	Service Item Description- Please note that all prices are exclusive of GST	Counsellor Level 6	Counsellor /SW therapist Level 7+	Psychotherapist	Psychologist	Psychiatrist	Social Worker	Other (No suffix required)	Pricing unit
SCSS	Support to Well-being (short term) in-person sessions, in accordance with Part B, clause 5.3.3	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 8 hours per claim)
SCSST	Support to Well-being (short term) sessions via Telehealth, (refer to Part B, clause 16), in accordance with Part B, clause 5.3.3	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	
SCNS	Support for Next Steps in-person sessions, in accordance with Part B, clause 5.3.4	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 2 hours per claim)
SCNST	Support for Next Steps via Telehealth sessions, in accordance with Part B, clause 5.3.4	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 2 hours per claim)
ASSESSMENT TO DETERMINE COVER AND ENTITLEMENT DECISIONS									
SCSA	Supported Assessment Assessor in-person sessions in accordance with Part B, clause 5.4.1	N/A	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 10 hours per assessment or max 6 hours per assessment if SCSAL is also used)
SCSAT	Supported Assessment Assessor sessions via Telehealth (refer to Part B, clause 16), in accordance with Part B, clause 5.4.1	N/A	\$127.92	\$148.38	\$186.48	\$407.65		N/A	
SCSAL	Supported Assessment Lead Provider (where the Lead Provider is not the Assessor) in-person sessions, in accordance with Part B, clause 5.4.1	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 10 hours per assessment)
SCSALT	Supported Assessment Lead Provider (where the Lead Provider is not the Assessor) via Telehealth, in accordance with Part B, clause 5.4.1	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 10 hours per assessment)
SCCS	Continuity sessions in-person, in accordance with Part B, clause 5.4.2	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour as agreed

Provider Code (Suffix)		1	2	3	4	5	6	N/A	
Service Item Code (Prefix)	Service Item Description- Please note that all prices are exclusive of GST	Counsellor Level 6	Counsellor /SW therapist Level 7+	Psychotherapist	Psychologist	Psychiatrist	Social Worker	Other (No suffix required)	Pricing unit
SCCST	Continuity sessions via Telehealth (refer to Part B, clause 16), in accordance with Part B, clause 5.4.2	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour as agreed
POST-COVER PRIMARY SERVICES									
SCSW	Support to Well-being in-person sessions in accordance with Part B, clause 5.5.1	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 48 hours per 12-month period)
SCSWT	Support to Well-being sessions via Telehealth (refer to Part B, clause 16), in accordance with Part B, clause 5.5.1	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	
SCMW	Maintaining Well-being in-person sessions in accordance with Part B, clause 5.5.2	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 4 hours per year for up to 3 years)
SCMWT	Maintaining Well-being sessions via Telehealth (refer to Part B, clause 16) in accordance with Part B, clause 5.5.2	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	
POST-COVER SECONDARY SERVICES									
SCGT	In-person triage for Group-based Therapy, in accordance with Part B, clause 5.6.1	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65	\$127.92	N/A	Per hour per Client (max 1 hour)
SCGTT	Triage for Group-based Therapy via Telehealth, in accordance with Part B, clause 5.6.1	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65	\$127.92	N/A	Per hour per Client (max 1 hour)
SCGW	Group-based Therapy in-person sessions in accordance with Part B, clause 5.6.1	N/A	N/A	N/A	N/A	N/A		Other \$54.03	Per hour per Client (max of 32 hours per Client per 12-month period)
SCGWT	Group-based Therapy sessions via Telehealth (refer to Part B, clause 16) in accordance with Part B, clause 5.6.1	N/A	N/A	N/A	N/A	N/A		Other \$54.03	

Provider Code (Suffix)		1	2	3	4	5	6	N/A	
Service Item Code (Prefix)	Service Item Description- Please note that all prices are exclusive of GST	Counsellor Level 6	Counsellor /SW therapist Level 7+	Psychotherapist	Psychologist	Psychiatrist	Social Worker	Other (No suffix required)	Pricing unit
SCGWL	Group-based Therapy (DBT 52-week course) in-person sessions in accordance with Part B, clause 5.6.1	N/A	N/A	N/A	N/A	N/A		Other \$54.03	Per hour per Client (max 2 hours per Client per week)
SCGWLT	Group-based Therapy (DBT 52-week course) sessions via Telehealth (refer to Part B, clause 16) in accordance with Part B, clause 5.6.1	N/A	N/A	N/A	N/A	N/A		Other \$54.03	
SCIA	Incapacity assessment in-person sessions in accordance with Part B, clause 5.6.2	N/A	N/A	N/A	\$186.48	\$407.65		N/A	Per hour (max 2 hours per assessment)
SCIAT	Incapacity assessment sessions via Telehealth (refer to Part B, clause 16) in accordance with Part B, clause 5.6.2	N/A	N/A	N/A	\$186.48	\$407.65		N/A	
SCRR	In-person Treatment Review in accordance with Part B, clause 5.6.3	N/A	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 16 hours per review)
SCRRT	Treatment Review via Telehealth (refer to Part B, clause 16) in accordance with Part B, clause 5.6.3	N/A	\$127.92	\$148.38	\$186.48	\$407.65		N/A	
PRE- AND POST-COVER SUPPORT SERVICES									
SCFW	Whānau in-person sessions in accordance with Part B, clause 5.7.4	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		Social Worker \$127.92	Per hour (max 20 hours per claim per 12-month period)
SCFWT	Whānau sessions via Telehealth (refer to Part B, clause 16) in accordance with Part B, clause 5.7.4	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		Social Worker \$127.92	
SCAL	Social work in accordance with Part B, clause 5.7.5	N/A	N/A	N/A	N/A	N/A		Social Worker \$127.92	Per hour (max 10 hours per claim per 12-month period)
SCAL	Active liaison in accordance with Part B, clause 5.7.6	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 10 hours per claim per 12-month period)

Provider Code (Suffix)		1	2	3	4	5	6	N/A	
Service Item Code (Prefix)	Service Item Description- Please note that all prices are exclusive of GST	Counsellor Level 6	Counsellor /SW therapist Level 7+	Psychotherapist	Psychologist	Psychiatrist	Social Worker	Other (No suffix required)	Pricing unit
SCCA	Cultural support and advice in accordance with Part B, clause 5.7.7	N/A	N/A	N/A	N/A	N/A		Actual & Reasonable to a maximum of \$142.37	Per hour (max 10 hours per claim per 12-month period)
REPORTING									
SCPL	Early Planning Report (including any updates and/or revisions) in accordance with Part B, clause 5.3.2	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 2 hours per report)
SCAR	Supported Assessment report in accordance with Part B, clause 5.4.1	N/A	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 10 hours per report)
SCWP	Well-being plan in accordance with Part B, clause 5.5.1	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 2 hours)
SCPR	Progress report, includes Case Conferencing, preparation and attendance in accordance with Part B, clause 5.5.1	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 3 hours per report and max 2 hours per case conference)
SCCR	Completion report in accordance with Part B, clause 5.5.1	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65		N/A	Per hour (max 2 hours per report)
ADMINISTRATIVE FEES									
SCADM	Administration and Management Fee (Supplier) in accordance with Part B, clause 5.8.1							Other \$193.55	One fee per claim
SCDNA	Client non-attendance fee for Primary Services, in accordance with Part B, clause 5.8.2	\$42.75	\$51.16	\$59.35	\$74.60	\$163.06		N/A	Per missed Client appointment (max 5 per claim per 12-month period)
SCDNAS	Client non-attendance fee for Secondary and Support Services, in accordance with Part B, clause 5.8.2	\$42.75	\$51.16	\$59.35	\$74.60	\$163.06	\$51.16	N/A	Per missed Client appointment (max 1 per claim per 12-month period)
SCCN	Clinical records – reimbursement for costs of obtaining clinical notes in accordance with Part B, clause 5.8.3	N/A	N/A	N/A	N/A	N/A		Lesser of actual cost or ACC rates	See operational guidelines

Provider Code (Suffix)		1	2	3	4	5	6	N/A	
Service Item Code (Prefix)	Service Item Description- Please note that all prices are exclusive of GST	Counsellor Level 6	Counsellor /SW therapist Level 7+	Psychotherapist	Psychologist	Psychiatrist	Social Worker	Other (No suffix required)	Pricing unit
SCCL	Closure notice in accordance with Part B, clause 5.8.4	\$26.72	\$31.98	\$37.10	\$46.62	\$101.92		N/A	Fee per report
SCTT5	<p>Paid for the first 60 minutes (or less) of total travel in a day where:</p> <ul style="list-style-type: none"> The travel is necessary; The Service Provider travels via the most direct, practicable route between their base/facility and where the services are provided; and The distance the Service Provider travels exceeds 20km return; and/or The time the Service Provider travels exceeds 30 minutes <p>Note 1: where the Service Provider has no base or facility in the Service provision area return travel will be calculated between the “start point” and “end point” closest to the Client (as agreed by ACC).</p> <p>Note 2: If travel includes more than one Client (ACC and/or non-ACC) then invoicing is on a pro-rata basis.</p>	\$53.43	\$63.96	\$74.19	\$93.24	\$203.82	Social Worker \$63.96		Per hour or part thereof First hour
SCTT1	<p>Paid for return travel time after the first 60 minutes in a day paid under SCTT5, where:</p> <ul style="list-style-type: none"> The travel is necessary; The Service Provider travels via the most direct, practicable route available between their base/facility and where the services are 	\$106.87	\$127.92	\$148.38	\$186.48	\$407.65	Social Worker \$127.92		Per hour or part thereof second and subsequent hours

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Service Item Code (Prefix)	Service Item Description- Please note that all prices are exclusive of GST	Counsellor Level 6	Counsellor /SW therapist Level 7+	Psychotherapist	Psychologist	Psychiatrist	Social Worker	Other (No suffix required)	Pricing unit
	<p>provided; and</p> <ul style="list-style-type: none"> Additional travel time is required after the first hour of travel <p>Note 1: where the Service Provider has no base or facility in the service provision area return travel will be calculated between the “start point” and “end point” closest to the Client as agreed by ACC.</p> <p>Note 2: the first 60 minutes must be deducted from the total travel time and if travel includes more than one Client (ACC and/or non-ACC) then invoicing is on a pro-rata basis.</p>								
SCTA1	<p>Air travel when a Service Provider is:</p> <ul style="list-style-type: none"> requested by ACC to travel to an outlying area that is not the Service Provider’s usual area of residence or practice to deliver Services; and air travel is necessary and has been approved by ACC. <p>Note: ACC will only pay for actual and reasonable costs and receipts must be retained and produced if requested by ACC. If more than one Client (ACC and/or non-ACC) receives services, then invoicing is on a pro-rata basis.</p>						Actual and reasonable		Per trip

Code	Service Item Description - Please note that all prices are exclusive of GST	Price
SCTD10	<p><u>Travel Distance</u></p> <p>A contribution towards travel:</p> <ul style="list-style-type: none"> For return travel via the most direct, practicable route; and Where the return travel exceeds 20km. <p>Note 1: where the Service Provider has no base or facility in the service provision area, return travel will be calculated between the “start point” and “end point” closest to the Client (as agreed by ACC).</p> <p>Note 2: ACC does not pay for the first 20km of travel and this must be deducted from the total distance travelled. If travel includes more than one Client (ACC and/or non-ACC) then invoicing is on a pro-rata basis.</p>	\$0.70 per kilometre
SCT6	<p>Costs for return travel by ferry, taxi, rental car, public transport and parking when: Return travel is via the most direct, practicable route; and The return travel exceeds 20km.</p> <p>Note 1: where the Service Provider has no base or facility in the service provision area return travel will be calculated between the “start point” and “end point” closest to the Client as agreed by ACC.</p> <p>Note 2: ACC will only pay for actual and reasonable costs and receipts must be retained and produced if requested by ACC. If more than one Client (ACC and/or non-ACC) receives services, then invoicing is on a pro-rata basis.</p>	Actual and reasonable Per Trip
SCAC	<p><u>Accommodation for Assessor/ Service Provider</u></p> <p>Payable when a Service Provider has been requested by ACC to provide Services in an outlying area that is not the Service Provider’s usual area of residence or practice, and overnight accommodation is necessary. ACC will pay actual and reasonable accommodation costs of up to a maximum of \$258.28 plus GST per day with prior ACC Recovery Team/Recovery Team Member approval and receipts provided.</p> <p>Hotels – Maximum of \$172.19 + GST per night</p> <p>Meal and Incidental Allowances – Actual and reasonable up to the following maximums \$86.09 + GST per 24-hour period where overnight stay is required.</p> <p>No reimbursement for alcohol, including mini-bar expenses</p>	Actual and reasonable Max \$258.28 Per Night
SCTR1	<p><u>Remote Clinic Room Hire</u></p> <p>Paid where a Service Provider is:</p> <ul style="list-style-type: none"> Requested by ACC to deliver services in an outlying area that is not the Service Provider’s usual area of residence or practice; and The Service Provider is required to hire rooms for the specific purpose of delivering Services. <p>Note: ACC will only pay for actual and reasonable costs and receipts must be retained and produced if requested by ACC. If more than one Client (ACC and/or non-ACC) receives services, then invoicing is on a pro-rata basis.</p>	Actual and reasonable (max \$229.58 excl. GST per day)

Price Review

ACC will review pricing when, at ACC’s sole discretion, we consider a review necessary. The factors ACC may take into account during a review include, but are not limited to:

- general inflation
- changes in service component costs
- substantial changes in the market

If ACC finds that the factors we take into account have not had a significant impact on price, the prices will remain unchanged.

If ACC provides a price increase, the Supplier must agree any adjustment in writing. The price increase will take effect from a date specified by ACC.

4. RELATIONSHIP MANAGEMENT

Table 2 - Relationship Management

Level	ACC	Supplier
Client	Recovery Team/Recovery Team Member	Individual staff or operational contact
Relationship and performance management	Engagement & Performance Manager	Operational contact/National Manager
Service Management	Portfolio Team or equivalent	National Manager

5. ADDRESSES FOR NOTICES (STANDARD TERMS AND CONDITIONS, CLAUSE 23)

NOTICES FOR ACC TO:

ACC Health Procurement (for deliveries)
 Justice Centre
 19 Aitken Street
 Wellington 6011
 P O Box 242 (for mail)
 Wellington 6140
 Marked: "Attention: Procurement Specialist"
 Phone: 0800 400 503
 Email: health.procurement@acc.co.nz

NOTICES FOR SUPPLIER TO:

Vendor_Name_Legal» (for deliveries)
 «Physical_Address_1»
 «Physical_Address_2»
 «Physical_City»
 «Postal_Address_1» (for mail)
 «Postal_Address_2»
 «Postal_City» «Postal_Code»
 Marked: "Attention: «Contractual_First_Name» «Contractual_Surname»"
 Phone: «Contractual_Phone»
 Mobile: «Alternative_Number»
 Email: «Contractual_Email»

TABLE OF CONTENTS

1.	PURPOSE	11
2.	SERVICE OBJECTIVES	11
3.	SERVICE COMMENCEMENT	12
4.	SERVICE LOCATION AND SPECIFIED AREA (Part A, clause 2).....	13
5.	SERVICE REQUIREMENTS.....	14
6.	SERVICE SPECIFIC QUALITY REQUIREMENTS	21
7.	OTHER SUPPLIERS	23
8.	SERVICE EXIT	23
9.	EXCLUSIONS	23
10.	LINKAGES	24
11.	PERFORMANCE REQUIREMENTS.....	24
12.	REPORTING REQUIREMENTS	25
13.	OPERATIONAL CONTACT	25
14.	RELATIONSHIP MANAGEMENT.....	26
15.	PAYMENT AND INVOICING	26
16.	DEFINITIONS AND INTERPRETATION.....	26
17.	GOVERNMENT PROCUREMENT RULES	29
18.	APPENDICES	30

B. SERVICE SPECIFICATIONS FOR INTEGRATED SERVICES FOR SENSITIVE CLAIMS

1. PURPOSE

1.1. ACC wishes to purchase Integrated Services for Sensitive Claims (ISSC or the Service) as outlined in this service schedule. The purpose of the Service is:

1.1.1. To provide high quality and timely services to ACC’s Sensitive Claims Clients to support recovery from the effects of Schedule 3 Events, in accordance with the principles in the Sexual Abuse and Mental Injury Practice Guidelines for Aotearoa NZ, March 2008 (“the Massey Guidelines”).

2. SERVICE OBJECTIVES

2.1. ACC will measure the success of this Service based on the following objectives:

Table 3 – Service objectives

Service	Objective
PRE-COVER PRIMARY SERVICES	
Getting started	Provide the opportunity to learn about ACC services available and choose a suitable Service Provider.
	Lodge a claim where this has not already occurred.
Early planning	To identify and document the needs of the Client and work collaboratively with the Client to determine the most appropriate pathway to recovery.
Support to Well-being (short term)	To provide short term early intervention services where the Client does not need or chooses not to pursue on-going treatment.
Support for Next Steps	To support Clients who are not eligible for ACC funding to find and transition to other non-ACC service providers.
ASSESSMENT TO DETERMINE COVER AND ENTITLEMENT DECISIONS	
Supported Assessment	Determination of cover and/or ACC entitlements and treatment recommendations and goals are subsequently developed and documented
	Clients are safe and supported during assessment
	The delivery of the service is flexible to meet the Client’s needs.
Continuity sessions	Provide continuity of service for Clients where there are delays in accessing or completing service stages e.g. due to wait times to see a suitable Assessment Provider, delays in collecting medical notes or ACC requiring additional time to make cover or entitlement decisions.
POST-COVER PRIMARY SERVICES	
Support to Well-being	A tailored Well-being Plan is developed, documented and kept up to date in collaboration with the eligible Client and ACC to maximise rehabilitation and recovery from the covered Mental Injury.
	Enable eligible Clients to achieve and maintain maximum recovery from the effects of a mental injury caused by sexual violence.
Maintaining Well-being	To maintain and refine a Client’s self-management plan and recovery through short interventions as required over a longer period.
POST-COVER SECONDARY SERVICES	
Group-based Therapy	Develop and practice new skills in a safe and supportive environment to support reintegration into usual activities.
	Develop supportive relationships with others to support recovery
Incapacity Assessment	To determine a Client’s eligibility for weekly compensation
Treatment Review	To determine further treatment requirements, where there are concerns with recovery progress
PRE- AND POST-COVER SUPPORT SERVICES	
Whānau Support	Reinforce Client’s recovery and/or coping strategies with the whānau
	Provide education to the Client’s whānau about the effects of sexual abuse to support Client recovery
Social Work	To support the Client directly with social resource needs during recovery and rehabilitation.
Active liaison	To coordinate key activities with other parties that support the Client’s rehabilitation and therapy.

Service	Objective
Cultural Support and Advice	Clients' cultural beliefs and values are recognised and inform rehabilitation and recovery.
	Services are culturally responsive

3. SERVICE COMMENCEMENT

3.1. Eligibility for Service – Pre-cover Primary and Support Services (refer to Part B, Clause 5.3); and Assessment to determine cover and entitlements (refer to Part B, Clause 5.4):

- 3.1.1. Pre-cover Primary and Support Services; and Assessment to determine cover are available for survivors of sexual violence who have experienced an event within the description of an offence listed in Schedule 3 of the Accident Compensation Act 2001, whether it is recent or historical, and the event(s) took place in New Zealand, or the survivor was ordinarily resident in New Zealand when the event occurred.
- 3.1.2. If ACC determines that a Client doesn't meet the conditions under Part B, Clause 3.1.1 the Client will be entitled to access Support for Next Steps services but will not be entitled to receive any other Services. The Client will be discharged from the ISSC when Support for Next Steps services have been provided.
- 3.1.3. All Clients must lodge a claim or have an existing claim to access ISSC. Suppliers will only be funded for services where ACC has a claim that relates to those services.
- 3.1.4. Where a Client is not pursuing cover for their claim, they will still be eligible for Pre-Cover Primary and Support Services and will be able to access Assessment Services to determine cover at any time.
- 3.1.5. Suppliers must offer support to all Clients pursuing cover for their claim throughout the cover process.

3.2. Eligibility for Service – Post-cover Primary, Secondary and Support Services

- 3.2.1. Post-cover Primary, Secondary and Support Services are available for Clients with an accepted claim following the Supported Assessment.
- 3.2.2. Where a claim has been assessed and cover has been declined the Client will be entitled to access Support for Next Steps services but will not be entitled to receive any other Services. The Client will be discharged from the Service when Support for Next Steps services have been provided.

3.3. Referral process and Service Commencement

- 3.3.1. Clients may self-refer into the ISSC or be referred by other treatment providers (e.g. General Practitioner, Sexual Assault Assessment and Treatment Services provider), Sexual Violence support services (e.g. Crisis support agencies), ACC or other agencies (e.g. Police, Oranga Tamariki).
- 3.3.2. Clients can contact ACC directly, or directly contact Suppliers in their local area.
- 3.3.3. Upon receipt of a referral, the Supplier will respond with either an acceptance or decline within two Business Days of the date of contact.
- 3.3.4. If accepting the referral, the Supplier will ensure that an appropriate Service Provider contacts the Client within two Business Days to make an initial appointment; ensuring the initial Getting Started session takes place as soon as an appointment is available.
- 3.3.5. If there is no appropriate Service Provider available within the timeframe specified (refer to Clause 3.3.4, above), the Supplier will either:
 - 3.3.5.1. Refer to the Operational Guidelines for information on how to manage referrals, or
 - 3.3.5.2. Decline the referral.
- 3.3.6. If declining a direct referral from a Client, the Supplier will direct the Client to findsupport.co.nz, or to another appropriate Supplier in the Client's TA. If the Client

requires further support, the Supplier will advise ACC within the timeframe specified in Clause 3.3.3 above.

- 3.3.7. The process around Clients returning to the ISSC on a sensitive claim previously lodged is as follows:
 - 3.3.7.1. If the claim was accepted, then the Supplier will contact ACC to plan how best to proceed. This will depend on when the Client disengaged, how often they presented for treatment, who the previous Lead Provider was, and whether updated assessment is being requested.
 - 3.3.7.2. If the claim was declined due to lack of information after lodgement or duplicated because of the prior lodgement, then a new claim needs to be made which will go through the standard process for all new claims.
 - 3.3.7.3. If the Therapist does not know the status of the claim, the Therapist will commence with Getting Started and an engagement form must be submitted.

4. SERVICE LOCATION AND SPECIFIED AREA (PART A, CLAUSE 2)

- 4.1. The Service will be provided by the Supplier for Clients in the geographical areas as specified in Part A, Clause 2. Suppliers may provide services outside of these geographical areas as agreed with ACC for the purpose of addressing capacity and capability constraints in other areas.
- 4.2. Where the service of a Client is required in a location away from the Service Provider's facility, prior approval must be given by ACC if the service location is outside the Service Provider's Territorial Authority (TA). If approved, travel costs will be reimbursed at the rate specified in Part A, Table 1. Where possible the Service Provider will carry out the service in one locality to minimise travel costs.
- 4.3. Services can be delivered by Telehealth, where clinically appropriate, and where this is considered to best meet the Client's needs and circumstances. Services delivered by Telehealth must:
 - 4.3.1. have a Client or authorised representative consent (recorded in the clinical notes), and with the option of an in-person meeting if the Client prefers.
 - 4.3.2. be accessible to the Client.
 - 4.3.3. be preceded by an initial suitability assessment and safety plan performed by the Service Provider.
 - 4.3.4. meet the same required standards of care provided through an in-person consultation.
 - 4.3.5. have clinical records that meet ACC and professional body requirements.
 - 4.3.6. meet the requirements outlined within ACC's guidance on the provision of services through Telehealth, any relevant regulatory authority/professional association Telehealth guidance and comply with the relevant New Zealand regulations, standards, and guidelines for Telehealth.
 - 4.3.7. have both the Client receiving the Telehealth service, and the Service Provider delivering the Telehealth service, physically present in New Zealand at the time the Service is provided.
 - 4.3.8. in circumstances where the Client will access the services at a location outside the Service Provider's Territorial Authority, have prior approval from ACC.
- 4.4. In line with relevant Health and Safety legislative requirements (including those mandated in the Health and Safety at Work Act 2015), it is the responsibility of the Supplier to have sufficient policies in place to ensure the safety of Service Providers; and to ensure that Service Providers utilise appropriate and safe service locations and premises.
- 4.5. In all locations, the Supplier will ensure all aspects of the environment are managed to ensure the Client feels safe, respected, and that services are delivered in a safe and confidential manner.
- 4.6. All service premises must be suitable for survivors of sexual abuse.

- 4.7. The service must be delivered in a physical environment appropriate to the age and developmental stage of the Client.
- 4.8. In all service premises, there needs to be adequate space for whānau.

5. SERVICE REQUIREMENTS

- 5.1. This section outlines the full range of ISSC services available. Refer to Appendix 3 for an overview. The Lead Provider will document delivery of all Services in the Client's service records and record progress in the relevant ISSC reports.
- 5.2. Suppliers must be able to deliver the full range of Pre- and Post-cover Primary Services, as well as Assessments to determine cover and eligibility, including associated reporting. The treatment limit and any conditions for each Service is set out in Part A, Clause 3 in Table 1 – Service Items and Prices.
- 5.3. The service items detailed in clause 5.3.1 to 5.3.5 below are Pre-cover Primary Services and the associated reporting requirements.
 - 5.3.1. Getting Started
 - 5.3.1.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by a Therapist (refer to Part B, Clause 16 below).
 - 5.3.1.2. The Therapist will submit the Engagement Form to ACC within two Business Days of the last Getting Started session with the Client.
 - 5.3.1.3. The Engagement Form will state whether the Client wishes to stay with the current Therapist, meet with another Therapist or not proceed with ISSC at this time. If the Client is choosing not to proceed, ensure that the Engagement Form states: “no assistance required”. No further reporting or activity is needed after this.
 - 5.3.1.4. Where a Returning Client accesses Getting Started to re-engage with ACC funded services the Therapist or other Supplier authorised person will contact ACC within two Business Days to obtain the status of the original claim and discuss which service stages are required to meet Client need.
 - 5.3.1.5. ACC will provide a purchase order for Getting Started services and for any further Services as agreed with ACC within three Business Days of receipt of the Engagement Form.
 - 5.3.2. Early Planning
 - 5.3.2.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by a Therapist who is the Lead Provider (refer to Part B, Clause 16 below).
 - 5.3.2.2. The Supplier will provide ACC with an Early Planning report that will specify which option the Client wishes to pursue.
 - 5.3.2.3. The template for the Early Planning Report is available on ACC's website. All sections that are relevant for the Client must be completed. Refer to the Operational Guidelines for more detail.
 - 5.3.2.4. The Early Planning service will include the administration of the Personal Wellbeing Index (PWI).
 - 5.3.2.5. For new Clients, the Therapist will confirm that the sexual violence event(s) meets eligibility criteria as outlined in Part B, Clause 3.1.1 of this service schedule.
 - 5.3.2.6. Where the Client chooses to proceed to a Supported Assessment, the approach to assessment, including clinical records required, will be documented in the Early Planning report. This includes where a Psychiatrist is required to complete the Supported Assessment (outlined in the Operational Guidelines) and report.

- 5.3.2.7. Any Pre-cover Support Services utilised prior to the submission of the Early Planning report will be documented in the report. Ongoing Pre-Cover Support Services required may be requested in the Early Planning report. Refer to Part B, Clause 5.7.2 for more detail.
- 5.3.2.8. The Supplier will ensure that for new Clients, an Early Planning Report; or for existing Clients a Wellbeing Plan is submitted, to ACC within ten Business Days of the last Early Planning session with the Client.
- 5.3.2.9. ACC will review and when satisfied will create a purchase order for the next service item(s) within five Business Days.
- 5.3.2.10. Where the report does not meet ACC quality standards, the report will be returned to the Supplier so that the Supplier can address the issues raised.
- 5.3.2.11. Where ACC requires additional time to action this report, continuity sessions will be allocated to ensure the Client has access to support during this time.
- 5.3.2.12. Where a Client does not complete the Early Planning stage the Therapist will submit a partially completed Early Planning Report or a Closure Notice (refer to Part B, Clause 5.8.4) as soon as possible.
- 5.3.3. Support to Wellbeing (Short Term)
 - 5.3.3.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by a Therapist (refer to Part B, Clause 16 below).
 - 5.3.3.2. The Support to Well-being (short term) service will include the administration of the PWI at the conclusion of services.
 - 5.3.3.3. The Supplier will ensure that a Completion Report, to document the final outcome of the service, will be submitted no later than ten Business Days after the last Support to Wellbeing (Short Term) session with the Client.
 - 5.3.3.4. The template for the Completion Report is available on ACC’s website. The Service Provider must complete all sections that are relevant for the Client. Refer to the Operational Guidelines for more detail.
 - 5.3.3.5. If a Client decides during the Support to Wellbeing (Short Term) stage that they would like to pursue cover, or if the need for ongoing treatment becomes apparent, the Completion Report may be replaced with an updated Early Planning Report. If further sessions are required to plan the Supported Assessment stage Clients may re-enter Early Planning stage.
 - 5.3.3.6. Returning Clients can only access this service if they don’t have a covered claim and if they haven’t previously accessed Support to Wellbeing (Short Term), or in exceptional circumstance.
- 5.3.4. Support to Next Steps
 - 5.3.4.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by a Therapist (refer to Part B, Clause 16 below)
 - 5.3.4.2. This item must be pre-approved by ACC before this Service is provided.
 - 5.3.4.3. The Supplier will ensure that the Closure Notice (refer to Part B, Clause 5.8.4) will be submitted within ten Business Days of the last face-to-face session of this service item.

5.4. The service item detailed in clause 5.4.1 to 5.4.2 below is the Assessment to determine cover and entitlement decisions and the associated reporting requirements.

5.4.1. Supported Assessment

- 5.4.1.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by an Assessment Provider. (refer to Part B, Clause 16 below)
- 5.4.1.2. This service item must be pre-approved by ACC before this Service is provided.
- 5.4.1.3. The template for the Supported Assessment Report is available on ACC’s website. The Service Provider must complete all sections that are relevant for the Client. Refer to the Operational Guidelines for more detail.
- 5.4.1.4. The Supported Assessment service will include the administration of the World Health Organisation Disability Assessment Schedule Second Addition (WHODAS 2.0) by the Assessment Provider.
- 5.4.1.5. The Supported Assessment service will include assessment report review session with the Client unless there are concerns around the clinical appropriateness of this.
- 5.4.1.6. The Supplier will ensure that a Supported Assessment Report will be submitted to ACC within ten Business Days of the Client assessment report review session, where the completed report is discussed with the Client and modifications are made where appropriate.
- 5.4.1.7. ACC will make a cover decision and approve the next service item(s) if satisfied with the Supported Assessment report. Where ACC requires additional time to consider the report(s), they will allocate Continuity Sessions to ensure the Client has access to support during this time.
- 5.4.1.8. Where the result of a Supported Assessment is a decision by ACC to accept the claim, ACC will generate a purchase order for the first four hours of Support to Well-being within ten Business Days.
- 5.4.1.9. Where the result of a Supported Assessment is a decision by ACC to decline the claim, ACC will generate a purchase order for the Support for Next Steps service item within ten Business Days.
- 5.4.1.10. Where a Client does not complete the Supported Assessment stage, the Assessment Provider will submit a partially completed Supported Assessment Report (if applicable) and the Lead Provider will submit a Closure Notice (refer to Part B, Clause 5.8.4) as soon as possible.
- 5.4.1.11. Supported Assessment may include the delivery of the Incapacity Assessment – see clause Part B, Clause 5.6.2 below.
- 5.4.1.12. The Supported Assessment is undertaken for ACC. The report written by the Assessment Provider is the property of ACC.

5.4.2. Continuity Sessions

- 5.4.2.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by a Therapist (refer to Part B, Clause 16 below).
- 5.4.2.2. The service item can be proactively approved by ACC or be requested by the Supplier or a Service Provider on the Supplier’s behalf. Refer to the Operational Guidelines for more information.

5.5. The service items detailed in clause 5.5.1 to 5.5.2 below are the Post-cover Primary Services and the associated reporting requirements.

5.5.1. Support to Wellbeing

- 5.5.1.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by a Therapist. (refer to Part B, Clause 16 below)
- 5.5.1.2. This service item must be pre-approved by ACC before this Service is provided. Support to Wellbeing is only available to Clients with an accepted claim for Mental Injury. The Lead Provider will use up to four hours at the start of this service to develop the Wellbeing Plan in collaboration with the Client and in consultation with the Assessment Provider. The Assessment Provider can access Active Liaison to be remunerated for this consultation. Refer to Part B, Clause 5.7.6 below.
- 5.5.1.3. The template for the Wellbeing Plan is available on ACC’s website. The Supplier will ensure that all sections that are relevant for the Client are completed. Refer to the Operational Guidelines for more detail.
- 5.5.1.4. The Wellbeing Plan will detail treatment recommendations and milestones, the plan for service delivery and the next service stages recommended to meet Client need, utilising up to 48 hours of Support to Wellbeing per 12-month period. Refer to the Operational Guidelines for more detail.
- 5.5.1.5. The Supplier will ensure that the Wellbeing Plan is submitted to ACC no later than ten Business Days after the fourth face-to-face session of the Support to Wellbeing.
- 5.5.1.6. The Supplier will ensure compliance with clauses 2(1)(a) and 2(1)(b) of Schedule 1 of the Accident Compensation Act 2001, so that treatment services will be “necessary and appropriate”, and of the quality required, for that purpose and be “performed only on the number of occasions necessary for that purpose” (Accident Compensation Act 2001, Schedule 1, Part 1, clause 2 (1) (a) and (b)).
- 5.5.1.7. Where ACC requires additional time to consider the plan, ACC will allocate Continuity Sessions to ensure the Client has access to support during this time.
- 5.5.1.8. Three months before the end of the current approval period, the Lead Provider will develop a Progress Report in collaboration with the Client and submit to ACC. This will include administering the WHODAS 2.0 and PWI.
- 5.5.1.9. The template for the Progress Report is available on ACC’s website. The Supplier will ensure that all sections that are relevant for the Client are completed. Refer to the Operational Guidelines for more detail.
- 5.5.1.10. ACC, the Client or the Lead Provider may initiate a Case Conference to discuss the Client’s recovery and ACC services. The Client must be present, unless they explicitly do not wish to attend. Other parties (for example a General Practitioner, Social Worker, Oranga Tamariki worker) may attend the Case Conference as appropriate and with Client consent. Refer to the Operational Guidelines for more detail.
- 5.5.1.11. Where the Client requires further support, the progress report will include a review and update of the Client’s recovery goals and recommendations.
- 5.5.1.12. If changes to the Client’s Wellbeing Plan are required in between progress reports the Lead Provider can utilise up to 30 minutes of Progress Report service item to prepare an updated Wellbeing Plan and submit this to ACC for consideration.
- 5.5.1.13. ACC will make a decision about ongoing entitlements and approve the next service item(s) accordingly before the current approval period ends.
- 5.5.1.14. At the completion of Support to Wellbeing, a Completion Report will document the final outcome of the service including final WHODAS 2.0 and PWI. It will

be submitted to ACC no later than ten Business Days after the last face-to-face session of this service item with the Client.

5.5.1.15. The template for the Completion Report is available on ACC's website. The Service Provider must complete all sections that are relevant for the Client. Refer to the Operational Guidelines for more detail.

5.5.1.16. Where a Client does not complete Support to Wellbeing, a Closure Notice (refer to Part B, Clause 5.8.4) will be submitted to ACC as soon as possible.

5.5.2. Maintaining Wellbeing

5.5.2.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by a Therapist. (refer to Part B, Clause 16 below)

5.5.2.2. The service is only available to Clients who have completed Support to Wellbeing and must be pre-approved by ACC before this Service is provided.

5.5.2.3. Where a Client presents for Maintaining Wellbeing with service needs outside of the scope of this service item, they need to re-enter services as a returning Client to access further support

5.6. The service items detailed in clause 5.6.1 to 5.6.3 below are Post-cover Secondary Services that Suppliers may make available to Clients:

5.6.1. Group-based Therapy

5.6.1.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered either by two Therapists approved to deliver Group-based Therapy, or, by one Therapist approved to deliver Group-based Therapy and a second person with significant skills and expertise relevant to the purpose of the Group-based Therapy.

5.6.1.2. Suppliers need approval for the group from ACC, as detailed in the Operational Guidelines. Once approved, the Supplier must advertise with all ISSC Suppliers in the TA the group is planned to be held within, unless the group is fully booked.

5.6.1.3. Group-based Therapy must have at least four participants who are ACC Clients for each group.

5.6.1.4. ACC Clients must be pre-approved, by ACC before this Service is provided, following the recommendation for Group Based Therapy in the Client's Well-being plan. Group-based Therapy is only available for Clients with an accepted claim and where this service is practically and reasonably accessible to the Client.

5.6.1.5. Service Providers can meet with a prospective group participant to ensure Group-based Therapy is a good fit for an individual Client and that the Client is a good fit with the other planned participants of a group i.e. Triage. Refer to Table 1.

5.6.1.6. The Supplier will ensure that the Lead Provider documents delivery of Group-based Therapy in the Client's service records to record progress to ACC. Refer to the Operational Guidelines for further detail.

5.6.1.7. Where a Client actively disengages, the Service Provider(s) will notify the Lead Provider as soon as practicable. Where this indicates the Client does not wish to proceed with the Group, then the Supplier will notify ACC to close off the purchase order for that service item. Where this indicates that the Client has completely disengaged from all services, a Closure Notice or a Completion Report will be submitted to ACC.

- 5.6.2. Incapacity Assessment
 - 5.6.2.1. The service, as outlined in Clause 2 – Service Objectives, must be completed by an approved Psychiatrist and can be added on to a Supported Assessment. If a Psychiatrist is not available within four weeks, ACC may approve a Clinical Psychologist who is an approved Assessment Provider to undertake the Incapacity Assessment.
 - 5.6.2.2. This service item must be pre-approved by ACC before this Service is provided.
 - 5.6.2.3. The Supplier will ensure that findings are submitted with the Supported Assessment report. Further detail, including forms and templates can be found in the Operational Guidelines.
- 5.6.3. Treatment Review
 - 5.6.3.1. The service, as outlined in Clause 2 – Service Objectives, must be completed by an Assessment Provider (refer to Part B, Clause 16).
 - 5.6.3.2. This service can be initiated by ACC at any time or be requested by the Supplier, or a Lead Provider on behalf of the Supplier.
 - 5.6.3.3. The service may be required where the Client has received 12 months of therapeutic intervention and may also be required when a Client has not made the expected progress in previously recommended treatment. Refer to the Operational Guidelines for more detail.
 - 5.6.3.4. This service item must be pre-approved by ACC before this Service is provided.
 - 5.6.3.5. The Treatment Review is undertaken for ACC. The report written by the Service Provider is the property of ACC.
 - 5.6.3.6. The Service Provider will administer the WHODAS 2.0 as part of this review and will report this data as part of the Treatment Review report.
 - 5.6.3.7. The Supplier will ensure that the Treatment Review report and any other supporting documents will be submitted to ACC within ten Business Days of providing feedback to the Client and/or their Lead Provider. Refer to the Operational Guidelines for more detail.
- 5.7. The service items detailed in clause 5.7.1 to 5.7.7 below are Pre- and Post-cover Support Services, which must be available to Clients throughout the ISSC process, following a request.
 - 5.7.1. Support Services can be accessed from Getting Started with rationale, use, goals, and hours used documented in the Early Planning Report. Subsequently, they can either be documented and requested as part of an ISSC report or plan requirements or, where unplanned support is necessary due to unforeseen developments, via phone or email in between. Where a request for Support Services is submitted outside of an ISSC report or plan, ACC will respond to the request within five Business Days.
 - 5.7.2. The first annual (12-month) allocation of Support Services does not require prior approval from ACC. Prior approval will be required for any subsequent allocations to be utilised. ACC must receive reporting which documents progress made against the goals. Refer to the Operational Guidelines for more information.
 - 5.7.3. Whānau Support
 - 5.7.3.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by a Therapist or Social Worker (refer to Part B, Clause 16 below).
 - 5.7.3.2. This service item is delivered to members of the Client’s whānau with the knowledge and consent of the Client, but where the Client is not present.

- 5.7.4. Social Work
 - 5.7.4.1. The service, as outlined in Clause 2 – Service Objectives, must be delivered by a Social Worker. (refer to Part B, Clause 16 below)
 - 5.7.4.2. Social work interventions will be initiated, monitored and evaluated. Coordination of resources from the Client’s wider social and community networks may be undertaken.
- 5.7.5. Active Liaison
 - 5.7.5.1. The service, as outlined in Clause 2 – Service Objectives, may be utilised by Lead Providers. (refer to Part B, Clause 16 below)
 - 5.7.5.2. In general, “Other Parties” excludes other Service Providers working under this Supplier.
- 5.7.6. Cultural Support and Advice
 - 5.7.6.1. The service, as outlined in Clause 2 – Service Objectives, will be delivered by an appropriate person approved by the Lead Provider and Client.
 - 5.7.6.2. Services will identify and attempt to remove cultural barriers to a Client’s recovery. Refer to the Operational Guidelines for more detail.
 - 5.7.6.3. This service item is delivered with the knowledge and consent of the Client, whether or not the Client is present.
- 5.8. The service items detailed in clause 5.8.1 to 5.8.4 below are Administrative Fees
 - 5.8.1. Administration and Management fee
 - 5.8.1.1. The Administration and Management fee is payable by ACC once per claim in recognition of the Suppliers coordination effort to ensure services are delivered in a safe, seamless and supportive manner.
 - 5.8.1.2. The Fee can be invoiced once an Engagement Form has been submitted to ACC at the completion of the Getting Started phase.
 - 5.8.1.3. There are times when an additional Administration and Management Fee may be requested. Refer to the Operational Guidelines for more detail.
 - 5.8.2. Client Non-Attendance Fee
 - 5.8.2.1. Non-Attendance fee is payable when a Client fails to attend a scheduled appointment without giving two working days prior notification to the Service Provider. The Service Provider must notify ACC when a Client has failed to attend more than 2 scheduled appointments.
 - 5.8.2.2. The Service Provider will do everything possible to engage the Client regarding attending appointments, (e.g. sending a text message the day before the appointment or ringing the Client the day before an appointment).
 - 5.8.2.3. If the Client frequently does not attend appointments, (more than five in a 12-month period) these appointments may be chargeable to the Client by the Supplier. Refer to the Operational Guidelines for further information.
 - 5.8.2.4. This fee is not payable for missed Group-based Therapy sessions.
 - 5.8.3. Clinical records – reimbursement for costs of obtaining clinical notes
 - 5.8.3.1. This service item provides a mechanism to reimburse the Supplier for the cost of obtaining clinical records directly from third parties.
 - 5.8.3.2. ACC provides the template for the Authority to Obtain Information form (ACC6300) on our website. The Service Provider must complete all sections that are relevant for the Client. Refer to the Operational Guidelines for more detail.
 - 5.8.3.3. ACC will request medical notes once an ACC6300 has been returned and will engage with the Client directly to gain informed consent and discuss the purpose and use of clinical records, and what clinical records will be requested by ACC.

- 5.8.3.4. ACC will reimburse the Supplier at ACC's standard rates if the Supplier obtained necessary clinical records, paid for them and submitted them to ACC with the relevant ISSC report. ACC will pay the lesser of actual costs or ACC's standard rates.
- 5.8.4. Closure Notices
 - 5.8.4.1. This service item provides information to ACC where Clients have stopped accessing services before the conclusion of the current service item or confirms the termination of service delivery for Support for Next Steps.
 - 5.8.4.2. Lead Providers will submit a closure notice as soon as it becomes clear that a Client has exited the service. ACC will accept notification of unplanned service exit via email or phone but will only pay for notifications via completed Closure Notice form.
 - 5.8.4.3. The template for the Closure Notice is available on ACC's website. The Service Provider must complete all sections that are relevant for the Client. Refer to the Operational Guidelines for more detail.

6. SERVICE SPECIFIC QUALITY REQUIREMENTS

- 6.1. In addition to the requirements specified in the Standard Terms and Conditions, the Supplier will meet the following requirements:
 - 6.1.1. Client-centric Service Delivery
 - 6.1.1.1. ISSC is designed to support Client centricity, allowing service delivery to be customised to the specific needs of each Client. The hours the Supplier requests for the different service items are to be based on the specific individual needs and what is clinically appropriate for the Client. Length and frequency of service sessions must be tailored to the Client's needs and invoiced per hour or part thereof depending on actual time spent.
 - 6.1.2. Cultural Responsiveness
 - 6.1.2.1. Suppliers will have a policy that Service Providers will deliver services that are culturally responsive and safe.
 - 6.1.2.2. The policy will meet the requirements set by ACC's Guidelines on Māori Cultural Competencies for Providers (ACC1625), ensuring that the Supplier's Service Providers deliver services that are demonstrably culturally appropriate and safe for the Client and their whānau.
 - 6.1.2.3. Suppliers are responsible for ensuring the on-going quality of these services. Refer to Operational Guidelines for more information.
 - 6.1.3. Continuity of Service
 - 6.1.3.1. The Supplier will provide a responsive service to Clients, with services being available throughout the year.
 - 6.1.3.2. The Supplier will ensure that there is adequate Service Provider coverage to allow for planned leave, including public holidays and study leave;
 - 6.1.3.3. Where, for unexpected reasons, the usual Service Provider is not available and/or services cannot be delivered, the Supplier will arrange alternative Services as part of contingency planning for the Client so that they receive any services determined to be essential for safety; this may include referring Clients to other Suppliers in the Supplier's TA that are likely to be able to appropriately respond to the needs of the Client.
 - 6.1.3.4. The Supplier will immediately advise ACC if the Supplier is not able to meet these requirements.

- 6.1.3.5. The Supplier will regularly provide ACC with information regarding Service Provider availability, as requested by ACC.
- 6.1.4. Premises, systems and processes
 - 6.1.4.1. Premises
 - 6.1.4.1.1. Both Suppliers and Service Providers will specify business addresses for ACC correspondence and advise ACC immediately if these details change.
 - 6.1.4.1.2. It will be acceptable for the Service Providers to use the Supplier's business premises to provide services and receive mail.
 - 6.1.4.1.3. The Supplier and its Service Providers must ensure that any address given to ACC for courier packages to be sent to is an address at which such packages can be collected and signed for in person. When this is not possible, courier packages will be sent to the closest local ACC office for collection.
 - 6.1.4.2. Systems
 - 6.1.4.2.1. Suppliers will have a landline or mobile with messaging and voicemail functions for Clients to access the Service. They will also have a secure internet connection, secure business email address and use specified or approved secure electronic interfaces for interactions with ACC (e.g. RealMe).
 - 6.1.4.2.2. All personal information will be stored securely and be inaccessible to unauthorised people; where held digitally, it will be password protected and regularly backed-up.
 - 6.1.4.2.3. All Supplier staff and Named Providers will take all necessary and reasonable care to protect Client information when it is in transit (e.g. when taking a physical file to an appointment).
 - 6.1.4.3. Processes
 - 6.1.4.3.1. Suppliers and Named Providers will use a manual or electronic system for the generation and storage of Client records. This will include a calendar or diary tool to manage appointments including recall and reminder tools.
 - 6.1.4.3.2. The Supplier will have a documented process that comprises both a record of any complaint or dispute and the response(s) taken which includes evidence of appropriate escalations and auditable records.
 - 6.1.4.3.3. Where a required plan or report does not meet ACC quality standards, outlined in this contract and the Operational Guidelines, it will be discussed with the Service Provider concerned and, ACC will return it to the Supplier, so they can address any issues raised by ACC with the Service Provider directly.
 - 6.1.4.4. Security/Safety screening
 - 6.1.4.4.1. Suppliers will uphold the safety of Clients by carrying out appropriate security screening/vetting, including Police vetting, for all Supplier authorised persons who interact with Clients and inform ACC of any adverse findings. Supplier authorised persons includes Named Providers on this contract
 - 6.1.4.4.2. All Service Providers who work with children must complete a Children's Workforce Safety Check to ensure they are safety checked to the standard required under the Children's Act 2014 and the Children's (Requirements for Safety Checks of Children's Workers) Regulations 2015.

7. OTHER SUPPLIERS

- 7.1. ACC reserves the right, to appoint additional Suppliers, during the life of the Contract. ACC may, in its sole discretion, appoint additional Suppliers to provide services that are the same or similar to the Services, and nothing in this Contract gives you an exclusive right to provide the services or any volume of the services.

8. SERVICE EXIT

- 8.1. This Service is complete when either:
- 8.1.1. ACC receives a closure notice or phone or email notification from the Lead Provider for a Client who either no longer requires service or is not eligible for further services (e.g. when a Client is actively disengaged who chooses not to proceed at any point, or has completed Support for Next Steps); or ACC receives a completion report for the interventions services used for the Client which is satisfactory to ACC in all respects; or
 - 8.1.2. The Client or ACC decides that it is not appropriate for the Client to continue the services or ACC suspends or terminates the Services for that Client. Once ACC has provided written notice to the Supplier that the Services are completed, the Supplier may not invoice ACC for Services provided after the date of receipt of the written notice; or
 - 8.1.3. A Supplier considers that it is no longer appropriate to provide Services to a Client. The Supplier will submit an ACC Closure Notice and obtain ACC approval to withdraw Services and provide a minimum of ten Business Days' written notice to terminate the Services for a Client. Following the withdrawal of Services, the Supplier will provide copies of all information pertaining to the Client's Services to ACC on request.
- 8.2. To ensure Clients are kept safe, if this Contract or any aspect of the Services is terminated or suspended for any reason, the Supplier will have a robust transition plan that supports Clients and their engagement with ACC. Prior to invoking a transition plan the Supplier is required to inform and consult with ACC directly.

9. EXCLUSIONS

- 9.1. The following Services are not purchased under this Service Schedule, and may not be provided or claimed for, but may be purchased under other Service Schedules:
- 9.1.1. Acute services (e.g.CAT, emergency crisis);
 - 9.1.2. Counselling under the Cost of Treatment regulations (CoTR);
 - 9.1.3. Sexual abuse assessment and treatment services (medical and forensic service);
 - 9.1.4. Psychological services for physical injuries;
 - 9.1.5. Neuropsychological Assessment Services;
 - 9.1.6. Educational support services;
 - 9.1.7. Social rehabilitation including training for independence and social rehabilitation assessment;
 - 9.1.8. Vocational rehabilitation including applicable medical assessment;
 - 9.1.9. Assessments for independence allowance or lump sum; and
 - 9.1.10. Counselling for family and whānau of the Client, where the counselling does not directly relate to the rehabilitation and recovery of the Client. Family and whānau requiring personal counselling will be referred to an alternative service as appropriate.

10. LINKAGES

10.1. The Supplier will ensure that linkages are maintained with the other Services to ensure that Clients have access to, and can be referred on to, appropriate Services outside the ISSC and to other Suppliers of ISSC (e.g. Group-based Therapy, Tikanga based model of treatment). The Services referred to in clause 10.1 include but are not limited to:

10.1.1. ACC funded services:

- 10.1.1.1. Other ISSC Suppliers
- 10.1.1.2. Clinical Psychiatric Services;
- 10.1.1.3. Neuropsychological Assessment Services;
- 10.1.1.4. Sensitive Claims Residential Rehabilitation Services; and
- 10.1.1.5. Training for Independence for Adults with Sensitive Claims.

10.1.2. Non-ACC funded services and groups:

- 10.1.2.1. Rainbow services;
- 10.1.2.2. The Client's whānau;
- 10.1.2.3. The Client's care/support team;

10.1.3. Relevant Educational Institutions, Organisations and professionals;

- 10.1.3.1. Oranga Tamariki (OT);
- 10.1.3.2. Male Survivors of Sexual Abuse Trust;
- 10.1.3.3. Relevant disability consumer groups;
- 10.1.3.4. Community Mental Health Services;
- 10.1.3.5. Relevant community non-governmental organisations (e.g. budgeting, housing);
- 10.1.3.6. Family and community services;
- 10.1.3.7. The Client's general practitioner or other primary health services;
- 10.1.3.8. Māori and Pasifika health providers.

10.1.4. Relevant Government Agencies, for example:

- 10.1.4.1. NZ Police
- 10.1.4.2. Relevant independent advocates;
- 10.1.4.3. Local sexual violence crisis support services, After Hours Crisis Support Teams and other NGOs that offer support to survivors of sexual violence.

10.1.5. Other agencies, organisations and/or professionals the Supplier deems appropriate.

11. PERFORMANCE REQUIREMENTS

11.1. The Supplier's performance will be measured as shown in Table 3 – Performance Measurement. Work will be undertaken through the 2021 Supplier Days to determine appropriate targets and data sources to use to measure performance against objectives. ACC has the right to update the table to include the targets and data sources that will apply in respect of this Contract.

Table 4 – Performance Measurement

Objective	Performance measure	Target – TBD following 2021 Supplier Days	Data Source – TBD following 2021 Supplier Days
1. To identify the change in Client well-being outcomes post-treatment	PWI – Support to Wellbeing (short-term) PWI – Support to Wellbeing WHODAS – Support to Wellbeing	<i>Example:</i> 65-80% of the time, PWI increases	<i>Example:</i> Completion reports; Treatment reviews

Objective	Performance measure	Target – TBD following 2021 Supplier Days	Data Source – TBD following 2021 Supplier Days
2. It is easy for potential Clients to engage in ISSC and lodge a claim	Acceptance/decline of referrals Allocation of Client to providers Initial face to face appointment	<i>Example:</i> 80% of the time, timeframes set out in this schedule are met.	<i>Example:</i> Quarterly Report
3. To meet timeliness requirements as set out in this service schedule	Submission of Well-being Plan Submission of Progress report at 9-month mark Submission of Completion report/Closure notice	<i>Example:</i> 80% of the time, timeframes set out in this schedule, or as agreed with ACC, are met	<i>Example:</i> ACC data
4. Client safety is maintained throughout engagement	Incidents reported to ACC	<i>Example:</i> 100% of incidents are reported to ACC <i>Example:</i> 100% of incidents are managed appropriately by the Supplier and ACC	<i>Example:</i> Health and Safety Incident Reporting Portal

12. REPORTING REQUIREMENTS

12.1. The Supplier will report the following information on the template provided on ACC’s website:

12.1.1. Quarterly reporting will be submitted to ACC as detailed in the ISSC Operational Guidelines.

12.1.2. The Supplier agrees to attend Supplier Meetings at the Supplier’s cost.

12.2. The Supplier will provide reports to ACC in accordance with the following table:

Table 5 – Reporting Requirements

Information	Frequency	When	Responsibility
Reporting an “Incident” (see the Definitions and Interpretations clause).	On occurrence.	Immediately but no later than 24 hours after an incident.	Supplier
Service item plans and reports	As specified in Service Schedule, Part B, clause 5: ‘Service Requirements	As specified in Service Schedule, Part B, clause 5: ‘Service Requirements	Supplier
Contract compliance audit reports – APC, insurance, financial viability, business continuity planning and disaster recovery, privacy, CPD and supervision.	Annually; where applicable	As requested by ACC	Supplier

13. OPERATIONAL CONTACT

13.1. During the Term of this Service Schedule the Supplier will nominate a person (as specified in Clause 5 of the Quick Reference Information in Part A of this Service Schedule) to be the main contact for ACC who will undertake the functions of the Relationship Manager at clause 11 of the Standard Terms and Conditions.

14. RELATIONSHIP MANAGEMENT

- 14.1. To ensure the continuing effective operation of the service, formal working relationships are to be maintained as defined in Table 2 - Relationship Management for Services provided in accordance with this Contract, including this Service Schedule (as specified in Clause 5 of the Quick Reference Information in Part A of this Service Schedule).

15. PAYMENT AND INVOICING

- 15.1. Services prices are defined for these Services as set out in Table 1 - Service Items and Prices (as specified in Clause 3 of the Quick Reference Information in Part A of this Service Schedule).
- 15.2. ACC agrees to pay the prices set out in Table 1 - Service Items and Prices (as specified in Clause 3 of the Quick Reference Information in Part A of this Service Schedule).
- 15.3. The Service item code (a prefix down the rows in the pricing table) and the provider code (a suffix across the columns in the pricing table) should be combined to create a pricing code.
- 15.4. All Face-to-face services, Active Liaison, Cultural Support and Advice and Closure Notices can be invoiced after each session or service occurrence or once ACC has approved services.
- 15.5. Report writing time can only be invoiced for once the respective report has been completed and submitted to ACC.
- 15.6. Payment for reporting will not be approved until a report that meets ACC's quality standards has been received by ACC.
- 15.7. Service items with hourly rates can be invoiced per full hour(s) or part thereof depending on actual time spent on service delivery. Partial hours will be rounded to the closest quarter hour.

16. DEFINITIONS AND INTERPRETATION

“Active disengagement” Where a Client who has been receiving services under this service schedule stops accessing these services before they have completed that current component of service. Active disengagement also includes Clients who have not commenced services that have been approved.

“Adverse findings” Refers to any recording and/or ongoing reporting of any adverse finding(s) and/or complaint(s) not yet investigated (whether upheld or not), from any of the following bodies:

- (a) Health and Disability Commissioner
- (b) Medical Council of New Zealand
- (c) Relevant registration boards or associations
- (d) Health Practitioners Disciplinary Tribunal
- (e) New Zealand Police

“Assessment” An assessment carried out and documented by a suitably qualified Service Provider for a range of purposes, including for example, to support ACC's cover determination or access to an entitlement e.g. weekly compensation, to determine and review the appropriateness of treatment, or an assessment with medication review.

“Assessment Provider” is a Service Provider, who meets the additional qualification, experience and other requirements outlined in Appendix 2 and has been approved by ACC to deliver Assessments under this Service Schedule.

“Business Days” is as stated in the standard terms and conditions of this contract.

“Engagement Form” is an electronic claims lodgement form that is an alternative to the ACC45 form for Sensitive Claims. Treatment Providers use the Engagement Form to lodge new claims with ACC on the Client’s behalf, or to advise ACC that a Client has re-engaged with ISSC under an existing claim.

“Face-to-Face” includes in-person; and Telehealth, if both the Service Provider and Client are in New Zealand, and the Client consents. Delivery via Telehealth channels must be clinically appropriate and be in line with ACC’s Telehealth Guidelines.

“Incidents” Something that the Supplier are required to notify ACC of immediately. This may include:

- (a) An occurrence that is clearly outside accepted professional practices raised by a Client or another person such as a staff member, a member of the public or a member of the Client’s family;
- (b) An unacceptable risk to the safety and security of the Client, or another party involved in service provision;
- (c) A situation that could become high profile or attract media/advocacy group attention; or
- (d) Any other situation that ACC can reasonably expect to be advised of.

“In-person” means the provider and Client are physically present in the same room.

“Integrated Services for Sensitive Claims (“ISSC” or “the Service(s)”)” The group of services or any service described in this service schedule.

“Lead Provider” is the Therapist who takes responsibility for the overall service co-ordination and delivery for a Client.

“The Massey Guidelines” A publication from the Massey University School of Psychology called Sexual Abuse and Mental Injury: Practice Guidelines for Aotearoa New Zealand (2008): Commissioned by Accident Corporation Compensation (ACC).

“Mental Injury” is a clinically significant behavioural, cognitive or psychological dysfunction.¹

“Operational Guidelines” is a document produced by ACC and updated periodically including the processes and procedures to be followed to ensure effective delivery of the ISSC contract. The Operational Guidelines can be found by searching the “resources” page on www.acc.co.nz.

“Pre- and Post-cover Support” A suite of services that can be accessed to support face-to-face therapy including social work, whānau support, active liaison and cultural support and advice.

“Pre-cover Primary Services” includes Getting Started, Early Planning, Support to Wellbeing (Short Term), and Support to Next Steps.

“Post-cover Secondary Services” includes Group Therapy, Incapacity Assessment and Treatment Review.

“Personal Well-being Index (PWI).” This Quality of Life measure assesses Client subjective well-being in seven to eight domains – standard of living, personal health, achieving in life, personal relationships, personal safety, community connectedness, future security, and spirituality if relevant. There are three versions utilised in this contract: PWI: A – General adult population; PWI: SC – School age children and adolescents; and PWI: ID – People with an intellectual disability or other form of cognitive disability.

¹ Section 27, Accident and Compensation Act 2001 no 49.

“Returning Client” is a Client who has previously lodged a claim and received some level of ACC funded service and who engages with a service provider to access ISSC. This includes Clients who have disengaged before the completion of therapy and Clients with claims that have previously been declined for cover by ACC.

“Sensitive Claim” is a claim lodged with ACC in relation to a possible or confirmed Mental Injury caused by an event that falls within the description of offences listed in Schedule 3 of the Accident Compensation Act.

“Service Provider, Named Provider” are interchangeable terms for all providers named under a Supplier’s contract and approved to deliver services under this service schedule.

“Session” refers to a single occurrence of face-to-face service delivery. Sessions may vary in length to best meet Client need. An allowance for preparation time has been included in hourly rates, for example, if the Service provider spends 45 minutes or more face-to-face with the Client up to 15 minutes may also be invoiced for an individual occurrence of service delivery for the completion of documentation for the session and/or other session related activities. Refer to Operational Guidelines for more examples.

“Social worker” is a Service Provider who meets the qualification, experience and other requirements outlined in Appendix 2 and has been approved by ACC to deliver Social Work under this Service Schedule.

“Supplier” has overall responsibility and accountability for services delivered to Clients; and, updating of records and reporting as set out under this Contract. Service Providers are accountable to the Supplier; and Suppliers are responsible for all Service Providers that sub-contract to them. Where requirements are noted for Service Providers, Suppliers are ultimately responsible.

“Telehealth” means the use of information or communication technologies to deliver services when Clients and Providers are not in the same physical location. For this Service Schedule, Telehealth relates to real-time videoconferencing interactions and telephone consultations. Telehealth excludes electronic messaging e.g. texts and emails. A telehealth consultation is to replace an in-person visit so it does not include a quick triage or check-in phone calls (unless specified). Telehealth may be used to deliver applicable services (as per Part A, Service Item and Pricing Schedule) only if both the Service Provider and Client are in New Zealand, and the Client consents. Delivery via Telehealth channels must be clinically appropriate and be in line with ACC’s Telehealth Guidelines.

“Therapy, Counselling or Treatment” Interchangeable terms referring to a mode of professional involvement in which the focus is on improved personal, social and emotional wellbeing.

“Treatment Provider / Therapist” are interchangeable terms for a Service Provider who meets the qualification, experience and other requirements outlined in Appendix 2 and has been approved by ACC to deliver services under this Service Schedule.

“Whānau” – may include family, relatives and friends of the Client

“World Health Organisation Disability Assessment Schedule Second Edition (WHODAS 2.0)” for Clients 18 years of age and older. This measure assesses a Client’s functioning across six domains, including understanding and communicating, getting around, self-care, getting along with people, life activities (i.e., household, work, and/or school activities), and participation in society.

17. GOVERNMENT PROCUREMENT RULES

- 17.1. The parties acknowledge that ACC must comply with the Government Procurement Rules (currently in its fourth edition, effective from 1 October 2019) and any associated guidance issued from time to time (referred to together as the “Procurement Rules”). In order to give effect to the Procurement Rules, the parties agree to the additional matters set out in this clause 17.
- 17.2. The parties agree that the Standard Terms and Conditions as they apply to this Service Schedule are amended as follows:
 - 17.2.1. Clause 8.16(a) is replaced with the following wording: “comply, and ensure the Supplier’s personnel and Subcontractors comply, with all relevant health and safety legislation including the Health and Safety at Work Act 2015 (“HSAWA”),
 - 17.2.2. Clause 9.3(c) is replaced with the following wording: “the use or disclosure is required or anticipated by the Procurement Rules, or required by law (including under the Official Information Act 1982), Ministers, or parliamentary convention”;
 - 17.2.3. Clause 16.4(b) is replaced with the following wording: “any subcontract the Supplier signs is consistent with this Contract, and includes any other matter which ACC, acting reasonably, advises is necessary in order to ensure compliance with Rule 25 of the Government Procurement Rules”,
 - 17.2.4. A new clause 8.5A is added after clause 8.5, as follows: “The Supplier must comply with the Supplier Code of Conduct issued by the Ministry of Business, Innovation, and Employment”,
 - 17.2.5. A new clause 10.9 is added as follows, under a new heading ‘Payments to Subcontractors’: “The Supplier should pay the Suppliers’ Subcontractors promptly and offer them payment terms no less favourable than in this Contract. If ACC becomes aware that the Supplier has not paid its Subcontractors without reasonable justification, then ACC may choose to pay those Subcontractors directly, and deduct those amounts from the Charges that would otherwise have been due to the Supplier”.
- 17.3. The Supplier must also:
 - 17.3.1. Perform the Services in a manner that gives appropriate regard to the protection of the natural environment, including by looking for opportunities to reduce emissions and waste impacts, such as by procuring and using low-waste and low emissions goods and services where practicable, and
 - 17.3.2. Comply, and ensure that its Subcontractors and personnel comply, with all relevant employment standards and laws (including obligations under the Employment Relations Act 2000, Minimum Wage Act 1983, Wages Protection Act 1983, and the Holidays Act 2003). The Supplier will report any instances where it, or its personnel or subcontractors are being investigated by the Labour Inspectorate, or where the Supplier identifies that the Supplier has breached any of the legislation referred to in this paragraph (c).

18. APPENDICES

18.1. Appendix 1 sets out the list of service providers, process for obtaining approval for new Service Providers or service coverage; and for removing Service Providers and changing service coverage.

18.1.1. Service Providers

18.1.1.1. The Supplier may subcontract Service Providers to provide the Services if each Service Provider is approved and named in accordance with Appendix 1. The list of Service Providers is in the table below.

Table 6 – Service Providers

Name of Approved Provider	Services Provided (1 or many)	ACC Provider Number	Vocational Classification	Address for Service (TA)
«Named_Provider_1»	«Services_Provided_1»	«Provider_Number_1»	Vocational Classification»	«TLA_Coverage_1» » «Base_Location_1»

18.1.1.2. The Supplier will use the Services of only Approved Service Providers named in the table above or added later by ACC in accordance with Part A, clause 2. Service Providers require a Service Address within each TA they provide services in (unless otherwise agreed with ACC).

18.1.1.3. The Supplier will ensure that Service Providers supply and maintain up to date information that ACC will make public via a Supplier/Provider search tool on the internet. This information is used to provide information to support Client selection of Service Provider.

18.1.1.4. Each Service Provider will meet the relevant qualifications set out in Appendix 2.

18.1.2. Process for Obtaining Approval of New Service Providers is as follows:

18.1.2.1. The Supplier may at any time during the Term of the Agreement make a written request to ACC to add one or more Service Providers to the Supplier's contract. Note that all Service Providers providing any ISSC service including Provisional Service Providers must be approved before they start providing services.

18.1.2.2. ACC may accept or decline each such request, by providing written notification to the Supplier. ACC can agree to a request subject to conditions, including meeting all the criteria specified in this Service Schedule and Appendices, and satisfactory NZ Police vetting.

18.1.2.3. Detailed information about how to apply will be available in the ISSC Operational Guidelines.

18.1.2.4. If a request is accepted under this clause, the Service Provider will be deemed added as an Approved Service Provider from the date of ACC's written notification to the Supplier. Clients will not be delayed in treatment and will be referred to another Service Provider if Service is required before the approval date of the New Service Provider.

18.1.2.5. All Service Providers may be subject to police vetting by ACC. Where the vetting results in adverse findings that could lead to the safety of ACC Clients being compromised, the Service Provider may be removed from the Contract.

18.1.2.6. The Supplier will ensure that the Supplier's new Service Providers receive the orientation and training necessary to carry out the services as described in this document.

- 18.1.3. Process for Removal of Service Providers and Management of Service Coverage is as follows:
- 18.1.3.1. ACC may, at any time, provide written notification to the Supplier that a Service Provider is to be removed as a Service Provider from this Agreement. The Service Provider will be deemed to be removed from this Agreement within five Business Days after receipt of ACC's notice by the Supplier. ACC will not issue such a notice arbitrarily.
 - 18.1.3.2. The Supplier may at any time provide written notification to ACC that a Service Provider has ceased to be a Service Provider for Services. The Service Provider will be deemed to be removed from their Agreement five Business Days after receipt of the Supplier's notice by ACC.
 - 18.1.3.3. The Supplier will ensure that Clients are appropriately supported where their existing Service Provider ceases providing services under the Contract. This may mean finding and transitioning to a new Service Provider or new Supplier.
 - 18.1.3.4. The Supplier will ensure that the Supplier maintain service coverage and capacity. Where a Service Provider is removed, the Supplier may be required to source additional Service Provider(s) to meet any shortfalls in coverage or capacity that result, where those shortfalls cannot be managed with existing Service Providers.

- 18.2. Appendix 2 sets out the provider criteria and qualifications for Treatment Providers, Supported Assessment Providers, Incapacity Assessment Providers, and discipline specific criteria as outlined in the tables below.

Table 7 – Criteria applicable for all Treatment Providers:

<p>Standard qualifications:</p> <p>A qualification which meets at least level 6 of an NZQA recognised course of study, with a focus on:</p> <ul style="list-style-type: none"> • Basic assessment skills; • Therapeutic intervention skills; • Abnormal psychology; • Skills in two or more therapy models; • Human development; and • Family dynamics. 	
<p>Full experience Service Providers:</p> <ul style="list-style-type: none"> • A minimum of two years equivalent full-time post-graduate experience working in mental health (not including clinical placements and internships); and • Able to demonstrate experience in working with survivors of sexual violence with this experience having been obtained or maintained in the last five years. 	<p><u>or</u> Provisional Service Provider requirements where full experience requirements are not able to be met:</p> <ul style="list-style-type: none"> • Must be able to demonstrate qualification requirements (either standard or particular circumstances); and • Have at least the equivalent of 12 months’ full-time post-graduate experience working in mental health (not including clinical placements and internships); and • Engage in further professional development with specific relevance to working with survivors of sexual violence, where recent professional development is not thought to be sufficient; and • Obtain on the job training to gain or to update the Supplier’s experience working directly with survivors of sexual violence. <p>Specific supervision requirements for Provisional Service Providers:</p> <ul style="list-style-type: none"> • Have arrangements in place for ongoing individual or group supervision with an appropriately qualified and experienced supervisor who has at least five years’ experience treating and assessing survivors of sexual violence and is a Named Provider on an ISSC contract; and • Have all ACC reports read and signed by the supervisor while under provisional status; and • Maintain a supervision log which outlines the cases discussed and provides a summary of issues and recommendations for each case; and • A final supervision report from the supervisor will be required by ACC once the supervisor considers that the Provisional Service Provider has obtained appropriate experience and supervision to work as a Named Provider. This needs to be within 24 months of being granted provisional approval.
<p>Registered under the Health Practitioners Competence Assurance Act 2003 (if relevant)</p>	

Table 8 – Criteria applicable for Supported Assessment Providers:

<p>Standard qualifications:</p> <p>A qualification which meets at least level 8 of an NZQA recognised course of study which includes in its content:</p> <ul style="list-style-type: none"> • Assessment, classification and clinical formulation; • Abnormal psychology; • Skills in two or more models of therapeutic intervention; • Human development; and • Knowledge and skills in the use of psychometric tools (if using psychometrics). 	<p><i>or</i> Specified equivalent qualification:</p> <p>Providers with a level 7 qualification otherwise meeting the standard qualifications will be accepted where the following additional criteria must also be met:</p> <ul style="list-style-type: none"> • The therapist has achieved the New Zealand Association of Psychotherapists (Inc) Advanced Clinical Practice qualification.
<p>Full experience:</p> <ul style="list-style-type: none"> • A minimum of two years equivalent full-time post-graduate experience working in mental health (not including clinical placements and internships), and • Able to demonstrate experience in working with survivors of sexual violence with this experience having been obtained or maintained in the last five years, and • Participation in relevant workshops, seminars and conferences, and • Be able to demonstrate knowledge of, and competency in using at least one of the following classification systems: <ul style="list-style-type: none"> ○ Diagnostic and Statistical Manual of Mental Disorders – Fourth Edition – Text Revision (DSM-IV-TR) or DSM-V ○ International Classification of Diseases – 10th Revision (ICD-10) ○ Psychodynamic Diagnostic Manual (PDM) ○ Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood – Revised (DC:0-3R) ○ Such classification systems may be used in isolation or in combination with multivariate statistical and psychometric approaches 	<p><i>or</i> Provisional requirements where full experience requirements are not able to be met:</p> <ul style="list-style-type: none"> • Must be able to demonstrate qualification requirements (either standard or specified equivalency); and • Have at least the equivalent of 12 months’ full-time post-graduate experience working in mental health (not including clinical placements and internships), and • Obtain on the job training to gain or to update the Suppliers experience working directly with survivors of sexual violence. • Engage in further professional development with specific relevance to working with survivors of sexual abuse or assault, where recent professional development is not thought to be sufficient. <p>Specific supervision requirements for Provisional Service Providers:</p> <ul style="list-style-type: none"> • Have arrangements in place for ongoing supervision with a supervisor experienced in ACC mental injury caused by sexual abuse assessments and who is a Named Provider on an ISSC contract; and • Discuss all cases with the supervisor; and • Participate in and attend at least fortnightly individual or group supervision with the supervisor; and • Maintain a supervision log which outlines the cases discussed and provides a summary of issues and recommendations for each case; and • Have each assessment report read and signed by the supervisor; and • A final supervision report from the supervisor will be required by ACC once the Supervisor considers that Provisional Services Provider has obtained the skills and experience to work as a Full named Provider. This will be within 24 months of being granted provisional approval.
<p>Registered under the Health Practitioners Competence Assurance Act 2003 (if relevant)</p>	

Table 9 – Criteria applicable for Incapacity Assessment providers:

A Psychiatrist who meets the criteria for the provision of the Supported Assessment, or
In particular circumstances, this can include an approved Supported Assessment provider, who has also been deemed appropriate by ACC to provide this service

Table 10 – Criteria applicable for Provisional Treatment Providers:

Provisional Provider meets the following standard qualifications:
A qualification which meets at least level 6 of an NZQA recognised course of study, with a focus on:

- Basic assessment skills;
- Therapeutic intervention skills;
- Abnormal psychology;
- Skills in two or more therapy models;
- Human development; and
- Family dynamics.

Provisional Provider meets all of the following requirements:

- Registered under the Health Practitioners Competence Assurance Act 2003 (if relevant);
- Membership in the relevant professional bodies as outlined below;
- Engage in professional development with specific relevance to working with survivors of sexual violence;
- Obtaining on the job training to gain experience working directly with survivors of sexual violence.

All of the following supervision requirements must be met:

- Have an appropriate supervision plan in place with an appropriately qualified and experienced supervisor who has at least five years' experience treating and assessing survivors of sexual violence. If the new graduate will be working with children or adolescents, the supervisor needs to have experience working with these Client groups. The supervisor will be a Named Provider on an ISSC contract;
- Discuss all therapy sessions and review session notes with supervisor;
- Have all ACC reports read and signed by the supervisor while under provisional status;
- Maintain a supervision log which outlines the cases discussed and provides a summary of issues and recommendations for each case.

All of the following additional requirements must be met:

- The Supplier will provide ACC with a detailed induction plan for the provisional provider including how they will be introduced and educated to the service specifications;
- The Supplier will provide ACC with the provisional provider's supervision plan including:
 - details of the proposed supervisor(s),
 - frequency and model of supervision.

The following conditions must be met to transition to full provider status:

- Complete therapeutic work with survivors of sexual violence over a 24 months' period;
- A final supervision report from the supervisor will be required by ACC once the full requirements to be approved on the contract have been met. This needs to be within 24 to 36 months of being granted provisional approval.

Table 11 – Discipline Specific Criteria

Counsellors	<p>Holds current Annual Practicing Certificate and membership of one of the following bodies below or other associations deemed appropriate by ACC (certificates must be provided):</p> <ul style="list-style-type: none"> • New Zealand Association of Counsellors (NZAC); • New Zealand Christian Counsellors Association (NZCCA); • Addiction Practitioners Association of Aotearoa New Zealand (DAPAANZ); • Australian, New Zealand and Asian Creative Arts Therapy Association (ANZACATA); • Aotearoa New Zealand Association of Social Workers Incorporated (ANZASW); • New Zealand Psychological Society (NZPsS); or • New Zealand Association of Psychotherapists (NZAP).
Social Workers	<p>Holds current Annual Practicing Certificate (certificates must be provided):</p> <ul style="list-style-type: none"> • Social Workers Registration Board of Aotearoa/New Zealand (SWRB); and <p>Holds full current membership with the following or other associations deemed appropriate by ACC (certificates must be provided):</p> <ul style="list-style-type: none"> • Aotearoa New Zealand Association of Social Workers Incorporated (ANZASW).
Psychotherapists	<p>Holds current Annual Practicing Certificate (certificate must be provided) with:</p> <ul style="list-style-type: none"> • The Psychotherapist Board of Aotearoa New Zealand; and <p>Has a current membership (certificate must be provided) with the following or other associations deemed appropriate by ACC:</p> <ul style="list-style-type: none"> • New Zealand Association of Child and Adolescent Psychotherapists (NZACAP) (Incorporated), and/or • New Zealand Association of Psychotherapists (NZAP).
Psychologists	<p>Holds current Annual Practicing Certificate (certificate must be provided) with:</p> <ul style="list-style-type: none"> • New Zealand Psychologists Board; and <p>Has a current membership (certificate(s) must be provided) with the (as appropriate):</p> <ul style="list-style-type: none"> • New Zealand Psychological Society (NZPsS), and/or • The New Zealand College of Clinical Psychologists Incorporated (NZCCP) and/or • Equivalent; and <p>Has one of the following Scopes of Practice:</p> <ul style="list-style-type: none"> • Psychologist; • Counselling Psychologist; • Clinical Psychologist; or • Educational Psychologist.
Psychiatrists	<p>Holds a current Annual Practicing Certificate (certificate must be provided) with:</p> <ul style="list-style-type: none"> • Medical Council of New Zealand (MCNZ); and <p>Holds Fellowship (certificates must be provided) with:</p> <ul style="list-style-type: none"> • Royal Australian and New Zealand College of Psychiatrists (RANZCP); or • or a membership deemed equivalent by the Medical Council of New Zealand (MCNZ); and <p>Holds registration in the vocational scope of psychiatry by the Medical Council of New Zealand (MCNZ).</p>

Service delivery standards applicable to all Service Providers:	
Ineligible because of Criminal Conviction	Any Service Providers who have been convicted of any offence against any of sections 124 to 210 of the Crimes Act 1961 or of an offence similar to any such offence in another jurisdiction are not eligible to be a provider for ACC; except where there are extenuating factual circumstances e.g. offending occurred a long time ago, and after undertaking due diligence on the Service Provider, ACC is satisfied that any concerns related to the offending are addressed.
Police Vetting	All Service Providers are subject to Police Vetting carried out by their Supplier, prior to ACC approval. Where there are adverse findings that could lead to the safety of ACC Clients being compromised, the Supplier must notify ACC to enable further investigation. The Service Provider may be ineligible to provide Services.
Massey Guidelines	Adherence and practical application of the 12 principles and practice guidelines outlined in 'Sexual Abuse and Mental Injury: Practice Guidelines for Aotearoa New Zealand'. These are to be followed when organising the Supplier's work, report writing, interacting with Clients and whānau and in supervision.
Cultural responsiveness	<ul style="list-style-type: none"> • A thorough grounding in the theory and application of 'Culture' as described in the Massey Guidelines, includes the provider recognising the limits of their competence, and options on how to proceed. • Adherence to ACC's Guidelines for Māori Cultural Competencies for Service Providers (refer to ACC1625 on ACC's website: https://www.acc.co.nz/resources/#/). • Adherence to relevant professional body standards.
Areas of additional competency	Where a Service Provider of treatment and/or assessment Services has one or more areas of competency, they will be asked to demonstrate the relevant qualifications, training and experience.
Therapists providing services for children and adolescents	<p>Must demonstrate:</p> <ul style="list-style-type: none"> • Experience working directly with children and/or adolescents and their family or whānau in the mental health setting, and • Ongoing professional development and training in working with children and/or adolescents, and • Experience working with children and/or adolescents who are survivors of sexual abuse or sexual assault, and their whānau, within the last 5 years.
Qualifications gained outside New Zealand	If the Supplier gained the Supplier qualification overseas, the Supplier must have it assessed by the New Zealand Qualifications Authority to establish what the New Zealand equivalent is and give this evidence to ACC along with appropriate registration board or association membership as per the Supplier's discipline as noted above.
Supervision	<p>Treatment and Assessment Service Providers must receive supervision from a supervisor who meets the following criteria:</p> <ul style="list-style-type: none"> • Holds full and current membership and meets the supervision requirements of the professional body to which they belong and provides ACC with the name and qualifications of their supervisor. • Has at least five years' clinical experience and at least three years' experience working with survivors of sexual abuse or sexual assault. <p>New Supported Assessors:</p> <ul style="list-style-type: none"> • Post approval to provide the assessment component of the ISSC contract, assessors who are new to providing assessments to ACC, will obtain supervision from a supervisor who is an experienced ACC assessor of mental injury arising from sexual abuse or assault. Supervision is required for the first ten assessment reports or longer, if deemed necessary by their supervisor. The supervisor needs to be approved by ACC.

18.3. Appendix 3 sets out an overview of the ISSC process.

