Provider three

4 April 2012

Te Roopu Awhina Family Start - Porirua

- Te Roopu Awhina's Family Start contract is \$614,870.00 for 125 families. 1
- The performance of all Family Start Providers has been assessed by looking at: 2
 - key performance indicators (KPI's)
 - quality of social work practice
 - implementation of key programme components
 - viability and capability of the organisation.
- Overall, Te Roopu Awhina are consistently not achieving the KPI's and althoug 3 the supervision threshold was met, the supervision given is of poor quality

Key performance indicators

Overall, there are 13 KPI's. However, we have to cused on the three KPI's (below) 4 which we consider to be the minimum performance requirements.

KPIs	July %	Aug %	Sept %	Oct %	Nov %	Dec %	Jan %	Feb %
Contracted volume				90		91		
Supervision	NA	NA						
AM/BTL (parenting)			91	91	90	92		90

- Percentage of contracted valumes delivered. Expected standard is 95%. Green light at 95% or above; Yellow
- light at 90%-95%. Red light at <90%.

 Percentage of workers who receive at least one hour of one-on-one supervision by a qualified supervisor each week. Expected standard is 95% Creen light at 95% or above; Yellow light at 90%-95%; Red light at <90%. Percentage of active families receiving at least one hour of Ahuru Mowai/Born To Learn per month. Expected standard is 35% Green light at 95% or above; Yellow light at 90%-95%; Red light at <90%. b.

Practice

- The examples of poor quality service delivery in this are:
 - the Child Safety Tools were not implemented in the timeframe expected
 - supervision is provided by an external contractor only, therefore while being delivered regularly, it lacks connection to the Family Start programme and does not adequately support staff or the sound delivery of the programme assessments are not specific, they are overly subjective and lack a child
 - the information recording process in place is inadequate
 - the delivery of Ahuru Mowai/Born to Learn does not meet the expected standard
 - there has been improvement in promoting improved health outcomes for children but little is done to promote early childhood education
 - there is a desire to develop additional services but focus should be on programme fidelity and meeting core programme standards first.

Provider engagement

- 6 Long-term vacancies in senior positions have de-stabilised the organisation and negatively affected performance. Because of this, the potential for improvement is compromised. For example:
 - a new Chief Executive commenced mid January 2012 (acting Chief Executive September to December 2011)
 - the Family Start Manager position has been vacant since November 2011.
 There is a commitment to fill this vital position but no progress to plate
 - interim management have limited experience in Family Start but have being very willing to work with the Directorate on practice
 - a number of staff have left and some of the current staff are resistant to change practice. There is no performance management process in place.
- There have been six meetings between the MSD Practice Advisor and the current management team since early January 2012. These meetings have focused on supporting early implementation of the expected changes (eg Child Safety Tools). The Service Improvement Plan was agreed 9 February 2012.
- Due to long standing vacancies in senior positions and instability of the Board the Family Start Directorate chose not to send a quarterly performance letter in December 2011. The Family Start National Contracts Manager met with Te Roopu Awhina's new Chief Executive 20 January This meeting put Te Roopu Awhina on notice that they would be unlikely to be offered a Family Start contract for 2012-2013.

9 not in scope

10

MSD engagement

MSD's interaction with Te Roopu Awhina since July 2011 is as follows:

- 1 letter from MSD Family Start Director to Turuki CE and chair of the board (July 2011)
- 4 MSD Regional Advisor Funding (RAF) monitoring visits
- 6 MSD Practice Advisor visits
- 1 meeting with the Family Start national contracts manager
- attended 1 regional child safety workshop
- attended 3 National Hui.



Meeting File Note – 20 January 2012
Subject: Family Start performance
Attendance: Te Roopu Awhina (Michael - CE, 9(2)(a) MSD (9(2)(a)
1. Welcomed by new CE 9(2)(a)
2. Overview from about the Directorate – what it is and why it was established. Emphasised the Minister's message that there was to be an improvement in its effectiveness – particularly child safety focus. This means greater scrutiny on performance and reality that poor performance may not mean continued funding. 9(2)(a)
Overview from about performance to date. Summary – it is poor and you will need to improve
Historical poor performance means the provider is being monitored monthly. Continue to perform poorly against KPIs (table) the attached reports). Informed new management team of monthly reporting (2)(a) to ensure on distribution list).
Identified that a Decletter was not written as nobody in the organisation to address to. Highlighted that they are one of our poorest performing providers and the lack of engagement with the support being provided by the Practice Advisor is detrimental.
 Spoke to the completed monitoring visits by the RAF 9(2)(a) These reports have been sent through by 9(2)(a) (also tabled)
Spoke to the issue that the lack of management positions being filled has made engagement with the organisation difficult and we can see the de-stabilising effects of this on performance. I asked for an update on filling key positions
Response: Staffing is a focus for the new CE - particularly the Practice Manager and Supervisor role:
It was explained that 9(2)(a) and 9(2)(a) and 9(2)(a) had current oversight of the Family Start programme. They identified that practice monitoring and up-skilling workers was a priority.
Two new whanau workers appointed. Noted that they were getting AM/BTL training in Feb. (a) offered to look at a system to assist with staff cover and ratio's)
• 9(2)(a) also raised Board issues

Response: New CE is aware of the governance issues and understands that he needs to establish feedback/liaison re performance of services.

 Also raised the Child Safety Tools – were they aware of them?
9(2)(a)
Response: knew nothing of the tools. explained these. Came to light that no information re Family Start that had been given to the Family Start providers was known
to the interim management team. <u>9(2)(a)</u> agreed to send newsletters etc (Actioned 3
Feb) 9(2)(a)
4. tabled draft service improvement plan. This was her thinking only at this
stage but led discussion on what needs to happen in the next few months for that organisation. It highlighted:
organisation. It highlighted.
Need for the organisation to be aware that child safety questions are
being reported against in FSNet and tools must be used and reflected in case notes/assessments
Ensuring that FS Net is used by org to capture info (TRA runs sep
9(2)(a) database to work with them on appropriately using both) • External supervision lacks case work focus and family Start programme
specifics (ie does Supervisor know about child safety tools? Is
Supervisor signing off on worker assessments etc)
5. Positives were discussed and TRA were encouraged to build on these (CE
accepted the environment he had and the need to make improvement).
TRA felt that they have great interaction rapport with families
 Strong networks with other providers Staff have a great cultural background and experience.
orall have a great control background and experience.
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Family Start Performance Assessment Template – February 2012 Refer to Memo "Sanctioning Criteria and Options for Family Start Providers" dated 13/2/12

FAMILY START PROVIDER PERFORMANCE ASSESSMENT – July 2011 to February 2012

Provider's Legal Name: Provider Number:

Te Roopu Awhina Ki Porirua Trust

Contract Number:

12160 314285

Completed by 9(2)(a)

9(2)(a) (RAF) on 12 March 2012 - Handwitten notes as permeeting with 9(2)(a) on 13 Mach 2012 with 9(2)(a)

Consistently poor. No endence of improve name and time or transacral in place that mis will knoppen goon closer monitoring personal personal personal page of page that mis will knoppen fore components are not personal personal page page.
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ore components are and perhabetivesed. pop quety.
Thereof concerning the proof of concern it lack of prog specific
upenision good ready his to lift performance.
मह। ।इंडा र र क्रिक्नार्थवा assessment was completed 3 June 2011. It appears that the last assessment of the FS programme
vas completed 29 April 2010. I need to check that this is still relevant and that CYF haven't done a subsequent approval
issessment visit.
Three visits completed last year. Previous practice manager $9(2)(a)$ was present for all three meetings, and $9(2)(a)$
supervisor was available for the first visit. They have both left the service and relocated to Auckland. First visit for 2012
scheduled for 19 March 2012. New CEO commenced duties mid January 2012 and has been supported by financial officer
and other senior manager. However, these staff have limited experience with FS programme. They have tried hard to
engage and address shortcomings in a very short timeframe.
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9(2)(a)

I recently atter	nded the training provided by to the kaimahi and was impressed with the level of enthusiasm shown by
	re are 6 kaimahi in total, two others whom have been with the
service a shor	t period of time, under two years and two new kaimahi who have just commenced employment. From the
discussions an	d interactions on the day, I would surmise that the four new staff members could actually have some good
	city, given they receive good guidance and supervision.
RECOMMENDATION	
Withhold or recover funding (F12)	
Terminate on Notice (1 July 2012)	Terminate 9(2)(g)(i)
Do not renew from 1 July 2012	<u>'</u>
Offer 1 year contract from 1/7/12	
Offer 3 year contract from 1/7/12	
9(2)(a) = 00 10 01to	recommendation to terminate.
	adequate performance but lack of capacity Forg + ensure
Rasea on 100	inequality performance but
	all of Prog are being delivered D TILL
Sighted by 9(2)(a) Na	ational Contracts Manager 9(2)(a)
Criteria	Rating Comments (include the evidence you have from monitoring and site
Criteria	
KEY DEDECOMANCE INDICATE	(1/2 6/3) (1/2 sits)
KEY PERFORMANCE INDICATO	
Contracted Volumes	217 Description of organisation camping
M	The reduction key areas of service promision
	Action with Reflective of organisation camping in key areas of service promises.
AM/BTL	Consistently 1000.
	7/4/
611217	

^{1 1 =} underperformance is consistent and is without satisfactory reasons; 2 = underperformance is evident and is without satisfactory reason; 3 = satisfactory performance, or any underperformance is for satisfactory reason.

, Readjusted in light of PA quality commands.

Supervision	3	Appears to be meeting the KPI target – will have to gauge at the next monitoring
	2	visit what this supervision looks like. Check with re kaimahi's comment around confidentiality.
KEY PROGRAMME COMPONENT	rs -	9(2)(a)
Strengths and Needs Assessments	1	Weak. Not and focused.
Individual Family Plans	1	wear Not child focused Not specific / objective
Child Safety Tools	1	Not implemented in required timeframe. New
Weekly Visits		Not found on due thindamentals
Supervision Quality	7	External only. Not program To ad foured.
Delivery of AM/BTL	,	of hat he arouse of programme
Promotion of health and education	ROE	Dias to been ocen a referred to grat Ingust
SOCIAL WORK PRACTISE	500	what mex applied.
Concerns about safety on practise a response to remedy those concerns	Maria	per all the superission.
CYF APPROVAL	an IIIn	
Governance, Financial or Managemi issues	This last the same of the same	Note last Approvals Assessment Date – any concerns? Any concerns of your own independent of Approvals?
	Yes or No	
WILLINGNESS/CAPACITY		
Willingness or capacity		Have recently got new manay norted.

Torganisation Acting CED Sept-Dec who was also FS prog. Manager. Did not bockfill Prog. Minger. New CE Started Jan. Prog. Manager position vaeant.

Assisted by other key statt but not up-t-speed with prog and inappropriate to only begin action and filling key positions from Feb 12.

Fundamentals of prog. have not been delivered.

Interim Mgmt team are willing. Much change ahead. SIP in goodshape.

Key Performance Indicator Results (%)

	July	August	September	October	November	December	January
Contracted Volumes	84%	88%	86.4%	89.6%	86.4%	91.2%	88.8%
AM/BTL - 1 hour each month	87.6%	83.6%	90.7%	91.1%	89.7%	92%	84.7%
Supervision – 60 mins weekly	Na	Na	100%	100%	100%	0%	100%

RELEASED UNDER THE OFFICIAL INFORMATION ACT

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