#### Disability Support Services Tier Two Service Specification Specialist Vision Assessment and Rehabilitation Services

#### 1 Introduction

This Tier Two Service Specification provides the overarching service specification for all Specialist Vision Assessment and Rehabilitation Services funded by Disability Support Services (DSS). It should be read in conjunction with the DSS Tier One Service Specification, which details requirements common to all services funded by DSS.

#### 2 Service Definition

The Specialist Vision Assessment and Rehabilitation Service (the Service) supports eligible people of all ages who are blind, deafblind or have significant visual loss, to maintain, regain or learn how to adapt and live with their blindness.

The type of support service delivered by the Provider includes assisting people to learn to effectively communicate, participate in life skills, move (travel) and orientate in and around their home, work or community environments.

The Provider will deliver an effective, coordinated and comprehensive service that is customised to meet the needs of the Person (and their family and whānau) to overcome identified barriers and maximise their functional abilities to live as others do.

### 2.1 Key Terms

Orientation	The cognitive component of purposeful movement.	
Mobility	Purposeful movement for a desired outcome.	
Developmental Orientation and Mobility (DOM)	A specialist discipline which primarily focuses on optimising purposeful movement, and its associated cognitive component, from a human development perspective when early onset of blindness or visual impairment is an issue. Includes white cane training programmes.	
Adaptive techniques for Daily Living	A programme designed to provide advice and instruction to enhance the Person's ability to perform routine activities of daily living, for example: maintaining cleanliness and grooming dressing, care of clothing and organisation	

The following are definitions of key terms used in this service specification:

<b></b>			
	<ul> <li>maintaining safety by managing the Person's home environments in a way that maximises independent living</li> <li>managing medication and health related issues</li> <li>managing activities inside and outside the house such as laundry, ironing, vacuuming, cleaning, gardening, rubbish disposal, and labelling food</li> <li>social skills such as leisure activities, and going out</li> <li>shopping for food, clothing, and household items</li> <li>preparation of food, cooking, serving and eating meals;</li> <li>use of the telephone</li> <li>financial management including banking, and money identification</li> <li>the use and maintenance of equipment for independence</li> <li>child care</li> <li>training in the use and maintenance of essential blindness equipment such as, magnifiers and adaptive equipment for the purposes of independent daily living activities.</li> </ul>		
Developmental	A generic programme of instruction designed to		
Adaptive Techniques of	encourage the ability to perform routine, age		
Daily Living Children	appropriate, activities of daily living when a child has		
	early onset of blindness or vision impairment.		
	Teaching children to use remaining senses and adaptive skills, as well as adaptive devices (such as a white mobility cane or an electronic aid) so that each child has the ability to participate in normal day activities.		
Deafblind	A unique sensory loss of both hearing and vision, the		
	combination of which fundamentally affects every		
	aspect of a Person's life, most notably		
	communication, socialisation, mobility and daily living.		
Equipment and	Means Orientation and Mobility Instructors who are an		
Modification Service	approved assessor accredited in Vision Assistive		
(EMS) Assessors	Technology as set out in the Equipment and		
	Modification Services (EMS) Accreditation Framework		

	(as published on the HIIRC website).	
Vision Rehabilitation Plan	Individual plan for rehabilitation programme includes goals and outcomes identified and evaluated at an identified time post programme completion.	

#### 3. Service Objectives

The Provider will work in partnership with the Person, their family and whānau and carers to enable the Person to reach their full potential and maximise their ability to participate in their community of choice.

#### 3.1 Outcomes

Provision of the Services by the Provider will result in:

- improved ability for people to communicate, travel effectively in a range of environments and participate in daily living activities
- achievement of short and long term goals for blind, deafblind and people with significant visual loss as per the agreed Vision Rehabilitation Plans with needs being reviewed as and when necessary
- raising of community awareness of issues related to blindness/ deafblindness /vision impairment.

### 4 Service Performance Measures

Performance Measures form part of the Results Based Accountability (RBA) Framework. The Performance Measures in the table below represent key service areas the Purchasing Agency and the Provider will monitor to help assess service delivery. Full Reporting Requirements regarding these measures are detailed in Appendix 3 of the Outcome Agreement. It is anticipated the Performance Measures will evolve over time to reflect Ministry and Purchasing Agency priorities.

The "How much", "How well" and "Better off" headings relate to different types of RBA performance measures.

Measures below are detailed in the Data Dictionary, which defines what the Ministry means by certain key phrases.

	How much	How well	Better off
All	Services		
1	# total number of service		
	users		

	How much	How well	Better off
2	# staff		
3	# new service users this reporting period		
4	# of complaints that have been received	% of complaints resolved (i.e. a corrective action plan has been implemented)	
5	# of plans	% people with plans	
6	# of personal plans reviewed and signed off	% of personal plans reviewed and signed off	
7	# of people offered a survey	% people offered a survey	#/% people and families who reported that they felt respected during the assessment process
Ser	rvice # 3 Preschool children se	ervice	
1	# of families offered a survey	% families offered a survey	#/% Family/Carers who reported that their child was able to travel to and locate destinations safely
2	# of families who returned a survey	% families who returned a survey	#/% of Family/Carers who reported that their child was able to carry out daily living tasks
Sei	vice #3: Counselling		
1	# counselling sessions		
2	# of people offered a survey	% people offered a survey	#/% people who reported improved ability to live with sight loss
3	# people who returned a survey	% people who returned a survey	
Ser	vice #4: Orientation and Mobi	lity Service	
1	# people receiving the service		
2	# of people offered a survey	% people offered a survey	#% of people who reported that they were able to travel independently and safely navigate their environment
3	<pre># people who returned a survey</pre>	% people who returned a survey	
Ser	vice #5: Adaptive Daily Living	· · · · · · · · · · · · · · · · · · ·	
1	# of people receiving the service		
2	# of people offered a survey	% people offered a survey	#% of people who reported that they were able to

	How much	How well	Better off
			travel independently and safely navigate their environment
3	# people who returned a survey	% people who returned a survey	#/% people who reported they were able to maintain their independence
Sei	rvice #6: Kāpō Māori whānau	services	
1	# people receiving services		
2	# of people offered a survey	% people offered a survey	#% people who reported that they knew how to access services they required
3	<pre># people who returned a</pre>	% people who returned a	
	survey	survey	
Sei	rvice #7: Pacific Island People	s' services	
1	# people receiving services		
2	# of people offered a survey	% people offered a survey	#% people who reported that they knew how to access services they required
3	# people who returned a	% people who returned a	
	survey	survey	
	vice #8: Deafblind service		
1	Measures to be discussed	Measures to be discussed	Measures to be discussed
	with Blind Foundation	with Blind Foundation	with Blind Foundation

#### 5. Service Users

#### 5.1 **Entry Criteria**

The Provider will provide the Services to people who meet the Eligibility, Clinical and Functional Criteria (or in some cases the Exceptions Criteria) set out below.

Known People previously using the service can re-enter the Service if their circumstances change or in response to a pre-determined re-entry point as determined in their Vison Rehabilitation Plan.

#### 5.2.1 Eligibility Criteria

The Person will:

- a) Be eligible for any publicly-funded health and disability service, as set out in the Health and Disability Services Eligibility Direction 2011<sup>1</sup> and
- b) have a sensory disability (vision and/or hearing)<sup>2</sup>.

<sup>&</sup>lt;sup>1</sup> Refer to the current *Ministry of Health Equipment Manual* and/or visit http://www.health.govt.nz/new-zealandhealth-system/eligibility-publicly-funded-health-services

<sup>&</sup>lt;sup>2</sup> Access to Disability Support Services is based on meeting the following eligibility criteria 'have a disability; either physical, intellectual, sensory (vision or hearing) and/or an age related disability (or a combination of these) that is likely to lasts for more than six months RNZFB

# 5.2.2 Clinical Criteria

Following an assessment by a registered Optometrist or Ophthalmologist demonstrate:

- i. a visual acuity not exceeding 6/24 in the better eye with correcting lenses OR
- ii. a serious limitation in the field of vision generally not greater than 20 degrees in the widest diameter OR
- iii. as meeting the registration criteria of Visual Resource Centres OR
- iv. as being deafblind (refer to definition appendix A).

## 5.2.3 Functional Criteria

The Person will undergo a functional vision needs assessment process showing that the Person has a functional loss related to vision impairment resulting in risk to personal safety, difficulty doing some everyday tasks on their own and require ongoing support to do so.

## 5.2.4 Exceptions Criteria

There are a small number of people who do not meet the eligibility, clinical and functional criteria set out above but who nevertheless have the ability to benefit from the Services available. At the discretion of the Provider, these people will be eligible for Services (although the occurrence of these exceptions will be infrequent), for example:

- People with neurological impairment with specific nerve involvement (such as elective surgical intervention resulting in visual sensory loss or space occupying lesions or tumour)
- People who would not usually meet the Eligibility, Clinical and Functional Criteria above but will benefit from short intervention to ensure personal safety or family safety (for example: a mother with young children requiring help with getting across road safely with young children after a Cerebral Vascular Accident).

### 5.3 People who are not eligible

The following people are not eligible to access the Services:

- people who do not meet the Eligibility, Functional and Clinical Criteria set out in section 5.1, (or in some cases the Exceptions criteria) identified in section 5.2.4
- children and young people whose need for Services is solely due to an injury that meets ACC's cover and entitlement criteria under the Accident Compensation Act 2001
- children at school requiring orientation and mobility services

- people who have left school or reached the age of 21 years, whichever is earlier, who require counselling services
- people experiencing low vision who do not meet the clinical criteria above
- people with a print disability (due to neurological condition such as CVA or dyslexia).

#### 6. Service Components

### 6.1 Vision Assessment Services

#### 6.1.1 Vision Needs Assessment

The Provider will:

- complete a comprehensive, subjective and objective specialist vision need assessment (may include a functional low vision assessment) with the Person, family and relevant support people, to determine their current functional level of blindness or vision impairment or visual impairment and its impact on their daily life
- ensure the Person's abilities, resources and culture are considered during the assessment process
- ensure the Person and their support people understand the assessment process
- undertake the assessment in an environment appropriate for best client outcomes
- link with other assessment data (eg, rehabilitation information, adaptive communication information) to form the basis of an agreed Vision Rehabilitation Plan
- take account of the differing needs of adults and the developmental needs of children in the assessment process

### 6.1.2 Assessments for the Provision of Long Term Loan Equipment

The Provider will ensure that assessments for long term loan equipment are carried out during the vision assessment process and will ensure delivery of the rehabilitation plan by the appropriate staff in their role as EMS Assessors accessing the Ministry's funded Equipment and Modification Services (EMS) through the Ministry's contracted EMS Providers.

The Provider will ensure that in undertaking the provision of assessments for Equipment and Modification Services, the EMS Assessors:

- are suitably qualified and competent to complete specific types of assessment for the consideration of equipment
- will comply with all requirements laid out in the relevant manuals for provision of Equipment and Modification Services

 have sufficient administrative support to facilitate the completion of all relevant paperwork and the coordination of all associated individuals and agencies in the assessment, trial and supply of Equipment and Modification Services eg, equipment suppliers.

# 6.1.3 Vison Rehabilitation Plan

Following a Vision Needs Assessment, the Provider will develop a Vision Rehabilitation Plan with each Person. The Plan will:

- determine the Person's individual short and long term goals goals and outcomes to be achieved over a planned period, taking into account cost of delivery of the Services and individual choice. The goals may include personal, social, recreational, educational, vocational /employment needs (note that some of these services are not funded through this specification)
- identify the type of service required, specifying timeframes, commencement and completion dates for the recommended services

The Provider will conduct ongoing assessment of each Person's status to monitor the effectiveness, acceptability and appropriateness of the continuing provision of the Services

Upon completion of the rehabilitation vision programme will evaluate the services provided to determine if the Person's goals relating to managing the impact of their sight loss have been met and they are satisfied with the outcomes.

### 6.2 Types of Rehabilitation Services

The Provider will deliver the rehabilitation/habilitation services detailed in the table below in accordance with the Vision Rehabilitation Plan developed with each Person:

Eligible people	Type of Service	Purpose	
	Pre-school Children Services	The Provider will support children under the age of five years with functional loss of vision requiring Developmental Life Skills Programme which includes:	
		<ul> <li>Orientation and Mobility to travel to, and locate, destinations safely</li> </ul>	
Children and		<ul> <li>Developmental Adaptive Techniques of Daily Living so that young children have increased opportunities to perform routine daily living tasks.</li> </ul>	
Young People	School aged Children Services	The Provider will work in partnership with the Ministry of Education providers to provide a wraparound service for school aged children (excludes tertiary level students) to develop practical skills as the young person prepares for adulthood.	

		This is a complimentary service (to Ministry of Education) limited to the development of specific Developmental Adaptive Techniques of Daily Living skills a young person requires in the home environment and in social settings (such as recreation, peer support camps, communication with peers, personal presentation, helping out at home with domestic activities, and involvement in family outings).
		Roles and Responsibilities between the Provider and the Ministry of Education for Services to be provided in collaboration with the Ministry of Education will be clearly documented to avoid duplication of the Services and transparency for young people and their parents, carers and whānau receiving the Services.
	Counselling for children and young People	The Provider will provide children and young people and their families 0-21 years who require counselling to assist children (and their family/parents/primary carers) to come to terms with their sight loss build self-esteem delivered through family strengths based programme.
Young	Orientation and Mobility Service	The Provider will provide specialist training and coaching to people who require support to independently travel and safely navigate their environment eg:
and adults 16 years		<ul> <li>identify surroundings, including home, community, work, as appropriate</li> </ul>
and over		<ul> <li>how to travel to destinations safely and independently, including catching buses, taxis and walking</li> </ul>
		<ul> <li>in the use of orientation and mobility equipment (eg, mobility canes).</li> </ul>
	Adaptive Daily Living Services	The Provider will provide specialist training and coaching to people who require support to maintain independence with activities of daily life to use their remaining senses, adaptive skills and/or equipment in areas such as (but not limited to):
		<ul> <li>social skills</li> </ul>
		<ul> <li>medication identification and management</li> </ul>
		<ul> <li>shopping, cleaning, cooking, home management</li> </ul>
		<ul> <li>gardening</li> <li>use of telephone</li> <li>land and mobile heating skills</li> </ul>
		<ul> <li>use of telephone – land and mobile, banking skills</li> <li>personal care skills – bygiene, dressing</li> </ul>
		<ul> <li>personal care skills – hygiene, dressing,</li> </ul>

organisation etc
<ul> <li>basic communication skills - signatures, eftpos, money identification, ATM etc.</li> </ul>

#### 6.3 Deafblind Services

- **6.3.1** The Provider will ensure that services are provided for deafblind people, including staff that:
  - are competent to undertake and deliver deafblind assessment and support deafblind to engage and access the Services
  - demonstrate an ability to effectively communicate with deafblind people such as the use of tactile and other communication methods
  - build effective working relationships with other key agencies that provide services to deafblind people
- **6.3.2** The Provider will develop a national community awareness programme of deafblind Services so that;
  - deafblind people and their family and whānau know how to access these Services
  - other key agencies that provide services to deafblind people (such as Needs Assessment and Service Coordination organisations) gain a better understanding of issues for deafblind.

### 6.4 Māori and their whānau (kāpō Māori)

The Provider will ensure the provision of Services to Māori, by working with whānau to identify needs and provide appropriate support and rehabilitation services in a way that is appropriate to their values.

### 6.4.1 Access and Engagement (Māori)

The Provider will deliver additional access and engagement support Services that assist and work alongside kāpō Māori to facilitate access to the Services.

This includes:

- having available access to expert staff (in the delivery of kaupapa Māori services) who can form the first point of contact for new people identifying as Māori
- offering initial referral to cultural support upon registration to facilitate connection of kāpō Māori and their whānau to specialist vision and rehabilitation services
- being the key contact and where appropriate a conduit for re-engagement with the Provider during times of change or identified service need.

In addition, the Provider will support kāpō Māori and whānau:

- to self-advocate to receive culturally appropriate Services
- by sharing culturally appropriate information
- to identify and work effectively with staff on their desired approach to deliver specialist vision and rehabilitation Services
- to achieve their goals within individual and whānau expectations and time frames.

The Provider will ensure that:

- it works as an integral part of the wider team in the rehabilitation Services in partnership to achieve best possible outcomes for kāpō Māori
- it works in partnership with existing experienced service providers in the kāpō Māori community to support kāpō Māori to explore individual and whānau needs related to blindness and ensure services delivered are effective.

The Provider will ensure staff delivering the access and engagement support service demonstrate the following:

- knowledge and expertise in the delivery of kaupapa Māori services
- Te Reo Māori
- knowledge and expertise of incorporating, nurturing and upholding kaupapa and tikanga Māori principles and practices of:
  - a) Rangatiratanga (the ability exert self-determination);
  - b) Whānaungatanga (care and awareness of relationships);
  - c) **Manaakitanga** (care of the spiritual, physical, emotional well-being of the individual and/or collective whānau or group); and
  - d) Whakapapa (acknowledgement of where people are from).

# 6.4.2 Community Awareness

The Provider will also work with the kāpō Māori community to overcome barriers faced by, blind, deafblind and vision impaired kāpō Māori and their whānau, providing information about the causes of vision impairment/ blindness/ deafblindness.

### 6.5 Pacific Peoples

The Provider will ensure that the provision of Services to Pacific People, by working with Aiga/Kainga (families) to identify needs and provide support and rehabilitation services in a way that is appropriate to their values.

The Provider will implement its Pacific services in line with the Ministry of Health National Pascific Disability Plan, Faiva Ora, wherever possible.

# 6.5.1 Access and Engagement (Pacific Peoples)

The Provider will support and work alongside Pacific Peoples to engage and access Services.

- having available appropriately experienced staff (in the delivery of Services) that can form the first point of contact for people identifying as Pacific
- following an assessment facilitate connection of Pacific and their aiga/kainga to specialist vision and rehabilitation Services
- being the key contact and, where appropriate, a conduit for reengagement with the Provider during times of change or identified need for Services.

In addition, the Provider will support Pacific Peoples and aiga as follows:

- to self-advocate to receive culturally appropriate Services
- by sharing culturally appropriate information
- to identify and work effectively with staff their desired approach to deliver specialist vision and rehabilitation Services
- to achieve their goals within individual and aiga/kainga expectations and time frames.

The Provider will ensure that it:

- works as an integral part of the wider team in the rehabilitation Services in partnership to achieve best possible outcomes for Pacific Peoples
- engages existing experienced service providers in the Pacific community to support Pacific Peoples to explore individual and aiga/kainga needs related to blindness.

The Provider will ensure staff delivering the access and engagement support service for Pacific Peoples' Services demonstrate the following:

- in depth knowledge and demonstrated expertise in the delivery of Services to the blind community of Pacific Peoples
- understanding and fluency in at least one Pacific language
- knowledge and experience of incorporating, nurturing and upholding relevant Pacific principles and best practice to ensure on-going participation and engagement with the blind pacific community and their families.

# 6.5.2 Community Awareness

The Provider will also work with the Pacific Peoples communities to overcome barriers faced by blind, deafblind and vision impaired Pacific People, by providing information about the causes of vision impairment/ blindness/ deafblindness.

# 6.6 Education Services

The Provider will also provide the following general Services:

 education eg, promoting the support of vision impaired/blind/deafblind people within the community

- training for the Person and other support people (such as caregivers) in the use and application of equipment to maximise the benefit for the Person
- self-care and carer education to optimise functional level, prevent loss of function and maximise self-management. This will include training caregivers on how to reinforce and facilitate functional skills into all daily living activities
- education to ensure that vision impaired, blind, deafblind have information about the Services and how they are accessed, and to support their entry into the Services
- support in the form of elementary training and technical advice to other agencies, service providers, and educators who are working with deafblind people so they can provide quality services.

# 6.7 Short Term Loan Equipment

The Provider will be responsible for managing a short term loan pool of equipment that can be accessed nationally by Persons or groups. This includes items such as mobility canes, lighting, CCTV etc, and includes

- delivering practical support in the community
- repairs and maintenance of the short term loan equipment
- training staff and individuals to use the equipment.

### 6.8 **Provision of Information**

The Provider will be a source of information and advice about the Services and generic information (about wider services and supports from government agencies) that will support visually impaired people. This includes:

- producing resources in a range of accessible formats for blind people to maximise the potential of each resource including audio tape, Braille, and MS Word for use with screen readers
- ensuring the quality of all resources published is of a high standard, including a thorough peer review, the use of plain language, professional editing and formatting.

### 6.9 Budget Management

The Provider will:

- effectively manage resources within the allocated annual budget as set out by the Ministry
- comply with best practice financial management

 regularly update the Ministry in the Quarterly narrative report on the budgets and expenditure for each of the seven service lines under this agreement.

### 6.10 Coverage and settings

The Provider will ensure that:

- the Services will be provided nationally and equitably, to all eligible people within New Zealand
- there are no barriers to access through cultural beliefs and practices (where 'cultural' includes age, gender, ethnicity, disability or sexual orientation)
- the Services are provided in a range of settings including the person's home, work or educational setting, as long as they remain an Eligible Person
- premises are wheelchair accessible and disability car-parking is available at the front of the building.

### 6.11 Time

Services will be provided within usual business hours, or, where necessary, at a time to suit the person following their agreement.

### 6.12 **Prioritisation**

The Provider will be responsible for provision of an efficient and effective system for managing for prioritisation of the Services to ensure that those who have the most urgent need for an assessment receive Services first. Based upon need, priorities will generally be established by reference to the following criteria:

- people with progressive conditions are seen as soon as practicable
- people who require crisis management are responded to as soon as possible.

### 7 Key Inputs

#### 7.1 Staffing

The Provider will maintain appropriate levels of staffing to ensure that the service can be provided effectively and efficiently. Staffing will encompass skills to enable effective:

- delivery of the Services
- management of Information systems
- management of financial Systems.

The Provider will ensure that staff are knowledgeable about and conversant with all policy and procedures, and have an awareness of disability issues.

## 7.2 Staff Training

The Provider will:

- maintain appropriate levels of staffing to ensure the Service are provided effectively and efficiently
- ensure staff have access to information and training that ensures the delivery of high-quality Services
- ensure staff have skills to enable effective vision assessment, direct delivery of Services and evaluation of agreed goals and outcomes
- notify the Ministry in writing within 10 working days if the delivery of the Service is impacted adversely either due to skill set, available resource or unanticipated disruption
- ensure staff demonstrate specialist training to support the needs of Eligible People.

## 8 Exit Criteria

The Provider acknowledges that a Person's situation may change in one of the following ways and they may exit from the service:

- Upon completion the Vision Rehabilitation Plan
- the Person's wishes to exit the Service and transfer to an alternative service which may be in conjunction with the NASC provider
- the child enters school
- on permanent departure from New Zealand
- upon their death.

Where a person wishes to transfer to an alternative service, the Provider will facilitate the appropriate referral and transfer of relevant information pertaining to the person's needs and Services without undue delay.

The Provider will ensure that on completion of the Vision Rehabilitation Plan:

- discharge is planned with the Person, caregiver/family and whānau and other agencies as appropriate;
- a written discharge report is available for the relevant agencies and the relevant NASC where appropriate

# 9 Exclusions

The following services are not covered by this agreement:

 services to children and young people that are receiving services from the Ministry of Education

- generic Needs Assessment and Service Co-ordination (NASC)
- provision of recreational, educational and vocational/employment services.
- adaptive communication and technology training which includes Braille instruction and computer training
- recreation service provision
- vocational employment service support
- refurbishment or repairs of vision equipment.

## 10 Linkages

The Provider will develop strong links and service relationships with the at least the following, but there may be others for whom regular contact and liaison is relevant and necessary:

- Needs Assessment and Service Coordination (NASC) organisations
- Equipment and Modifications Service Assessors
- Registered Medical Practitioners, Ophthalmologists, Audiologist Māori community care services
- Pacific Peoples' community care services
- Residential care providers
- Equipment and Modification service providers
- District Health Boards
- Consumer advocacy services
- Deaf Aotearoa
- Child Development Services
- Education Services including Blind Low Vision Education Network New Zealand
- Consumer organiasations for the blind such as Blind Citizens of New Zealand, Ngati kāpō, Parents Vision Impaired
- Other government agencies as appropriate, such as Work and Income.

Where appropriate, the Provider will develop written service protocols or Memoranda of Understanding with those organisations and agencies listed above to ensure the Services can be operated in an effective and timely manner.

Where appropriate, the Provider will participate in intersectoral collaboration such as Strengthening Families.

### 11 Quality Requirements

The Provider is required to comply with the quality specifications as set out in the Tier One Service Specification. The Provider will also meet the following specific quality requirements.

## 11.1 Acceptability

- The Services will be delivered in a framework and manner that is consistent with the objectives of the New Zealand Disability Strategy.
- The Services should be provided in a way that is sensitive to the needs of the community within which the Provider operates and should have effective working relationships based on cooperation with a range of relevant community and support link groups.
- Client satisfaction surveys will be conducted by the Provider at least once a year, to ensure outcomes are being achieved and people are satisfied with the Services they receive. These surveys may also highlight the areas of the Services that may require reviewing or modifying. The Provider will Help inform reporting against service performance measures.
- In addition, acceptability to Māori and Pacific Peoples should be included in the review conducted by the Provider in conjunction with Māori and Pacific People. Support services to Māori and Pacific People should be proactively offered and available.

## 11.1 Record and Information Management

The Provider is responsible for:

- keeping accurate and up-to-date records of each Person's needs and ensuring that their records are linked to each individual's National Health Index (NHI) number.<sup>3</sup>
- complying with their obligations under relevant legislation including the Privacy Act 1993, the Health Information Privacy Code 1994.

### 12 Purchase Units

Purchase Units are defined in the Ministry of Health's Nationwide Service Framework Purchase Unit Data Dictionary. The following table is a summary list of the Tier Two Specialist Vision Assessment and Rehabilitation Services Purchase Unit Codes associated with this Service.

Purchase Purchase Unit Init Code Description	Measure	Purchase Measure definition
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<sup>&</sup>lt;sup>3</sup> "The NHI and the NHI number are central to the vision of safe and secure sharing of information among health and disability support services. An NHI number is fundamental for services to link information and get a better understanding of each person's needs." NHI Frequently Asked Questions, New Zealand Health Information Service website: <a href="http://www.nzhis.govt.nz/moh.nsf/pagesns/265?Open">http://www.nzhis.govt.nz/moh.nsf/pagesns/265?Open</a> The NHI is a unique identifier that is assigned to each person using health and disability support services, enabling individuals to be positively and uniquely identified for the purposes of treatment and care, and for maintaining medical records</a>

DSS1029	Specialist services	Assessment	
	-sensory		

# **13** Reporting Requirements

Full Reporting Requirements (including any Provider specific reporting requirements) are included in Appendix 3 of the Outcome Agreement.