

# Client Wellbeing Plan



Complete this form if you are planning a client's recovery from a covered mental injury and either:

- The client has not previously had a Wellbeing Plan for that injury (e.g. because the client's claim for the injury as recently approved); or
- the client is returning for treatment in respect of an existing covered claim, but requires a new Wellbeing Plan.

Changes to current Wellbeing Plans should be made by documenting the changes in the Client's Progress Report, rather than creating a new Wellbeing Plan using this form.

Please return the completed form to: [sensitiveclaimsproviderreports@acc.co.nz](mailto:sensitiveclaimsproviderreports@acc.co.nz)

1. Client details			
Client name: x		Claim number: x	
Date of birth: x		Address: x	
<input checked="" type="checkbox"/> Adult		<input type="checkbox"/> Child or young person	
<input checked="" type="checkbox"/> Female	<input type="checkbox"/> Male	<input type="checkbox"/> Non-binary Preferred pronouns and/or other information	
Ethnicity: x			
Contact details / Safe contact where appropriate:			
Oranga Tamariki status, if applicable: N/A			
Client's covered injuries: PTSD, MDD, Psychiatric assessment concludes treatment is required to address the following complicating factors: Cultural and social work support required for treatment of relational trauma and building a robust support network outside of family Sex therapy required for sexual dysfunction related to PTSD Active liaison with GP and other support networks to address PTSD and MDD.			
Please complete the following if the client is a child or young person N/A			
2. Supplier and provider details			
Supplier name: South Coast Psychology		Supplier ID: G09884	
Lead provider name: x		Lead provider ID: x	
3. Client's current situation			
Please briefly describe the client's current situation. The intent is to capture any changes since the client's most recent assessment or report. For each section, if there have been no changes since the most recent report or full assessment, you can simply state "refer to (name of report) dated (give date)"; or "refer to Supported Assessment dated (give date)" as appropriate.			
Please describe changes to the client's presentation since previous reporting. This can include comments on the client's medication and overall health, as well as their current emotional, behavioural and social			

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functioning:

When first coming into therapy late last year, x presented with a complex array of symptom nomenclature:

personality: difficulties stabilising a coherent sense of self independently, feeling bad and guilty all the time, significant introversion and little ability to tolerate others for anything more than relatively short periods, difficulties with intimacy and any form of touch, a need to be in control, perfectionistic tendencies and self-critical when she cannot live up to her unrelenting standards

posttraumatic stress: daily flashbacks, nightmares, feelings of acute anxiety with memories of sexual abuse, avoidance of people, places, events and anything that has reminders of the thoughts, feelings, sensations, and experiences she had whilst being abused, a belief that if she is in control nothing bad will happen again developed out of her experiences of sexual abuse as a child, she recognises that she has begun retreating into her own fantasy world as she did as a child again in dissociation.

depression: constant low mood, outbursts of anger, feelings of guilt and shame (whakama), low self-worth, not being able to concentrate, finding no joy in anything, significant weight gain after the rape, and rapid weight loss leaving work.

Since then, she has found it difficult being off work living off her savings and then a small benefit. She has recently been told that her application for loss of potential income (LOPE) has been approved. She has used community supports to gain income support, food parcels and her entitlements from WINZ. She has found this process very demoralising as she has “always worked”. She has attempted to work for 3 hours a week but find that she still has difficulty with work relationships, and does not have sufficient interpersonal effectiveness skills, or tolerance to manage these.

Please describe changes to the client’s living situation since previous reporting. This can include the client’s current family or whānau situation, their work or school life, their financial position, any current stresses associated with their situation, and the support and expectations of others:

X has gained a housing New Zealand home of her own with the support of a community worker. She still spends a lot of time at her mother’s home cleaning and maintaining house for the whanau.

Are there any current risk factors for this client? Please consider all areas of vulnerability including areas where the client may be at risk to themselves, to others or from others, and including lifestyle and mental health factors:

Although x has significant suicidal ideation she reports that she does not want to die currently.

If a risk of harm to self or others, or risk from others has been identified, please explain how these will be managed.

X and her mother have the emergency mental health contact details and will use these if x is at risk.

Please indicate any providers, specialists, and agencies involved in the client’s recovery and care

Name:	Role/s:	Organisation:
x	GP	x

## 4. Client’s Personal Wellbeing Index (PWI)

Domain	Initial measure	Current measure
Date administered:	x	x

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Life as a whole (optional)		3	4
1. Standard of living		3	4
2. Personal health		1	3
3. Achieving in life		7	4
4. Personal relationships		6	4
5. Personal safety		4	6
6. Community connectedness		1	3
7. Future security		3	5
8. Spirituality and religion (optional)		7	6
<b>Personal Wellbeing Index</b> <i>Fields automatically calculate PWI. Put cursor in field and press F9 to update</i>		<b>40.00</b>	<b>43.75</b>
Version of test administered:	<input checked="" type="checkbox"/> Adult	<input type="checkbox"/> School child	<input type="checkbox"/> Intellectual disability
Additional comments X's overall PWI score has improved from baseline. In particular she is feeling safer and has more future security despite realising working in some industries may not be right for her mental health			

5. World Health Organisation Disability Assessment Schedule 2.0			
Results of the World Health Organisation Disability Schedule 2.0 (WHODAS 2.0). If the client's rating score was done more than 3 months ago, please complete a new rating. Please do not use this measure if the client is under 18 years of age.			
Please do not complete this part of the ACC6423 if the WHODAS 2.0 report is for completion of Support to Wellbeing (Short term).			
Domain	Score	Domain	Score
Understanding and communicating:	1.8	Getting around:	2.2
Self-care:	1.8	Getting along with people:	2.6
Life activities – household:	1.8	Life activities – school or work:	4
Participation in society:	3.3	Total disability score:	63.2%
Qualitative data: X's functioning is most affected by her menial injuries in terms of her relationships and consequently inability to maintain working. Her physical health concerns also impact her ability for self-care and getting around further complicating mental health and wellbeing.			
Provider that completed WHODAS 2.0: x		Date completed: x	

## 6. Treatment goals overview

What are the broad, overall goals for the client's treatment with regards to the covered mental injury?

According to her supported assessment report x, psychiatrist x suggests the following treatment plan:

### Proposed Treatment Plan:

1. x requires ongoing psychological treatment to address the symptoms of her PTSD and its implications for her everyday life and functioning. She has a long and established relationship with her current treatment provider and has benefited for the treatment thus far. If the issues with sexual intimacy cannot be addressed in this therapeutic relationship then a specialist provider may need to be sort in the future.
2. x will be supported by her psychological treatment provider to contact the Victims Support Co-ordinator as she wishes to comment on the possible parole and early release of her convicted perpetrator from her sexual abuse during primary school years.
3. x would like support at a time when she feels ready, to disclose her most recent rape to the police.
4. x would like to consider whether she could make a claim against ACC for the fracture to her hip when she was x years old because of an assault by her peers. The ongoing difficulties following that surgery makes some employment environments difficult for her.
5. x would like a cultural advisor to engage her with her x ancestry. Her biological father lied to her about her x background and she is currently not engaged with it. The inability for her to be physically in close contact with others has implications for her and her whanau which she would like help to be address.
6. x would like to be able to complete her x studies and consider university entry and go on to study further, as this was taken away from her due to her rape and the subsequent response of her peers at school.
7. x would like support to consider challenging the behaviour of her school counsellor who informed her peers and possibly the teachers at school of the reasons why she was behaving as she was in the school place. She did not wish her peers to have such information and the disclosure was without her consent and knowledge.
8. x would like to consider trialling medications to help her sleep. x may benefit from an antidepressant as she appears to be depressed and her PTSD symptoms may also benefit from an antidepressant. She can consider such an antidepressant as Sertraline. I would recommend discontinuation of the low dose Amitriptyline she is currently taking. x could continue with her current Quetiapine and take a dose, such as 25mg if the 50mg is too much, for sleep. Otherwise, she could consider medication such as Melatonin. Additional beneficial medication may be to consider Prazosin to help with the nightmares and agitation at night, and a morning dose could also be given after the evening dose has commenced to help ameliorate some of her daytime hyperarousal symptoms. x's GP may be willing to provide this treatment and x will require primary care appts for prescribing and monitoring until beneficial medications and doses are established. Appts with the nurse for monitoring of side effects and blood tests may also be necessary. If her primary care practice are not able to provide this treatment it may need to be commenced by a treating psychiatrist provided by ACC.
9. x's psychological treatment provider will encourage and work with x to help her to sign up for benefits due to her mental health issues, as she is unable to work. x is keen to return to work when she is able. In the meantime, she needs to claim benefits as she has no money.
10. I have spoken to x's GP who will consider prescribing for x's mental health issues when they next have an appointment with x.
11. I would recommend that a copy of this report be made available to x's GP. x wishes to receive a copy of my report. On review of this report should she be unhappy with the representation of information within the report I would be happy to discuss this with x and correct any agreed inaccuracies in fact or interpretation

To achieve these goals we will need to:

- Maintain the therapeutic relationship with weekly psychotherapy
- Build x's self-management and relational skills and self-capacities including a robust social support network with the support of social work services and internal resources and skills through DBT PTSD, ITFT(Briere), a sense of cultural safety and stability through cultural support and advice, and sex therapy with a specialist sex therapist

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- Process x's experiences of sexual abuse and take action on the measures required to resolve traumatic material
- Provide x necessary therapeutic and social work support to address complicating barriers to recovery including her physical claim with the support of a social worker.

How will you and the client determine that each goal has been achieved and ACC-funded treatment for the covered mental injury is no longer required?

X and I will review the goals posed and she will have achieved these and feel able to function well without the support of therapy

## 7. Recovery goals and treatment plan

Please complete the information below for each recovery goal you have agreed with the client. The goals should be relevant to the client's recovery, attainable for the client, negotiated with and explained to the client, and should be linked to clear and measurable changes in the client's functioning.

Please refer to as many goals as you have agreed with the client.

**Recovery goal:** Maintain the therapeutic relationship with weekly psychotherapy

Why has this goal been selected? To heal from complex PTSD (relational trauma) attention to a secure therapeutic relationship is important.

How will this goal be achieved? X will attend weekly therapy and engage in the work

Which practitioners will be involved in achieving this goal? x

How will progress towards this goal be measured? X will be attending and achieving progress

What is the expected timeframe for achievement of this goal? Ongoing in long-term therapy

**Recovery goal:** Build x's self-management and relational skills and self-capacities including a robust social support network with the support of social work services and internal resources and skills through DBT PTSD, ITFT(Briere), a sense of cultural safety and stability through cultural support and advice, and sex therapy with a specialist sex therapist

Why has this goal been selected? To ensure x has the psychological strength to manage trauma processing and desensitisation work

How will this goal be achieved?

- X will learn skills in integrated trauma focussed and DBT therapy and within a DBT group to gain more effective self-management and more mutually satisfying relationships at all levels.
- She will develop a robust support network utilising social work support
- She will develop a sense of mana wahine through engagement with adjunct counselling with a x therapy provider and the support of cultural advice in relation to her x

She will develop a sense of herself in relation to her sexuality and sexual functioning by engaging Process x's experiences of sexual abuse and take action on the measures required to resolve traumatic material

Provide x necessary therapeutic and social work support to address complicating barriers to recovery including her physical claim with the support of a social worker.

- with a specialist sex therapy provider

Which practitioners will be involved in achieving this goal? x. x social worker. Cultural Advisor – to be determined (x). Sex Therapy x. x and x DBT skills group.

How will progress towards this goal be measured? X will report a sense of stability and a growing sense of self. She will begin abuse processing work

What is the expected timeframe for achievement of this goal? 12-18 months

**Recovery goal:** Process x's experiences of sexual abuse and take action on the measures required to resolve traumatic material

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<p>Why has this goal been selected? to treat complex PTSD</p> <p>How will this goal be achieved? ITFT (Briere)</p> <p>Which practitioners will be involved in achieving this goal? x</p> <p>How will progress towards this goal be measured? X will no longer be troubled by PTSD symptoms</p> <p>What is the expected timeframe for achievement of this goal? 24 months</p>
<p><b>Recovery goal:</b> Provide x necessary therapeutic and social work support to address complicating barriers to recovery including her physical claim with the support of a social worker</p> <p>Why has this goal been selected? As per the psychiatric report. X's physical injuries are a significant maintaining factor in her mental injuries. She requires the ongoing support of either a social worker or a TI programme</p> <p>How will this goal be achieved? X will engage with a social worker and make a plan to address the needs in relation to physical problems</p> <p>Which practitioners will be involved in achieving this goal? x</p> <p>How will progress towards this goal be measured? X will be satisfied with the management of her physical injuries</p> <p>What is the expected timeframe for achievement of this goal? 6 months</p>
<p><b>Recovery goal:</b></p> <p>Why has this goal been selected?</p> <p>How will this goal be achieved?</p> <p>Which practitioners will be involved in achieving this goal?</p> <p>How will progress towards this goal be measured?</p> <p>What is the expected timeframe for achievement of this goal?</p>

**8. Planned services and the providers who will deliver these services**

For each service you are requesting that will be delivered by a provider working under the Lead Provider's Supplier, please outline in the following table who will deliver each service and the likely number of hours required for each.

ACC requires this information to make a decision on the service(s) requested.

Service	Provider	Provider discipline Eg Psychotherapist	Hours requested
Support to wellbeing Lead	x	Psychologist	22
Support to wellbeing x counselling	x	Counsellor	12
Cultural advice	x	x	10
DBT group	x	Social Worker and Counsellor	107
Sex therapy	x	Sex Therapist/ Psychotherapist	10

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Social Work	x	Social Worker	20

Please indicate any ISSC or other ACC services you or your Supplier cannot provide and will need from other suppliers: N/A

Please demonstrate how the requested services will meet Recovery goals and include your rationale for any services that have been requested (please refer to ISSC Operational Guidelines for a list of available ISSC Support Services, including services addressing cultural and spiritual needs):  
Please see goals above

Please outline any current practical barriers to the client accessing services. This can include, but is not limited to, difficulties such as problems with transport or provider availability:  
X will need taxis to therapy from x to x.

## 10. Recovery check-ins

Please specify proposed dates of check-ins:

Case conference	Progress report
(6 months after the start date of this plan)	(9 months after the start date of this plan)
Proposed date: x	Proposed date: x

## 11. Other information

Please indicate the date of the last face-to-face meeting with the client that informed this report: x

Please provide any other information that you consider relevant. Please attach additional pages if required and expand this section as much as you need. n/A

## 12. Provider declaration

I have informed the client/guardian/s that the information collected for this report will be sent to ACC [and will be used to inform decision making about treatment and rehabilitation needs] and I have obtained the client's/guardian/s authority for this.

I confirm that the information contained in this report is accurate and that I have followed the standards as set out in the ISSC Operational Guidelines.

Signature (provider): x	Date: x
Provider name: x	Provider ID: x

When we collect, use and store information, we comply with the Privacy Act 2020 and the Health Information Privacy Code 2020. For further details see ACC's privacy policy, available at [www.acc.co.nz](http://www.acc.co.nz). We use the information collected on this form to fulfil the requirements of the Accident Compensation Act 2001.