

Progress Update 3

Family Start: Service Improvement Plan

Giving children the best start in life...



14/2/12

9(2)(a)

Name of Provider: Te Ropu Awahina  
Location of Provider: Region: Porirua  
Manager: 9(2)(a)  
Practice Advisor: 9(2)(a)  
RAF: 9(2)(a)  
Visit Date: 2 Feb 2012

Plan needs to consider all KPIs and explore performance and good practice being achieved. Consider 'good news', progress and strengths and also focus on areas where performance or RAF monitoring have identified difficulties. Prioritise the biggest challenges.

Particular attention is required in the areas relating to Child safety, supervision, assessment and planning engaging hard to reach whanau, delivery of activity e.g. weekly visits, relationships with other agencies. Additional 'Advice Notes' will be made available to set standards to assist with this process and guide expectations. Current Advice notes will be used to support standards and unify practice.

Proportion of time spent at each site will have an emphasis on input - advice, support, and guidance. RAF's role is centrally one of monitoring and Practice Advisors is one of delivering active support and building on change and improvement. The roles are complementary and will naturally overlap in some instances.

Plans will be discussed and agreed with the Site Manager - input may be with Supervisors and/or practitioners. Audit of files and discussion with practitioners will be needed to explore and evidence progress as will possible discussion with whanau using the service.

Brief summary of practice strengths:

- o Regular weekly staff internal training
- o Qualified senior practitioner/supervisor interim
- o Managing and monitoring whanau exit process

Brief summary of practice requiring attention:

- o Referrals from CYF through DR process do not stay on FS voluntarily
- o Major changes to the organisations premises, and senior management
- o Resignations and recruitment of whanau workers
- o Whanau engagement not strong but practice manager monitoring this
- o Improve relationships and referrals of at risk whanau from lead referral agencies and Teen parent school in Lindon
- o Strengthen supervision and monitoring processes that centre around the child
- o Improve procedures and processes linking whakaatua, needs assessment, child safety tools for whanau and navigational plan for whanau workers
- o Increase AMBTL delivery % per month
- o Increase the uptake of well child checks and immunisations; improve networking with these services

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- o Increase % of whanau receiving at least one home visit per month
- o Increase number of whanau visited at least weekly in first six months on FS
- o ECE uptake is low

**Practice Advisor**

Priorities identified for practice advisor support: Implementing the Child Safety Tools and whole process from Initial Visits through to the first IFP. Apart from the priority practice areas all areas of this programme need assessing.

**Current judgement on level of support required:**

This will assist Practice Advisors in determining how much time needs to be allocated. High Medium Low  
 Low would indicate need for no more than contact every 2 months. Medium monthly contact and high requires contact twice a month.

Desired Outcome Ensure SMART	Action	Who	When	Review date: Progress Update: Enter evidence of progress or add actions as required	Achieved Signed off
Te Ropu Awhina ES will have a clear process for implementing and supporting whanau workers practice in using the Child Safety Tools and developing Safety Plans	Develop a plan and report template for implementing the CST with all new whanau Develop a plan to review CST with all existing whanau to ensure that all whanau have CST completed by May 2012.	9(2)(a)	Implement by 10 Feb	Review date: 2 Feb 2012 Progress Update: 10 Feb Received email re: agreement to SIP <ul style="list-style-type: none"> <li>o Have had a staff meeting to assist with realigning to the new KPI's</li> <li>o Monday and Wednesday meetings held to follow up on progress, keep staff on target and provide support.</li> <li>o Staff will begin to implement CST on Tuesday 6 Feb.</li> <li>o Existing whanau CST - Each whanau worker is given a list of two of their whanau that they are to review CST with each week. This will enable all to be completed by May.</li> </ul>	
	Review the Safety Plan template to include the standards required MSD	9(2)(a)	By 10 Feb	9(2)(a) has developed a new Safety Plan template	
	Provide a focus session on CST for all whanau workers to support practice	9(2)(a)	28 Feb	Focus session – half day CST, half day IFP	

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<p>Te Ropu Awhina will ensure that there is a well connected process between implementing the Strengths and Needs Assessment and Individual Family Goals</p>	<p>Reorganise whanau file, to bring the CST, S &amp; N Assess and Safety Plan to the front</p>	<p>Support staff to improve on detail within completed S &amp; N Assess, by using the "Great Assessment Tool"</p>	<p>Ensure that IFP goals are relevant to the outcomes of the S &amp; N Assess and connect to the Assess domains</p>	<p>Review the IFP template to include a link to the Whakaahua information ie: strengths of whanau used in IFP plan</p>	<p>Provide a focus session on developing a quality FS IFP</p>	<p>Te Ropu Awhina will improve the quality of recording of case notes, assessments and goal planning in client file</p>
<p>Support staff with record writing that includes: factual detail and are specific, objective and concise.</p>	<p>Support staff with record writing that includes: factual detail and are specific, objective and concise.</p>	<p>Support staff with record writing that includes: factual detail and are specific, objective and concise.</p>	<p>Support staff with record writing that includes: factual detail and are specific, objective and concise.</p>	<p>Support staff with record writing that includes: factual detail and are specific, objective and concise.</p>	<p>Support staff with record writing that includes: factual detail and are specific, objective and concise.</p>	<p>Support staff with record writing that includes: factual detail and are specific, objective and concise.</p>
<p>9(2)(a)</p>	<p>9(2)(a)</p>	<p>9(2)(a)</p>	<p>9(2)(a)</p>	<p>9(2)(a)</p>	<p>9(2)(a)</p>	<p>9(2)(a)</p>
<p>By 10 Feb</p>	<p>By 10 Feb</p>	<p>Implement 28 Feb</p>	<p>By 10 Feb</p>	<p>By 10 Feb</p>	<p>28 Feb</p>	<p>Provide support immediately</p>
<p> <ul style="list-style-type: none"> <li>Have begun to reorganise whanau files, some staff are ok with it. [redacted] will encourage others.</li> <li>The Great Assessment Tool has been shared and discussed with the staff, some staff are holding self assessments</li> <li>A staff meetings the quality and improvement of case notes is reiterated and staff are reminded to be specific.</li> <li>[redacted] is working with the new staff on strengthening their ability to use the Whakaahua assessment</li> <li>Reminding staff that Whakaahua strengths of whanau are utilised in IFP.</li> </ul> </p>	<p> <ul style="list-style-type: none"> <li>Reminding staff that they must ensure that Whakaahua is completed with specific, objective and concise information.</li> <li>Although it is the whanau filling it out, the whanau workers needs to support</li> </ul> </p>	<p>9(2)(a)</p>	<p>9(2)(a)</p>	<p>9(2)(a)</p>	<p>9(2)(a)</p>	<p>9(2)(a)</p>

Te Ropu Awahina will have a robust leadership plan for the new FS management team.	Develop a strategy/plan to ensure that the relevant information and progress made towards performance improvement is transferred to new manager/leader when employed	9(2)(a)	By 28 Feb	<p>more meaningful conversation to gather important information.</p> <ul style="list-style-type: none"> <li>o 9(2)(a) meeting weekly with re: progress and management structure.</li> <li>o A number of discussions have been had with external supervisor about support for casework and follow up of plans ect....</li> <li>o [redacted] can sign off on S &amp; N Assess, CST, reviews. This is also a means of monitoring all aspects of FS KPI delivery and casework. These should be discussed with the [redacted] when the worker when signing off work.</li> </ul>	9(2)(a)
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Use as many pages a required as continuation

Signed: Manager:  
Signed off Practice Leader:

date:  
date:

Practice Advisor: 9(2)(a)  
Ensure copied and sent to RAF

date: 2 Feb 2012

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Progress Update 2

Family Start: Service Improvement Plan

Giving children the best start in life...

Family Start

9(2)(a)

awaiting review  
Sg/nicole 2/12/12

Name of Provider: Te Ropu Awahina  
Location of Provider: Region: Porirua  
Manager: 9(2)(a)  
Practice Advisor: 9(2)(a)  
RAF: 9(2)(a)  
Visit Date: 26 Jan 2012

Plan needs to consider all KPIs and explore performance and good practice behind these. Consider 'good news', progress and strengths and also focus on areas where performance or RAF monitoring have identified difficulties. Prioritise the biggest challenges.

Particular attention is required in the areas relating to child safety, supervision, assessment and planning, ensuring hard to reach whanau delivery of activity e.g. weekly visits, relationships with other agencies. Additional 'Advice Notes' will become available to set standards to assist with this process and guide expectations. Current Advice notes will be used to support standards and unify practice.

Proportion of time spent at each site will have an emphasis on input - advice, support, and guidance. RAF's role is centrally one of monitoring and Practice Advisors is one of delivering active support and building on change and improvement. There is a complementary and will naturally overlap in some instances.

Plans will be discussed and agreed with the Site Manager - input may be with Supervisors and/or practitioners. Audit of files and discussion with practitioners will be needed to explore and evidence progress as will possible discussion with whanau using the service.

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- o Strengthen supervision and monitoring processes that centre around the child
- o Improvement needed on all areas of I-FP development
- o Improve procedures and processes linking whakaahua, needs assessment, child safety tools for whanau and navigational plan for whanau workers
- o Increase AMBTL delivery % per month
- o Increase the uptake of well child checks and immunisations, improve networking with these services

Attached not correct this is an update. Provider signed the original SIP which was the original  
2/2/12

- o Increase % of whanau receiving at least one home visit per month
- o Increase number of whanau visited at least weekly in first six months on FS
- o ECE uptake is low

**Practice Advisor**

Priorities identified for practice advisor support: Implementing the Child Safety Tools and whole process from Initial Visits through to the first IFP. Apart from the priority practice areas all areas of this programme need assessing.

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 Low would indicate need for no more than contact every 2 months. Medium monthly contact and high requires contact twice a month.

Desired Outcome Ensure SMART	Action	Who	When	Review Date: 26 Jan 2012 Progress Update: 10 Feb Enter evidence of progress or add actions as required	Achieved Signed off
Te Ropu Awahina FS will have a clear process for implementing and supporting whanau workers practice in using the Child Safety Tools and developing Safety Plans.	Develop a plan and report template for implementing the CST with all new whanau. Develop a plan to review CST with all existing whanau to ensure that all whanau have CST completed by May 2012.	9(2)(a)	Implement by 10 Feb	9(2)(a) had not been part of the National briefings on the new KPI's and CST 9(2)(a) a briefing to 9(2)(a) on the CST's and Whanau journey cycle - A Template had partly been developed by 9(2)(a) but was missing some questions, will re-develop this 9(2)(a)	
	Review the Safety Plan template to include the standards required MSD	9(2)(a)	By 10 Feb	- The Safety Plan was not clear, need to work on this and align with CST 9(2)(a)	
	Provide a focus session on CST for all whanau workers to support practice	9(2)(a)	28 Feb	9(2)(a) will develop a focus session	

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<p>Te Ropu Awthina will ensure that there is a well connected process between implementing the Strengths and Needs Assessment and Individual Family Goals</p>	<p>Reorganise whanau file, to bring the CST, S &amp; N Assess and Safety Plan to the front</p> <p>Support staff to improve on detail within completed S &amp; N Assess, by using the "Great Assessment Tool"</p> <p>Ensure that IFP goals are relevant to the objectives of the S &amp; N Assess and connect to the Assess domains</p> <p>Review the IFP template to include a link to the Whakaahua information ie: strengths of whanau used in IFP plan</p> <p>Provide a focus session on developing a quality FS IFP</p>	<p>9(2)(a)</p> <p>9(2)(a)</p> <p>9(2)(a)</p> <p>9(2)(a)</p> <p>9(2)(a)</p>	<p>By 10 Feb</p> <p>Implement 28 Feb</p> <p>By 10 Feb</p> <p>By 10 Feb</p>	<p>- Together we went over some whanau files and particularly focused on the S &amp; N Assess and IFP.</p> <p>- Safety goals</p> <p>- All S &amp; N Assess were too brief lacking detail and subjective</p> <p>- Explained to me how the Whakaahua model works</p> <p>- Longer process between the Whakaahua and S &amp; N Assess and Goals</p> <p>- Information gathered from Whakaahua could be used better</p> <p>- No real flow on from Whakaahua Goals and priorities to IFP, this has potential but needs to connect better</p> <p>- 9(2)(a) will have this ready</p>	<p>Te Ropu Awthina will</p> <p>Support staff with</p> <p>9(2)(a)</p> <p>Provide</p> <p>Consideration made in the whanau</p>
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improve the quality of recording of case notes, assessments and goal planning in client file	recor writing that includes: factual detail and are specific, objective and concise.	9(2)(a)	support immediately	to how this is monitored and how staff receive support External supervisor is not providing monitoring of casework quality.	
Te Ropu Awahina will have a robust leadership plan for the new FS management team.	Develop a strategy/plan to ensure that the relevant information and progress made towards performance improvement is transferred to new manager/leader when employed	9(2)(a)	By 28 Feb		

Use as many pages as required as confirmation

Signed: Manager:   
 Signed off Practice Leader:

9(2)(a) date: 2/2/12

Kristine Advisor 9(2)(a)   
 Ensure copied and sent to RAF

date: 26 Jan 2012

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**Family Start: Service Improvement Plan**

*Giving children the best start in life...*

**Family Start**

Name of Provider: *Te Ropu Awahina*

Location of Provider: Region: *Porirua*

Manager: *9(2)(a)*

Practice Advisor: *9(2)(b)*

RAF: *9(2)(a)*

Visit Date: *26 Jan 2012*

Plan needs to consider all KPIs and explore performance and good practice behind these. Consider good news, progress and strengths and also focus on areas where performance or RAF monitoring have identified difficulties. Prioritise the biggest challenges.

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**Practice Advisor**  
 Priorities identified for practice advisor support: Implementing the Child Safety Tools and whole process from Initial Visits through to the first IFP.  
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Ensure SMART					
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	Review the Safety Plan template to include the standards required MSD	9(2)(a)	By 10 Feb		
	Provide a focus session on CST for all whanau workers to support practice	9(2)(a)	28 Feb		

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<p>Te Ropu Awhina will ensure that there is a well connected process between Implementing the Strengths and Needs Assessment and Individual Family Goals</p>	<p>Reorganise whanau file, to bring the CST, S &amp; N Assess and Safety Plan to the front</p> <p>Support staff to improve on detail within completed S &amp; N Assess, by using the "Great Assessment Tool"</p> <p>Ensure that IFP goals are relevant to the outcomes of the S &amp; N Assess and contribute to the Assess domains</p> <p>Review the IFP template to include a link to the Whakaahua information ie: strengths of whanau used in IFP plan</p> <p>Provide a focus session on developing a quality FS IFP</p>	<p>9(2)(a)</p> <p>9(2)(a)</p> <p>9(2)(a)</p> <p>9(2)(a)</p>	<p>By 10 Feb</p> <p>Implement 28 Feb</p> <p>By 10 Feb</p> <p>By 10 Feb</p> <p>28 Feb</p>		
<p>Te Ropu Awhina will improve the quality of recording of case notes, assessments and goal planning in client file</p>	<p>Support staff with record writing that includes: factual detail and are specific, objective and concise.</p>	<p>9(2)(a)</p>	<p>Provide support immediately</p>		

Te Ropu Awahina will have a robust leadership plan for the new FS management team.	Develop a strategy/plan to ensure that the relevant information and progress made towards performance improvement is transferred to new manager/leader when employed	9(2)(a)	By 28 Feb	
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Use as many pages as required as continuation

Signed: Manager: 9(2)(a) date: 09/02/2012 Practice Advised 9(2)(a) date: 26 Jan 2012  
 Signed off Practice Leader: 9(2)(a) date: 27/2/12 Ensure adopted and sent to RAF

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Progress Update 1

9(2)(a)

8/2/12

Family Start: Service Improvement Plan

Giving children the best start in life...



Name of Provider: Te Ropu Awhina  
Location of Provider: Region: Porirua  
Manager: 9(2)(a)  
Practice Advisor: 9(2)(a)  
RAF: 9(2)(a)  
Visit Date: 20 Jan 2012

As of 16/12/11 this SIP has not been sent to TRA, due to no Management in place to send it to. A copy has been sent to RAF.

Plan needs to consider all KPIs and explore performance and good practice behind the scenes. Consider 'good news', progress and strengths and also focus on areas where performance or RAF monitoring have identified difficulties. Prioritise the biggest challenges.

Particular attention is required in the areas relating to child safety, supervision, assessment and planning. Engaging hard to reach whanau, delivery of activity e.g. weekly visits, relationships with other agencies.

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- o Improvement needed on all areas of I-P development
- o Improve procedures and processes linking whakaahua, needs assessment, child safety tools for whanau and navigational plan for whanau workers
- o Increase AMBTL delivery % per month

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- o Increase the uptake of well child checks at immunisations, improve networking with these services
- o Increase % of whanau receiving at least one home visit per month
- o Increase number of whanau visited at least weekly in first six months on FS
- o ECE uptake is low

**Overview**

- o RAF aware of TRA Board issues and Board lack of involvement with FS.
- o Laura last day 14 Dec, new manager starting 16 Jan.
- o Closed for 3 weeks over Xmas.
- o No middle management to oversee day to day operations until new manager starts.
- o All whanau workers having regular clinical external supervision by qualified supervisor, this does not monitor casework or linked to achieving KPI requirements.
- o KPI – Weekly Visits - Staff are resistant to implement weekly visits due to concerns around weakening relationships with whanau.
- o KPI – Child Safety – have not started to implement these, and did not have a plan to do this.
- o Laura had been facilitating weekly practice meetings and past two weeks held frequent morning training on Plans. Outcomes and steps to achieve, and monitors plans in place through an electronic staff dashboard.
- o All whanau workers do own Initial Contact Visits
- o All whanau workers use the Whakaahua Assessment Tool (past 2 years) and have had crash courses in using the Whanau Tah electronic Data Base

9(2)(a)

- o [redacted] says that of the 4 current staff none are capable of taking a lead role.
- o Two 2 new whanau workers starting Jan Feb 2012
- o Priorities identified for practice advisor support: Implementing the Child Safety Tools and whole process from Initial Visits through to the first IFP.

**Summary**

**Currently:**

- o The Board is in the process of change
- o Closed for 3 weeks over Xmas
- o The Manager/practice manager has finished
- o New Manager starts mid – end Jan 2012
- o No interim leader in place
- o Two whanau workers short – recruiting in Jan possible start Feb
- o Implementing own Whanau Assessment Tool – and FS tool
- o Implementing own electronic Whanau Tah Data Base – and FS NET
- o Not started implementing new Child Safety requirements
- o Qualified and regular external supervision undertaken but unsure of how it with monitoring and supporting FS needs

**Practice Advisor**

Priorities identified for practice advisor support: Implementing the Child Safety Tools and whole process from Initial Visits through to the first IFP. Apart from the priority practice areas all areas of this programme need assessing.

9(2)(a) could not give me a clear idea of who I could/should work with or when I could begin to assist them, except that the new manager will be starting in Jan 2012.

**Current judgement on level of support required:**

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Desired Outcome Ensure SMART	Action	Who	When	Progress Update: 20 Jan 2012 Review date: 26 Jan 2012 Enter evidence of progress or add actions as required	Achieved Signed off
No Plan developed as yet as no-one from the organisation to sign off on it.				<p>Progress Update: 20 Jan 2012 11am. Attendance: 9(2)(a)</p> <p>- The purpose of this visit was to meet and greet. A formal whakataua for 9(2)(a) was provided and appreciated.</p> <p>- The past 6m 9(2)(a) has just started this week. I discussed some history of FS and the directorate and highlighted where TRA is with regards to contact performance measures. Many areas have been identified as needing to improve.</p> <p>- I have identified where they are at and is willing to receive support.</p> <p>- The HR prioritised staffing and will recruit a new manager/supervisor as soon as possible</p> <p>- 9(2)(a) will be main contacts for FS in the afternoon.</p> <p>- 9(2)(a) gave an overview of the practice advisor role and went over the SIP template and draft outcome plans.</p> <p>- All agreed that practice support is needed and a visit has been scheduled for 26 Jan to formalise a SIP.</p> <p>- The SIP will include the implementation of the CST, S&amp;N Assess and IFP processes and a PATH plan. Once this is in place we can then all work towards achieving it.</p>	

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Signed: Manager:  
Signed off Practice Leader:

date:  
date:

Practice Advisor: 9(2)(a) date: 20 Jan 2012  
Ensure copied and sent to RAF

9(2)(a)

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9(2)(a)

9(2)(a)

**Family Start: Service Improvement Plan**

*Giving children the best start in life...*

# Family Start

Name of Provider: *Te Ropu Awihina*

Location of Provider: Region: *Porirua*

Manager: 9(2)(a)

Practice Advisor: 9(2)(a)

RAF: 9(2)(a)

Visit Date: *13 Dec 2011*

*As of 16/12/11 this SIP has not been sent to TRA, due to no Management in place to send it to. A copy has been sent to RAF.*

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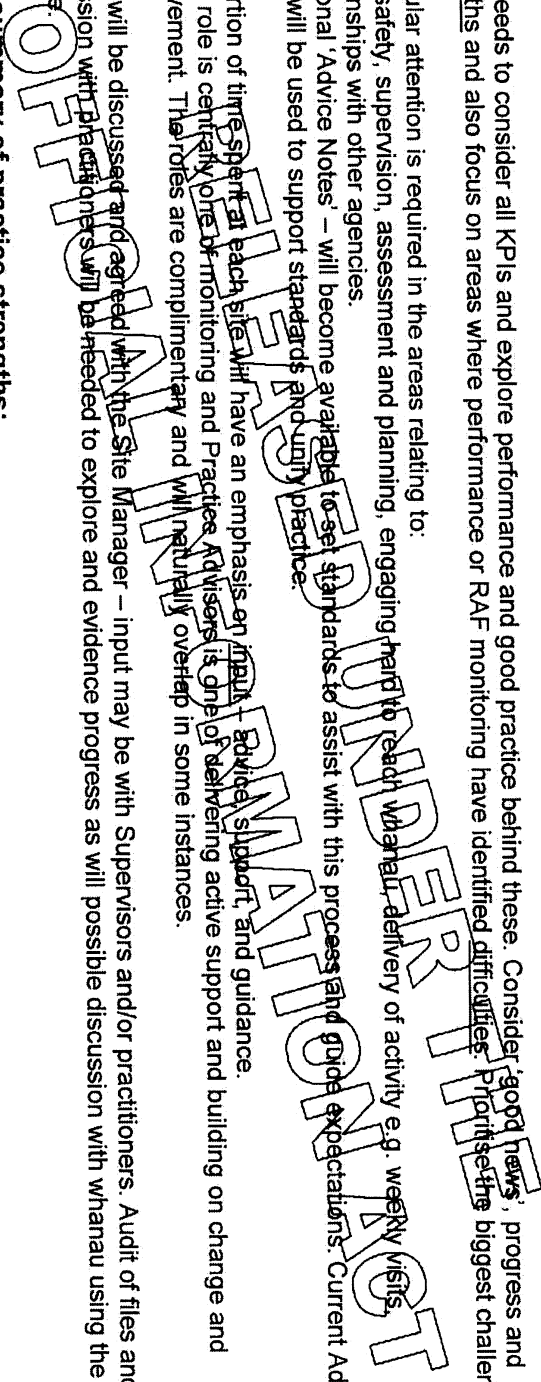
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**Overview**

- o RAF aware of TRA Board issues and Board lack of involvement with FS.
- o Laura last day 14 Dec, new manager starting 16 Jan.
- o Closed for 3 weeks over Xmas.
- o No middle management to oversee day to day operations until new manager starts.
- o All whanau workers having regular clinical external supervision by qualified supervisor, this does not monitor casework or linked to achieving KPI requirements.
- o KPI – Weekly Visits – Staff are resistant to implement weekly visits due to concerns around weakening relationships with whanau.
- o KPI – Child Safety – have not started to implement these, and did not have a plan to do this.
- o Laura had been facilitating weekly practice meetings and past two weeks held frequent morning training on Plans, Outcomes and steps to achieve, and monitors plans in place through an electronic staff dashboard.
- o All whanau workers do own Initial Contact Visits
- o All whanau workers use the Whakaahua Assessment Tool (past 2 years) and have had crash courses in using the Whanau Tahi electronic Data Base
- o 9(2)(a) says that of the 4 current staff none are capable of taking a lead role.
- o Two 2 new whanau workers starting Jan – Feb 2012.\*
- o Priorities identified for practice advisor support: Implementing the Child Safety Tools and whole process from Initial Visits through to the first IFP.

**Summary**

This programmees performance has been under performing for past year and a half. Reg. Part reports

- Currently:
- o The Board is in the process of change
  - o Closed for 3 weeks over Xmas
  - o The Manager/practice manager has finished
  - o New manager starts mid/ end Jan 2012
  - o No interim leader in place
  - o Two Whanau workers short – recruiting in Jan possible start Feb
  - o Implementing own Whanau Assessment Tool – and FS tool
  - o Implementing own electronic Whanau Tahi Data Base – and FS NET
  - o Not started implementing new Child Safety requirements
  - o Qualified and regular external supervision undertaken but unsure of how it with monitoring and supporting FS needs

**Practice Advisor**

Priorities identified for practice advisor support: Implementing the Child Safety Tools and whole process from Initial Visits through to the first IFP. Apart from the priority practice areas all areas of this programme need assessing.

9(2)(a) could not give me a clear idea of who I could/should work with or when I could begin to assist them, except that the new manager will be starting in Jan 2012.

**Current judgement on level of support required:**

This will assist Practice Advisors in determining how much time needs to be allocated **High Medium Low**  
Low would indicate need for no more than contact every 2 months. Medium monthly contact and high requires contact twice a month.

Desired Outcome Ensure SMART	Action	Who	When	Review date: Enter evidence of progress or add actions as required	Achieved Signed off
No Plan developed as yet as no-one from the organisation to sign off on it.					

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Signed: Manager:  
Signed off Practice Leader:

date:  
date:

Practice Advisor: date:  
Ensure copied and sent to RAF

Family Start: Practice Advisor Site Visit Record 2:

<p>Name of Provider: Te Rau Awhina                  Manager: 9(2)(a)                  Practice Advisor: 9(2)(a)                  RAF: 9(2)(a)                  Visit Number: 2</p>	<p>Location of Provider: Porirua                  Region: Wellington</p>
<p>Date of Visit: 20/1/2012</p>	<p>Staff seen: 9(2)(a)                  9(2)(a)</p>
<p>1. Review of Service Improvement Plan</p>	<p>- The new CM 9(2)(a) has just started this week.                  - 9(2)(a) acknowledged where they are at and is willing to receive support. He has prioritised staffing and will recruit a new manager/supervisor as soon as possible.                  - One new whanau worker started in Dec, one mid Jan and one end Jan all three are attending AMBTL training in Feb.                  - TRA have two FS backup workers who are in another service of the org, one backup has been used during this Dec – Jan period.                  - External supervisor is back at work for the year and supervision has begun this week.</p>
<p>2. Evidence of progress</p>	<p>- 9(2)(a) will be main contacts for FS in the interim.                  - SIP to be developed. Focus on CST, S &amp; N assess IFP's and Review</p>
<p>3. Delivery of support as planned</p>	<p>- All agreed that practice support is needed and a visit has been scheduled for 26 Jan to formalise a SIP.</p>
<p>4. Additional activity agreed</p>	<p></p>

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5. Other relevant issues	<p><del>9(2)(a)</del>discussed some history of FS and the directorate and an update of where TRA is with regards to contract performance measures. Many areas have been identified as needing to improve.</p> <p><del>9(2)(a)</del>ave an overview of the practice advisor role and went over the SIP template and draft outcome plans.</p> <ul style="list-style-type: none"> <li>- TRA will be holding a BOT hui sometime in Feb – possible new board members coming on.</li> </ul>
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**Family Start: Practice Advisor Site Visit Record 1:**

<p>Name of Provider: Te Ropu Awahina                  Manager: 9(2)(a) <input type="checkbox"/>                  Practice Advisor: 9(2)(a) <input type="checkbox"/>                  RAF: 9(2)(a) <input type="checkbox"/>                  Visit Number: 1</p>	<p>Location of Provider: Porirua                  Region: Wellington</p>
<p>Date of Visit: 13/12/2011</p>	<p>Staff seen: 9(2)(a) <input type="checkbox"/>                  Visit with 9(2)(a) <input type="checkbox"/></p>
<p>1. Review of Service Improvement Plan</p>	<p>currently:                  The Board is in the process of change                  Closed for 3 weeks over Xmas                  The Manager practice manager has finished                  New manager starts mid – end Jan 2012                  No interim leader in place</p> <ul style="list-style-type: none"> <li>o Two whanau workers short – recruiting in Jan possible start Feb</li> <li>o Implementing own Whanau Assessment Tool – and FS tool</li> <li>o Implementing own electronic Whanau Tahī Data Base – and FS NET</li> <li>o Not started implementing new Child Safety requirements</li> <li>o Qualified and regular external supervision undertaken but unsure of how it with monitoring and supporting FS needs</li> </ul>
<p>2. Evidence of progress</p>	
<p>3. Delivery of support as planned</p>	<p>Priorities identified for practice advisor support: Implementing the Child Safety Tools and whole process from Initial Visits through to the first IFP.</p>

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	<p>Apart from the priority practice areas all areas of this programme need assessing.</p> <p>9(2)(a) could not give me a clear idea of who I could/should work with or when I could begin to assist them, except that the new manager will be starting in Jan 2012.</p>
4. Additional activity agreed	
5. Other relevant issues	See draft SIP

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**Family Start: Service Improvement Plan**

*Reviewing*

*Giving children the best start in life...*

**Family Start**

*DIS*

Name of Provider: **Te Ropu Awahina**

Location of Provider: Region: **Porirua**

Manager: **[9(2)(a)]**

Practice Advisor: **[9(2)(a)]**

RAF: **[9(2)(a)]**

Visit Date: **13 Dec 2011**

**As of 16/12/11 this SIP has not been sent to TRA, due to no Management in place to send it to. A copy has been sent to RAF.**

Plan needs to consider all KPIs and explore performance and good practice behind these. Consider 'good views', progress and strengths and also focus on areas where performance or RAF monitoring have identified difficulties. Prioritise the biggest challenges.

Particular attention is required in the areas relating to:

Child safety, supervision, assessment and planning, engaging hard to reach whanau, delivery of activity e.g. weekly visits, relationships with other agencies.

Additional 'Advice Notes' - will become available to set standards to assist with this process and guide expectations. Current Advice notes will be used to support standards and early practice.

Proportion of time spent at each site will have an emphasis on input, advice, support, and guidance.

RAF's role is centrally the monitoring and Practice Advisers (some of delivering active support and building on change and improvement. The roles are complementary and will have a 'handover' in some instances.

Plans will be discussed and agreed with the Site Manager - input may be with Supervisors and/or practitioners. Audit of files and discussion with practitioners will be needed to explore and evidence progress as will possible discussion with whanau using the service.

**Brief summary of practice strengths:**

- Regular weekly staff internal training
- Qualified senior practitioner/supervisor interim
- Managing and monitoring whanau exit process

**Brief summary of practice requiring attention:**

- Referrals from CYF through DR process do not stay on FS voluntarily ✓
- Major changes to the organisations premises, and senior management ✓
- Resignations and recruitment of whanau workers ✓
- Whanau engagement not strong but practice manager monitoring this ✓
- Improve relationships and referrals of at risk whanau from lead referral agencies and Teen parent school in Linton ✓
- Strengthen supervision and monitoring processes that centre around the child ✓
- Improvement needed on all areas of IFP development ✓
- Improve procedures and processes linking whakaahua, needs assessment, child safety tools for whanau and navigational plan for whanau workers ✓
- Increase AMBTL delivery % per month ✓
- Increase the uptake of well child checks and immunisations, improve networking with these services ✓
- Increase % of whanau receiving at least one home visit per month ✓
- Increase number of whanau visited at least weekly in first six months on FS ✓

**Overview**

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Use as many pages a required as continuation

Signed: Manager: \_\_\_\_\_ date: \_\_\_\_\_  
 Signed off Practice Leader: \_\_\_\_\_ date: \_\_\_\_\_

Practice Advisor: date: \_\_\_\_\_  
 Ensure copied and sent to RAF

*discussed with Earl  
 earlier 20/12/11. Awareness of  
 concerns. To meet with  
 new CEO in early  
 year 2012.*

**FAMILY START KPI MONITORING TEMPLATE**

**Provider Name:** Te Roopu Awhina Ki Porirua Trust  
**Provider Number:** 12160  
**Contract Number:** 314285  
**Date of Visit:** 13 December 2011  
**Monitoring period:** October and November 2011  
**Venue:** 9 Lydney Place, Porirua  
**Present:** Laura Bell, Acting CEO  
                   9(2)(a) Regional Advisor Funding  
                   9(2)(a) - Practice Advisor

**General discussion**

1.	Good news stories	
2.	Issues and trends in the community	
3.	Issues and trends with the Family Start programme	Please refer to monitoring report dated 20 September 2011.
4.	Health of the organisation	Please refer to monitoring report dated 20 September 2011.
5.	CYF Approval review completed	Refer to latest Approvals report – record when this was completed. Is there anything to follow-up? When is the next visit due.
6.	Annual Mowat visit	Record the last visit from AM/BTL team – anything to follow-up? 9(2)(a) has just completed a AM/BTL visit and has provided some induction training to one of the new staff members.
7.	Review of the financials for Family Start (annually)	Record the last review of Annual accounts Review of annual budget and expenditure on the Family Start programme The next AGM is scheduled for the end of October 2011, date to be confirmed. A copy of last year's audited accounts to be provided when available. Has this occurred yet??

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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>KPI 1: Contracted volumes</p> <p>Number and percentage of contracted volumes delivered</p> <p><b>Why?</b></p> <p>Tracking volumes contracted as well as demand for the service</p>	95%	<p>90%</p> <p>October</p> <p>86%</p> <p>Nov</p>	<p>1. 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"> <li>Are the key referral agencies engaged?</li> </ul> <p>3. The number of referrals declined:</p> <ul style="list-style-type: none"> <li>Summary of reasons – are the reasons reasonable? Are the referral criteria being applied correctly? What is being done to activate/voluntarily participate in the programme?</li> <li>The <del>list</del> <sup>list</sup> of longest duration: <ul style="list-style-type: none"> <li>Are these families still actively engaged in the programme?</li> <li>Waiting list numbers to assess demand for the service</li> <li>How long do people wait? Are they referred elsewhere?</li> </ul> </li> <li>6. FS-Net being maintained: <ul style="list-style-type: none"> <li>Eliminate 'unassigned' active cases in FS-Net if not contacted after 6 weeks</li> </ul> </li> <li>7. Leave &amp; training planned to ensure adequate coverage: <ul style="list-style-type: none"> <li>Plan in place to cover unplanned absences</li> </ul> </li> </ul>	<p>Staff</p> <p>Interviews will be held this week to fill the two whanau worker vacancies, six applicants were shortlisted.</p> <p>Laura Bell the Acting CEO leaves TRA this Friday 16 December 2011.</p> <p>Michael McKay the new CEO has been appointed, and is due to commence 16 January 2011.</p> <p>Referrals</p> <p>Four referrals for the month – five exits, 4 planned and one unplanned.</p> <p>The contracted volume has not been achieved for this two month period, which effectively means that the contracted volume has not been achieved for nearly 1½ years.</p> <p>Please refer to monitoring report dated 14 November 2011, for further discussion on this situation.</p>
<p>KPI 2: Supervision</p> <p>Percentage of workers who receive at least one hour of one-on-one supervision by a qualified supervisor each</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>1. What level of qualifications do supervisors</p>	<p>External supervision has commenced. While this is a stop gap measure to help kaimahi with case management until a new supervisor is appointed internally, there is no internal system to ensure that kaimahi are delivering the FS programme according to</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><b>Why?</b></p> <p>Support the professional practice of those working with vulnerable families.</p>	<p>95%</p>	<p>No FS-MET data available</p>	<p>currently have?</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"> <li>Sight supervision schedule and files for frequency of supervision and information that is covered, expect to see a formal note that covers client cases.</li> <li>Sight internal contract between supervisor and whanau worker.</li> <li><del>External supervision is given, sight ledger/note and a written agreement.</del></li> <li>Class 6.3.4 Family Start Manual</li> <li>5. Ensure supervisor recorded accurately in FS-MET</li> </ul> <p>Review by 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"> <li>Frequency of review – check dates and review dates?</li> <li>Does IFP reflect progress over last 3 months and link/buils on strengths and needs assessments?</li> <li>Home visits have been undertaken each month?</li> <li>Have intensity levels been set by the supervisor? Revised?</li> <li>Have other agencies been consulted in relation to developing IFP?</li> </ol>	<p>the contractual obligations and within the specific timeframes required.</p> <p>The Acting CEO did not consider that any current kaimahi were experienced enough to lead and monitor the KPI results.</p> <p>No individual family plans were assessed during this visit.</p> <p>Discussions were held with the Practice Advisor and the development of the Service Improvement Plan.</p> <p>Acting CEO advises that she will discuss the safety tools with the staff before she departs.</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><u>KPI 4. AM/BTL Visits</u> Percentage of active families receiving at least one hour of AM / BTL per month</p> <p><b>Why?</b> Regular delivery of AM/BTL provides some confidence that families are being regularly assessed in these domains.</p>	95%	<p>91% Oct</p> <p>90% Nov</p>	<p>6. Quality of goals: Are they: SMART? child-focused? Achievable? Likely to strengthen family against child maltreatment?</p> <p>7. IFP signed by both whanau worker and family?</p> <p>8. Has the supervisor signed off quarterly review within one week of review completion?</p> <p>Refer to last Ahuru Mowai report and with AM Advisor – check if any follow up is required? (Avoid duplication)</p> <p>Site/sahdoma sample of client files FS-Net client notes for AM delivery verifying one hr per month 1. All whanau workers have received initial training to deliver AM/BTL 2. Supervisors have attended support workshop? 3. Site home visit record sheets (yellow), completed in a timely manner, dated 4. Have missed visits been recorded; were activities planned; what was the activity; was the activity planned for the next visit; was this activity followed up at the next visit? 5. Has an annual AM or exit survey been completed?</p>	<p>9(2)(a) has just completed a AM/BTL support visit and has provided some induction training to one of the new staff members.</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><b>KPI 5: AM&amp;BTL Milestones</b> Percentage of children 0-3 up-to -date with the developmental milestone checks set out in Ahuru Mowai / Born to Learn.</p> <p><b>Why?</b> Adherence to the development milestone checks provides some confidence that children are being regularly assessed in these domains.</p>	95%	No FS- NET data available.	<p>Refer to last Ahuru Mowai report and with AM Advisor – check if any follow up is required? (Avoid duplication)</p> <p>1. Sight milestone checklists are completed relevant to the age of the child 2. Is the handout list recorded? 3. What AM/BTL resources are available to whanau workers?</p>	Not assessed during this visit.
<p><b>KPI 6: Family who remain for 12 months</b> Percentage of all new families who remain on the programme for at least 12 months</p> <p><b>Why?</b> 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%	<p>54% (Oct) 43% (Nov)</p>	<p><i>I to confirm start date for measurement – likely to be 1 July 2020</i> Print off the list of cases for each whanau worker – randomly select and:</p> <ol style="list-style-type: none"> <li>1. Check that the family has received minimum of 1 home visit per month and 1 hour of AM&amp;BTL delivered per month</li> <li>2. Check that the Strength and Needs assessments are reviewed at least 6 monthly</li> </ol> <p>Discuss reasons why families are leaving within 12 months: (Refer to monthly FS-Net stats planned and unplanned exits). 3. Are proposed exits discussed with Practice Manager? • Graduation process – strengths and needs</p>	Not assessed during this visit.

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New KPI Performance Measure	New KPI Standard	KPI Achieved	<p>What information will be checked/verified?            What information will be gathered?</p> <p>assessment completed, JFP reviewed and plan put in place upon exiting</p> <ul style="list-style-type: none"> <li>Was the exit within the control of the provider?</li> <li>Is a regular scan done for long periods of non-contact? Check active families who have been receiving service for longer periods.</li> </ul> <p>4. Is a retention strategy in place?</p> <p>5. Are families referred elsewhere? (particular # vulnerable transfers)</p> <ul style="list-style-type: none"> <li>Have family signed consent?</li> <li>Has transition been managed by their Family Start provider? (sign transfer documentation)?</li> </ul>	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>KPI 7: Immunisations</p> <p>Percentage of children who have their scheduled immunisation(s) during the quarter it came due</p> <p><b>Why?</b></p> <p>Promoting immunisation is a key way of improving children's health.</p>	80%	67% (Oct)	<p>1. How do you promote this?</p> <p>2. Are FS-Net reminders followed?</p> <p>3. Is information collected at the initial contact phase about child's immunisation status?</p> <p>4. Is this part of supervision discussions?</p> <p>5. Refer to monthly FS-net stats/percentages for cannot be determined and Non answered why?</p> <p>6. Check file for completed immunisation schedule</p> <p>7. Check that client notes in FS-Net the discussion has been recorded and noted</p>	To monitor next visit.
<p>KPI 8: Well Child Visits</p> <p>Percent of children who have had their scheduled Well Child visit(s) during the quarter that it came due</p> <p><b>Why?</b></p> <p>Gives us some confidence that family health and well-being is being addressed.</p>	86%	65% (Oct)	<p>1. How do you promote this?</p> <p>2. Are FS-Net reminders followed?</p> <p>3. Is information collected at the initial contact phase about child's Well Child's visits?</p> <p>4. Is this part of supervision discussions?</p> <p>5. Refer to monthly FS-net stats/percentages for cannot be determined and Non answered why?</p> <p>6. Check file for completed Well Child visits</p> <p>7. Check that in client notes in FS-Net the discussion has been recorded and noted</p>	To monitor next visit.

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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><b>KPI 9: Early Childhood Education</b>            Percentage of children 18 months and over enrolled in a licensed Early Childhood Education (ECE) facility</p> <p><b>Why?</b>            ECE has been shown to be beneficial for a child's development</p>	70%	No FS- NET data available.	<ol style="list-style-type: none"> <li>1. Gather information about how many are on waiting lists or enrolled in alternative education facilities.</li> <li>2. Refer to monthly FS-Net stats percentages for cannot be determined and non answered -- why?</li> <li>3. Relationship with ECE's and Family Start awareness?</li> </ol>	<p>The FS-NET result for this KPI is generated quarterly, therefore, cannot be commented upon until we have the October, November and December period completed.</p> <p>To monitor next visit</p>

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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
<p>KPI 10: Harmful Discipline Percentage of parents who do not use harmful disciplinary practices</p>	75%	No FS-NET data available.	<p>1. Review the implementation plan for the Child Safety Tools</p> <ul style="list-style-type: none"> <li>Should be a tangible document</li> <li>Are the tools included within organisation's processes/forms</li> <li>Are they reflected on every three-months</li> </ul> <p>Confirm that staff have received training in and regular supervisor for the use of the Child Safety Tools</p> <ul style="list-style-type: none"> <li>Evidence that the Supervisor has signed off documentation</li> <li>Ensure that the FSNet screen is being completed properly (note in place from 1 Dec 2011).</li> <li>3. Confirm covered in case notes</li> </ul>	<p>Acting CEO advises that she thinks staff are using the new conversations with whanau in relation to child safety.</p> <p>She also advises that she will be going through the new tools with all staff before her departure.</p> <p>Practice Advisor happy to assist in this area.</p>
<p>KPI 11: Abuse and Neglect Percentage of children assessed as safe from abuse and neglect</p>	80%	No FS-NET data available.	<p>As above</p>	<p>As above</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
<p><b>KPI 12: Positive Parent-child Interactions</b></p> <p>Percentage of parents who demonstrate positive parent-child interactions</p>	80%	No FS-NET data available.	As above	
<p><b>KPI 13: Families Visited</b></p> <p>Percentage of families visited once weekly in the first 6 months</p>	TBC <sup>1</sup>	22% (Oct)	<p>1. Review those families to determine:</p> <ul style="list-style-type: none"> <li>If not meeting standard, were there attempted visits</li> <li>If not high need, should visiting be reduced</li> </ul> <p>Discussions on targeting correct "high need" referrals</p>	Not assessed this visit
<p>Introduced from 1 October 2011</p>		50% (New)	<p>Evidence that the weekly visit was within the definition of a "home visit"</p> <ul style="list-style-type: none"> <li>Child seen</li> <li>Child's residence or if out, child focused Primary Carer to be seen every time</li> <li>Family members involved in child's care to be seen</li> </ul>	

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<sup>1</sup> We will confirm the expected standard for this measure prior to its proposed introduction in October 2011. We need to test the impact of tighter referral criteria (which signal that Family Start is not open to lower risk families) and providers will need to work through the implications on whānau worker caseloads.

**Summary of improvements/actions identified in last monitoring/support visit:**

Agreed Actions	By Whom	By When	Completed/Update
Senior Practitioner to work with administrator who loads referral data into FS-NET.	Senior Practitioner and administrator	To review December 2011 to gauge effect	In progress, good result, data matched.
Long duration clients to be reviewed and exited if appropriate.	Senior Practitioner and Acting CEO	To review next monitoring visit 28 October 2011.	26 to be reviewed, Acting CEO to provide analysis next monitoring visit.
All performance assessments to be completed	All staff	To review next monitoring visit 28 October 2011.	Have been completed.
Senior Practitioner to ensure all whanau workers receive 1 hour of supervision per week and that it is recorded accurately in FS-NET.	Senior Practitioner	To review next monitoring visit 28 October 2011.	Completed well done.
Each whanau worker to review one file and review SNA's and IFPS and set new goals etc if necessary.	Whanau workers and Senior Practitioner	To review next monitoring visit 28 October 2011.	On going.

**Summary of improvements/actions identified in this monitoring/support visit:**

Agreed Actions	By Whom	By When
It is recommended that once the new CEO commences duties that they and representation from the board meet with Carl Crafar and myself to discuss the performance of the FS contract.		Meeting to be set for January/February 2012

**Overall Comments:**

TRA have some work to do to lift KPI performance. The monitoring of KPI performance from an organisations point of view is usually undertaken by either a practice manager, supervisor or CEO. This is identified as an area of risk for TRA given the turn over of middle management personnel.

9(2)(a) the Practice Manager, is happy to assist the organisation with overall practice especially in relation to the new Child Safety requirements.

It is imperative that the new CEO and Board familiarise themselves asap with the issues which could affect the continuation of this agreement

**Sign-off:**

Report prepared by:

Provider agreed to content:

Agreed copy sent to provider on:

Agreed copy sent to Approvals Assessor on:

Agreed copy sent to AM/ST Support person on:

Agreed copy sent to Practice Advisor on:

9(2)(a)

Acting CEO has resigned

Regional Advisor Eundling

20 January 2012

19 January 2012

19 January 2012

19 January 2011

RELEASED UNDER THE OFFICIAL INFORMATION ACT

