

# **Review of the Code of ACC Claimants' Rights: Year One Review**

ACC

May 2004

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## Executive Summary

### Perceptions of the Code

- The Accident Compensation Corporation (ACC) receives unanimous support from complainants, advocates and branch managers for putting the Code of ACC Claimants' Rights into place in February 2003.
- The Code is seen as being on a par with other codes such as the Code of Health and Disability Services Consumers' Rights. It is considered to enhance ACC's overall reputation as an organisation that puts its clients first, and one that is serious about treating clients respectfully and fairly.
  - Complainants and advocates appreciate the Code most for setting out clear expectations about the service to expect from ACC, and for offering a well defined complaints process
  - Staff value the Code as an important management tool which provides strong guidelines for interactions with claimants, and as a mechanism to assist in ongoing improvement and modification of ACC systems and services.
- The eight Code Rights and their corresponding obligations are generally praised for encompassing all aspects of service which claimants can expect – both in terms of staff *behaviour* (e.g. adequate communication and information flows) and staff *attitudes* (e.g. treating claimants with dignity and respect).
  - The Rights are necessarily based on broad principles around service and fairness, and do not provide specific directives for staff behaviour. As such, a feeling that they are somewhat open to subjective interpretation persists among some ACC staff and some claimants (whose complaints are not upheld).
- There is some divergence in understanding of the Code's overall purpose. Claimants do not seem to recognise their obligations within the **spirit** of the Code – i.e. their responsibilities towards a partnership with ACC based on 'mutual trust, respect, understanding and participation'.
- Awareness of the Code and its corresponding complaints process has gradually increased over the past year. However, there are indications that many claimants (and some staff) have only a 'surface level' understanding of the Code and its implications.
  - There are some disparities in awareness of the Code between different ethnic groups, with lower awareness amongst Maori and Pacific peoples claimants, but these appear to be diminishing.

## Impact of the Code on claimant satisfaction

- It is not possible to conclude that the Code has had a positive impact on overall claimant satisfaction with ACC. Claimant satisfaction levels with ACC were tracking upwards before the Code was introduced, and they have continued to track upwards since the Code's implementation.
  - The positive impact of the Code is suggested by the fact that claimants who are aware of the Code are slightly more likely to be satisfied with ACC's service than those who are not. (Throughout Year One, the proportion of those who were satisfied with ACC was consistently higher amongst those who were aware of the Code, by 2 to 5 percentage points).<sup>1</sup>

## ACC's compliance with the Code

- The majority of claimants perceive that ACC follows the Code of ACC Claimants' Rights, with the level increasing slightly during the course of Year One.
  - However there is room for improvement. One in six long-term claimants say they perceive that ACC does not comply with the Code - although when asked, most of these individuals are unable to specify a Code Right that they believe ACC has breached.<sup>2</sup>
- Branch Managers are confident that in the main, ACC staff do adhere to the Code. However they highlight barriers to Code compliance:
  - ACC at times may overload claimants with information and claimants may not remember what they have and have not been told. Despite Case Managers' best efforts to explain processes and provide adequate information, claimants may still feel that staff have *not communicated effectively* (a breach of Right 5) and/or *not kept them fully informed* (a breach of Right 6)
  - There is a small core of claimants who do not like ACC and whose expectations will never be met. These people can be extremely litigious and openly discuss future complaints they may lodge.
- Relative to the claims base, the total number of complaints received by ACC has increased by 4% since the Code was introduced (or 9% in real terms). The increase is significantly lower than projections made before the Code was introduced (up to 22% increase was projected).
  - There were a total of 1200 complaints (Code and non-Code) in 2003, and the number of issues was 2732
  - Code complaints represent around two thirds of all complaints to ACC.

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<sup>1</sup> ACC Network Survey (October-December 2003)

<sup>2</sup> ACC Network Survey (October-December 2003)

- Around one third of all Code complaints are upheld by ACC. The most common Code complaints, and the ones most frequently found to be breached by staff are about ACC *not communicating effectively* (Right 5) and not keeping claimants *fully informed* (Right 6).
  - The next most frequent Code complaints are being *treated fairly and having views considered* (Right 2), and being *treated with dignity and respect* (Right 1).
- The peer review system used by the Complaints Service is considered a good 'safety check' which enhances the quality of decisions made by Complaints Investigators. 17 complainants sought a formal Review of the complaint decision in the past year, and of the 7 files reviewed by DRSL in that time only one was modified.

## Perceptions of the Code Complaints process

- The Review has highlighted several **overriding issues** about the Code complaints process which permeate through all aspects of claimants' and advocates' perceptions of the process:
  - *False expectations* among claimants and claimant advocates about what a Code complaint can achieve. This stems from confusion about Code versus non-Code complaints issues (i.e. claimants confuse entitlement issues with Code issues), and to a lesser extent, a lack of awareness about the limited nature of remedies currently available
  - Concerns among claimants and claimant advocates about the overall *independence* of the Complaints Service – namely that as part of ACC it has an inherent bias towards ACC staff. This contrasts with the perception of ACC Branch Managers who believe the Complaints Service and DRSL err on the side of claimants
  - A perceived *lack of transparency* in the complaint process, both while the complaint is being investigated, and after a decision is reached. Complainants would prefer more opportunities for genuine dialogue with ACC about the complaint, and an insight into actions taken to ensure that similar Code breaches do not occur in future.
- Complaints processes appear to be working smoothly and effectively. Initiatives implemented by the Complaints Service to streamline and improve services are having a noticeable and positive impact.
  - Moving the 0800 number service to the Inquiry Service Centre (ISC) for day-to-day management has been a particular success, allowing the Complaints Service to focus on complex complaints in a thorough and comprehensive manner
  - Efforts are being made to improve the ISC's capture of data about complaints and concerns.
- Complainants are generally positive about the actual steps involved in making a Code complaint. Overall satisfaction with the complaints process can largely be attributed to complaint *outcome*.
  - Results from an October 2003 survey of complainants (including both Code and non-Code complainants) show that 76% of those whose complaint is upheld are satisfied with

the process, compared with 13% satisfaction amongst those whose complaint is not upheld.

- Resolutions and remedies offered to claimants whose Code complaint has been upheld largely fail to meet complainant expectations and needs.
  - The apology letter is generally viewed as an 'empty remedy' with no sincerity underlying it. Many view it as a 'form' letter that lacks personalisation
  - Claimants' desire for remedies often includes a change of Case Manager or information about penalties for Case Managers, but this creates tensions with ACC's legal response as an employer.
  
- DRSL staff and advocates who have experience of the Code Review process are keen to see it improved. Presently Code Reviews are seen to be process-driven, and in most cases do not provide a satisfactory solution for either ACC or the complainant.

The dissatisfaction appears to stem from a fundamental difference between DRSL's view of the purpose of a Complaints Review ('an opportunity to look at all the evidence afresh'), and the Complaints' Service view ('an opportunity to check that the complaint has been investigated properly and a fair and reasonable decision made').

# Conclusions and Recommendations

## Conclusions

The Year One Review aimed to answer four key questions. Our conclusions for each of these are summarised below.

### 1. *How effective was/is the public notification process for the Code?*

- The public notification process for the Code appears to have been effective, given that there is 75% total awareness amongst the claimant population after one year of the Code being in place, and that the level of awareness of the Code has shown a gradual improvement over the year. Posters and pamphlets have been an important part of the publication notification process, followed by Case Manager communication to claimants.
- However there is a need to continue work in this area to ensure that claimants *and* staff have more than a 'surface level' understanding of the Code and its implications.
- There is also a need to ensure that disparities in awareness of the Code between different ethnic groups are addressed.

### 2. *Is ACC achieving the level of service required by the Code?*

- In the main, it appears that ACC staff are upholding the service standards outlined in the Code.
  - Only a small minority of claimants perceive that ACC does not comply with the Code
  - Customer satisfaction with ACC has continued on an upward trend since the Code was introduced
  - Despite the fact that the Code provides a formalised and accessible forum for dissatisfied clients to make complaints to ACC, complaint levels have only marginally increased
  - Qualitative research highlighted that many complainants view their complaint issue as a 'one-off' rather than evidence of poor service standards throughout ACC.
- We can assume that the service areas with very low levels of Code complaints (and low levels of upheld complaints) are those where ACC staff are generally achieving Code standards. These areas are:
  - Right 3 – To have culture, values and beliefs respected (2% of all Code complaints issues)
  - Right 4 – To a support person (2% of all Code complaints issues)

- Right 8 – To complain (3% of all Code complaints issues)
- Right 7 – To have privacy respected (6% of all Code complaints issues).
- Areas triggering higher levels of Code complaints (and higher levels of upheld complaints) can be assumed to be those where ACC staff are less likely to be upholding Code standards. These are:
  - Right 5 – To effective communication (28% of all Code complaints issues)
  - Right 6 – To be fully informed (26% of all Code complaints issues)
  - Right 2 – To be treated fairly and have views considered (19% of all Code complaints issues)
  - Right 1 – To be treated with dignity and respect (16% of all Code complaints issues).

### **3. Is ACC dealing with claimants in a way that meets expectations?**

- We can conclude from the Year One Review that the Code complaints process generally meets claimant expectations with regard to:
  - The method for lodging a complaint, and the accessibility of the 0800 number
  - The sequence and nature of individual steps in the complaints process
  - Timeliness of response (if the complaint is processed during timeframes currently being achieved by the Complaints Service).
- However, clients appear to be being disappointed by the current process with regard to:
  - Opportunities for dialogue with ACC, and the chance to 'be heard'
  - Nature of remedies and resolutions
  - The Review process.
- There is still a degree of claimant and advocate confusion about the difference between Code and non-Code complaints. False expectations stemming from this issue inevitably lead to claimant disappointment with the process.

### **4. Is ACC is currently recording sufficient data to enable a thorough external evaluation in 2005?**

A decision was made by the Code of ACC Claimants' Rights Steering Committee to undertake a one-off external evaluation of the Code, to be undertaken post-implementation. Data requirements for external monitoring and reporting measurements were listed in a Steering Committee Decision Paper (2 August 2002). Litmus has checked this list against current data collection and concludes:

- The quarterly Network Claimants Survey and the annual Complaints Service Customer Satisfaction Monitor will provide much of the data needed for the external evaluation in 2005.

- The Network Claimants Survey is the best vehicle to measure awareness of the Code, and general perceptions about ACC's compliance with the Code. However, it does not include a measure that directly links the Code with claimant satisfaction.
  - The Complaints Service Customer Satisfaction Monitor is the best vehicle to measure satisfaction with the complaints process, and the relationship between satisfaction and complaint outcome. However, a coding issue was evident with the previous measure and will need to be addressed in future measures (in October 2003 the proportion of complainants who said they made a Code Complaint did not accurately reflect the complainant population). The current survey does not cover complainant perceptions of remedies.
- Complaints Service database systems are adequate to provide basic information about the number and type of Code complaints, Code complaint outcomes and complaint processing times.
  - DRSL data collection appears to be adequate to provide data around Code Reviews.
  - There does not appear to be any provision for measuring staff perceptions in relation to the Code. (Unless there is a regular staff survey which could be modified to include Code questions).

## Recommendations

The Year One Review aimed to enable ACC to make general improvements to Code operation before the external evaluation in 2005 (e.g. processes, communication of the Code, and effectiveness). It was not intended to consider substantive changes to the Code itself, nor to prescribed Code processes.

Key recommendations arising from the Year One review of the Code are as follows:

- Continue efforts to raise awareness and understanding of the Code, amongst both claimants and staff.
  - Address disparities in awareness between different ethnic groups.
- Promote the 'spirit' of the Code more effectively to claimants, to make them aware of their obligations towards a successful working relationship with ACC.
- Implement strategies to better manage claimant and advocate *expectations*.
  - Promote a better understanding of the difference between Code and non-Code complaints, to prevent non-Code complaints being lodged in the guise of Code complaints
  - Work with advocates to ensure that they are not giving claimants false hopes in terms of the remedies available to them under a Code complaint.
- Improve communication with complainants to increase perceptions that the Complaints Service is 'genuinely listening'.
  - Use verbal communication to claimants where appropriate, to assist in the speediness of response, and to help claimants feel truly listened to
  - Develop an 'interim update' letter to send to complainants who do not receive a Statement of Events, to ensure that they are not 'left in the dark' between the time they receive an acknowledgment letter and the Code complaint decision.
- Continue initiatives to help understand the underlying causes of Code complaints, and ways to ensure staff adhere to the Code.
  - Target the most common areas of Code complaints – i.e. Right 5 (*communicating effectively*), Right 6 (*keeping claimants informed*), Right 2 (*treating claimants fairly and considering their views*) and Right 1 (*treating claimants with dignity and respect*)
  - Focus on ways to address the higher number of Code complaints among long term ACC claimants, and repeat complainants.

- Continue efforts to encourage resolution of issues between ACC and claimants at the 'front end' – i.e. at Case Manager and Branch Manager level, thus preventing the need for a formal complaint.
- Address criticisms of Code complaint remedies and resolutions, if necessary using 'creative solutions'.
  - Find ways to show complainants that their Code complaint issue has genuinely been resolved, and things put in place to ensure the issue will not arise in future, without compromising ACC's employer obligations to staff
  - In particular, promote more sincere, tailored apology letters.
- Continue the 6-month trial of ISC answering the 0800 complaints line.
- Develop mechanisms for more effectively tracking concerns and complaints that do not ultimately end up being dealt with by the Complaints Service.
  - This could include surveys of ISC calls relating to concerns and complaints over a fixed time period, and implementing data capture processes at branch level.
- Continue work to streamline and speed up the complaints process (whilst ensuring that streamlining processes do not adversely affect the ability of the Complaints Service to undertake a complete and thorough investigation).
- Clearly communicate to claimants that the Complaints Service is *impartial* and *transparent*.
- Investigate ways to improve satisfaction with the complaints process amongst those whose Code complaint is *not* upheld.
  - Perhaps looking at ways of communicating to complainants about the reasons why the Code complaint was not upheld.
- Explore using mediation and facilitation as a way to resolve Code complaints before a formal decision is made.
- Work with DRSL to resolve disparate understandings of the ultimate purpose of the Code Review process. This would resolve differing opinions between the Complaints Service and DRSL about whether Case Managers should be present at Review hearings.
- Publish Code Review findings on the ACC website to provide guidance for advocates and complainants.
- Additional data capture recommended is as follows:
  - Data collection around concerns/resolutions dealt with at branch level, or via the ISC

- A survey of ACC staff to capture feedback to evaluate staff 'buy-in' to the Code, and perceptions about its operation
- Minor amendments to the Network survey, and the Complaints Service Satisfaction Monitor to plug data gaps noted
- In-depth qualitative research with complainants to understand the impact of changes to Code operation and processes as a result of this Review.

## Background to the Year One Review

### The Code

In February 2003, ACC introduced the Code of ACC Claimants' Rights after an extensive period of consultation with the general public and external stakeholders.

The spirit of the Code is to encourage *“positive relationships between ACC and claimants”*. This purpose derives from the underlying recognition that *“for ACC to assist claimants a partnership based on mutual trust, respect, understanding and participation is critical. Claimants and ACC need to work together, especially in the rehabilitation process. This Code is about how ACC will work with claimants to make sure they receive the highest practicable standard of service and fairness.”*

The Code details eight claimant Rights:

- Right 1 – to be treated with dignity and respect
- Right 2 – to be treated fairly, and to have your views considered
- Right 3 – to have your culture, values and beliefs respected
- Right 4 – to a support person or persons
- Right 5 – to effective communication
- Right 6 – to be fully informed
- Right 7 – to have your privacy respected
- Right 8 – to complain.

The Code also provides a process for raising concerns and lodging complaints. If claimants are concerned about ACC's service they can:

- Raise the concern with the branch it relates to, and work to resolve their concerns at this level with their Case Manager and Branch Manager, and/or
- Make a complaint to the Complaints Service either orally or in writing.

The ACC **Complaints Service**, also known as the Office of the Complaints Investigator (OCI), consists of a team of 9 people. The role of the Complaints Service is to investigate complaints about ACC, including complaints relating to breaches of the Code, and non-Code related complaints. Complaints procedures for potential breaches of the Code, and target times for various stages are outlined in the Appendix.

If not satisfied with the Complaints Service's Code decision, claimants have the right to a Review of this decision. The **Dispute Resolution Service Limited** (DRSL) is responsible for

investigating Code Reviews. Neither the claimant nor ACC has the right to appeal a Review decision made relating to the Code.<sup>3</sup> Review procedures are outlined in the Appendix.

## Desired impact of the Code

At the time of its development in 2002, ACC predicted that a number of **benefits** would accrue to both claimants and ACC from the introduction of the Code:

- Helping claimants participate in and feel confident about rehabilitation, by providing certainty over processes, outcomes and what to do if they are dissatisfied with ACC's service
- Giving ACC and its agents clear expectations of their obligations towards claimants, contributing towards uniform service standards
- Providing information and feedback about ACC's service which leads to improved practices and processes
- Providing a clear process for lodging and dealing with complaints against ACC
- Providing clear guidelines for how ACC should address situations where its conduct does not reflect the Code, including remedies to claimants for breaches of the Code.

Implied in the above is a perception that the Code will have a positive impact on *claimant satisfaction* with ACC.

## Code evaluation and Year One Review

From the outset, it was agreed that ACC would monitor data of relevance to the Code, for both internal and external reporting purposes<sup>4</sup>. This monitoring will provide an understanding about the impact of the Code – on the public and claimants, on ACC, and ACC agents.

A formal external review of the Code is planned for 2005, when the Code will have been operational for two years. Prior to this occurring, ACC elected to undertake an *interim one-year review* of the Code, the results of which are detailed in this report.<sup>5</sup>

The overall objective of the Year One Review is to determine whether Code processes have been effectively implemented. Specific objectives are to determine<sup>6</sup>:

1. Whether the public notification process used for the Code was/is effective

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<sup>3</sup> A full copy of the Code of ACC Claimants' Rights can be viewed at <http://www.acc.co.nz/claimscare/news/the-code-of-acc-claimants-rights/index.html>

<sup>4</sup> Key audiences are the Minister for ACC, ACC senior management, the Department of Labour, ACC staff, claimants and advocacy groups

<sup>5</sup> Note: Results of the one-year review will be available for inclusion in the 2005 external evaluation

<sup>6</sup> Briefing Paper No. BP 03/002, 24 January 2004

2. Whether ACC is achieving the level of service required by the Code and if not, why not
3. Whether expectations of claimants are being met about how ACC should deal with them, including issues of fairness and equity
4. Any areas for improvement in Code operation (e.g. processes, communication of the Code, and effectiveness).

The Year One Review will enable ACC to make general improvements to Code operation before the external evaluation in 2005. It will *not* however, consider substantive changes to the Code itself, nor to prescribed Code processes.

The Review will also highlight whether ACC is currently recording sufficient data to enable a thorough external evaluation in 2005.

In summary, the Review draws on quantitative and qualitative feedback from claimants, complainants, claimant advocates, ACC staff and Branch Managers and other internal ACC information sources. Details of the information streams included in the Review are appended together with data capture tools, methods and mechanisms.

## Actions in Year One

In Year One of the Code, the Complaints Service implemented a number of **initiatives** that aimed to improve service to people making Code complaints:

- In April 2003 a permanent data analyst was employed to undertake analysis of complaints data being collected by the Complaints Service
- In December 2003 the responsibility for answering the 0800 complaints line was moved to the Hamilton Inquiry Service Centre (ISC) for day-to-day management (as a 6-month trial)
- A category of 'Quick Resolution' was introduced to cover Code complaints which can be resolved without undertaking the formal written complaints process
- Statement of Events documents were changed to include 'Interim Findings', signalling a likely decision to complainants
- A project team was established to clear backlogged files in the last quarter of 2003
- Two new Complaints Investigators were employed into the Auckland office in the last quarter of 2003
- The Complaints Service visited all ACC branches in the last quarter of 2003, to raise awareness of the Code process and obtain feedback from staff about how it was working
- The file load of the Chief Complaints Investigator was reduced, to allow her to have a greater focus on management responsibilities
- Acknowledgement letters were simplified so they could be dispatched within 24 hours
- In August 2003 ACC's Training Services weekly training modules were used to provide frontline staff with training regarding Rights 1 and 2 (one weekly training module), and Rights 5 and 6 (a separate weekly training module).

## Report notes

The following terms are used in this report:

- *Code* refers to the Code of ACC Claimants' Rights
- *Code complaints* refers to individual complaint issues related to Code Rights made by the complainant
- *Complaints* refers to both Code complaints and non-Code complaints
- *Review* refers to reviews of entitlements and *Code Review* refers to the process to review any decision made by ACC under the Code about a complaint
- The Office of the Complaints Investigator is referred to as the *Complaints Service* as noted in publications to claimants
- *Long-term claimants* are those who have claims of more than 52 weeks duration, while *short-term claimants* are those whose claims are under 1 year
- *Closed files* are complaint files that have been investigated and the complainant and ACC informed of the outcome
- Unless stated otherwise, survey data figures cited for complainants are from the Complaints Service Customer Satisfaction Monitor, carried out in October 2003. This survey included Code *and* non-Code complainants. It should be noted that the complainants' survey took place *before* the ISC started screening 0800 complaints calls.
- Unless stated otherwise, survey data figures cited in this report for claimants are from the latest Network Survey report, October-December 2003.

## Perceptions of the Code

### Overview

- The Accident Compensation Corporation (ACC) receives unanimous support from complainants, advocates and branch managers for putting the Code of ACC Claimants' Rights into place in February 2003.
- The Code is seen as being on a par with other codes such as the Code of Health and Disability Services Consumers' Rights. It is considered to enhance ACC's overall reputation as an organisation that puts its clients first, and one that is serious about treating clients respectfully and fairly.
- The Code sets clear expectations about service and treatment of claimants for all parties, and clear procedures in the event that claimants are dissatisfied with ACC.
  - Staff also value the Code as a important management tool which provides strong guidelines for interactions with claimants, and as a mechanism to assist in ongoing improvement and modification of ACC systems and services.
- The eight Code Rights and their corresponding obligations are generally praised for encompassing all aspects of service which claimants can expect – both in terms of staff *behaviour* (e.g. adequate communication and information flows) and staff *attitudes* (e.g. treating claimants with dignity and respect).
- The Code Rights were designed to encompass broad principles, rather than set out specific behaviours and actions for staff to follow. Reflecting this, some staff (including some Complaints Service staff) and some complainants find the Rights 'subjective'.
  - In particular, Right 1 (*to be treated with dignity and respect*) and Right 2 (*to be treated fairly, and to have your views considered*)
  - Right 3 (*to have your culture, values and beliefs respected*) and Right 4 (*to a support person or persons*) are described by the Complaints Service as 'ambiguous and requiring clarification'.

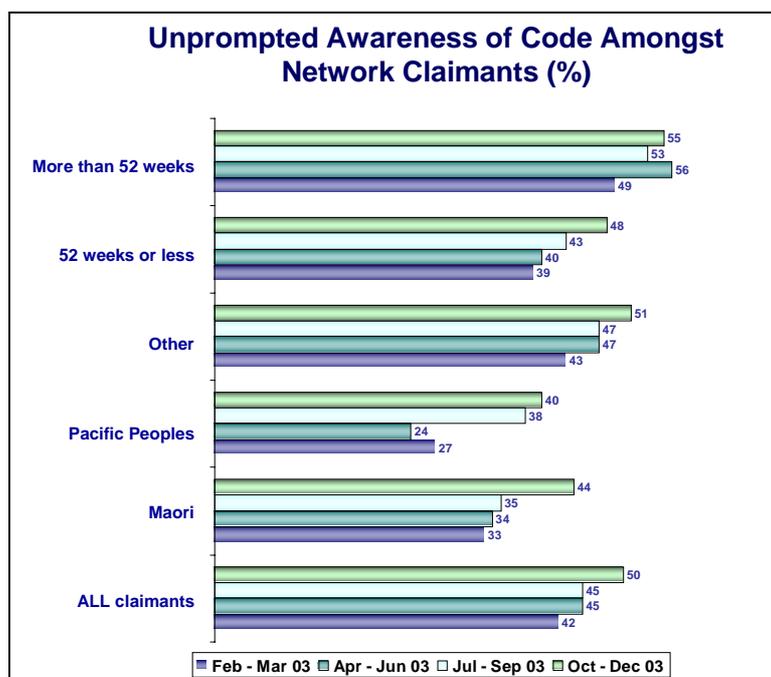
***"It is supposed to be there for claimants so they are not disadvantaged. It is there to fall back on if I am not treated properly so you can say: 'This is what you are supposed to do'. It is there to protect claimants."*** Complainant

## Views about the Code's purpose

- There is some divergence in understanding of the Code's overall purpose. In particular, the 'spirit' of the Code, about a *two-way* partnership between claimants and ACC staff, does not appear to be being picked up by claimants.
- For **complainants** the Code offers a sense of security by setting their expectations of how ACC should deal with them (a 'customer service charter') and in offering a complaints process.
  - While the long version of the Code states that disputes about cover and entitlements are not covered by the Code, complainants tend not to compartmentalise their complaints, and merge the two together.
- For **advocates** the Code pulls together 'duties' from other strands of law such as the Privacy Act and the Code of Health and Disability Services Consumers' Rights. They believe that it assists ACC in building a more positive public image by clearly defining expectations of staff, and by ACC addressing process issues that arise.
  - Advocates note that both they and ACC are still coming to terms with distinguishing between entitlement decisions that they wish reviewed, and Code complaints. As a safeguard for their clients, some are putting in parallel Code complaints at the same time that they apply for an entitlement Review.
- **Branch Managers** value the Code as a management tool which offers their staff clear guidelines for dealing with claimants. Some argue that the Code needs to make the *claimant's* role more explicit in establishing good relations with ACC staff by placing responsibilities on them.
  - Branch Managers use the Code to monitor staff performance and to identify training needs of staff who receive multiple complaints.
- The Complaints Service addresses Code and non-Code complaints simultaneously, and informs complainants about each in the same letter. In many cases complainants with non-Code complaint (i.e. an entitlement issue) are advised to go to a Review. (Ideally some complainants and advocates would like one agency to be able to resolve Code and non-Code complaints at the same time.)

## Awareness

- Since its introduction there has been a gradual increase in the proportion of ACC claimants who are aware of the Code.
  - Unprompted awareness has risen from 42% to 50%, while total awareness (prompted and unprompted) has risen from 71 to 75%<sup>7</sup>
  - As would be expected, long-term claimants are more likely to be aware of the Code than short-term claimants (78% total awareness, and 73%, respectively)
  - Differences in awareness levels exist between ethnic groups, with Maori and Pacific peoples having slightly lower levels than other ethnicities (69% total awareness for Maori, 70% for Pacific peoples, and 76% for all other ethnic groups). However, the upward trend in awareness is consistent across all ethnic groups, and the gaps between Maori/Pacific peoples and other groups appear to be reducing.



- There are some question-marks about whether claimants are *genuinely* aware of the Code, in that they know what it is and what it is for, or whether their recollection of the Code is largely 'surface level'.
  - In the complainants survey in October 2003, only 3% of complainants classified their complaint as a 'Code complaint' when asked to define it
  - In the qualitative research, a considerable proportion of those who made a complaint to ACC said that they were not aware of the Code before this point - i.e. they did not realise

<sup>5</sup> Feb-Mar 03, compared with Oct-Dec 03, Network Survey

that they were actually making a Code complaint. (Consequently language used in correspondence from the Complaints Service can be somewhat confusing to these individuals.)

- Claimants tend to learn about the Code through written information in the form of posters and pamphlets.
  - 61% of claimants who are aware of the Code say they learnt about the Code this way
  - Case Managers are the next most frequent source (22% learnt about the Code from Case Managers)
  - Other information sources such as GP, newspapers, friends and family are cited infrequently (1%-3%).
  
- Awareness of the procedure for making a complaint under the Code is also increasing.
  - Amongst those aware of the Code, the proportion who say they were told how to make a complaint has risen from 46% to 57%.<sup>8</sup>
  
- Qualitative research indicated that complainants tend to find out about the Complaints Service via different avenues *once concerns have arisen* by:
  - Calling the 0800 number and being referred, going to the ACC website for the contact details, being informed by friends, relatives and advocates, being informed by their Case Manager (often during a particularly fraught session), or being informed by Hon. Ruth Dyson's office. (Some complaints go to the Minister first, either because claimants are not aware of the formal complaints process, or to give their complaint added 'weight').

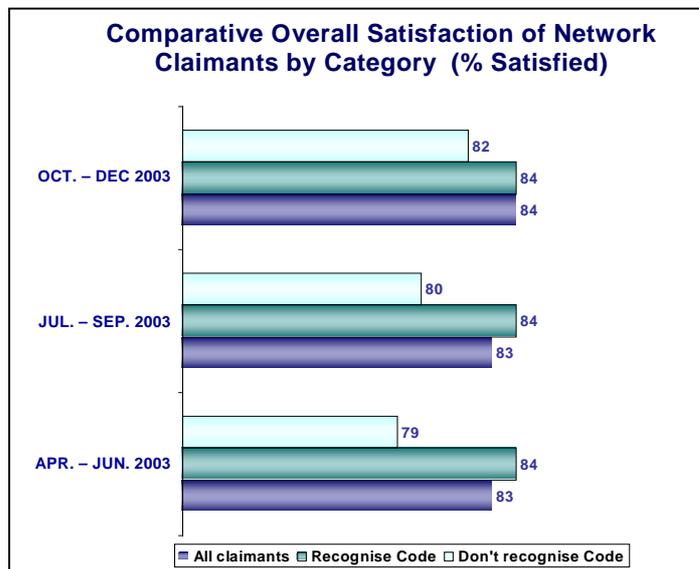
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<sup>8</sup> Feb-Mar 03, compared with Oct-Dec 03, Network Survey

## ACC's Compliance with the Code

### Overall satisfaction levels

- It is not possible to state that the Code has had a direct impact on claimant satisfaction. In the 18 months prior to the Code's introduction, claimant satisfaction levels with ACC services tracked upwards and this trend continued after the Code was introduced.
  - The overall satisfaction of Network claimants was 87% in January 2004, an increase from 79% in January 2003
  - Claimant ratings continue to increase across a range of service attributes, including getting information, receiving compensation, the way compensation was handled and Case Manager services.
  
- However, it is positive to note that claimants who are aware of the Code are slightly more likely to be satisfied with ACC's overall service than those who are not.
  - Throughout Year One, the proportion of those who were satisfied with ACC was consistently higher amongst those aware of the Code (by 2-5 percentage points)
  - This difference extends across a range of ACC service dimensions.



## General perceptions about ACC's compliance with the Code

- The majority of **claimants** believe that ACC follows the Code of ACC Claimants' Rights, with the level increasing slightly during the course of Year One. However, there is still room for improvement.
  - 71% of claimants said they believed ACC followed the Code in October-December 2003, compared with 66% in February-March. The level of those who do *not* believe ACC complies with the Code decreased over the year, from 10% in February/March 2003, to 7% in October-December 2003
  - Long-term claimants are less likely than short-term claimants to believe that ACC follows the Code (60%, and 74% respectively in October-December 2003). One in six (17%) long-term claimants believe that ACC does *not* comply with the Code – although when asked, most are unable to specify a particular Code Right that they believe ACC has breached
  - There do not appear to be any ethnic group differences in general perceptions of ACC's compliance with the Code.
  
- **Branch Managers** consider that in the main, ACC staff do comply with the Code, and in many cases, have always offered service to Code standards. They make some general points about Code compliance:
  - ACC at times may overload claimants with information and therefore many claimants can no longer distinguish what they have and have not been told. Despite the Case Managers' best efforts to explain processes and provide adequate information, claimants who do not recall this information may still feel that Rights 5 and 6 have been breached
  - There is a small core of claimants who don't like ACC and whose expectations will never be met. This is particularly evident amongst complainants with head injuries, and long-term recipients of ACC who are being rehabilitated off the ACC scheme. These participants can be extremely litigious and openly discuss future complaints they may lodge.

## Complaint levels

- Qualitative research indicated that many complainants *initially* attempt to resolve their concerns at a local level with their Case Manager. However, as it tends to be the Case Manager's behaviour or service that is under question, this often proves to be a frustrating and fraught process.
  
- A considerable number of complainants are not aware that they can take their complaint to their Case Manager or Branch Manager to seek resolution at a local level, and thus go directly to the Complaints Service. However, there will always be some who are less than comfortable with this approach due to the disintegration of their relationship at a local level.
  
- The ACC 0800 complaints line has received 13,000 complaint calls since April 2003, averaging between 1200 and 1400 calls per month. Since the ISC took over the management of the line in December, 70% of these calls have been resolved by the ISC or

passed to an ACC branch for resolution, resulting in a sharp drop of 'quick resolution' complaints to the Complaints Service.

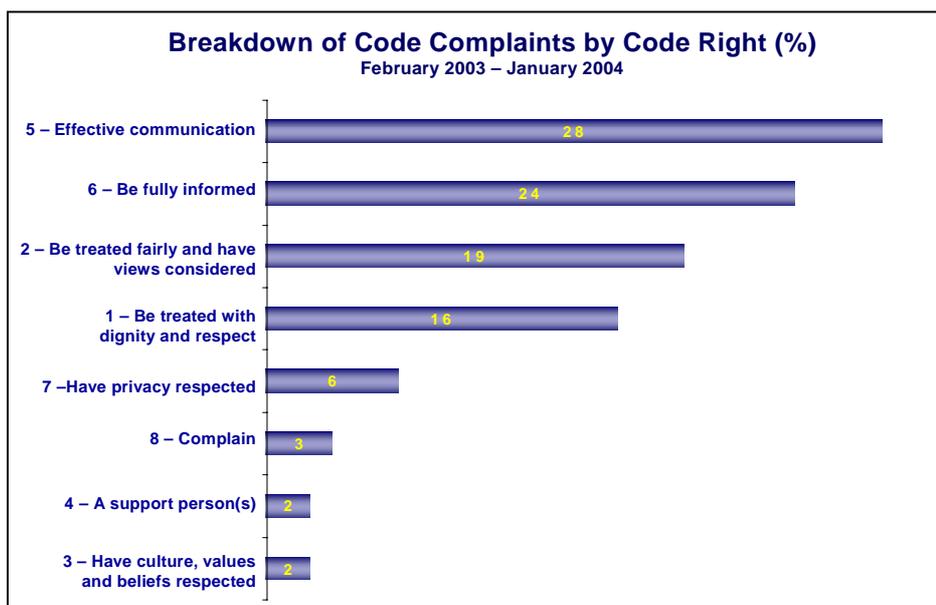
- The ISC passes about 34% of complaint phone calls back to an ACC branch for resolution, and it resolves around 36% at the first point of contact, reducing the need for intervention by the Complaints Service. Only 11% of calls are passed on to the Complaints Service for further investigation, allowing staff to concentrate on more complex complaints
  - Only 'high level' data is captured about complaints and concerns received by ISC that are not passed to the Complaints Service. Steps are being taken to improve the information collected, to assist ACC in understanding the patterns that may exist.
- The number of claimant complaints received by ACC has increased slightly since the Code was introduced – certainly not to the extent predicted<sup>9</sup>.
    - Compared with 2001 and 2002, the number of individual complainants registering complaints has risen by 9% since the Code was introduced, but only 4% based on the total number of entitlement claims. (Note: This figure also includes levy payer complaints.)
    - There were a total of 1200 Code and non-Code complainants in 2003. Approximately 10% of all complaints for 2003 were repeat complainants.
- Long-term claimants are more likely to complain (for both Code and non-Code issues) to ACC than short-term claimants. The age group 35-44 is over-represented in complaints statistics, while young people aged 15-24 are under-represented. Maori and Pacific peoples are under-represented as complainants, however it should be noted that they are also under-represented as ACC claimants.<sup>10</sup>
- The Complaints Service is tracking data to investigate whether there are any relationships between branch file loads and the number of complaints received. At this stage it is still too early to determine any systemic trends in this area.
- The number of individual *issues* raised by complainants has increased substantially since the Code was introduced, reflecting that problems experienced by ACC claimants often impact across multiple Code Rights, and changes to how issues are coded.
    - A total of 2372 issues were registered in Year One of the Code
    - Since February 2003, the number of Code complaint issues has varied considerably on a month by month basis. Monthly complaints averaged out at 200 complaints per month over the year, but over 250 complaints were received in some months.

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<sup>9</sup> The level of complaints was predicted to rise by 22% and the number of Code complaints not upheld and taken to review by 30%. Cabinet Social Development Committee paper, November 2002

<sup>10</sup> It should be noted that ACC's coding of claimants' ethnicity is known to be less than 100% accurate

- Code complaints tend to represent around two thirds of all complaints made to ACC. The most frequent Code complaints are about ACC not *communicating effectively* (Right 5) and ACC not keeping claimants *fully informed* (Right 6).
  - Complaints about breaches of Right 5 account for 28% of all Code complaints, and Right 6 for 24%
  - Next most frequent areas of complaint are being *treated fairly and having views considered* (Right 2, 19% of all Code complaints) and being *treated with dignity and respect* (Right 1, 16%).



## Code breaches

- ACC was found to have breached the Code in around *one in three* (34%) Code complaint investigations during Year One.
  - The highest proportion of breach findings relate to Code Rights 5 and 6, with around two in five of these complaints being upheld by ACC (44% and 40%, respectively).
- Complaints Service staff note that peer reviewing has contributed to improved quality and consistency of their decisions.
- The Complaints Service is also encouraging staff to complete a *Pathway* note for every encounter with claimants, as lack of sufficient information from the *Pathway* case activity log can count against ACC in a complaint investigation.
- It is too early to judge whether training delivered to Network staff in August 2003 will impact on staff adherence to Code Rights 1 and 2, 5 and 6.

- Complaints Service staff visited all ACC branches and business units in the last quarter of 2003 and has noted that branch responses to requests for information about Code complaints has improved following these visits.
  
- Advocates hypothesise that complainants are more likely to have a complaint upheld if they receive advice from an advocate about what to include in the complaint form. They believe that ACC should take steps to enable greater numbers of complainants to access guidance in this area, as those who 'take on' ACC on their own are at a disadvantage.
  
- During Year One, seventeen complainants who were dissatisfied with ACC's finding on their complaint took their case to Code Review (a ratio of 1:82 Review files to closed files). Of the 7 files reviewed by 31 January 04, only one decision was modified.
  - The fact that ACC does not bring witnesses to Code Review hearings tends to undermine its case, as when the issue turns on oral evidence, if there is no rebuttal to claimant testimony then the Reviewer invariably accepts the claimants' evidence.

## Perceptions of the Code Complaints Process

### Overview of complaints process

- The qualitative research indicated that most complainants find the Code complaints process straightforward (although this does not necessarily mean they are satisfied overall). Complaints Service staff are also positive about the process, and note that it is continually being improved and modified.
- Feedback about the **preliminary steps** in the process is generally positive – i.e. the initial contact with the Complaints Service, acknowledgement letter and completing the complaint form.
  - Complainants are clear about what to do, and have a good feeling that things are 'being taken care of'
  - A few may have difficulties knowing what to write, and find it difficult to 'fit' their complaint to the Code. Consequently, they may not use the complaint form but send in a separate letter or email
  - The complaints form is being changed to address feedback that it was confusing for people with a combination of Code/non-Code issues (the Form was headed 'Code Complaint' only).
- The **Statement of Events** is an important and helpful document, which is read closely by complainants and advocates. Complaints Service staff note a positive response to including 'interim findings' within the Statement of Events.
 

However, in some cases complainants were frustrated to see information in the *Statement of Events* that they perceive as incorrect or untrue.

Qualitative research highlighted that a number of complainants do not respond to the Statement of Events even though they dispute the events summarised. This reflects that by this stage in the process, complainants are becoming weary and somewhat disenchanted with ACC.
- The Statement of Events letter is issued to complainants only when there has been significant disagreement about events, or where issues are complex. Complainants with a 'simple' Code complaint may therefore not receive any feedback from ACC about their complaint until the decision has been made. If their complaint was not upheld, complainants feel that they have been 'kept in the dark' during the process.
- The final **decision letter** is generally well understood.
  - However, some would like greater clarity about the steps to take on receiving the decision letter if a breach ruling is made.

- The main issues for **Branch Managers** in the complaints process are the time involved completing the template and managing disagreements about decisions relating to a breach.

## Satisfaction with complaints process

- Individual steps in the complaints process are largely considered to be sensible and a good way for ACC to conduct investigations. However, several **overriding** areas of concern about the complaints process have been highlighted during the Year One Review:
  - False expectations of complainants and complainant advocates
  - Perceived independence and fairness
  - One way communication and a lack of transparency.

Each of these issues is discussed in turn below.

### ***False expectations***

- It is apparent that some complainants and advocates are unclear about what they can complain about under the Code - i.e. not entitlement issues.
- This creates false hopes about resolutions and remedies, and may encourage some people to make a Code complaint when there is no basis for doing so.

### ***Perceived independence and fairness***

- All parties feel that the others are more advantaged under the Code in relation to complaints process.
  - In situations where the complaint is not clear-cut Code complainants and advocates feel that the Complaints Service errs towards ACC. By contrast, some Branch Managers believe the Complaints Service can be 'overzealous' in funnelling service comments into a Code complaint, and favouring Code complainants generally.
- Most complainants and advocates have a degree of concern about the fact that the Complaints Service is part of ACC, rather than a separate entity.

***“The process was efficient. You couldn’t fault the process. But they shouldn’t be investigating themselves. You don’t get an unbiased opinion. The Unit should be completely separate from ACC. Not paid by ACC.”*** Complainant

### ***Lack of dialogue and transparency***

- There is a desire for greater direct communication with Complaints Service staff, reflecting an expectation by complainants that ACC will commence a dialogue with them once they have lodged their complaint.

The qualitative research indicated that some hear nothing from the Complaints Service (apart from the acknowledgement letter) until a complaint decision has been made. In cases where the complaint is not upheld, it heightens claimant perceptions of bias towards ACC, and an impersonal 'closed door' approach.

Additionally, there is a desire for more feedback about consequences for Case Managers who have breached the Code, and follow-ups to ensure further breaches do not occur.

***"I'm not sure about the transparency. If all you get is a decision, then that's not okay. You need to know what has been done, and who's communicated with who."*** Advocate

- The **outcome** of the Code complaint is a very influential factor in determining how complainants perceive the complaints process. Those with a favourable outcome tend to be very positive about the process, while those with unfavourable outcomes tend to be overly critical of the complaints process, driven by their perception they did not receive a 'fair' hearing.
  - The most recent survey of Code and non-Code complainants highlights the impact of outcome on complainants' perceptions:
    - 76% of complainants who receive favourable outcomes are satisfied with the process. In comparison, only 13% of complainants who receive an unfavourable outcome are satisfied with the complaint process<sup>11</sup>.
    - The proportion who believe that Complaint Investigators 'take everything into account' is 85% amongst those who received a favourable outcome, vs 30% of those who have an unfavourable outcome
    - The proportion who believe ACC shows an 'understanding of their personal circumstances' is 77% of those with a favourable outcome, compared with 35% whose complaint was not upheld.<sup>12</sup>
- Few complainants in the qualitative research recalled having direct contact with Complaints Service **staff** and 63% of complainants (both Code and non-Code) surveyed in October 2003 recalled having contact with staff. Those that do have contact describe staff as empathetic and helpful, and in some cases even offering insight into other complaint avenues (e.g. recommendation to go to an entitlement Review or to the Health and Disability Commissioner or the Ombudsman).

<sup>11</sup> OCI Customer Satisfaction Monitor, October 2003

<sup>12</sup> CS Customer Satisfaction Monitor, October 2003

- The majority of complainants are satisfied with the amount of **time** taken to process a claim, and the time taken to process Code complaints appears to be declining.
  - The time taken to investigate Code complaints varied through Year One: 25 days in the first quarter, 50 days in the second, 46 days in the third, and 33 in the fourth. Processing time generally appears to be improving with claims taking an average of only 29 days in January 2004. It appears that having the ISC taking 0800 complaints calls is the primary contributing factor to these improvements
  - 70% of complainants surveyed in October 2003 (both Code and non-Code) feel that the complaint was reported in an acceptable timeframe.
  
- The Complaints Service highlights the importance of striking a balance between prompt resolution of Code complaints with conducting *complete and thorough* investigations. An analysis of 22 files by the Complaints Service identified a range of ways to improve speediness of response without impinging on the quality of decisions made, including:
  - Active monitoring of the length of the claim, encouraging ACC branches to respond more promptly, and dealing with issues verbally rather than via email/letters.

## Resolutions and remedies

- For some Code complainants, merely receiving a breached ruling is enough of a 'remedy' as it acknowledges their concerns and shows that someone was listening. However, most would prefer to see remedies and resolutions applied as an *automatic* result of the ruling.
  
- Complainants whose complaint is upheld expect that they will see evidence of a *change* within ACC – either in future behaviour of Case Managers, or via internal strategies to deal with their concerns. In addition to making genuine changes to ACC service or systems, some advocates and Complaints Service staff argue that ACC should be offering financial solutions, at the least, to cover legal fees.
  
- For most upheld Code complaints, the only form of resolution offered to complainants is a letter of apology. ACC staff tend to believe that complainants will be satisfied to receive an admission 'in writing' that ACC has acted improperly, however complainants and advocates generally view the apology letter as an 'empty remedy'.
  - Apology letters are criticised for looking and sounding like they are form letters, for being 'limp', or for coming from the wrong person (i.e. the Branch Manager not the Case Manager)
  - Letters are also criticised for being couched in terms which undermine the apology's sincerity (i.e. "if this did occur, I am sorry"). Branch Managers admit that staff at times find apology letters difficult to write when they disagree with the Complaints Service's decision.

***"I got a letter from the manager saying they were sorry about what happened. It was a nothing letter. They should have said what they had done wrong, recognised the harm they did to me, and apologised sincerely."*** Complainant

- In the qualitative research a minority of Code complainants considered that they had received 'genuine' resolution (usually this means receiving a new Case Manager), however most do not (in their eyes). In many cases, there is a sense of 'unresolved business', for example:
  - Not receiving information requested from ACC
  - Not finding out whether other claimants had received their personal information, when they received others' information (Right 7 – *the right to have privacy respected*)
  - Not receiving a follow up letter or call detailing the implications for the Case Manager. For example did the Case Manager receive appropriate training, were they reprimanded, or at the extreme, as some complainants wanted, fired.
  
- If justified, Branch Managers say that they usually talk to Case Managers about complaints, and if a complaint is upheld steps are taken to ensure that the Case Manager's future behaviour improves. However, in most instances complainants are not aware of the changes. Not witnessing or being made aware of changes in ACC's behaviour or service undermines the value of the complaints process.
  - Claimants' desire for remedies often includes a change of Case Manager or information about the repercussions for the Case Manager due to their complaint. However, ACC is unable to offer complainants information about Case Managers as it would breach their legal responsibilities as an employer.
  
- DRSL Reviewers agree with claimants and advocates about remedies available for Rights breaches, saying they are 'limited and weak'.

## Code Review process

- The qualitative research indicated that a considerable number of complainants who disagree with a complaint decision will not take their case to Code Review. This reflects that they do not have the energy to 'fight' their case, or that they have developed a distrust of ACC – i.e. they simply don't believe they will get a fair hearing at the Code Review.
- Overall, it appears that the Code Review is not a satisfactory process for resolving Code disputes. The dissatisfaction appears to stem from a fundamental difference between DRSL's view of the purpose of a Complaints Review ('an opportunity to look at all the evidence afresh'), and the Complaints' Service view ('an opportunity to check that the complaint has been investigated properly and the correct decision made').
- Code Reviews seem to be **process-driven**, and in most cases do not provide a satisfactory solution for either party. DRSL Reviewers point out that while the Code Review decision effectively puts an end to the dispute process, it does not resolve the *underlying* issues.
- The 'formal and adversarial' Code Review process is frequently **inappropriate** for Code disputes, given the nature of the issues and the state of ACC/claimant relationships. DRSL recommends that ACC considers employing mediation or facilitation at an early stage of a Code dispute, in the same way that it does for entitlements disputes.
- The fact that **Complaints Investigators represent ACC** at Code Reviews undermines their neutrality, and is unexpected by complainants. Reviewers question the role of Complaints Service staff, saying that they take a 'non-adversarial' approach, generally not challenging claimants' evidence, nor presenting any ACC evidence.
- The **absence of Case Managers** at Review is cited as an issue by complainants and advocates. The DRSL shares this view and strongly recommends that ACC reconsider its policy of not calling ACC Case Managers as witnesses at Code Review hearings.
  - Advocates stress the need for staff to be made aware that if a complaint against them goes to Code Review, complainants will see all their internal emails. Viewing some e-mails has caused considerable upset for complainants.
- There are mixed reports about the performance of ACC and DRSL staff during Code Reviews:
  - DRSL Reviewers report that Complaints Service staff have 'always been very professional' in their approach to Code Reviews
  - However, one advocate involved in recent qualitative research mentioned what she perceived to be a 'lack of professionalism' by ACC staff at Code Reviews (i.e. treating complainants disrespectfully)

- One advocate involved in qualitative research criticised the quality of DRSL Reviewers, saying that they seem immature and inexperienced. This was demonstrated by the Reviewer not introducing the process or acting professionally
- Complaints Service staff have noted nationwide inconsistencies in Review decisions.
- Ideally, advocates would like the Complaints Service to publish Code Review findings on the ACC website. Currently some feel like they are *“shooting in the dark because there are not publicly available findings”*.

## Appendix

### 1. Complaints Service procedures

1. Claimants make initial contact with ACC via the 0800 complaints line, or directly to the Complaints Service by phone, letter, email or fax. They may then be asked to complete a complaint form
2. ACC sends an acknowledgement letter confirming that ACC has received the complaint
3. ACC investigates the claim, seeking feedback from ACC branches (a 5 day time-frame is the target for branch responses). The *Pathway* case activity log is a key resource to follow and analyse the history of a claim
4. ACC may send claimants a 'Statement of Events' and 'Interim Findings'. Claimants have the option to respond to ACC in writing or verbally
5. ACC sends a final decision letter to the claimant. Any remedies recommended should occur within 5 days. If the decision is not agreed with, claimants have the right to take their complaint to a formal Review.

### 2. Dispute Resolution Service procedures

The Dispute Resolution Service Limited (DRSL) is responsible for investigating Code Reviews. Key steps in the Code Review process are as follows:

1. Complainant lodges the application for Code Review
2. ACC acknowledges receipt of the application and does a file review. If there are no apparent anomalies, the Complaints Service sends the claim file to DRSL to arrange a hearing
3. DRSL writes to the applicant and to the Complaints Service with official Code Review details, and a Review Support Officer then organises the hearing. ACC makes available to all parties the documentation used to make its initial complaint decision
4. The hearing takes place. ACC is represented at Code Review hearings by the Complaints Service. Staff involved in the complaint (i.e. Case Managers) are not called as witnesses at Code Reviews
5. The Reviewer issues a decision within 28 days after the hearing. Code Review decisions fall into four categories: 'dismissed', 'quashed', 'no jurisdiction' and 'modified'. DRSL sends copies of the decision to all parties.

### 3. Information streams for the Review

Components of the Year One Review were agreed by a project Steering Committee<sup>13</sup>. A range of information streams were included in the Review as follows:

#### A. Statistical data

- Data from various satisfaction surveys including: Network Claimants Surveys (monthly, specific Code questions introduced in February 2003); Contact Centres Survey (monthly, limited coverage on Code questions); Complaints Investigator Customer Satisfaction Survey (annual, most recently carried out in September/October 2003); Partnership Programme Claimants' Survey (annual, most recently carried out in August 2003); and the Medical Misadventure Unit Customer Satisfaction Monitor (annual, most recently June 2003)
- Administrative records of the Complaints Service and DRSL.

#### B. Evaluations

- A report on the first 11 Code Reviews, prepared by the DRSL
- A 6-month evaluation of Code delivery by the Complaints Service, outlined in an issues paper of 14 August 2003.<sup>14</sup>
- Case study of Complaints Service workload management within the prescribed Code processes (covering 32 files).

#### C. Qualitative research

1. Litmus carried out qualitative research amongst complainants, Branch Managers, and claimant advocates, in March 2004. Key research objectives were to identify:

- Code complainant and advocate perceptions of the Code
- Code complainant and advocate perceptions of ACC's compliance with the Code
- Code complainant and advocate perceptions of ACC's customer service in terms of the operation of the Code complaints process
- Branch Manager perceptions of the Code, ACC's compliance with the Code, and the complaints process.

The qualitative research involved 20 face-to-face interviews with claimants who had made a complaint against the Code of ACC Claimants' Rights, 8 'tele-depth' interviews with Branch Managers, and 3 'tele-depth' interviews with claimant advocates / lawyers.

2. In March 2004 ACC's Advocacy Liaison Co-ordinator carried out three interviews with representatives from the Consumer Outlook Group, and the Council of Trade Unions.

<sup>13</sup> A list Steering Committee members is included as Appendix 4

<sup>14</sup> From Margaret Cassie, to John Saunders

#### D. Facilitated workshops

- A workshop on 31 March 2004 to consider and synthesise all of the reports produced for the review of the Code. Workshop attendees and contributors included:
  - Helen Anderson, National Manager, Strategic Network Operations, ACC
  - John Nicholson, Manager, Operational Strategy, Development Division, ACC
  - Sue North, Advocacy Liaison Co-ordinator, ACC
  - Toni Izzard, Chief Complaints Investigator, ACC
  - Ed Liuchan, Complaints Investigator, ACC
  - Michelle Berendt, Team Leader, Ministerials, Customer Relations Unit
  - Michael Playle, Policy Analyst, Strategy Policy and Research, Scheme Integrity
  - Margaret Cassie, National Manager, Customer Relations
  - Chrissie Little, Analyst, People and Services, CRU
  - How Kooi Kong, Senior Strategy Analyst, Market Research
  - Steve Hollands, Manager, Wellington Contact Centre, ACC
  - Alyson Holland, Consultant
  - Melanie Martin, Analyst, Labour Market Policy Group, Department of Labour
  - Mary Ahern, Legal Services, ACC.
  
- A workshop with Complaints Service staff on 5 March 2004, to obtain direct feedback about implementation of the Code and the complaints process. Workshop attendees included: Toni Izzard, Cheryl McDowell, John Sullivan, Nikki Anglesey, Peta Cherry, Barbara King, Linda Watling, Steve Wagner and Judy Dearsley.

## 4. Steering Committee

The following individuals comprised the 1-year Code Review project Steering Committee, who agreed the scope for the review:

Co-sponsors:

Cathy Scott, General Manager Strategy and Policy Division - Co-sponsor

Keith McLea, General Manager Research and Corporate Services - Co-sponsor

Steering Committee:

Keith McLea, (Chair)

Margaret Cassie, National Manager Customer Relations

Cheryl Gall, Branch Manager Wellington

David Turner, Department of Labour representative