



# Service Schedule for Psychological Services

CONTRACT NO: <HP\_SS\_Contract\_number>

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## A. QUICK REFERENCE INFORMATION

### 1. TERM FOR PROVIDING PSYCHOLOGICAL SERVICES

- 1.1 The Term for the provision of Psychological Services (**Services**) is the period from 1 May 2026 (**Start date**) until the close of 30 April 2029 (**End date**) or such earlier date upon which the period is lawfully terminated or cancelled.
- 1.2 Prior to the End date, the Parties may agree in writing to extend the Term of this Service Schedule for a maximum of two further terms of one year each. Any decision to extend the Term of this Service Schedule will be based on:
  - 1.2.1 the parties reaching agreement on the extension in writing prior to the End Date; and
  - 1.2.2 ACC being satisfied with the performance of the Services by the Supplier; and
  - 1.2.3 all other provisions of this Contract either continuing to apply during such extended Term or being re-negotiated to the satisfaction of both parties.
- 1.3 There is no obligation on the part of ACC to extend the Term of this Service Schedule, even if the Supplier has satisfactorily performed all the Services

### 2. GEOGRAPHICAL AREA AND SERVICE LOCATION(S) (PART B, CLAUSE 4)

<HP\_Specified\_Area\_Service\_Location\_TAs>

### 3. NAMED SERVICE PROVIDERS (PART B, CLAUSE 8)

Approved Named Service Provider	Services Provided	ACC Provider Number	Vocational Classification	Address for Services
[Named Provider]	[Service Provided]	[Provider ID]	[Vocational classification]	[Physical Address]

#### 4. SERVICE ITEMS AND PRICES (PART B, CLAUSE 13)

##### Part A: Table 1 – Service Items and Prices

Service Item Code	Telehealth Code	Service Item Description	Price (excl GST)	Pricing Unit
PSY50	PSY50T	Early Intervention & Planning Part B, clause 6.1, 6.2. and 6.4.	\$189.92	Per hour to a maximum of 4 hours
PSY51	PSY51T	Mental Injury Assessment to determine MICPI Cover Part B, clause 6.6.	\$189.92	Per hour to a maximum of 16 hours
PSY40	PSY40T	WRMI Early Intervention Part B, clause 6.3.	\$189.92	Per hour to a maximum of four hours
PSY52	PSY52T	Mental Injury Assessment to determine WRMI Cover Part B, clause 6.6.	\$189.92	Per hour to a maximum of 16 hours
PSY53	PSY53T	WRMI post Mental Injury Assessment therapeutic sessions Part B, clause 6.7.	\$189.92	Per hour to a maximum of two hours
PSY60	PSY60T	Psychological Sessions – no Mental Injury Cover Part B, clause 6.5.	\$189.92	Per hour and/or part thereof to a maximum of 10 hours per block
PSY61	PSY61T	Post Cover MICPI Treatment Part B, clause 6.8.	\$189.92	Per hour and/or part thereof to a maximum of 24 hours per block
PSY62	PSY62T	Post-Cover WRMI Treatment sessions Part B, clause 6.8.	\$189.92	Per hour and/or part thereof to a maximum of 24 hours per block
PSY70	N/A	Early Intervention & Planning Progress / Completion Report Part B, clauses 7.1 or 7.2	\$189.92	Per Report
PSY71	N/A	Progress / Completion Report with MICPI Cover, clauses 7.1 or 7.2	\$189.92	Per Report
PSY72	N/A	Progress / Completion Report with WRMI Cover, clauses 7.1 or 7.2	\$189.92	Per Report

<b>Service Item Code</b>	<b>Telehealth Code</b>	<b>Service Item Description</b>	<b>Price (excl GST)</b>	<b>Pricing Unit</b>
PSY80	PSY80T	Treatment Review Part B, Clause 6.9	\$189.92	Per hour and/or part thereof to a maximum of 16 hours.
PSY81	PSY81T	Whanau Support Part B, clause 6.10.	\$189.92	Per hour and/or part thereof to a maximum of 8 hours per claim
PSY82	N/A	Active Liaison Part B, clauses 6.11.	\$189.92	Per hour (max. 3 hours per claim)
PSYDNA	N/A	Non-Attendance Fee Part B, clauses 18.1.3.	\$75.97	Max two per claim (payable once per DNA)
PSYTD10	N/A	Travel Distance - a contribution towards travel In accordance with Part B Clause 18.2.	\$0.82	Per km
PSYTT1	N/A	Paid for return travel time: a contribution towards travel In accordance with Part B Clause 18.2	\$189.92	Per hour or part thereof
PSYTA1	N/A	Air travel for a Named Service Provider when requested by ACC Part B, clause 18.3.	Actual and Reasonable	Per trip
PSYT6		All other travel Part B, clauses 18.2.	Actual and Reasonable	Per trip
PSYAC		Accommodation Part B, clauses 18.4.	Actual and Reasonable (max of \$282.97 excl. GST per day)	Per Night
PSYTR1		Remote Clinic Room Hire Part B, clauses 18.5.	Actual and Reasonable (max of \$248.24 excl. GST per day)	Per Day

## 5. PRICE REVIEW

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

- general inflation;
- changes in service component costs; and
- substantial changes in the market.

5.2 If, following a pricing review, ACC determines that the factors it took into account have not had a significant impact on price, the prices will remain unchanged.

5.3 If ACC proposes any price increase, the price increase will only take effect if the Supplier has agreed to the increase in writing. If the Supplier agrees to the price increase, the price increase will take effect from a date specified by ACC.

## 6. ASSOCIATED DOCUMENTS

6.1 The Supplier and ACC must operate this Service in accordance with:

6.1.1 ACC's Standard Terms and Conditions;

6.1.2 this Service Schedule; and

6.1.3 Operational Guidelines (available on ACC's website).

6.2 ACC may amend the Operational Guidelines from time to time in consultation with the Supplier.

6.3 If there is any inconsistency or conflict between this Service Schedule and the Operational Guidelines, this Service Schedule takes precedence.

## 7. RELATIONSHIP MANAGEMENT (STANDARD TERMS AND CONDITIONS, CLAUSE 11)

### Part A: Table 3 - Relationship Management

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

**8. 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 Partner"  
Phone: 0800 400 503  
Email: health.procurement@acc.co.nz

**NOTICES FOR SUPPLIER TO:**

<HP\_Supplier\_Name\_Legal>  
<HP\_Supplier\_Name\_Trade>  
<HP\_Physical\_Address\_1> (for deliveries)  
<HP\_Physical\_Address\_2>  
<HP\_Physical\_City>  
<HP\_Postal\_Address\_1> (for mail)  
<HP\_Postal\_Address\_2>  
<HP\_Postal\_City> <HP\_Postal\_Code>  
Marked: "Attention: <HP\_Contractual\_First\_Name> <HP\_Contractual\_Surname>,  
HP\_Contractual\_Postion>  
Phone: <HP\_Contractual\_Phone>  
Mobile: <HP\_Alternate\_Number>  
Email: <HP\_Contractual\_Email>

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## **B. SERVICE SPECIFICATIONS FOR PSYCHOLOGICAL SERVICES**

### **1. PURPOSE**

- 1.1 ACC wishes to purchase Psychological Services from the Supplier.
- 1.2 The purpose of the Service is to enable Client(s) to achieve and maintain their maximum level of health and independence in daily activities.

### **2. SERVICE OBJECTIVES**

- 2.1 ACC will measure the success of this Service based on the following objectives:
  - 2.1.1 Assessment of the Client current psychological status for the purposes of ACC's treatment planning to address rehabilitation needs;
  - 2.1.2 Identification of current barriers that are preventing rehabilitation towards independence;
  - 2.1.3 Providing timely and appropriate, evidence-based psychological interventions to address the identified barriers, to achieve Client independence;
  - 2.1.4 Providing Client education for self-management;
  - 2.1.5 Providing early education to the family/whānau of the Client about the effects of psychological problems/mental injury to foster strong recovery/coping strategies and Client managed recovery and rehabilitation; and
  - 2.1.6 Achieving agreed outcome specifications.

### **3. SERVICE COMMENCEMENT**

- 3.1 Client Eligibility for Services
- 3.2 A Client is eligible to receive Psychological Services if the Supplier has received a written referral for Psychological Services from ACC for the Client and if one of the following apply:
  - 3.2.1 the Client has suffered a personal injury as defined in the Accident Compensation Act 2001 (**AC Act**) which has been accepted as having Cover under the AC Act, and may include:
    - 3.2.1.1 Mental Injury suffered by a person because of physical injuries (**MICPI**) suffered by that person; or
    - 3.2.1.2 Work Related Mental Injury (**WRMI**) suffered by a person in the circumstances described in section 21B of the AC Act; or

- 3.2.1.3 mental injury suffered by a person because of a non-Covered treatment injury (**TIMI**) suffered by that person;
- 3.2.1.4 the Client has suffered a personal injury that has resulted in psychological difficulty or are experiencing psychological barriers to recovery from their personal injury.
- 3.2.2 the Client may have suffered a personal injury as defined in the AC Act and a claim has been lodged for:
  - 3.2.2.1 work-related mental injury (WRMI) that is likely to have been suffered by a person in the circumstances described in section 21B of the AC Act; and
  - 3.2.2.2 the injury has resulted in the requirement of Psychological Services to assist with their rehabilitation.
- 3.3 Referral Process
  - 3.3.1 A Referral for Psychological Services (**ACC265**) from ACC is provided to the Supplier following a:
    - 3.3.1.1 Psychiatric assessment or recommendation;
    - 3.3.1.2 Neuropsychological assessment or recommendation;
    - 3.3.1.3 Pain assessment or recommendation;
    - 3.3.1.4 Other specialised assessment or recommendation;
    - 3.3.1.5 Recommendation from a Psychology Advisor (PA); or
    - 3.3.1.6 Recovery Team Member identifying the need for Psychological Services.
  - 3.3.2 When the Supplier receives a Referral, the Supplier will:
    - 3.3.2.1 Ensure that a Named Service Provider possessing the requisite clinical training, experience, specialisation, and knowledge is available to meet the specific needs of the Client prior to accepting the referral.
    - 3.3.2.2 Respond with either an acceptance or decline within five (5) business days from the date of Referral; and
    - 3.3.2.3 If accepting the Referral, the Supplier will ensure the client has been contacted within five (5) Business Days to arrange an appointment for Services. The supplier will notify ACC if they are unable to contact the client within this timeframe.
  - 3.3.3 ACC will not pay the Supplier for Services for a person or Client who has not been referred to the Supplier in accordance with this Service Schedule.

#### 4. SERVICE LOCATION

- 4.1 The Supplier will provide the Psychological Services at the Service Location(s) within the Geographical Area specified in Part A, clause 2.
- 4.2 For each Geographical Area specified in Part A clause 2, the Supplier must:
- 4.2.1 have Named Service Provider/s in each geographical area/s to deliver Treatment Services;
  - 4.2.2 have Named Assessment Service Provider/s in each geographical area/s to deliver Assessment Services; and
  - 4.2.3 maintain the Service Location(s) in a Geographical Area to ensure Coverage across the whole geographical area in a manner that does not require a Named Service Provider to travel unreasonably to provide the Services.
- 4.3 If the Client circumstances are exceptional or if a physical condition precludes the Client from attending the Supplier's Service Location then the Service may be provided in a location that meets the needs of the eligible Client.
- 4.4 Where services of a Client is required in a location away from the Supplier's facility, travel costs will be reimbursed at the rate specified in Part A, clause 4. Where possible, Services will be carried out in one location to minimise travel costs to ACC. If provision of the Service is required in a location outside that specified in Part A, clause 2 of this Service Schedule, the Supplier must seek prior written approval from ACC and, if ACC approved, travel costs will be reimbursed at the rate specified in Part A, clause 4.
- 4.5 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:
- 4.5.1 have Client or authorised representative consent (recorded in the clinical notes), and with the option of an in-person meeting if the Client prefers;
  - 4.5.2 be accessible by the Client;
  - 4.5.3 be preceded by an initial suitability assessment and safety plan performed by the Service provider;
  - 4.5.4 meet the same required standards of care provided through an in- person consultation;
  - 4.5.5 have clinical records that meet ACC and professional body requirements;
  - 4.5.6 meet the requirements outlined in ACC's Telehealth Guide (accessible on ACC's website), ACC's guide for Telepsychology (accessible on ACC's website) and the New Zealand Psychologist's Board Telehealth Best Practice Guidelines and comply with relevant New Zealand regulations, standards, and guidelines for Telehealth;

- 4.5.7 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; and
- 4.5.8 in circumstances where the Client will access the Services at a location outside the Service provider's Location have prior written approval from ACC.

## **5. SERVICE COMPONENTS**

- 5.1 The Supplier must undertake all the six Service components in accordance with this Part B, set out below:
  - 5.1.1 Early Intervention and Planning
  - 5.1.2 Treatment (Pre and Post Mental Injury Cover)
  - 5.1.3 Assessment
  - 5.1.4 Treatment Review
  - 5.1.5 Active Liaison
  - 5.1.6 Whanau Support
- 5.2 The Supplier may subcontract Named Service Providers, to carry out the Services in accordance with clause 16 of the Standard Terms and Conditions and any requirements in Part B of this Service Schedule.

## **6. SERVICE REQUIREMENTS**

- 6.1 Early Intervention and Planning
  - 6.1.1 The Supplier must ensure each Client referred into Psychological Services receive an Early Intervention and Planning Service which may include an Action Plan.
- 6.2 WRMI Early Intervention Services
  - 6.2.1 WRMI Early Intervention Services has the following purposes:
    - 6.2.1.1 to provide early psychological intervention to help reduce the psychological impact of the traumatic event on Client;
    - 6.2.1.2 to assist in the prevention of mental injury; and
    - 6.2.1.3 to gather information which can be used in an Assessment Report should the Client wish to progress to a Cover decision for WRMI.

- 6.2.2 WRMI Early Intervention
  - 6.2.2.1 WRMI Early Intervention must be provided by a Named Service Provider who is approved to deliver both Treatment and Mental Injury Assessment.
  - 6.2.2.2 The Supplier may provide up to a maximum of four (4) hours for Early Intervention Services.
- 6.2.3 Following the WRMI Early Intervention Service if:
  - 6.2.3.1 The Client wishes to progress to a WRMI Cover decision, the Supplier must provide a Mental Injury Assessment as specified in Clause 6.6; or;
  - 6.2.3.2 If the Client decides not to proceed to a WRMI Cover decision, the Supplier must outline in an email to ACC the number and date of sessions undertaken by the Client, any issues Covered and the outcome of the sessions.
- 6.3 Early Intervention & Planning
  - 6.3.1 Early Intervention & Planning Services has the following purposes:
    - 6.3.1.1 to provide information to the Client on the purpose of the Service and agree to treatment goals and objectives;
    - 6.3.1.2 to assist in the prevention of mental injury; and
    - 6.3.1.3 to gather information which can be used as part of the Mental Injury Assessment process should it be appropriate for the Client to progress to a Cover decision for MICPI.
  - 6.3.2 The Supplier must:
    - 6.3.2.1 provide Early Intervention and Planning sessions which involves early contact with the Client to help gather information for ACC and provide early assistance;
    - 6.3.2.2 submit an Action Plan as detailed in Part B, Clause 7.1.2; and
    - 6.3.2.3 allocate up to a maximum of four (4) hours for this service.
  - 6.3.3 Prior to completion of the Early Intervention & Planning, the Supplier may request further ACC funding approval to provide further Psychological Services sessions in accordance with Part B, Clause 6.5 below. The Supplier must ensure that the Named Service Provider makes this request at least two weeks before the approved Early Intervention & Planning stage is completed.

#### 6.4 Request for further Services

- 6.4.1 The Supplier and Named Service Provider may request further Service hours when considered necessary and appropriate for the treatment of the Client's injury related needs.
- 6.4.2 The Supplier and Named Service Provider must submit a request for further Services to ACC prior to the commencement of any further session(s). The request must include the following information:
  - 6.4.2.1 the functional objectives and outcomes of the proposed further Psychological Services;
  - 6.4.2.2 the initial outcomes achieved to date;
  - 6.4.2.3 reasons why further Psychological Services are necessary;
  - 6.4.2.4 expected timeframes for further Psychological Services;
  - 6.4.2.5 the recommended number of further Psychological Services sessions, up to a maximum of 10 hours; and
  - 6.4.2.6 if more than 10 Psychological Sessions – No Mental Injury Cover hours are required to achieve the proposed outcomes, why a Mental Injury Assessment, or other ACC Assessment, is not indicated.
- 6.4.3 ACC will provide notice in writing to the Supplier, Named Service Provider and the Client of its decision (at ACC's sole discretion) to accept or decline the Named Service Provider's request for funding of further Psychological Services within two weeks of receipt of the request.

#### 6.5 Mental Injury Assessment (WRMI and MICPI)

- 6.5.1 A **Mental Injury Assessment** must only be completed by an approved Named Assessment Provider.
- 6.5.2 The Supplier must only accept and allocate referrals for Mental Injury Assessment to a Named Assessment Provider:
  - 6.5.2.1 who possess the necessary clinical training, experience and areas of specialisation or relevant knowledge, including but not limited to expertise in working with children, adolescent, or specified cultural groups; and
  - 6.5.2.2 Meets the requirements set out in Part B Table 4 below.
- 6.5.3 The Supplier must ensure a Named Assessment Provider:
  - 6.5.3.1 completes a Mental Injury Assessment Report which includes preparation and reading time, face- to-face assessment time, and Report writing;

- 6.5.3.2 includes the Client feedback and discussed findings;
  - 6.5.3.3 undertakes a Client feedback session (which is time to review the Assessment Report and it's findings with the Client), unless there are concerns around Client or named service provider safety, or if this is deemed clinically inappropriate; and
  - 6.5.3.4 allocate up to a maximum of 16 hours for the Named Assessment Provider to complete the Mental Injury Assessment.
- 6.5.4 For MICPI Mental Injury Assessments where the Client has a Treatment Provider who is not the Assessment Provider, ACC will approve a further 10 sessions of MICPI Early Intervention in order to ensure the Treatment Provider is able to support the Client before, during and following the assessment until ACC has made a decision on the Client's claim for Cover.
- 6.5.5 On receipt of the Mental Injury Assessment Report, ACC will review and either:
- 6.5.5.1 Approve the next service item(s) within seven (7) working days; or
  - 6.5.5.2 Return the Mental Injury Assessment report to the Supplier where further information is required or it does not meet ACC quality standards. The supplier is required to address the issues raised with the Assessment Provider and resubmit the Mental Injury Assessment Report within ten (10) business days from the date of return, and at no cost to ACC.
- 6.6 WRMI Post Mental Injury Assessment Therapeutic Sessions
- 6.6.1 Pre-Cover WRMI Post Mental Injury Assessment Therapeutic Sessions have the following purposes:
    - 6.6.1.1 to provide early psychological intervention to reduce the psychological impact of the traumatic event on Client;
    - 6.6.1.2 to assist in the prevention of mental injury; and
    - 6.6.1.3 to allow continuity of support.
  - 6.6.2 The Supplier must provide Pre-Cover WRMI Post Mental Injury Assessment Therapeutic Sessions, which allows a Client continuity of support and care while ACC determines whether the Client has Cover for WRMI following receipt of the Mental Injury Assessment Report.

## 6.7 Post Cover Treatment Sessions

6.7.1 The Supplier must ensure that Treatment Sessions are available and provided following ACC decision to accept Cover. The Post Cover Treatment Sessions must include:

6.7.1.1 conducting a clinical evaluation of the Client to determine suitability of the Referral and confirmation of the number of sessions recommended in the Referral;

6.7.1.2 the provision of cognitive-behavioural or other evidence-based therapy to promote Client adaptation to their injuries;

6.7.1.3 access to information regarding mental injury and its effects;

6.7.1.4 reassessing goals and discussing progress made throughout the sessions;

6.7.1.5 monitoring clinical outcomes for the Psychological Services provided; and

6.7.1.6 ensuring the Client has sufficient supports in place on completion of Psychological Services.

6.7.2 The Supplier must ensure:

6.7.2.1 a Named Service Provider only delivers the number of treatment hours that are necessary, appropriate and required for a Client; and

6.7.2.2 the Treatment Sessions are consistent with achieving the Client objectives and goals.

6.7.3 The Supplier must allocate up to a maximum of 24 hours per block for treatment.

## 6.8 Treatment Review

6.8.1 This Service is an independent review of the treatment that has been delivered, and the progress Client have made towards their goals.

6.8.2 A **Treatment Review** is required when:

6.8.2.1 a Client has received 48 hours of Post-Cover Treatment (MICPI, TIMI, and WRMI); or

6.8.2.2 has received Post-Cover Treatment (MICPI, TIMI, and WRMI) for more than 12 months, whichever is sooner.

- 6.8.3 A Treatment Review is not a diagnostic or Cover assessment.
- 6.8.4 A Treatment Review must be completed by a Named Assessment Provider, who cannot be the Treatment Provider for the Client at the time of the request.
- 6.8.5 ACC can initiate this Service, or the Supplier can request this Service, during or at the completion of a block of therapy if:
  - 6.8.5.1 there are concerns about treatment progress;
  - 6.8.5.2 there is a deterioration in progress over time;
  - 6.8.5.3 there is no clear explanation for a lack of progress; or
  - 6.8.5.4 information indicates that the treatment provided no longer meets the Client injury related needs.
- 6.8.6 If the Supplier requests a Treatment Review, the Supplier must ensure:
  - 6.8.6.1 prior approval is received from ACC before undertaking a Treatment Review; and
  - 6.8.6.2 confirm the Named Assessment Provider who will undertake the Treatment Review.
- 6.8.7 The Supplier must ensure the Named Assessment Provider completes a Treatment Review Report which details:
  - 6.8.7.1 the current presentation(s) of the Client;
  - 6.8.7.2 an evaluation of the extent to which the current Psychological treatment goals are on track;
  - 6.8.7.3 identify current issues or barriers to recovery;
  - 6.8.7.4 any other information or findings for the review;
  - 6.8.7.5 the Client's feedback and opinion; and
  - 6.8.7.6 recommendations for ongoing treatment if any further treatment is required.
- 6.8.8 The Treatment Review must involve the Client. This includes meeting with Client to ensure their opinion is reflected in the Treatment Review Report and to assess their current treatment needs.
- 6.8.9 A paper-based review can be requested if involving a Client in the review poses significant risk to the health, safety or wellbeing of the Client or Named Assessment Provider. ACC must approve a paper-based review before it proceeds. Any request must include strong rationale detailing the risk. The Client must also consent to any paper-based review before it can proceed.

- 6.8.10 On receipt of the Treatment Review Report, ACC will review and either:
  - 6.8.10.1 Approve the next service item(s) within seven (7) working days; or
  - 6.8.10.2 Return the Treatment Review Report to the Supplier where further information is required or it does not meet ACC quality standards. The supplier is required to address the issues raised with the Treatment Review Report and resubmit the Treatment Review Report within ten (10) business days from the date of return, and at no cost to ACC.

## 6.9 Whanau Support

- 6.9.1 The purpose of **Whanau Support** is to support the Client rehabilitation and recovery through provision of education and support to Whanau about the effects of mental injury.
- 6.9.2 For all Whanau Support Services, the Supplier must:
  - 6.9.2.1 submit a written request to ACC for Whanau Support;
  - 6.9.2.2 ensure ACC has approved this service before it is delivered;
  - 6.9.2.3 ensure Whanau Support is delivered to members of the Client's Whanau with the knowledge and consent of the Client. The Client can be present for the delivery of this Service; and
  - 6.9.2.4 document the delivery of this service in the Treatment Providers next Progress or Completion Report.
- 6.9.3 Whanau Support can be requested at any stage in the Psychological Service.

## 6.10 Active Liaison

- 6.10.1 The purpose of **Active Liaison** is to provide Named Service Providers time during Assessment, Treatment Review or Treatment to coordinate key activities that support the Client rehabilitation and recovery. This may include:
  - 6.10.1.1 telephone discussions with agencies and/or relevant parties to ensure that the necessary supports are in place for a Client that supports their rehabilitation and/or treatment programme; and
  - 6.10.1.2 contributing to interagency meetings and/or case conferences, including recording and follow-up of designated actions.
- 6.10.2 For all Active Liaison services, the Supplier must:
  - 6.10.2.1 submit a written request to ACC for this service;
  - 6.10.2.2 ensure ACC has approved this service before delivery of this service; and

- 6.10.2.3 document the delivery of this service in the Treatment Providers next report.
- 6.10.3 Active liaison is non-Face-to-Face time, unless it involves a case conference which the Client attends.
- 6.10.4 Active Liaison can be requested at any stage in the Psychological Service.
- 6.10.5 The Supplier acknowledges that Active Liaison excludes:
  - 6.10.5.1 collection of collateral information for assessment or review purposes, which is included in the relevant Service codes' time allocations; and
  - 6.10.5.2 time spent communicating with ACC.

## **7. REPORTING**

### **7.1 Action Plan**

- 7.1.1 The Supplier must ensure the Named Service Provider submits an Action Plan, as provided on ACC's website (**ACC266**) to ACC at the Early Intervention and Planning stage.
- 7.1.2 The Supplier must ensure the Action Plan (**ACC266**) Covers the following:
  - 7.1.2.1 A detailed history of the Client;
  - 7.1.2.2 An introduction to the Client of the purpose of the Services, confidentiality issues, and any other concerns the Client may have at the outset;
  - 7.1.2.3 The history of the presenting mental injury or psychological problem, and its causal link to the original personal injury;
  - 7.1.2.4 Functional enquiry regarding current mental status, mood and other compromising psychological or psychiatric symptoms;
  - 7.1.2.5 Personal, educational, social and occupational history;
  - 7.1.2.6 Medical and psychiatric history;
  - 7.1.2.7 Client goals and motivation;
  - 7.1.2.8 A risk assessment;
  - 7.1.2.9 Named Service Provider's plan of action, including further treatment, which details how functional objectives will be achieved to meet the expected outcomes of the Referral; and

- 7.1.2.10 Written agreement with an initial assessment where an independent assessment has been conducted, or written explanation including an extensive rationale of any variance to the initial assessment.
  - 7.1.3 The Supplier must ensure that Assessment Reports are in the Service provider's own format and are submitted to ACC with the Action Plan.
- 7.2 On receipt of the Action Plan ACC will review and either:
  - 7.2.1 Approve the next service item(s) within seven (7) working days; or
  - 7.2.2 Return the Action Plan report to the Supplier where further information is required or does not meet ACC quality standards. The supplier is required to address the issues raised with the Action Plan and resubmit within ten (10) business days from the date of return, and at no cost to ACC.
- 7.3 Progress Reports
  - 7.3.1 The Supplier must ensure the Named Service Provider submits a Progress Report, as provided on ACC's website (**ACC267**) to ACC and the Client's General Practitioner or primary care health provider at the following intervals:
    - 7.3.1.1 Early Intervention and Planning stage; and
    - 7.3.1.2 at the midpoint of the approved Psychological Services period.
  - 7.3.2 While undertaking the Progress Report, the Supplier must ensure:
    - 7.3.2.1 the Named Service Provider completes all sections Progress Report including parts that are relevant for the Client; and
    - 7.3.2.2 works in coordination with all active rehabilitation service providers approved by ACC; and
    - 7.3.2.3 any other information that is relevant to the Client's care and injury needs.
  - 7.3.3 ACC may require the Supplier and the Named Service Provider to share information with a healthcare provider for a specified purpose (where it is necessary and appropriate and subject to the Client's consent).
  - 7.3.4 On receipt of the Progress Report, ACC will review and either:
    - 7.3.4.1 Approve the next service item(s) within seven (7) working days; or
    - 7.3.4.2 Return the Progress Report to the Supplier where further information is required or it does not meet ACC quality standards. The supplier is required to address the issues raised with the Progress Report and resubmit the Progress Report within ten (10) business days from the date of return, at no cost to ACC.

## 7.4 Completion Reports

- 7.4.1 On completion of the Psychological Services, the Supplier must ensure:
  - 7.4.1.1 the Named Service Provider submits a Completion Report (**ACC268**) to ACC and the Client's General Practitioner or primary health care provider within the relevant timeframes stipulated in Part B Table 6 of this Service Schedule; and
  - 7.4.1.2 ensure the Named Service Provider has completed all sections of the report including those that are relevant for the Client.
- 7.4.2 On receipt of the Completion Report, ACC will review and either:
  - 7.4.2.1 Approve the next service item(s) within seven (7) working days; or
  - 7.4.2.2 Return the Completion Report to the Supplier where further information is required or it does not meet ACC quality standards. The supplier is expected to address the issues raised with the Completion Report and resubmit the Completion Report within ten (10) business days from the date of return, at no cost to ACC.

## 8. SERVICE SPECIFIC QUALITY REQUIREMENTS

### 8.1 Service provider requirements

- 8.1.1 The Supplier is responsible for ensuring all Service Providers (**Named Service Providers and Named Assessment Service Providers**) delivering Services under this Service Schedule comply with all qualifications, registration and membership, experience and competency criteria set out in Part B: Table 4, below of this Service Schedule.
- 8.1.2 The Supplier must maintain records demonstrating that each Service provider has been evaluated and complies (and continues to comply) with the requirements outlined below. This includes, but is not limited to, current registration status, demonstrated competencies, and (where applicable) Psychological Services Supervision logs. The Supplier must provide these records to ACC immediately upon request.
- 8.1.3 The Supplier will deliver the Services with the Named Service Providers specified in Part A, clause 3 (or subsequently added as Named Service Providers by ACC pursuant to Part B, clause 8.2), in the course of providing Psychological Services to Clients.

## 8.2 Addition of Named Service Providers

- 8.2.1 The Supplier may, at any time during the Term of this Service Schedule, make a written request to ACC that a psychologist be added as a Named Service provider. The written request must include sufficient information for ACC to determine whether the proposed Service Provider meets the criteria listed in Part B, Table 4 and will comply with the Supervisory requirements under Part B, Clause 8.7.
- 8.2.2 ACC may in its sole discretion accept or decline each such request, by providing written notification to the Supplier. Agreement to such a request may be made subject to conditions.
- 8.2.3 If a request is accepted under this clause 8.2, the psychologist shall be deemed added as a Named Service provider from the date of ACC's written notification to the Supplier.

## 8.3 Removal of Named Service Providers

- 8.3.1 The Supplier may, at any time during the Term of this Contract for Psychological Services, provide written notification to ACC that a Service Provider has ceased to be a Named Service provider for Psychological Services. The Service provider shall be deemed to be removed from this Service Schedule, five Business days after receipt of the Supplier's notice by ACC.
- 8.3.2 ACC may, at any time during the Term of this Service Schedule for Psychological Services, provide written notification to the Supplier that a Named Service provider is to be removed from this Service Schedule for Psychological Services. The Service provider shall be deemed to be removed from this Service Schedule, five Business days after receipt of ACC's notice by the Supplier. ACC shall not issue such a notice arbitrarily.
- 8.3.3 The Supplier must ensure all Clients of the removed Named Service Provider are:
  - 8.3.3.1 safely transitioned to another Named Service Provider;
  - 8.3.3.2 provided with full support, information and assistance for a smooth, efficient and effective transition;
  - 8.3.3.3 ensure the transition is in a manner which minimises disruption to, or adversely impact the Clients; and
  - 8.3.3.4 undertake any other steps as required by ACC.

#### 8.4 Supervision Requirements for Provisional Service Providers

8.4.1 The Supplier is responsible and must ensure all Provisional Service Providers meet and undertake the following supervision requirements:

8.4.1.1 Have an arrangement in place for ongoing supervision with an appropriately qualified and experienced supervisor who has experience treating and assessing Clients with psychological problems following physical injury and traumatic incidents, including experience in ACC mental injury assessments and meets the criteria detailed in Part B, Table 4;

8.4.1.2 Discussion of all cases with the supervisor prior to and following the assessment;

8.4.1.3 Engagement in fortnightly one-on-one supervision with the supervisor;

8.4.1.4 Maintenance of a supervision log which outlines the cases discussed and provides a summary of issues and recommendations for each case; and

8.4.1.5 Have each Assessment Report and each Treatment Report read and co-signed by the supervisor.

8.4.2 The Supplier must submit to ACC upon the completion of the above and compliance with the experience and competency criteria set out in Table 4 the following:

8.4.2.1 A final supervision report from the supervisor, supervision log, and two anonymised mental injury assessments (if applying for full Named Assessment Service Provider status). This supervision report and supervision log should be received by ACC within 36 months of approval of provisional status.

8.4.2.2 A summary letter or other document outlining how the above requirements have been met over the provisional period.

8.5 The Supplier must ensure that each Named Assessment Service Provider providing Assessments to determine Cover or Treatment Reviews meets the criteria detailed in Part B, Table 4.

#### 8.6 Supervision required by all Named Service Providers

8.6.1 The Supplier will ensure that all Named Service Providers will have a supervisory agreement in place with a professional peer who is appropriately experienced, qualified and has substantive ACC Mental Injury Assessment experience for the Services being provided.

- 8.6.2 The Supplier will provide ACC with the contact details and qualifications of all Named Service Providers’ supervisors on request and within ten working days of the request.
- 8.7 New Named Service Providers require additional supervision
- 8.7.1 The Supplier must ensure that service providers who are new to providing mental injury assessments for ACC, obtain supervision from a supervisor who is an experienced ACC Named Assessment Service Provider.
- 8.7.2 The supervisor needs to be an approved Named Assessment Provider with ACC and must review and co- sign a minimum of the Named Service provider’s first 10 mental injury assessments prior to the Named Service provider supplying them to ACC. The purpose of this is to ensure the new Named Service provider’s early reports are of the quality required.
- 8.8 Competency Levels
- 8.8.1 The Supplier must ensure that all Service Providers are clinically and culturally competent, appropriately experienced, trained and qualified to provide Psychological Services.
- 8.8.2 The Supplier must have in place a system that identifies and monitors clinical and cultural competency levels, training needs and compliance with training requirements by Service providers to ensure that all requirements in this Contract are met.
- 8.9 Training
- 8.9.1 The Supplier must ensure that all Service providers who provide Psychological Services will have satisfactorily completed recognised courses to further develop, refresh and update their skills and knowledge.

**Part B: Table 4 – Named Service Provider Qualifications, Registration and Membership, Experience and Competency Criteria**

<b>Service Provider</b>	<b>Registration and Membership</b>	<b>Experience</b>	<b>Competency</b>
Named Treatment Service Provider	<p>Must hold current registration and annual practising certificate with the New Zealand Psychologists Board – with a scope of practice in one of the following:</p> <ul style="list-style-type: none"> <li>- Clinical Psychologist</li> <li>- Psychologist</li> <li>- Counselling Psychologist</li> <li>- Neuropsychologist</li> <li>- Educational psychologist</li> </ul>	<p>Must have a minimum of one-year postgraduate clinical practice experience in working with Clients who have mental health difficulties associated with physical injuries (excluding clinical placements and internships).</p>	<p>Must demonstrate competency in the following areas (and be able to support this with evidence):</p> <ul style="list-style-type: none"> <li>• Ability to identify and apply best available current evidence in professional practice and decision making.</li> <li>• Ability to apply appropriate screening, outcome measurement and data collection tools to professional practice and decision making.</li> </ul>

Service Provider	Registration and Membership	Experience	Competency
	<ul style="list-style-type: none"> <li>• Must have a qualification that meets at least Level 6 of a NZQA recognised course of study, which includes in its content:               <ul style="list-style-type: none"> <li>- abnormal psychology;</li> <li>- skills in two or more models of therapeutic intervention;</li> <li>- human development and knowledge</li> <li>- Basic assessment skills</li> <li>- therapeutic intervention skills; and</li> <li>- family dynamics.</li> </ul> </li> <li>• Must hold current membership of at least one of the following:</li> <li>• New Zealand Psychological Society</li> <li>• NZ College of Clinical Psychologists; or</li> <li>• An international professional body acceptable to ACC.</li> </ul>	<p><b>NOTE:</b> Where a Service provider does not meet this experience criteria the Supplier must comply with the Supervision requirements outlined in Part B, clause 8.4 for that Service provider</p>	<ul style="list-style-type: none"> <li>• Maintains and improves knowledge, skills and new evidence for practice.</li> <li>• Reflects on practice to inform current and future reasoning and decision-making and the integration of theory and evidence into practice.</li> </ul>
Named Assessment Service Provider	<p>Must meet the requirements <b>above</b> and further:</p> <p>Have a qualification which meets at least Level 8 (postgraduate) of an NZQA recognised course of study, which includes in its content:</p> <ul style="list-style-type: none"> <li>- assessment, classification and formulation;</li> <li>- abnormal psychology;</li> <li>- skills in two or more models of therapeutic intervention;</li> <li>- human development; and</li> <li>- knowledge and skills in the use of psychometric tools;</li> </ul>	<p>Must have a minimum of two years equivalent full-time postgraduate clinical practice experience in working with Clients who have mental health difficulties associated with physical injuries (excluding clinical placements and internships).</p>	<p>As <b>above</b>, and must demonstrate knowledge of, and competency in using, the most recent version of the following classification systems:</p> <ul style="list-style-type: none"> <li>- Diagnostic and Statistical Manual of Mental Disorders (DSM, e.g., DSM-5)</li> <li>- International Classification of Diseases (ICD, e.g., ICD-11)</li> <li>- Psychodynamic Diagnostic Manual (PDM e.g., PDM-2)</li> <li>- Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:0-, e.g., DC:0.5).</li> </ul> <p>Such classification systems may be used in isolation or in combination with multivariate statistical and psychometric approaches.</p>
Provisional Named Service Providers	<ul style="list-style-type: none"> <li>• A Provisional Named Treatment Service Provider must meet all the Qualification, Registration and Membership requirements applicable to a Full Named Service Provider (Treatment) above.</li> </ul>	<p>Where the full experience of a Named Service Provider (Treatment) are not met the Competencies must be demonstrable.</p>	<ul style="list-style-type: none"> <li>• Must be able to demonstrate Service provider qualification requirements (either standard or specified equivalency); and</li> <li>• Must have experience and demonstrate competencies;</li> <li>• Must provide details of on the job training to gain or update the Service provider's experience working directly with Clients who</li> </ul>

Service Provider	Registration and Membership	Experience	Competency
	<ul style="list-style-type: none"> <li>A Provisional Named Assessment Service Provider must meet all the Qualification, Registration and Membership requirements applicable to a Full Named Assessment Service Provider above.</li> </ul>	<p>A Provisional Named Assessment Service Provider must have a minimum of 12 months equivalent full-time postgraduate clinical practice experience in working with and assessing Clients who have mental health difficulties associated with psychological trauma and/or physical injuries (excluding clinical placements and internships).</p>	<p>have developed psychological problems following physical injury and traumatic incidents; or</p> <ul style="list-style-type: none"> <li>Engage in further professional development with specific relevance to working with psychological problems following physical injury and/or traumatic incidents where recent professional development is not thought to be sufficient.</li> </ul>

## 9. PSYCHOLOGY INTERNS

- 9.1 The Services may be provided to Client by Psychology Intern if a Psychology Intern Supervisor is co-located on-site at the relevant Service Location during the Client treatment session. The Supplier may only invoice ACC in relation to these Services in accordance with Part B, clauses 9.2, 9.3, and 9.5, below.
- 9.2 The Supplier acknowledges and agrees that it may only invoice ACC for the Psychology Intern Supervisor's time when and to the extent the Psychology Intern Supervisor has been physically present providing direct supervision to the Psychology Intern during the Client's treatment session. In these circumstances, the Supplier may invoice ACC under the Supervisor's Service provider ID number utilising the psychology intern code in the applicable Service Schedule.
- 9.3 For all other circumstances, including where the Psychology Intern Supervisor is co-located in the building but not physically present providing direct supervision during the appointment, the Supplier must not claim, and ACC will not fund the delivery of the Services under this Contract which are or have been provided by Psychology Interns.
- 9.4 The Supplier must ensure its record-keeping includes what, if any, Services are provided to Clients by a Psychology Intern.

9.5 The Supplier must ensure that the following requirements are met in all circumstances where a Psychology Intern is providing the Services:

9.5.1 The Psychology Intern must adhere to the New Zealand Psychologist's Board's standards of ethical conduct and clinical and cultural competence as well as any best practice guidelines adopted and endorsed by the Board, (these standards are required by the *Health Practitioners Competence Assurance Act 2003*) including:

9.5.1.1 Core Competencies for the Practice of Psychology in Aotearoa New Zealand;

9.5.1.2 Code of Ethics for Psychologists Working in Aotearoa/New Zealand;

9.5.1.3 Cultural Competencies for Psychologists Registered Under the Health Practitioners Competence Assurance Act (2003) And Those Seeking to Become Registered.

9.5.1.4 The Psychology Intern must have a Psychology Intern Supervisor. The Psychology Intern may have a second nominated Psychology Intern Supervisor to provide supervision if the primary Supervisor is not on-site. The Psychology Intern must ensure that their named Supervisor/s is or are co-located on-site and available when undertaking clinical work with ACC Client.

9.5.1.5 Each Supervisor meets all requirements included in the definition of that term above.

9.5.1.6 The Psychology Intern Supervisor/s are registered with the New Zealand Psychologist's Board in the same scope in which the Psychology Intern is undertaking their internship.

9.5.1.7 The Psychology Intern may only see Clients under one Supplier contract.

9.5.2 If the Supplier is hosting a Psychology Intern that will or may provide Services, the Supplier must provide to ACC:

9.5.2.1 An application – (ACC8344 Psychology Intern Application Form), the Psychology Intern's annual practicing certificate, and academic transcript;

9.5.2.2 An induction plan including how the Supplier is going to introduce and educate the Psychology Intern about the Psychological Services;

9.5.2.3 Details of the Psychology Intern's supervision plan and arrangements including:

9.5.2.3.1 the Psychology Intern Supervisor/s details;

9.5.2.3.2 Frequency and model of supervision as determined by the Psychology Intern's university; and

9.5.2.3.3 Informed consent process for Clients.

9.5.3 A written acknowledgement signed by the Supervisor/s which confirms the following:

9.5.3.1 All clinical work undertaken by the Psychology Intern will be overseen by the Supervisor/s, who will maintain responsibility for the Client's care at all times;

9.5.3.2 The Supervisor/s will be co-located on-site when the Psychology Intern is undertaking clinical work with Clients; and

9.5.3.3 The Psychology Intern Supervisor of a Psychology Intern will check and co-sign each report and clinical record completed by the Psychology Intern.

9.5.3.4 The Psychology Intern Supervisor/s is responsible for ensuring that the standard of each assessment and treatment provided is at least equivalent to that of a qualified psychologist.

## **10. SERVICE EXIT**

10.1 The Psychological Services are completed for a Client when:

10.1.1 a satisfactory Completion Report is received by ACC and the Client's General Practitioner or primary health care provider, on completion of the recommended and approved number of sessions; or

10.1.2 ACC advises, or the Service provider recommends and ACC agrees, that the Client ceases to receive Psychological Services due to non-progress or non-attendance, in accordance with Part B, clause 10.2 and 10.3 below (Client has withdrawn).

10.2 Any recommendations to cease due to non-progress or non-compliance from the Client must be made in consultation with ACC and must be accompanied by a report demonstrating non-attendance including:

10.2.1 details of attempts to contact the Client;

10.2.2 letters written (evidence) attempted correspondences with the Client;

10.2.3 measures take to address non-compliance including the presentation of alternatives offered; and

10.2.4 the Client's responses to this contact.

10.3 Where the above attempts have been made but are of no success, ACC require the Supplier to make contact with the Client’s General Practitioner or primary health care provider for assistance and possible referral. The Supplier will make contact with the Client’s General Practitioner or primary health care provider within ACC’s notified timeframe.

**11. PERFORMANCE REQUIREMENTS**

11.1 The Supplier’s performance will be measured as shown in Part B Table 5 – Performance Measurement

**Part B: Table 5 – Performance Measurement**

<b>Objective</b>	<b>Performance measure</b>	<b>Calculation</b>	<b>Target</b>
Timely reporting	The percentage of Mental Injury Assessment Reports and Treatment Progress/Completion Reports submitted within expected timeframes. The Assessment Report and Completion Report are provided within 10 Business days following the Assessment/concluding session.	The percentage of Reports submitted to ACC during the reporting period, are submitted within the required timeframes.	90%
Quality reporting	The percentage of Mental Injury Assessment Reports and Treatment Progress/Completion Reports submitted during the reporting period that meet the quality criteria defined in the Psychological Services Report Guidelines.	The percentage of Reports submitted during the reporting period that meet the quality criteria.	90%

11.2 For each Client that receives the Services, the Supplier will ensure the Named Service Provider submits an Outcome Measures that are appropriate for each Client to ACC through an agreed channel.

11.3 The Outcome Measures will be submitted in accordance with this Contract and any requirements in Report Guidelines.

11.4 ACC will evaluate the Supplier and the Services they provide according to contract reporting and monitoring criteria. This enables ACC to compare the progress and quality of the Supplier’s service delivery with expected performance.

**12. CONTRACT MONITORING REPORTING REQUIREMENTS**

12.1 ACC may request the Supplier to supply further information or reports on the Services provided to Clients. Any request will be reasonable, and the Supplier shall provide the information within 30 days of the request.

12.2 The purpose of such a report is to monitor the progress and quality of Service delivery under this Service Schedule against expected performance in accordance with Part B, clauses 5, 6 and 8.

- 12.3 The evaluation undertaken by ACC may include (but shall not be restricted to):
  - 12.3.1 The processes outlined in this Service Schedule, including the timeliness, appropriateness and cost effectiveness of the Services provided and the ongoing management of this Service Schedule;
  - 12.3.2 Satisfaction of the Referrer with the Service provider and the quality of the Service provider's Services;
  - 12.3.3 Satisfaction of Clients with the Supplier, Service provider and ACC; and
  - 12.3.4 Any other matters reasonably considered to be relevant by ACC.
- 12.4 ACC will regularly review the Supplier's performance by analysing data from the following resources:
  - 12.4.1 data from the ACC database;
  - 12.4.2 data provided to ACC;
  - 12.4.3 complaint records;
  - 12.4.4 health and safety notifications;
  - 12.4.5 provider monitoring reports against key performance indicators (where applicable); and
  - 12.4.6 any other monitoring information supplied to ACC.
- 12.5 The information provided may:
  - 12.5.1 help ACC to identify opportunities to improve the Services, as well as practices that are working well;
  - 12.5.2 be used to set benchmarks for the Supplier and other suppliers;
  - 12.5.3 be used by ACC to publish aggregated performance data that identifies all Suppliers in the relevant region, to ensure that Clients have access to this information; or
  - 12.5.4 may trigger a request from ACC for information from the Supplier, and a requirement to engage in the Service Improvement Process (clause 14 of the Standard Terms and Conditions).

## **13. SERVICE AND REPORTING TIMEFRAMES**

### **13.1 Service Delivery Timeframes**

- 13.1.1 The Service will usually be provided during normal working hours but may be provided after hours or during weekends.

13.1.2 The Supplier must ensure that the Service provider does not carry out more than one Psychological Services session with a Client on any day without prior approval from ACC.

13.1.3 Part B: Table 6, below outlines the timeframes and responsibilities for delivering the Services.

**Part B: Table 6 - Service Timeframes**

<b>Service Activity</b>	<b>Responsibility</b>	<b>Timeframe</b>
Receipt of Referral – to contact the Client	Supplier	Within three Business days
Client has decline to attend the initial appointment	Supplier	within one Business day
Client cannot be contacted – to advise ACC.	Supplier	Within three Business days (clause 6.1.3
Assessment Report submitted to ACC	Supplier	within ten Business days following the assessment
Progress Report submitted to ACC	Supplier	Within three business days
Mental Injury Assessment Reports (ACC 4247) submitted to ACC	Supplier	within 10 business days of the last face to face session with the Client
Client does not attend treatment session	Supplier	within one Business day
Additional Service sessions request	Supplier	two weeks prior to the completion of the initial Psychological Services session
Further approved Services to commence	Supplier	Within 10 Business days

## **14. RELATIONSHIP MANAGEMENT**

14.1 During the Term of this Service Schedule the Supplier will nominate a person (as specified in Part A, clause 5, as the Relationship Manager to be the main contact for ACC who will:

14.1.1 Have primary responsibility for relationships and communication with ACC and the operation of this Service on a day to day basis;

14.1.2 Be proactive in informing ACC of issues with provision of Services as outlined;

14.1.3 Raise issues and suggest solutions regarding this Service;

14.1.4 Ensure that the Service is operated in accordance with this Service Schedule;

14.1.5 Represent the Supplier in discussions on performance; and

- 14.1.6 Ensure that ACC is advised promptly when the person's contact details change.

## **15. BUSINESS REQUIREMENTS**

### **Safety Checks**

- 15.1 To protect and uphold the safety of Clients at all times, the Supplier must:
  - 15.1.1 carry out appropriate screening/vetting, including police vetting, for all Named Service Providers the Supplier engages to deliver the Services under this Service Schedule;
  - 15.1.2 ensure all Service Providers who work with children must complete a 'Children's Worker Safety Check' to ensure they are safety checked to the standard required under the Children's Act 2014 and the Children's (Requirement for Safety Checks of Children's Workers) Regulations 2015;
  - 15.1.3 establish and maintain appropriate systems, processes and security screening practices, for all Service Providers the Supplier engages to deliver Services under this Service Schedule; and
  - 15.1.4 immediately notify ACC of any actual, possible or anticipated issues that could impact the safety of Clients.
- 15.2 If ACC receives any information from any source related to the safety of Clients in relation to these Services, ACC may take steps to investigate and take appropriate action. If ACC considers on reasonable grounds that the safety of a Client(s) may be impacted, ACC can, at its sole discretion, suspend or terminate all or any part of the Services, or this Service Schedule.

### **Continuous Improvement**

- 15.3 The Supplier will have a documented quality improvement plan for their Service to ensure continuous improvement of systems, procedures and process and alignment with Good Industry Practice. ACC may request a copy of the Supplier's quality improvement plan at any time.

### **Risk Management**

- 15.4 The Supplier will have a documented risk management plan which will include evidence of management and mitigation of any identified risks to:
  - 15.4.1 Clients;
  - 15.4.2 Named Service Providers' health and safety; and
  - 15.4.3 Service delivery.
- 15.5 The Supplier will provide its health and safety risk management plans as described in Part B, Claus 16 below ("Health and Safety Risk Management Plan") to ACC on request.

## **Complaints Management**

- 15.6 The Supplier will:
- 15.6.1 maintain and have documented systems for all complaints management processes;
  - 15.6.2 ensure Clients and Named Service Providers are aware of the Supplier's complaints management processes; and
  - 15.6.3 seek to resolve any complaints about the delivery of the Service (including any aspect of the Service delivered by Named Service Providers).
- 15.7 If a complaint cannot be resolved by the Supplier, the Supplier must refer the complaint to ACC.
- 15.8 ACC will investigate and seek to resolve the complaint with the parties involved.
- 15.9 The Supplier must 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. The Supplier will keep ACC informed and provide records if required.

## **16. HEALTH AND SAFETY**

- 16.1 The following provisions in Part B, clause 16 are in addition to the health and safety provisions contained in ACC's Standard Terms and Conditions.
- 16.2 The Supplier and all Named Service Providers must ensure any health and safety risks identified are appropriately managed and monitored throughout the Client's journey. To facilitate this, the Supplier must:
- 16.2.1 identify, monitor, and manage all health and safety risks associated with providing the Services;
  - 16.2.2 ensure all Named Service Providers providing the Services are aware of their health and safety obligations and have appropriate plans in place to manage those risks;
  - 16.2.3 have systems in place to enable all Named Service Providers (including the Supplier's employees) to promptly report any health, safety and security events and risks relating to the Services to the Supplier;
  - 16.2.4 when requested, provide information promptly to ACC relating to the Supplier's compliance with its health and safety obligations; and
  - 16.2.5 immediately notify ACC if there is an imminent threat or risk to the safety of a Client or a Named Service Provider (including the Supplier's employees).

- 16.3 The Supplier must maintain a Health and Safety Risk Management Plan relevant to the Clients that the Supplier and Named Service Provider(s) and employees will be delivering the Services to and the environment the Services will be performed from. The Health and Safety Risk Management Plan must at a minimum:
- 16.3.1 identify health and safety risks which arise in performing the Services;
  - 16.3.2 establish controls to eliminate or minimise those health and safety risks so far as reasonably practicable;
  - 16.3.3 ensure all workplaces, environments, fixtures, fittings and plant (as defined in the Health and Safety at Work Act 2015) are, so far as reasonably practicable, maintained without risk to health and safety;
  - 16.3.4 describe the duties which overlap with other Persons Conducting a Business or Undertaking (PCBUs), as that term is defined by the Health and Safety at Work Act 2015; and
  - 16.3.5 ensure there are arrangements to consult, co-operate and co-ordinate with those other PCBUs in order to manage health and safety risks and events (including accidents, harm or near misses) so far as is reasonably practicable.
- 16.4 The Supplier will ensure the Health and Safety Risk Management Plan also includes (but is not limited to) provisions relating to the management of specific hazards and risks, safe environment practices, incident management, emergency management, personnel engagement and active monitoring and review of hazards and risks to enable continuous improvement.
- 16.5 The Supplier must undertake a pre-qualification check in accordance with Good Industry Practice to confirm its Named Service Providers have appropriate health and safety accreditation and risk management plans in place that protect all workers and others who may be put at risk by the Services.
- 16.6 In addition to the notification obligations contained in ACC's Standard Terms and Conditions, the Supplier must report any health and safety incidents, events and risks related to the Services to ACC via ACC's online health and safety form (available on ACC's website) and at any meetings requested by ACC.

## **17. INFORMATION SECURITY**

- 17.1 In addition to the privacy and information management requirements detailed in ACC's Standard Terms and Conditions, the Supplier must:
- 17.1.1 ensure that Personnel who receives and/or accesses to ACC Client Personal Information from ACC in respect of a Client only does so for the purposes of delivering the Services and in a manner that complies with the Supplier's privacy, security and confidentiality obligations under this Contract;

- 17.1.2 not transmit, transfer, export or store Personal Information and Confidential Information outside of New Zealand and/or Australia;
- 17.1.3 maintain information security systems, procedures and processes in accordance with Good Industry Practice to protect Client Personal Information and Confidential Information against loss or unlawful access, use, modification or disclosure;
- 17.1.4 undertake regular security assurance, monitoring and testing of its information management systems;
- 17.1.5 promptly remediate any identified security vulnerabilities, in accordance with Good Industry Practice;
- 17.1.6 comply with any security information, accreditation and certification requirements requested or notified by ACC from time to time; and
- 17.1.7 ensure and confirm all Named Service Providers meet the requirements in Part B, clause 19.1. before releasing any Client Personal Information or Confidential Information

## **18. CHARGES**

### **18.1 Service Items and Prices**

- 18.1.1 ACC agrees to pay the prices set out at Part A, clause 4 of this Service Schedule, for Services as per the prior approved purchase order for Services provided in accordance with this Service Schedule.
- 18.1.2 The Supplier may invoice ACC for all report writing, after the respective report has been completed, submitted and accepted by ACC.
- 18.1.3 The Supplier may invoice for a non-attendance fee when the client fails to attend a scheduled appointment without giving two (2) working days prior notification to the Named Service Provider.
- 18.1.4 The Supplier must invoice for Travel, as described in Clause 11.2, on a pro-rata basis if more than one Client (ACC and/or non-ACC client) receives services.

### **18.2 Travel by Road**

- 18.2.1 ACC agrees to contribute towards a Service provider's expenses for travel by road in the amounts for each of Travel Time and Travel Distance specified in Part A: [Table 3] of this Service Schedule, and otherwise in accordance with ACC's *Travel Policy for Providers* (available on ACC's website).
- 18.2.2 The Supplier must ensure all Service providers comply with ACC's *Travel Policy for Providers*.

### 18.3 Travel by Air

#### 18.3.1 Air travel is payable by ACC when:

18.3.1.1 ACC has requested air travel to an outlying area that is not the Service Provider's usual area of residence or practice to deliver Services;

18.3.1.2 air travel is necessary for the provision of Services to ACC Client(s); and

18.3.1.3 the Service Provider has received ACC's written approval prior to any air travel.

18.3.2 ACC will only pay for actual and reasonable costs of air travel. The Supplier must retain all receipts of all air travel and provide copies when requested by ACC.

### 18.4 Accommodation Cost

18.4.1 The Supplier can invoice for accommodation costs when a Named Service Provider has been requested by ACC to provide Services in a remote area that is not the Named Service Provider's usual area of residence or practice, and overnight accommodation is necessary.

#### 18.4.2 ACC will:

18.4.2.1 Pay actual and reasonable accommodation costs of up to a maximum specified in Part A, Clause 4 per day with prior ACC approval and receipts provided; and

18.4.2.2 Will not pay for alcohol or other non-service-related costs, including mini-bar expenses.

### 18.5 Remote Clinic Room Hire

18.5.1 The Supplier can invoice for Remote Clinic Room Hire where a Named Service Provider:

18.5.1.1 is requested by ACC to deliver Services that is not the Named Service Provider's usual area of residence or practice; and

18.5.1.2 required to hire rooms for the specific purpose of delivering Services when a room cannot be provided by their Supplier.

18.5.2 Any request for Remote Clinic Room Hire must be made to ACC in writing prior to delivery of the Services. ACC must approve the request before a Remote Clinic Room can be hired.

18.5.3 ACC will only pay actual and reasonable costs and receipts must be retained and produced if requested by ACC.

18.6 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 will be on a pro-rata basis.

## **19. OVERLAPPING SERVICES**

19.1 When Supplier receives a referral, Supplier will check with the Client and/or the referrer, as appropriate, whether the Client is or may be receiving other ACC funded services that overlap with the Services, including integrated care pathways.

19.2 If:

19.2.1 The Client is receiving other ACC funded services that overlap with the Services; or

19.2.2 The Supplier is not able to confirm whether the Client is receiving other ACC funded services that overlap with the Services,

then the Supplier must, prior to commencing Services, obtain:

19.2.3 ACC's prior approval for the Services (unless ACC is the referrer); and

19.2.4 The consent of the Client for any Services that may affect the eligibility of the Client for other ACC funded services that overlap with the Services, including any related risks.

## **20. DOUBLE BILLING**

20.1 The Supplier will not undertake Double Billing.

20.2 If Supplier does undertake Double Billing, Supplier will promptly, upon identifying the Double Billing or being informed of the Double Billing:

20.2.1 provide Supply Correction Information to ACC;

20.2.2 refund any amounts identified in the Supply Correction Information that have been paid by ACC; and

20.2.3 take all reasonable steps to prevent any future Double Billing.

## **21. OVERPAYMENTS**

21.1 If ACC pays an invoice and either Party later determines that there has been an overpayment for any reason, including an error on ACC's part:

21.1.1 that Party will promptly notify the other Party of the overpayment; and

21.1.2 Supplier will, within 10 Business days of becoming aware of, or being notified by ACC about, the overpayment:

21.1.2.1 provide Supply Correction Information to ACC; and

21.1.2.2 refund the overpayment.

## **22. DEDUCTION OR SET-OFF**

22.1 ACC may deduct from or set-off any amount the Supplier owes to ACC under this Contract against any amount or other payment that is or may become owing by ACC to the Supplier under this Contract or any other agreement.

## **23. CONTRACT TRANSITION PLANNING**

23.1 The Supplier must provide ACC with a contract transition plan as specified in this clause 23 (“Contract Transition Plan”) for a Service at either of the following times:

23.1.1 within 6 months of the Date of expiry of this Contract; and/or

23.1.2 promptly and within 10 Business days of either Party providing the other with a Notice to terminate this Contract.

23.2 The Contract Transition Plan must be acceptable to ACC and include:

23.2.1 how Clients receiving the Services from the Supplier will be transitioned to another supplier or any other health, rehabilitation and/or social services as applicable;

23.2.2 the information that will be provided to each Clients about their transition;

23.2.3 how the Supplier will return all Confidential Information; and

23.2.4 how the Supplier will otherwise ensure that the transition does not negatively impact Clients or ACC.

23.3 The Supplier will:

23.3.1 comply with its obligations and the timeframes in the Contract Transition Plan; and

23.3.2 otherwise provide all assistance and information reasonably requested by ACC to ensure a smooth, efficient and effective transition to other ACC services or suppliers of the services in a manner which minimises disruption to, or adverse impact on, Clients and ACC.

23.4 The Supplier is responsible for paying its own costs and expenses incurred in the preparation and implementation of the Contract Transition Plan, unless ACC agrees and the Contract Transition Plan expressly states otherwise.

## 24. ATTACHMENTS

24.1 The following attachments are applicable to this Service:

Code of ACC Claimants' Rights	Can be accessed at: <a href="#">ACC Claimant Rights.pdf</a>
ACC's Kawa Whakaruruhau (Cultural Safety) Policy	Can be accessed at: <a href="#">Kawa Whakaruruhau Cultural Safety Policy.pdf</a>
ACC's Te Whānau Māori me ō mahi Guidance on Māori Cultural Competencies for Providers	Can be accessed at: <a href="#">Te Whānau Māori me ō mahi Guidance.pdf</a>
Telehealth Guidance	Can be accessed at: <a href="#">ACC8331_Telehealth Guide.pdf</a>
Travel Policy for Providers	Can be accessed at: <a href="#">ACC Travel Policy for Providers.docx</a>
Report Guidelines	Can be accessed at: Resources

## 25. DEFINITIONS AND INTERPRETATION

In this Contract, unless the context requires otherwise:

**APC** means an Annual Practising Certificate issued by the New Zealand Psychologists Board.

**Cover (or Cover claim)** means when ACC refers to a Client who has cover for a personal injury under the Accident Compensation Act 2001.

**Face-to-Face** includes in-person and Telehealth, if both the Service provider and Client are in New Zealand, and the Client consents.

**Good Industry Practice** is the exercise of the due care, skill and diligence, and to the appropriate professional or industry standard, as would be expected from a leading supplier or person in the relevant industry.

**In-person** means the Service provider and the Client are physically present in the same room.

**Named Assessment Service Provider** is a Named Service Provider, who meets the additional qualification, experience and other requirements outlined in Part B Table 4 and has been approved by ACC to deliver Assessments under this Contract.

**Named Service Provider/Service Provider** is a provider named under a Supplier's contract and approved to deliver services under this Contract.

**Psychology Intern** means a student engaged in a New Zealand Psychologist's Board accredited postgraduate diploma, masters or doctoral course of studies, to achieve full registration in the clinical psychologist, psychologist, neuropsychologist or counselling psychologist scopes of practice, but who does not as yet have the necessary clinical experience.

**Psychology Intern Supervisor** means a supervisor of a Psychology Intern that meets all the following requirements:

- (a) is registered with the New Zealand Psychologist's Board as a psychologist, clinical psychologist, neuropsychologist, or counselling psychologist scope of practice;
- (b) holds a current annual practicing certificate with the New Zealand Psychologist's Board;
- (c) is a current member of at least one of the following:
  - New Zealand Psychological Society; or
  - NZ College of Clinical Psychologists; or
  - an international professional body acceptable to ACC;
- (d) is an approved ACC Named Service provider with at least two years of clinical experience; and
- (e) is approved by the Psychology Intern's university to provide supervision for Psychology Interns; and
- (f) is allocated to no more than two Psychology Interns during each clinical practicum.

**Psychological Services Report Guidelines** refers to the guidance document that sets out how to correctly complete the ACC report templates relevant to this service. These guidelines are published by ACC and will be updated periodically as required.

**TIMI** means Treatment Injury Mental Injury, which is a mental injury caused by a non-Covered treatment Injury.

**Telehealth** means the use of information or communication technologies to deliver services when Clients and Service 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.

## **PSYCHOLOGICAL SERVICES FORMS TO BE ACCESSED FROM THE ACC WEBSITE**

At [www.acc.co.nz](http://www.acc.co.nz):

- ACC266: Psychological Services Action Plan.
- ACC267: Psychological Services Progress Report.
- ACC268: Psychological Services Completion Report.
- ACC4247: Mental Injury Assessment form which includes the Guidelines for completing mental injury assessment reports.
- Psychological Service Report Guidelines