



MINISTRY OF SOCIAL DEVELOPMENT

Te Manatū Whakahiato Ora

Bowen State Building, Bowen Street, Wellington 6011, PO Box 1556, Wellington 6140 • Telephone: 0-4-916 3300 • Facsimile: 0-4-918 0099

24 APR 2014

AUCKLAND

Dear

Thank you for your letter of 16 January 2014 requesting, under the Official Information Act 1982, information related to the Mental Health Employment Service and Work Ability Assessments.

Mental Health Employment Service

The aim of the Mental Health Employment Service ("MHES") is to support clients on Jobseeker Support with mild to moderate mental health conditions to gain work and achieve sustainable employment. This is achieved through the provision of employment-related case management, placement and post-placement support that is integrated with the individual's current clinical support.

This approach aligns with emerging best practice that points to improvements in people's health and wellbeing where they are engaged in suitable employment.

I will address each of your questions about MHES separately.

1. *Detailed information about the names, addresses and particular services offered by providers the Ministry of Social Development (MSD) has mid to late 2013 entered contracts with, to provide so-called "Mental Health Employment Services". Also requested are details about the numbers of staff (incl. management) they employ, the particular qualifications held by the employees of those providers, the positions they hold and the roles and tasks they perform in dealing with so-called "moderate" mental health sufferers, who are considered suitable for accessing forms of employment.*

Table one shows the names and addresses of MHES providers. You will note that MHES has not been implemented nationwide and that the addresses listed show the office which holds the MHES contract, not where the service is provided.

The Ministry of Social Development does not hold details of external providers' staff such as roles, numbers and qualifications. Therefore, your request for this information is declined under section 18(g) of the Official Information Act. However, I can advise that providers were selected to deliver the MHES based on their demonstrated experience and ability to work with clients with mental health issues and provision of successful employment services.

2. *Details about the fees payable by MSD, the agreed fee structure, the terms for payment of fees, the outcome expectations in the providers AND in the referred*

mental health sufferers on benefits - that were agreed to between MSD and the individual providers. This is also in consideration of established "particular service intensity categorisation", and details about such categorisation would be appreciated.

Table two shows a detailed breakdown of the fee schedule including the service intensity categories. Please note that every client referred to a MHES provider is assigned a service intensity rating by Work and Income. These ratings relate to factors impacting on a client gaining employment and are based on age, gender and other circumstances.

The provider will carry out an individualised needs assessment for each client, to identify their skills, barriers to employment and the support required to overcome these. In conjunction with the client, the provider will develop a plan for the achievement of realistic and appropriate employment opportunities that align with the client's goals and obligations.

- 3. Details about the "wrap-around services" that were mentioned in media reports, like for instance an article in the "Herald on Sunday", dated 30 June 2013 and titled "Govt will pay to shift mentally ill into work", that are intended to support the clients that Work and Income (WINZ) refers to such service providers. What kind of such services have been agreed on, who will pay for them, what are the roles and qualifications of those presumably external "wrap around service" providers offering what kinds of "support"? Information providing details on all this will be appreciated.*

Changes implemented as part of the Welfare Reform programme mean that we now work more proactively with clients who receive Jobseeker Support and have a health condition or disability, to identify the type of support and services a person needs to help get them back into sustainable work. The 'wrap around services' referred to includes things such as our case managers having one-on-one conversations with a client about what they can do and what supports are needed and working with the client to formulate a plan. The MHES also provides a wrap-around service for clients.

- 4. Information on how MSD and WINZ do assess and decide on who as a "moderate" mental health sufferer in benefit dependency will be referred to "Mental Health Employment Services", and what kind of input the affected are allowed to give, to apply any realistic, medically and otherwise justified, fair and reasonable measures, in order to achieve similarly justified, desired outcomes for them. If "independent" medical and work capability assessments were conducted, how many of them were conducted by WINZ designated doctors? Please supply available data on this.*

To meet the initial selection criteria for the MHES a client will:

- be in receipt of Jobseeker Support
- have a common mental health condition as determined by their doctor (for example, clients with depression, stress and/or anxiety, who are cared for in a primary care setting)
- be single or the primary client
- have part-time or deferred work obligations.

Clients who meet these criteria and reside in an area that offers a MHES will receive a call from a Work and Income staff member to advise them that it has services and options to assist people into employment. The client is asked to respond to a series of questions to determine if, with the right support, they would be willing to be involved in activities or a service that might help them to get into work.

If the client agrees to receive this support, they may then be referred to a service provider where capacity exists. If a client tells Work and Income that they do not want to participate, they will be removed from future referrals to the MHES.

The Ministry does not centrally record the number of medical and work capability assessments carried out by a Work and Income designated doctor. This information is held on individual client files. Therefore, this part of your request is refused under section 18(f) of the Official Information Act. This section allows me to refuse a request where substantial collation and research is required to find the information requested.

In this case, to research the information requested, the Ministry would need to manually access and collate a substantial number of individual client files. I do not consider this to be in the public interest as this would remove staff from their core duties and impact on the effective functioning of the Ministry.

- 5. Information on how many beneficiaries suffering "moderate" mental health conditions have to date been referred to such services, how many were approached to consider being referred, how many agreed to be referred, how many refused to be referred, how many have been successfully placed into employment, how many have had to terminate any efforts working with providers of "Mental Health Employment Services", and of them, for what reason did they do so? Records on this are requested.*

As at 27 January 2014:

- 2,930 clients were approached to participate
- 1,754 clients agreed to participate
- 1,176 declined to participate.

Sixty-five clients have achieved an employment outcome. This number continues to increase as clients work through the items on their plan.

Since the MHES started, 328 clients have ended their participation with a provider.

- 6. Information on whether any referred Work and Income clients with mental health conditions suffered any significant medical or psychological problems upon having been referred to such service providers as mentioned above, and what types of problems there were. Also in relation to this, if such cases occurred, what measures were taken by the provider and by WINZ, to offer support for the clients affected, and what records have been kept on this? Please provide the relevant details.*

To date there have been no recorded incidents where a client has suffered significant medical or psychological problems having been referred to MHES. If this situation arises, the service provider will inform Work and Income, who will take the appropriate steps to support the client.

Work Ability Assessments

Work and Income is tailoring the support it provides to help people with a health condition or disability move into work. Following the July 2013 welfare reform changes, Work and Income is taking a closer look at the barriers some people face and the support and services they need to move towards sustainable employment.

From 24 February 2014, this involved referring some Jobseeker Support clients with a health condition or disability to a health or medical specialist to complete a Work Ability Assessment (WAA).

These people would have already been working closely with a case manager but a WAA gives Work and Income a comprehensive assessment of their situation, strengths and what is needed to help them find and stay in work.

The WAA takes a holistic approach to the factors affecting a client's ability to work and identifies the client's ability to work, along with the supports and services required to enable them to secure sustainable work.

As a result of the WAA, Work and Income and participating clients have clearer information about clients' strengths and abilities, the factors impacting on their ability to work, the types of work they can do, and recommendations for supports and services required to help them reach their employment goals.

Please note that WAA is not about benefit eligibility. Clients continue to receive a benefit as long as they meet criteria.

7. *Details about the names, addresses and particular services to be offered, of contracted providers to perform outsourced work capability and/or medical assessments on beneficiaries (or applicants for benefits) that will commence providing services from February this year (2014). I refer to media reports in the 'Otago Daily Times' from 25 Oct. 2013, titled "Tests for disabled 'flawed model'", and 'Stuff.Co', from 03 Nov. 2013, titled "Contractors to assess sick and disabled for work", that mentioned some details on MSD entering contracts with such providers.*

The Ministry has contracted 15 providers to deliver WAA. Table three shows the names and addresses of the WAA providers. You will note that the addresses listed show the office which holds the WAA contract, not where the service is provided.

8. *Please provide also details on the number of staff (incl. management) that these providers will employ, what medical and other qualifications they will hold, what particular roles they will be expected to perform, and what direct interactions they will have with referred sick and disabled on benefits. Furthermore I seek information whether the medical staff will all be registered with particular professional registering authorities listed under the 'Health Practitioners Competence Assurance Act 2003'.*

The Ministry of Social Development does not hold details of external providers' staff such as roles, numbers and qualifications. Therefore, your request for this information is declined under section 18(g) of the Official Information Act.

I can advise you that it was a condition of the Request for Proposals for the provision of WAA that assessors proposed to carry out the assessments with referred clients belong to a profession regulated by the Health Practitioners Competency Assurance Act 2003.

The provider will be responsible for the delivery of an individualised assessment of each referred client to identify what types of work they can do and the supports required for them to achieve and retain employment. This will be carried out by a review of relevant information and a face-to-face assessment.

9. *Please provide details on the agreed fees payable, the fee structure agreed upon, any conditions placed on fees to be paid, the terms for such providers (that will be assessing sick and disabled clients of WINZ) when working with Work and Income to achieve specified outcomes. In this regard I appreciate details on the outcomes that are intended to be achieved under the contracts entered.*

The provider will be paid \$650.00 for the completion of the report.

10. *What expectations will Work and Income place on referred sick and disabled on health related benefits, or applying for such, for them to meet obligations to attend external assessments for medical conditions and work capability, and what sanctions will be applied if a client objects to, or refuses to be examined by a medical or health professional she/he will not agree to. I appreciate your detailed response.*

Clients on benefits have obligations, when asked, to attend the following external assessments:

- Specialist Assessment – this is used to determine medical eligibility for a Supported Living Payment at either application or medical review. The assessments are sought when the permanence and/or severity of a client's condition/s cannot be established using information already obtained by Work and Income. Additionally, specialist assessments provide information that cannot be obtained elsewhere, including information from a designated doctor report
- Work Ability Assessment – this is used to determine a client's strengths, abilities and barriers to work and is carried out by a suitably qualified medical or health professional with expertise in assisting people into work. This assessment helps determine how Work and Income can support the client into suitable employment by building on their strengths and facilitating appropriate supports and services to assist them to find and stay in work.

If a person objects or refuses to attend a Special Assessment or a Work Ability Assessment the reasons for refusing will be discussed with them and the purpose of the WAA will be reiterated. If the client still refuses to attend we will consider if there is a good and sufficient reason for the client not to attend a WAA at this time. A postponement may be considered.

If there is no good and sufficient reason and the client still refuses to attend, the consequences will be discussed and an obligations failure may be initiated. This can affect the rate of benefit the client may receive. A client can re-comply by attending a WAA.

11. *What is the purpose of outsourced medical and work capability assessments, when Work and Income has for years been relying on their client's own doctors' competence to make proper medical diagnosis, or assessments to establish a patient's work capabilities, or alternatively refer their patient to a specialist to provide more specialised examinations and assessments? What is the purpose for these outsourced assessments, when WINZ and MSD have for many years also relied on their own pool of designated doctors to provide second opinions and assessments, where uncertainties or contradictions in reports on conditions existed? Are MSD and WINZ therefore going to stop using information from clients' GPs and other medical professionals they have traditionally tended to rely on? Any information offering clarification on these questions is appreciated and expected.*

Work and Income supports many disabled people and people with health conditions to prepare and look for suitable, sustainable work. Work and Income will not stop using information from clients' GPs and other medical professionals to determine clients' eligibility and work capabilities.

However, in a few cases, Work and Income may need expert external advice on a client's work capacity, and the supports and/or services they may need, and refer the client for a Specialist Assessment or a Work Ability Assessment.

12. *As media reports have stated, it is anticipated that such assessments by outsourced service providers will take up to 3 hours and include examinations and face to face interviews. This will by some be seen as unreasonable, and as putting unnecessary stress and pressures on already sick, incapacitated and disabled person suffering from various conditions, including mental illnesses. What accommodations will be made to offer affected persons needed support - like time and space to recover from stress they may then experience. Also, will affected clients be allowed to bring along support persons to such assessments? I appreciate information on these aspects.*

Work and Income estimates that Specialist Assessments and Work Ability Assessments will take approximately three hours to complete. The time the assessor is expected to spend with the client is approximately one hour. The other two hours is expected to be used to review relevant information and to prepare a report that sets out the findings of their assessment.

At the time of referral for a Specialist Assessment or a Work Ability Assessment, Work and Income will identify, with clients, any support they need in order to attend and participate. It is a person's right to bring a support person with them.

13. *What will the interviews consist of, what questions will be asked of the persons to be assessed in the above mentioned outsourced assessments by private operators? If available I would appreciate a list of the proposed questions that have been agreed on between the Ministry of Social Development and the particular providers.*

Appendix one details the proposed questions to be asked by the Work Ability Assessor during the assessment.

I hope you find this information about the Mental Health Employment Service and Work Ability Assessment helpful. You have the right to seek an investigation and review of my response by the Ombudsman, whose address for contact purposes is:

The Ombudsman
Office of the Ombudsman
PO Box 10-152
WELLINGTON 6143

Yours sincerely

A handwritten signature in black ink, appearing to read 'Debbie Power', with a small dot at the end.

Debbie Power
Deputy Chief Executive Work and Income

Table One: Mental Health Employment Service providers broken down by region and address

Region	Provider and address
Auckland	Workwise Employment Ltd 293 Grey Street Hamilton
	West Auckland Living Skills Homes Trust Board 8 Hickory Ave Waitakere
	Elevator Group Inc Level 1, 1 Marewa Road Greenlane Auckland
	Edge Employment 215 Wairau Road Glenfield North Shore
	Framework Trust Level 11 57 Market Road Epsom Auckland
	APM Employment 331 Rosedale Road Albany
Canterbury	APM Employment 3 Pilgrim Place Sydenham Christchurch
	Workwise Employment Limited 293 Grey Street Hamilton
Southern	APM Employment 331 Rosedale Road Albany
Waikato	Workwise Employment Limited 293 Grey Street Hamilton
	APM Employment 331 Rosedale Road Albany

Table Two: Mental Health Employment Service provider fees schedule per contract

Enrolment and Activity Fee

Table A – Enrolment and Activity Fee (GST Exclusive)		
Medium SI Rating	High SI Rating	Very High SI Rating
\$500	\$1,000	\$1,000

Employment Placement Fee

Table B – Employment Placement Fee (GST Exclusive)				
Hours of Employment	Medium SI Rating	High SI Rating	Very High SI Rating	Very High SI - subsidy accessed*
5 to 20 hours per week	\$750	\$1,250	\$2,500	\$1,000
21 to 30 hours per week	\$1,125	\$1,875	\$3,750	\$1,500
30 plus hours per week	\$1,500	\$2,500	\$5,000	\$2,000

Six and Twelve Month Continuous Employment Fees

Table C – Continuous Employment Fee (GST Exclusive)				
Hours of Employment	Medium SI Rating	High SI Rating	Very High SI Rating	Very High SI - subsidy accessed*
5 to 20 hours per week	\$500	\$750	\$1,500	\$1,500
21 to 30 hours per week	\$750	\$1,125	\$2,250	\$2,250
30 plus hours per week	\$1,000	\$1,500	\$3,000	\$3,000

Notes:

“SI” is Service Intensity.

“Very High SI – subsidy accessed” is when the provider will receive the above at six and twelve month milestones if still in continuous employment.

The scaling of these fees is reflective of the resources and expenses providers outlay.

Table Three: Work Ability Assessment providers broken down by region and address

Provider	Service Delivery region	Head Office Address
APM Workcare	National	331 Rosedale Road Albany
Catapult Employment Services Trust	Canterbury	478 Barrington Street Addington Christchurch
Company Medic (Robust Medic Ltd)	Northland	51 Port Road Whangarei
ECS Connections Ltd	Taranaki, Central	16 Puketotara Street Highlands Park New Plymouth
Enableworks Ltd	Canterbury	61 Mandeville Street Christchurch
Linkage Limited (Wise Group)	Auckland, Waikato, Taranaki, Central, Wellington, Canterbury	293 Grey St Hamilton East Hamilton
Mana Recovery Trust	Wellington	2A Upper Main Drive Porirua
OTRS Group Ltd	Auckland, Waikato, Bay of Plenty	20 Palmerston Street Hamilton
ProActive Rehab	Northland, Auckland, Waikato, Bay of Plenty, East Coast, Taranaki, Central, Wellington	17 Parumoana Street Porirua
PhysioACTION Limited	Auckland	418 Glenfield Road Glenfield North Shore Auckland
Southern Rehab	Nelson, Canterbury, Southern	Level 1, 29 Byron Street Sydenham Christchurch
Te Oranganui Iwi Health Authority	Taranaki	57 Campbell Street Whanganui
WALSH Trust	Auckland	8 Hickory Ave Waitakere Auckland
Wayne Hudson Physiotherapy Ltd	East Coast	76 Wellesley Road Napier
WorkRehab Ltd	Nelson, Canterbury, Southern	10 Nazareth Avenue Middleton Christchurch

Appendix One: Proposed questions to be asked by the Work Ability Assessor during the Work Ability Assessment

Are there any health conditions / disabilities affecting the client's ability to work? (If yes, please describe). How do these impact on the clients ability to work?

What does the client see as their main abilities to work?

What do you (the assessor) see as the client's main abilities to work?

What does the client see as their main barriers to work? How are these being managed or treated?

What do you (the assessor) see as the client's main barriers to work?

Please summarise your key observations as to the client's abilities and barriers for each of the areas below.

- *Work experiences (eg strong work ethic, interpersonal conflict)*
- *Psychological (including cognition, mood and behaviour)*
- *Physical (including mobility)*
- *Social (including ability to communicate, connection with family and community)*
- *Medical (including treatment and equipment)*
- *Other*

Given what you know about the client and their circumstances, please describe the types of work that are best suited to the client and why?

Describe the types of work the client should avoid and why (eg client should not work directly with public as they don't cope well dealing with others)

Please describe any strengths that could help the client to find or stay in work (eg strong family and community connections, positive approach to life, motivated, regular exercise)

Please outline any strategies that will increase the client's independence and help them reach their employment goals (eg community participation, exercise routine)

In your opinion, how many hours can this client currently work in suitable employment outlined above?

- *Full time (30 hours or over)*
- *Full time (30 hours or over) with accommodations (please describe further below)*
- *Part-time (15 – 30 hours): Hours details: _____ hours per day, _____ days per week*
- *Less than 15 hours per week Hours details: _____ hours per day, _____ days per week*
- *Cannot work at all*

What supports and services may assist the person to find and stay in suitable work?

- *Employment Support (including educational and vocational supports and services)*
- *Health condition / disability support (including medical, physical, psychological)*
- *Other (including support to overcome other significant issues)*

If these supports and services were put in place how many hours per week do you think this client could work in suitable employment?

- *Hours details: _____ hours per day, _____ days per week*