

26 July 2011

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John Tamihere
Te Whanau o Waipareira Trust
PO Box 21 081
Henderson 0650

Dear John

FAMILY START SERVICES FROM 1 JULY 2011

Further to our meeting, you are aware that I have been appointed as the Director of the Family Start programme. This is as a direct result of Minister Bennett directing that new governance arrangements be put in place due to concerns about the performance of the Family Start programme.

I will be seeking a demonstrable improvement in the programme's effectiveness over the next 12 months. To achieve an improvement, the environment within which Family Start operates and how we work together, needs to change.

Family Start Team

A dedicated Ministry of Social Development (MSD) team has been established for the Family Start programme.

The team consists of:

- Carl Crafar - Director of Family Start.
Accountable for the delivery and performance of the Family Start programme.
(Email: 9(2)(a) DDI: 9(2)(a))
- 9(2)(a) - National Contracts Manager Family Start.
Responsible for the development of contracting procedures to ensure compliance with government contracting processes. This includes managing the reporting and monitoring of performance and compliance with contractual obligations.
(Email: 9(2)(a) DDI: 9(2)(a))
- 9(2)(a) - Programme Manager Family Start.
Responsible for leading the development of the Family Start programme. This includes redesigning the Family Start programme manual, developing best practice and coordinating enhancements to FS Net.
(Email: 9(2)(a) DDI: 9(2)(a))

- 5 positions to develop and support good practise to be appointed:
 - Practice Leader, MSD National Office. This position will lead the development and maintenance of supporting processes, resources and tools for quality service delivery.
 - Four Technical Experts will be based within the regions. The Technical Experts will identify areas needing practice improvement and will work collaboratively with you and relevant stakeholders to implement strategies/plans to strengthen practice.
- 9(2)(a) - Senior Advisor Funding Planning and Reporting.
Your RAF is responsible for the day-to-day management of your contract. Your RAF will work closely with the National Contracts Manager to monitor your performance and closely with the Technical Experts to support practice improvement.
(Email: 9(2)(a) DD: 9(2)(a))

Communications

I will be writing to you quarterly to keep you informed of your organisation's performance, any contract or practice issues and to update you on the developments with the Family Start programme. In addition I will be regularly attending the Family Start Collective Meetings nationally and regionally.

The Family Start team is developing a monthly e-news letter which will feature more generic updates on the Family Start programme, frequently asked questions and answers, reminders about key dates, training opportunities and the like. We also encourage you to share with us your good news stories. We will be checking your preferred contact details with you directly to confirm the distribution list.

Family Start Contract from 1 July 2011

Overall the performance of the Family Start programme against key performance measures for the 2010/2011 year was below expectations in a number of areas. On that basis, changes have been made to Family Start contracts from 1 July 2011 to strengthen our monitoring of providers performance and to accurately capture the service's key outcomes. The changes are noted below:

1. Monitoring of performance

From 1 July 2011 we will monitor your performance each month. The monthly monitoring arrangement will be reviewed quarterly and, subject to an improved performance, may be reduced to each quarter. Monitoring will focus on your performance against the key performance measures and the explanations for the numbers reported through FS-Net.

As part of the monitoring process, we will be reviewing provider's Family Start cost allocation structure and Family Start Programme budgets to ensure that Family Start funding is being used directly for Family Start service provision.

Your RAF will contact your organisation to organise dates. It is expected that monitoring visits will be conducted on arranged dates and that your organisation will develop and implement action plans to address any concerns raised. The RAFS and national office team will work closely together to remedy any concerns you have that require MSD action.

2. New Key Performance Measures

Your contract includes a revised set of 13 monthly and quarterly key performance measures (KPIs). These are attached as Appendix One and we include a brief description of any changes made and the rationale for those. In brief the KPIs include:

- Nine measures to be introduced from 1 July 2011; these include four new or amended measures of supervision practises, family planning processes and retention of families, and current measures around volumes, WellChild checks, immunisations and attendance at early childhood education.
- Four new measures to be introduced from 1 October 2011; these include three new measures of child maltreatment and a new measure of intensive home-visitation. The delay til October should enable adequate lead-in time around changes to the programme manual, development of whanau worker training and FS-Net changes.

The level of performance expected against those measures has been raised to between 70% and 95% and this will represent the level of performance that will be "green lighted" from 1 July 2011. We are working on changes to FS-Net to reflect the new KPIs but these will not be in place until August 2011.

Where performance targets are not met, the reasons why will be discussed during contract monitoring. The Ministry acknowledges that Family Start providers will need time and support to achieve the new KPIs and we will not penalise your organisation for things outside its control. However, a consequence of poor performance without an acceptable reason may be the withholding of payments and continued poor performance may result in contract termination.

I will again be meeting with the Family Start Collective on 28 July in Wellington and will talk about the above.

I look forward to working with you to improve outcomes for children and their families.

Yours sincerely

Carl Crafar
Director of Family Start

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Family Start: Practice Advisor Site Visit Record:

<p>Name of Provider: <u>Waipareira Trust</u> Manager: <u>9(2)(a)</u> Practice Advisor: <u>9(2)(a)</u> RAF: <u>9(2)(a)</u></p>	<p>Location of Provider: <u>Henderson</u> Region: <u>Auckland</u></p>
<p>Date of Visit: <u>22/2/12</u></p>	<p>Staff seen: <u>9(2)(a)</u> Joint monitoring visit with <u>RAF 9(2)(a)</u></p>
<p>1. Review of Service Improvement Plan</p> <p>2. Evidence of progress</p>	<p><u>9(2)(a)</u> signed off the SIP however there was not the opportunity to fully discuss this with him. <u>9(2)(a)</u> has stated that the Supervisors have been given full delegation and will be leading the practice outcomes for FS.</p> <p>- Child Safety Tools? Sighted template which supervisors have modified to include a narrative to justify yes/no answers. A qualified counsellor specialising in abuse and trauma <u>9(2)(a)</u> is doing a series of workshops on the 29th March in relation to the tools. This will cover engaging with families, how to ask questions related to the tools, what to do when a "yes" or a disclosure is made by families and workers keeping themselves safe. Supervisors are ensuring that all components of the tools are discussed before sign off in supervision. Discussed further training, however both supervisors feel confident that they can support staff in this area and with the additional training from <u>9(2)(a)</u>. Suggested that this be monitored by the PA.</p> <p>- Exiting and low needs families: previously no pathway or paper trail to exit families and workers were exiting themselves with no supervisor consultation or sign off. Supervisors have developed an exit pathway which has to be signed off by the supervisor and placed on the file. This includes a case summary and analysis and risk assessment. I have sighted this document and it looks very comprehensive.</p> <p>- Training calendar was sighted for all staff to attend. This included a workshop on case note writing in which I sighted best practice guidelines.</p>

Strengths and Needs assessments and IFP's training has been set for 21st Mar. Every Wed meeting components of the programme, including the manual is being covered with staff. Two workers are currently completing child matters training.

- I have suggested that the Puawaihahi training for recognising abuse facilitated by medical specialists at Starship Hospital would be a good complement alongside the CST tools training. Supervisors agreed and would look at the CYF training calendar for this.
- Home visits: Daily submission of staff calendar is monitored by the supervisors to assess how staff are managing their workload. Any outstanding KPI activities and stats are recorded by the supervisor and are shared with the staff so everyone can see where they are at. One worker is behind staff will offer to assist that worker where practicable.
- Weekly supervision for all staff remains a high priority. 9(2)(a) stated that there is a real focus on reflective practice during supervision which is something staff are not previously familiar with. Supervisors now recording all face supervision and case consultations. 9(2)(a) has approved external supervision for both supervisors, although they touch base with [redacted] every morning and have a formal meeting once a week.
- AM/BTL: 9(2)(a) spent time with the staff and presented the Whakatipu training. Staff feedback was very positive and supervisors reported overall clear improvements which was fed back by 9(2)(a). Two staff are on refresher training this week.
- Development plans: Previously no plans in place, however staff beginning to do these. Will need to be sighted for verification [redacted] has agreed to fund all fees for staff to gain their ANZASW competency and registration. For those that are not social work qualified, they will have membership to their professional body paid for. Supervisors are giving staff six months to complete their competency process.
- Referrer and community engagement: Presentation dates to agencies were sighted and those that have been completed. Supervisors reported that those agencies that refused to refer are now coming on board. CYF meetings for Waitakere and Whenuapai sites have been set and they have

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	<p>been invited to attend an afternoon tea and meet the staff. Supervisors said that the CYF managers looking forward to starting again and working together more productively. Western Women's Refuge are now referring their POL 400's. Barnardos and Pacific Island Support at Starship hospital have also got presentations booked. All Hospital DHB's are scheduled to be seen in March. 16 referrals have been received this month so far which is an improvement.</p> <p>- A .5 community liaison position has been established and is attending hub meetings in the community and focus on relationship building. List sighted for agency visits. There will now be a F.S representative at all weekly FVIARS meetings</p>
<p>3. Delivery of support as planned</p>	
<p>4. Additional activity agreed</p>	
<p>5. Other relevant issues</p>	<p>- Small cluster of staff, mainly new and inexperienced workers are finding engaging with families about the CST difficult. Have suggested that these workers be buddied by an appropriate senior worker to go out with the less experienced worker and the need for supervisors to be doing more live supervision to assess how they are going. Some staff are not sure about their job since the introduction of the tools and also the introduction of new boundaries now being put in place Supervisors clear with staff that those who do not comply will be performance managed.</p> <p>- Supervisors report a reluctance for workers to case note record, this may be due to a lack of confidence in their analysis and decision making and accountability. Workers are reluctant to make a report of concern to CYF due to fear on disengaging with the family. Supervisors are making efforts to address this through further training and supervision. I have asked them to develop a written statement on child safety and risk which is clear to all staff as per the SIP.</p>

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- Assessment and IFP's remain an ongoing concern. Supervisors concerned that staff do not know what SMART planning is and what information is needed in an assessment. Training has been schedule dot address this.

9(2)(a)

- I asked [redacted] about why the baseline competency assessment is not being completed as agreed in the SIP, but he stated that it that has and that the supervisors have completed their own analysis. I have asked the supervisors to put this analysis in writing and to send this through to me so I am clear about how they have measured this.

- There are a number of low needs families of workers caseloads which require transition and an exit plan. Some staff are reluctant about "letting go" and a more directive approach with workers is being needed.

- Both Supervisors are making a strong and focused effort, particularly 9(2)(a) who appears to be leading the change management of staff. They understand that despite all their best efforts, the contract may not be renewed but are determined to make positive changes in the mean time. While this change may take some months to fully materialise, it is good to see that there is tangible evidence so far of what processes and systems have been put in place.

9(2)(a)

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Family Start

Family Start: Practice Advisor Site Visit Record:

Name of Provider: Waipareira Manager: 9(2)(a) Practice Advisor: 9(2)(a) RAF: 9(2)(a)	Location of Provider: Henderson Region: Auckland Date: 24/2/12
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Summary of observations from Practice Advisor 9(2)(a) and RAF 9(2)(a) regarding

There is recent steady progress being made from the supervisors 9(2)(a) and 9(2)(a) implementing change management processes to practice and the daily management of the team. However this really has only occurred since the introduction of the newest Supervisor 9(2)(a) who began her post in January this year. 9(2)(a) appears to have genuine motivation and commitment to ensuring the success of the programme. This is somewhat of a concern long term, as 9(2)(a) is a full time supervisor, whilst 9(2)(a) is part time and has two other contracts to manage (PAFT and Incredible Years). This arrangement may not be sustainable if one Supervisor is managing staff and implementing new systems and processes. Should 9(2)(a) leave her role, it is the observation of both myself and the RAF that this would not be carried through by 9(2)(a) and that she would need considerable support to do so.

We are also unclear of 9(2)(a)'s role as on the most recent visit from myself and the RAF, he stated that the site improvement plan would be managed by the two supervisors and that we would need to be liaising with them in respect of the daily management of Family Start. Whilst 9(2)(a) signed the improvement plan, it appeared more of a formality rather than a commitment from himself to ensure that the agreed goals are being met and how he will support the Supervisors in achieving this. If 9(2)(a) has delegated the daily management of the programme, it would be recommended that 9(2)(a) be shifted into a manager role, and replaced by another supervisor. This would then allow 9(2)(a) to focus on the change management and would also give a clearer process of line management to the staff.

While it is good to see processes in place, the tangible evidence of this will not be seen for some months due to an entrenched culture of bad performance and practice which the Supervisors recognise. It would also be unfair and unrealistic to expect improved outcomes of the programme to be the responsibility of two Supervisors (mainly 9(2)(a)), especially when 9(2)(a) overall role and leadership of the programme is questionable. Therefore, despite all efforts, with these issues unaddressed, both the RAF and myself remain doubtful whether any long term and sustainable change can be made.

9(2)(a)



MINISTRY OF SOCIAL DEVELOPMENT

Te Manatū Whakahiato Ora

Bowen State Building, Bowen Street, PO Box 12 136, Wellington • Telephone: 0-4-916 3300 • Facsimile: 0-4-918 0099

15 December 2011

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John Tamihere
Te Whanau o Waipareira Trust
PO Box 21 081
Henderson 0650

Dear John

FAMILY START QUARTERLY LETTER (1 JULY TO 30 SEPTEMBER 2011)

I apologise for the delay in writing this quarterly letter for the period 1 July to 30 September 2011. Further to my letter of 26 July 2011, I am writing to you to inform you of your organisation's performance for the quarter above and also update you on the developments with the Family Start team and in the programme during that time.

Your performance for the period 1 July 2011 to 30 September 2011

I have been advised by your Regional Adviser Funding (RAF), 9(2)(a) that your organisation has been fully engaged in the monitoring of the Family Start programme. I acknowledge the effort that your organisation is taking to respond to the new key performance measures and ensuring there is improvement in the effectiveness of Family Start, and in particular the strengthened focus on child safety.

Below are the results for your organisation as at 30 September 2011 against seven key performance measures:

Key performance measure	Contract Standard %	Achieved %
Number and percentage of contracted volumes delivered	95	83.7
Percentage of active families receiving at least one hour of AM / BTL per month	95	64.9
Percentage of workers who receive at least one hour of one-on-one supervision by a qualified supervisor	95	88.24
Percentage of all new families who remain on the programme for at least 12 months	80	8.65
Percentage of children who have their scheduled immunisation(s) during the quarter it came due	80	55.83
Percent of children who have had their scheduled Well Child visit(s) during the quarter that it came due.	80	50
Percentage of children 18 months and over enrolled in a licensed Early Childhood Education (ECE) facility	70	36.57

Your organisation did not meet any of the standards for the key performance measures. Further your organisation's performance continues to be poor and has declined over the quarter.

I wish to commend your organisation on its recent appointment of experienced staff members to focus on the Family Start programme and your recruitment drive to achieve an improvement. But I remain concerned that your organisation continues to be one of the poorest performers. I understand that the challenges to your organisation are the high whanau worker to family ratios, lack of positive engagement with referring agencies, and the implementation of core components of social work practise. I look forward to your organisation making progress in these areas and ask that you advise us of any support you need from our Family Start team to assist you in making improvements.

With regard to the key performance measure on the number of weekly visits required for new families (from 1 October) in their first 6 months of contact with Family Start, we wrote to each organisation's Family Start programme manager on 29 September 2011. The letter advised that we will not place a standard on this measure for the period 1 July 2011 – 30 June 2012. Instead we will monitor the performance of organisations for the remainder of this financial year and set an appropriate standard from 1 July 2012.

Family Start Team

We have now appointed 5 positions to develop, support and strengthen best practise.

9(2)(a) was appointed as the Practise Leader in early September 9(2)(a) will lead the development and enhancement of supporting processes, resources and tools for quality service delivery nationally. 9(2)(a) contact details are: 9(2)(a)
9(2)(a)

We have also appointed four Practise Advisors that will be based within the regions. The Practise Advisor for your organisation is 9(2)(a)

9(2)(a) would have already been in contact with your organisation to discuss how she can support practise capability within your organisation and also establish a timeline regarding the regularity of visits. You can be assured that 9(2)(a) will work closely together to ensure our activity is co-ordinated effectively to ensure as little disruption as possible.

Communications and support provided

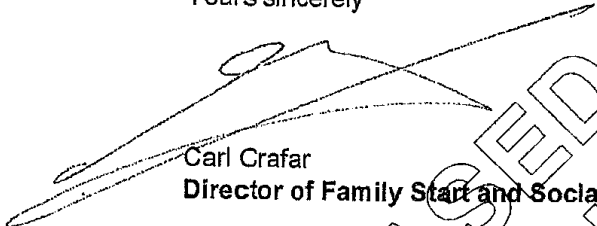
Over the last quarter:

- A Family Start working party has been established. It is made up of representatives of providers (as nominated by the Family Start Collective) and Ministry staff to ensure that where possible there is effective consultation on practise development.
- The Family Start team attended the Family Start Collective hui on 11 November.

- 9(2)(a) and 9(2)(a) (Programme Manager) facilitated workshops in late October/early November at five regional hui for Family Start providers. These workshops focused on the new child safety tools, associated practise and recording process.
- RAF's have undertaken regular support/monitoring visits and provided written reports on those visits to you and the National Family Start team.
- Advice notes have been issued on qualified supervision, weekly home visits, FS Net changes and child safety tools.
- A monthly newsletter with frequently asked questions has been implemented.
- Additional resources and support has been provided through:
 - o AM/BTL supervision training in Wellington (early September)
 - o issuing the "Raising Families in New Zealand" DVD to Family Start sites
 - o Whakatipu parenting resources.

I look forward to continuing to work with you to improve outcomes for vulnerable children and their families.

Yours sincerely



Carl Crafar
Director of Family Start and Social Sector Trials

Copy to: 9(2)(a)

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Family Start

Family Start: Practice Advisor Site Visit Record:

<p>Name of Provider: Waipareira Trust Manager: 9(2)(a) Practice Advisor: 9(2)(a) RAF 9(2)(a)</p>	<p>Location of Provider: Henderson Region: Auckland</p>
<p>Date of Visit: 19/11/11</p>	<p>Staff seen: 9(2)(a) (Supervisor) Present Also 9(2)(a)</p>
<p>1. Review of Service Improvement Plan</p>	<p>Discussed and introduced the requirements of the site improvement plan and the role of the Practice Advisor in regards to monitoring and prioritising low areas of performance across the programme. The purpose of the visit was to also ensure 9(2)(a) were clear about the new KPI tools (child safety) and that 9(2)(a) would clarify this.</p>
<p>2. Evidence of progress</p>	<p>9(2)(a) reported the following strategies that are being implemented:</p> <ul style="list-style-type: none"> - Process of exiting families clarified 9(2)(a) is in the process of tidying up FS net and exiting those families with low needs and where there has been little or nor contact. - Ratio's of intensity more stringent with the need to target high needs families - Priority that every family is visited as some have had no contact from the Whanau Worker
<p>3. Delivery of support as planned</p>	
<p>4. Additional activity agreed</p>	<p>9(2)(a) discussed introducing role play with the Whanau Workers re training and to having a declaration of approach regarding the child safety tools.</p>

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5. Other relevant issues

- Reviewing relationship management with stakeholders and ensuring there is a safety net within the wider organisation.
- Require MOU with CYF office regarding protocols and points of contact.
- Relationship with CYF needs to be more robust.
- ECE – good provider relationships, however not informing FS of available vacancies.
- Next visit would include 9(2)(a) and the RAF to work through the sip and get this ready for sign off asap.

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Family Start

Family Start: Practice Advisor Site Visit Record:

<p>Name of Provider: Waipareira Trust Manager: 9(2)(a) Practice Advisor: 9(2)(a) RAF: 9(2)(a)</p>	<p>Location of Provider: Henderson Region: Auckland</p>
<p>Date of Visit: 8/12/11</p>	<p>Staff seen: 9(2)(a) (Supervisor) and 9(2)(a) (FS Director) and 9(2)(a) (RAF)</p>
<p>1. Review of Service Improvement Plan</p>	<p>- Draft SIP presented for discussion with suggested SMART Plans. It reiterated the importance of finalising and signing the SIP promptly so that monitoring and support can begin. It was further emphasised that due to the historical concerns about poor performance and specific child safety issues that we would need to see hard evidence of change and also leadership. We also needed to have management Board involved and committed to these changes.</p>
<p>2. Evidence of progress</p>	<p>It is to be noted that the below statements are from and 9(2)(a) are yet to be evidenced and is not an indication of current improved KPI standards. These will need to be measured over time through close monitoring of the SIP and ongoing monthly reports from RAF.</p> <ul style="list-style-type: none"> - Recently recruited Comms manager to look at breakdowns in systems and communications pathway both internally across services and externally with referrers. - Referrals have been slipping due to lack of confidence by referrers in FS. 9(2)(a) reports that FS is now responding with a better service and referrals are increasing. One Social Worker has a good networking ability and will be the liaison person. - Completed FS net file audit and database tidy up - Phased target of referrals to incorporate new referral criteria. Important that the relationship with CYF is strengthened with local site as this will be a crucial source of referrals. 9(2)(a) to assist in facilitating this. - Co-ordination integration meeting every Friday to discuss cross referrals within the wider service. FS group meet weekly to review home visits, practice and quality issues, referrals etc.

<p>9(2)(a) acknowledged a culture of selective reporting but states that transparency has increased with a weekly written report to CEO. 9(2)(a) states this is called an Integrated Services Report. 9(2)(a) was asked to provide a copy of these to the FS Directorate.</p> <ul style="list-style-type: none"> - Group and peer supervision to occur on a regular basis. Trying to incorporate reflective practice. 9(2)(a) reports Supervision has already increased and that staff are feeling much more secure and supported. Teams have been refocused and experienced workers are more evenly distributed within the team - 9(2)(a) talked about generating statements of leadership within the organisation and promotion that the child's safety is paramount. It was however unclear what this actually meant as 9(2)(a) was not able to articulate this with any tangible evidence. 9(2)(a) 9th January a strategic planning day is to occur with a focus on re-energising and supporting staff to be on the outcome of this and to offer any additional support where required and agreed to. A baseline assessment of all staff is to occur by the end of Feb 2012. The purpose of this is to assess the current level of knowledge amongst staff (e.g. practice knowledge and in particular, their understanding of risk and analytical skills. This will enable targeted training and support to be delivered to staff. It was agreed that 9(2)(a) is to be included in the development of this assessment as this will work alongside the SIP. 	<p>9(2)(a)</p>
<p>3. Delivery of support as planned</p>	<p>9(2)(a)</p>
<p>4. Additional activity agreed</p>	<p>9(2)(a)</p>
<p>5. Other relevant issues</p>	<ul style="list-style-type: none"> - Currently 16 VWV – 5 down. Staff are at full capacity. Taking on two new students. - 6 PAFT workers, supervision monthly - New Supervisor to start in new year on a part time basis from ATWC FS. - 9(2)(a) to contact 9(2)(a) when back from leave in the new year to formalise SIP and begin planned appointments.

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FAMILY START KPI MONITORING TEMPLATE

Provider Name: Te Whanau O Waipareira Trust
 Provider Number: 3311
 Contract Number:

For period: reviewing overall performance from 1 July 2011
 Venue: Whanau House, Waipareira Trust

Monitoring took place over three dates;

- 8 Dec 2011 – Meeting with 9(2)(a) [redacted] and towards the end Supervisor 9(2)(a) [redacted] (meeting also used to inform Service Improvement Plan)
- 9 Dec 2011 – File Audit Check, five (5) files randomly selected and briefly discussed with 9(2)(a) [redacted]
- 13 Dec 2011 – Follow up discussion on file check findings and to consolidate action plan

General discussion

1. Good news stories	
2. Issues and trends in the community	Update if there are changes from last report
3. Issues and trends with the Family Start programme	Update if there are changes from last report
4. Health of the organisation	Update if there are changes from last report 9(2)(a) [redacted] 9(2)(a) [redacted]
5. CYF Approval review completed	Approvals Assessor 9(2)(a) [redacted] was undertaking a review in the week ending 9 th Dec. [redacted] advised that initial feedback from [redacted] had been positive (in regard to file improvements). The RAF has yet to follow up with Approvals at time of writing.
6. Ahuru Mowai visit	Record the last visit from AM/BTL team – anything to follow-up?
7. Review of the financials for Family Start (annually)	A copy of the latest audited financial accounts remains overdue.

New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
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New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>1. Number and percentage of contracted volumes delivered (Monthly measure)</p> <p>Why? Tracking volumes contracted as well as demand for the service</p>	95%	77.8% (Oct 2011)	<p>Record the number of whanau workers and supervisors.</p> <p>2. The number of incoming referrals in the period:</p> <ul style="list-style-type: none"> Are the key referral agencies engaged? The number of referrals declined: Summary of reasons – are the reasons reasonable? Are the referral criteria being applied correctly? What steps are being taken to achieve voluntary participation in the programme? Are these families still actively engaged in the programme? Waiting list numbers to assess demand for the service How long do people wait? Are they referred elsewhere? FS-Net being maintained: <ul style="list-style-type: none"> Eliminate 'unassigned' active cases in FS-Net if not contacted after 6 weeks Leave & training planned to ensure adequate coverage: Plan in place to cover unplanned absences 	<p>advised that volumes are low because there has been a focus on exiting families that were not actively engaging in the programme. He said that in some cases families had not been visited for six months, and there was one case where three siblings were registered as Family Start children. The file checks confirmed that the visiting frequency is variable.</p> <p>Alongside this, [redacted] acknowledged that Waipareira needs to improve engagement with key referral agencies (mainly hospitals, mental health services and whānau). He advised that the Trust has employed a Communications Manager to undertake an environmental scan and improve stakeholder engagement and communication pathways – both internal and external.</p> <p>[redacted] explained that he has a mandate to lead change across funding and contracting areas of concern. He provides performance-rated and risk-rated reports to the C E John Tamihere. He said that there was previously a lack of honesty and transparency in reporting to senior management, and a culture of "selective reporting".</p> <p>[redacted] advised that there are now phased monthly targets to improve contract volumes. [redacted] The end of Feb 2012 was agreed as the review date at which there would be evidence of progress/improvement.</p> <p>[redacted] advised that there are currently 16 Whanau Workers (which translates to an acceptable VWV to Client ratio of 1:16). However [redacted] said that they are still "five workers down". [redacted]</p>

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New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>2. Percentage of workers who receive at least one hour of one-on-one supervision by a qualified supervisor each week</p> <p>(Monthly measure)</p> <p>Why?</p> <p>Support the professional practice of those working with vulnerable families.</p> <p>[REDACTED]</p> <p>[REDACTED]</p>	95%	100%	<p>The most recent CYF Approvals assessment report should be referenced, and if this has been done recently, avoid duplicating any checks.</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>2. Are staff development plans and performance appraisals in place?</p> <p>3. Quality of the supervision (internal):</p> <ul style="list-style-type: none"> Sight supervision schedule and Was for frequency of supervision and documentation that is covered, expect to see a formal note that covers client cases. Sight internal contract between supervisor and whanau worker <p>4. If external supervision is given, sight ledger/invoice and a written agreement - clause 6.3.4 Family Start Manual</p> <p>5. Ensure supervision recorded accurately in FS-Net.</p> <p>[REDACTED]</p>	<p>9(2)(a)</p> <p>[REDACTED]</p> <p>9(2)(a) [REDACTED] that there had been a lack of leadership, guidance and effective supervision at Waipareira Family Start. He said there is a need to "re-energise professional development and delivery". This will be addressed through team meetings, one to one supervision and leaders modelling of desired behaviours.</p> <p>Action 1: The team is meeting in January 2012 to develop a Strategic Plan focussed on team-building and performance development [REDACTED] to provide this plan to MSD team by the end of Jan 2012. This will include strategies for encouraging a safe culture where practice issues and tensions can be openly discussed and workers are able to challenge each other respectfully and constructively. 9(2)(a)</p> <p>Supervision records were not checked this month.</p> <p>Action 2: [REDACTED] to provide 9(2)(a) [REDACTED] with copies of the performance/risk-rated reports which go to the CE and Board (please provide most recent report before the week ending 16th Dec).</p> <p>The team's readiness to work with the new Child Protection tools was discussed, as were the practice issues arising in the investigation of the nine year old girl torture case [REDACTED] acknowledged a "culture of collusion and enmeshment" between workers and families at Waipareira. He advised that there is a need to balance the traditional whanau-centric approach of Maori social services with the strong child-focus of Family Start.</p>

New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>3. Percentage of families who are reviewing and completing their Individual Family Plans (IFPs) at least every three months</p> <p>(Quarterly measure)</p> <p>Why?</p> <p>The IFP is particular to a family and a regular review is required to reflect progress and ensure appropriateness of service provision.</p>	95%	Reported in FS-Net	<p>Review a random selection of client files to ensure that whanau are progressing towards their IFP goals</p> <p>IPF is to include all requirements as laid out in Family Start Manual</p> <ol style="list-style-type: none"> 1. Frequency of review – check dates and review dates? 2. Does IFP reflect progress over last 3 months and links/builds on strengths and needs? 3. Have intensity levels been set by the supervisor? Revised? 4. Have other agencies been consulted in relation to developing IFP? 5. Quality of goals: Are they SMART? Have they been discussed? Achievable? Likely to strengthen family against child maltreatment? 6. IFP signed by both whanau worker and family? 7. Has the supervisor signed off quarterly review within one week of review completion? 	<p>Action 3: In January 2012 supervisors will undertake a Knowledge & Attitude Assessment of all Whanau Workers to determine those who may need extra support with applying the Child Protection tools.</p> <p>9(2)(a) advised that cultural explanations/justifications for violence are not acceptable and he regards these as 'cultural camouflage'. He said that supervisors will be actively looking for signs that the focus has drifted from the welfare of the child.</p> <p>9(2)(a) said that Whanau had become 'insular' and that some workers held the attitude that 'we should stay out of the family's business and let them decide' in cases where whanau violence was suspected.</p> <p>9(2)(a) said that they are looking to build confident, competent practitioners and staff would be supported to re-orientate and re-focus on child-centred practice. Staff unable to make this shift will be performance managed and could face disciplinary proceedings.</p> <p>9(2)(a) advised that more information needs to be shared with workers about performance targets, the reason for them, and variances in workers' performance.</p> <p>Action 4: [redacted] to provide MSD team with Narrative Template developed to support whanau to explore some of the questions/issues raised in the application of the Child Protection tool (by w/e 16th Dec).</p>

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9(2)(a)

New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>4. Percentage of active families receiving at least one hour of AM / BTL per month</p> <p>(Monthly measure)</p> <p>Why? Regular delivery of AM/BTL provides some confidence that families are being regularly assessed in these domains.</p>	<p>95%</p>	<p>77.6% (Oct 2011)</p>	<p>Refer to last Ahuru Mowai report and with AM Advisor – check if any follow up is required? (Avoid duplication)</p> <p>Site random sample of client files FS-Net client notes for AM delivery verifying one hr per month</p> <p><i>All whanau workers have received initial training to deliver AM&BTL</i></p> <p><i>Supervisors have attended support workshops?</i></p> <p><i>Sight-check visit records sheets (yellow), completed in a timely manner, dated</i></p> <p><i>Has an initial AM or exit survey been completed?</i></p>	<p>AM/BTL has been low for Waipareira month on month. <input type="checkbox"/> advised that a .5 BTL champion supports the focus on BTL and co-works difficult cases.</p>
<p>5. Percentage of children 0-3 up-to-date with the developmental milestone checks set out in Ahuru Mōwai / Born to Learn. (Quarterly measure)</p> <p>Why? Adherence to the development milestone checks provides some confidence that children are being regularly assessed in these domains.</p>	<p>95%</p>	<p>Reported in FS-Net</p>	<p>Refer to last Ahuru Mowai report and with AM Advisor – check if any follow up is required? (Avoid duplication)</p> <p><i>Sight milestone checklists are completed and relevant to the age of the child</i></p> <p><i>Has the check list been ticked or dated?</i></p>	

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New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>6. Percentage of all new families who remain on the programme for at least 12 months</p> <p>(Monthly measure)</p> <p>Why?</p> <p>Research suggests vulnerable families need to be actively engaged in intensive home-visitation programmes for at least 12 months for the programme to have a positive effect.</p>	80%	0% (Oct 2011)	<p>Print off the list of cases for each whanau worker – randomly select and:</p> <ol style="list-style-type: none"> 1. Check that the family has received <i>minimum of 1 home visit per month and 1 hour of AM&BTL delivered per month</i> 2. Check that the Strength and Needs assessments are reviewed at least 6 months <p>Discuss reasons why families are leaving within 2 months: (Refer to monthly S-Net stats planned and implemented exits) 3. Are proposed exits discussed with Practice Manager?</p> <ul style="list-style-type: none"> • Exit process - strengths and needs assessment completed, IFP reviewed and plan put in place upon exiting • Was the exit within the control of the provider? • Is a regular scan done for long periods of non-contact? <p>4. Is a retention strategy in place?</p> <p>5. Are families referred elsewhere? (particularly if vulnerable)</p> <p>6. Transfers:</p> <ul style="list-style-type: none"> • Have family signed consent? • Has transition been managed between Family Start providers (Sight transfer documentation)? 	Retention strategies are required.

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New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>7. Percentage of children who have their scheduled immunisation(s) during the quarter it came due</p> <p>(Quarterly measure)</p> <p>Why? Promoting immunisation is a key way of improving children's health.</p>	80%	55.83% 2011/09 quarter	<ol style="list-style-type: none"> How do you promote this? Are FS-Net reminders followed? Is information collected at the initial contact phase about child's immunisation status? Is this part of supervision discussions? Refer to monthly FS-net stats/percentages for cannot be determined and Non answered why? Check file for completed immunisation sheets Check that in client notes in FS-Net the discussion has been recorded and noted 	<p>An action plan is needed to address the low immunisation ECE and Well Child KPI's.</p>
<p>8. Percent of children who have had their scheduled Well Child visit(s) during the quarter that it came due.</p> <p>(Quarterly measure)</p> <p>Why? Gives us some confidence that family health and well-being is being addressed.</p>	88%	Reported in FS-Net	<ol style="list-style-type: none"> How do you promote this? Are FS-Net reminders followed? Is information collected at the initial contact phase about child's Well Child's visits? Is this part of supervision discussions? Refer to monthly FS-net stats/percentages for cannot be determined and Non answered – why? Check file for completed Well Child visits Check that in client notes in FS-Net the discussion has been recorded and noted 	See above

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New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>9. Percentage of children 18 months and over enrolled in a licensed Early Childhood Education (ECE) facility</p> <p>(Quarterly measure)</p> <p>Why? ECE has been shown to be beneficial for a child's development</p>	70%	Reported in FS-Net	<ol style="list-style-type: none"> 1. Gather information about how many are on waiting lists or enrolled in alternative education facilities. 2. Refer to monthly FS-Net stats percentages for cannot be determined and non answered - why? 3. Relationship with ECE's and Family Start awareness? 	See above

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Key Performance Indicators for introduction from 1 October 2011

New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>10. Percentage of parents who do not use harmful disciplinary practices (Quarterly measure)</p> <p>Why? Measuring the workers proactive approach to identifying safety risks for children and taking action accordingly.</p> <p>Refer to the Family Staff Advice Note "Child Safety Tools" November 2011</p>	75%	Reported in FS-Net	<p>1. Review the implementation plan for the Child Safety Tools</p> <ul style="list-style-type: none"> Should be a tangible document Are the Tools included with the organisation's processes/forms Are they reflected on every three months <p>2. Confirm that staff have received training in and regular supervision for the use of the Child Safety Tools</p> <ul style="list-style-type: none"> Evidence that the Supervisor has signed off documentation <p>3. Confirm covered in case notes</p>	<p>Refer to the Family Staff Advice Note "Child Safety Tools" November 2011</p>

New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>11. Percentage of children assessed as safe from abuse and neglect</p> <p>(Quarterly measure)</p> <p>Why? Measuring the workers proactive approach to identifying safety risks for children and taking action accordingly.</p> <p>Refer to the Family Start Advice Note "Child Safety Tools" November 2011</p>	80%	Reported in FS-Net	As above	

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New KPI/Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>12. Percentage of parents who demonstrate positive parent-child interactions (Quarterly measure)</p> <p>Why? Measuring the workers proactive approach to identifying safety risks for children and taking action accordingly.</p> <p>Refer to the Family Start Advice Note "Child Safety Tools" November 2011</p>	80%	Reported in FS-Net	As above	

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New KPI Performance Measure	New KPI Standard	KPI Achieved	What information will be checked/verified? What information will be gathered?	Comment and actions for improvement
<p>13. Percentage of families visited once weekly in the first 6 months</p> <p>(Monthly measure)</p> <p>Why? Frequent home visits in the first three to six months for high needs families are critical for building a strong connection and are a key to good needs assessments and achieving successful outcomes.</p> <p>Refer to the Family Start Advice Note "Weekly Home Visits" September 2011</p>	N/A	Reported in FS-Net	<p>1. Review those families to determine:</p> <ul style="list-style-type: none"> If not meeting standard, were there attempted visits If not high need, should visiting be reduced Discussion on targeting correct "high need" referrals <p>2. Evidence that the weekly visit was <i>within the</i> definition of a "home visit"</p> <ul style="list-style-type: none"> Child seen <i>at</i> child's residence <i>at</i> out, child focused <i>on</i> primary carer to be seen every time Family members involved in child's care to be seen 	

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Summary of improvements/actions Identified in last monitoring/support visit:

Agreed Actions	By Whom	By When	Completed/Update
Previously agreed actions were not followed through on – undertakings were made by Family Start staff no longer involved in the programme 9(2)(a) and 9(2)(a)			

Summary of improvements/actions Identified in this monitoring/support visit:

Issue	By Whom	By When
Provide Strategic Plan focussed on team building and development.	9(2)(a)	End of Jan 2012
Provide copies of reports that go to Maipareira's C.E. [redacted]	9(2)(a)	Most recent report by week ending 16 th Dec 2011.
Carry out Knowledge & Attitude Assessment of staff, with the assistance of Practice Advisor (to assist with development of assessment)	9(2)(a)	End of Jan 2012
Provide copy of Narrative Assessment that supports families to explore Child Protection-related issues and discuss with MSD.	9(2)(a)	At monitoring visit on 13 th Dec 2011.
Provide copy of audited financial accounts.	9(2)(a)	Immediately please

File Checks:

Five files were reviewed and the following issues were identified (see file check sheets for specific findings);

Issue Identified	Suggested Follow-Up	By Whom
SNA's not signed off by supervisors, some contain only sketchy information.	[redacted]	9(2)(a) and 9(2)(a) and other supervisors
SNA's not linked to IFP's. Plans are generalised and	[redacted]	As above

<p>adult-centric. They do not include SMART objectives, in many cases.</p>	<p>Families' needs are 'buried' in case notes, and not woven into individual plans. There is therefore no review period within which progress (and risk) can be assessed.</p>	<p>As above</p>
<p>Initial Contact assessments are not being carried out. There is no evidence that the family's suitability for Family Start has been assessed, and no documentation of referral needs.</p>	<p>9(2)(a) to seek agreement about minimum standard of information/documentation to be kept up to date on files.</p>	<p>9(2)(a)</p>
<p>Referral information on file is inadequate i.e. no letter of referral or referral form from agencies, referring agencies not acknowledged. Service Agreement and referral forms relate to Whanau Tahī, not Family Start.</p>	<p>Could the Family Start Director please clarify whether Whānau Tahī referral forms can be used in place of Family Start forms?</p>	<p>9(2)(a)</p>
<p>Some files appeared to reflect a general home visiting service where visits were made and documented in case notes without any conscious use of SMTA's or IFP's as tools to assist family's progress.</p>	<p>Focus area for Practice Advisor</p>	<p>9(2)(a) and 9(2)(a) and other supervisors</p>

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Sign-off: 9(2)(a) Senior RAF

Report prepared by 9(2)(a) Senior RAF

Provider has sighted content: (Record name and date – attach email showing agreed or additional comments)

Copy sent to provider on:

Copy sent to Practice Advisor and Approvals Assessor on:

Family Start File Check Sheet

Family Start Monitoring Visit File Check Template	
Visit Date: 9 th Dec 2011	RAF: 9(2)(a)
Provider Name: Te Whanau O Waipareira Trust	
Monitoring Period Covered: From 1 July 2011	

File 3785 was selected for review but couldn't be located in the filing cabinet. It is suggested that "File Out" cards are used when staff have taken files out to update them.

File Number	4091	3857	4043	3683	4126
Whanau Worker	9(2)(a)				
1. REFERRALS (Related KPI – Contract Volumes, referral criteria met)					
Date of referral / accepted date?	15/06/11	Unclear	15/05/11	17/08/10	02/08/11
How old was child at date of referral?	9 months		18 months	Unclear	8 months
Where did the referral come from?	Self	PAFT	CYF		
Does the child/whanau met the 'high needs' criteria?	Unclear	No	Yes		

Comments per file:	
File Numbers	
4091	Self referral – is F S referral form being used to document referral needs? Service agreement / consent form relates to Whanau Tahi, not F S. Further correspondence (letter to HNZ) notes inappropriate housing as an issue.
3857	PAFT Service Agreement and enrolment form on file (Aug 2009). F S Service Agreement dated 23/11/11. Unclear why family now need F S, not PAFT? – no referral info on file, so hard to tell. No I C assessment info on file
4043	File monitoring check sheet on file – good! Referred May 2011, Whanau Tahi Service Agreement signed 5/8/2011. No I C assessment info on file.
3683	No referral info or I C assessment info on file.
4126	Referral need – family history of abuse. Whanau Tahi Service Agreement on file but only signed by Whanau Worker, whanau did not complete it.

2. STRENGTHS AND NEEDS ASSESSMENTS / HOME VISIT FREQUENCY					
Was the 1 st assessment completed within 6 weeks of the	Yes	No	Yes	No	Yes

¹ The date made active is the date a whanau worker was assigned (not Key Contact). It happens after acceptance of the family.

² This question is not applicable if the family has been on the programme for more than 12

Family Start File Check Sheet

family being made active? ^{1 2}					
Have subsequent assessments been completed within the 6 monthly periods?	Yes		Yes	No	
Has the supervisor signed off the assessment?	No		No	No	No
What does the assessment look like? Across the five domains has the whanau worker captured a good range of information?					
Has there been an assessment of the child's safety as a result of the domain work? (Manual pages 58-61)			No	No	
Have all whanau in their first year of engagement received weekly home visits?			No		

Comments per file:

File Numbers	
4091	First SNA completed 23/06/2011, referred 15/06/2011. Neither SNA's signed by supervisor. Info in second assessment (6/10/11) is brief.
3857	Case notes state that a HV took place 22/08/11 – but no mention of SNA due and no mention of work towards IFP. Appears to be a continuation of PAFY delivery.
4043	SNA's completed on time, but info is brief. Suggest that MSD Practice Advisor has a look at quality of info/analysis in assessments.
3683	There is one SNA on file dated 21/11/11. According to the Family Start Service Agreement form, the referral was made in August 2010? The information is brief and there is no linkage with IFP's.
4126	SNA completed on time and generally good info for first assessment.

3. INDIVIDUAL FAMILY PLANS REVIEWED AT LEAST EVERY THREE MONTHS?

Was the 1 st IFP completed within the required timeframe? (within one month of S&N Assessment)	No	No	No	Yes	No
Are the child's needs reflected in the IFP?	No			No	Some
Has the IFP been signed by whanau and worker?	Yes			Yes	Yes
Are the family goals consistent with the Family Start goals? i.e. child centred, prevention of abuse & neglect?					
Do the IFP's include SMART objectives?				No	No
Have reviews of the IFP taken place quarterly? 1 - reflecting progress over last 3 months, and the link between assessments and IFPs 2 - assessment of progress made by whanau and goals achieved 3 - an amended plan setting the goals for the next 3 months and does it reflect needs of the child	No				
	No				
Has the supervisor signed off the quarterly reviews within a week of the review's completion?					

_____ months

Family Start File Check Sheet

Comments per file:	
File Numbers	
4091	Concerns for the health/safety of the child are documented in correspondence to HNZ, but this thread has not been pulled through into the Whanau Plan. Goals appear to be adult-centric – "Get full licence", "Get and finish degree", "Move to Rotorua". The quarterly review of the plan is now due.
3857	No IFP on file.
4043	No IFP on file. There is concern that the issues and needs in the FGC plan are not followed through by goal planning for this family. There is mention of MOC and child's needs in case notes but these are not addressed in SMART goals for the family. 9(2)(a)
3683	The goals are generally adult-focussed and not SMART objectives e.g. 9(2)(a) to get full time job, 9(2)(a) to keep looking in the newspaper, 9(2)(a) to do his Drivers Licence, "Budgeting".

4. AM & BTL					
Does the file reflect that the family has received at least one hour of AM/BTL per month? Is there a case note or Home Visit Record entry for each AM/BTL session?	No	Yes	No	No	Yes

5. AM/BTL DEVELOPMENTAL MILESTONE CHECKS					
Is the child (if aged 0 to 3 years) up to date with developmental milestone checks?	Yes	Yes	No	Yes	Yes

Comments per file:	
File Numbers	
4091	BTL delivered in June, July, Aug, Sept – missed Oct & Nov. Latest case note (1/12) does not note overdue IFP review, or overdue BTL.
3857	File focuses on BTL delivery, rather than F S.
4043	PAFT HV records on file for May, June & Oct only. Could not see BTL Developmental Milestone Checks on file
3683	Client Contact Hours indicate only 3 hours of BTL delivered since Feb 2011.

6. RETENTION OF FAMILIES (all files checked were recent referrals)					
Did this family remain engaged in the programme for at least 12 months?	Yes	Yes	Yes	Yes	Yes
If exited, what was the reason for early exit?					
If exited, was this referral suitable/appropriate?					
Is there evidence on file of a retention strategy for this family?					

Family Start File Check Sheet

Comments per file:	
File Numbers	
4091	Contact with client has been relatively frequent, although in Sept & Oct this was DCC rather than HV.
3857	Was involved in the joint PAFT/FS programme, now transferred to FS - but unclear whether high needs criteria are met.
4043	Client contact hours indicate family home visited 3 times since 31/05/11. But some case notes on file dated 22/11/11.
3683	There is so little assessment info on file that it is hard to tell whether this family still needs to be engaged in FS, or exited. Have this family's referral needs been met? Last case note (not dated) states that children attend ECE, there are no concerns and "Whanau are well and settled." What are their needs and goals for the future?
4126	There are some needs identified in the first SNA which are not captured in goal planning for the whanau or child

7. IMMUNISATIONS					
Is there an Immunisation Schedule on file?	Yes	Yes	Yes	Unsure	Yes
Is the Immunisation Schedule up to date? (is there an immunisation due in the relevant quarter?)					
Is their evidence in case notes that immunisation has been discussed? (at I C Assessment and other HV)					

Comments per file:	
File Numbers	
4091	Imms & W C records indicate child up to date.
3857	Imms & W C records indicate child up to date
4043	Imms & W C records on file but not up to date - records stop at 5 months and child is 18 months.
3683	Imms & W C checklist on file but info only starts at 15 months, so unsure if Imms up to date.
4126	Imms & W C checklist on file but imms noted with a X.

8. WELL CHILD VISITS					
Is there evidence on file of completed Well Child visits?	Yes	Yes	No	Yes	Yes
Is there evidence in case notes that Well Child has been discussed?					

Comments per file:

Family Start File Check Sheet

File Numbers					
9. EARLY CHILDHOOD EDUCATION					
Is there evidence on file that the child is engaged in ECE (if the child is eligible).	n/a	Yes	No	Yes	n/a

Comments per file:	
File Numbers	
3857	There is correspondence re ELP on file, but this is not linked to any assessments, planning or case notes.

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Family Start: Practice Advisor Site Visit Record:

<p>Name of Provider: Waipareira Trust Manager: 9(2)(a) Practice Advisor: 9(2)(a) RAF: 9(2)(a)</p>	<p>Location of Provider: Henderson Region: Auckland</p>
<p>Date of Visit: 3rd Feb 2012</p>	<p>Staff seen: 9(2)(a) (Supervisors) 9(2)(a)</p>
<p>1. Review of Service Improvement Plan</p>	<p>9(2)(a) was not available at this meeting so the SIP could not be signed off. There are also a number of tasks specific to which are not the responsibility of the supervisors, therefore my focus will be on supporting the supervisors with the new KPI tool as the first priority then with the strengths and needs/IFP's.</p>
<p>2. Evidence of progress</p>	
<p>3. Delivery of support as planned</p>	
<p>4. Additional activity agreed</p>	<p>9(2)(a)</p>
<p>5. Other relevant issues</p>	<p>- Baseline competency with staff (as discussed and agreed with [] is no longer being held and will be done through supervision individually. Supervisors stated there is a 3 month training plan in place, i.e. casenotes, disclosures, training for 3 staff at Care Matters.</p>

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- It was identified that IFP's are the biggest gap although there is some improvement. Using Wednesday meetings to go through competencies. It was agreed that further training is required with this area and the S&A. Discussed with Supervisors that it would be beneficial for them to co-facilitate any workshops around this give the high cultural components. We all agreed that at the next monitoring visit we would work through an outline of what this would like and ensure a date is set.
- Child safety tools – reported that these are being implemented, however a concern arose that staff were taking out the questions and leaving them with families to fill in and hand them back to the worker. I advised that this is not what they are for and it is the workers responsibility to ask the questions and draw out the information. It was agreed that this again would be covered in the training plan.
- Supervisors stated that they have lightened areas up in terms of monitoring the work of staff, i.e. all outgoing mail is monitored and checked before it is sent to ensure quality and content. There is a key contact person that completes all initial assessments and does not hold a clipboard.
- Daily monitoring of stats – every worker has to submit a daily diary of their key work so that this can be measured against the stats. Weekly visits were an issue of not being recorded, however expectation is that all schedules to be submitted for the week.
- Discussion regarding a plan for performance management of staff. Supervisors stated that low performers have been identified and a template has been developed to record the KPI's that have not been met. A PIP template has been developed and one staff member is now on this plan. The template was sighted.
- Supervision – This is a priority and staff are receiving weekly supervision. Home visits and BTL are being monitored and supervisors report that improvement should be seen in the next KPI's.
- Referrals – A lot of services did not know about FS, and those that did are hesitant in referring. The supervisors said that is has been difficult to get those referrers such as CYF, hospital and womens refuge back on board given the difficulties with Waipareira responding to referrals and providing effective social work practice with the families. There has been a blanket response from the main referrers to not refer to FS and the supervisors are aware it will take time for agencies to begin to trust the service again and to re-engage.
- All staff are about to submit ANZASW applications to sit their

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	<p>competency and then apply for registration. The supervisors report that there is much more trust and stability within the team and that they feel more settled. Some of the problems that the whanau workers had was that they did not have an understanding of the purpose and philosophy of FS, therefore they did not understand the key components of the programme and why KPI's were so important.</p> <p>- 9(2)(a)</p>
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