



COVERSHEET

Minister	Hon Tracey Martin	Portfolio	Children
Name of package	Proactive release of Transforming our Response to Children and Young People at Risk of Harm: Paper Three: Intensive Intervention	Date of issue	02 August 2019

List of documents that have been proactively released		
Date	Title	Author
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31 October 2018	SWC-18-MIN-0150 – Cabinet Social Wellbeing Committee Minute	SWC Committee Secretary

Information withheld	
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Section of the Act	Reason for withholding
Section 9(2)(g)(i)	The release may undermine the future ability of Ministers to provide free and frank advice on Budget expenditure options. The importance of this process means it is not outweighed by the public interest in transparency.
Section 9(2)(f)(iv)	Maintain constitutional conventions for the time being which protect the confidentiality of advice tendered by Ministers of the Crown and officials.

BUDGET – SENSITIVE

Office of the Minister for Children
Chair, Cabinet Social Wellbeing Committee

TRANSFORMING OUR RESPONSE TO CHILDREN AND YOUNG PEOPLE AT RISK OF HARM

PAPER THREE: INTENSIVE INTERVENTION

Proposal

- 1 This paper seeks agreement to policy proposals for the establishment of a new intensive intervention function for Oranga Tamariki—Ministry for Children (Oranga Tamariki). These proposals will support children and young people currently at risk of harm, to stay safely with their families and whānau, and prevent them from entering and re-entering state care.

Executive summary

- 2 Intensive intervention is one of the core functions of the new Oranga Tamariki operating model:



- 3 Developing the intensive intervention function is essential if we are to achieve a genuine shift in New Zealand's care and protection system, which does not currently sufficiently support children and young people at risk of harm to be cared for safely at home.
- 4 New Zealand, under the Oranga Tamariki Act 1989, has a systematic approach to assessing the risk of harm to children, and to decision-making and service referral (through family group conferences). However, the system is not adequately resourced to understand the nature of the harm or potential harm caused, and to provide intensive support to the child and their family and whānau to address the full range of needs while keeping the child safe in a loving and stable home.¹

¹ Expert Panel on Modernising Child, Youth and Family Final Report, December 2015 (p72)

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- 5 Some amendments to the Oranga Tamariki Act 1989 in relation to taking a more preventative approach are coming into force on 1 July 2019 (see Appendix A). These do not prescribe what the intensive intervention function should look like, but my proposed approach will help to better fulfil existing and soon to be in force legislative obligations.
- 6 If we are to safely reduce the number of children who need to be brought into state care, it is essential that we build a genuinely intensive child protection service for children who have been assessed as at risk of harm, and their families and whānau. This is specialised and complex work – generally some of the most difficult work within any care and protection system – requiring highly skilled workers.
- 7 In June 2018, the Cabinet Social Wellbeing Committee agreed the key purpose of the intensive intervention function, and that it initially focus on children who are assessed as being in need of care or protection and who therefore currently receive a statutory response (but who are not in state care) [SWC-18-MIN-0074 refers].
- 8 The intensive intervention function must therefore look to address the serious concerns that would lead a statutory social worker to believe a child or young person is in need of care or protection (including on the grounds that they are suffering or likely to suffer serious harm such as neglect, physical and sexual abuse or emotional abuse). It needs to go much further than a more general family and whānau support service that manages more general wellbeing concerns (such as those relating to housing, anti-social behaviour or truancy).
- 9 For Māori children and young people, it is important that support to keep them safe at home with their families and whānau is aligned with the Oranga Tamariki Mana Tamaiti objectives (see *Paper Two: Improving Outcomes for Māori*).
- 10 My proposed option for developing the intensive intervention function (Option Two) for Oranga Tamariki commits us to building a new systematic approach nationwide – for the first time providing New Zealand with an intensive approach to preventing children from entering or re-entering statutory care. Key investment areas for implementation are below (further detail is provided in Appendix D):

WORKFORCE	RELATIONAL SUPPORT	IMMEDIATE NEEDS FUND	COMMUNITY DESIGN	COLLABORATIVE DELIVERY
Building frontline statutory social worker capacity to provide quality support	Family/whānau intensive support workers provided to families/ whānau where appropriate	Establishing a flexible fund to meet family/whānau immediate needs (where there is a gap)	Rolling out community-by-community and continuously evaluating approach and process to identify gaps	Partnering cross-agency and with providers to ensure integrated and effective service provision

- 11 The benefits of this proposal are anticipated to be wide-ranging, and will include improvements in identified areas of need for our initial focus cohort.
- 12 I propose that delivery begins, in Year 1, with the rollout of a small number of initial sites for development to test processes, approaches and assumptions in partnership with communities (including, for example, [REDACTED] and non-government providers). Design 9(2)(f)(iv) and implementation will need to be closely linked with other cross-agency services and initiatives, such as [REDACTED] roles and the Joint Venture Family Violence and Sexual Violence. A robust evaluation approach will help to improve the service over time. 9(2)(f)(iv)
- 13 Subject to Cabinet agreement, this approach to the intensive intervention function for Oranga Tamariki will be further refined and will form the basis of a Budget 2019 initiative.

Background

- 14 In 2015, the Final Report of the Modernising Child, Youth and Family Expert Panel (the Expert Panel) identified that the current care and protection system is not sufficiently equipped to ensure a child's safety or wellbeing, to understand the nature of the harm or potential harm caused, and provide intensive support to the child and their family and whānau to address the full range of needs to keep the child safe in a loving and stable home.
- 15 Although New Zealand, under the Oranga Tamariki Act 1989 (the Act), has a systematic approach to assessing the risk of harm to children and to decision-making and service referral – including through family group conferences (FGCs) – we do not currently have the genuinely intensive child protection services available that families and whānau need to reduce the risk of harm. It is vital that, while we work to improve the system for children and young people in state care, we place a real focus on preventing children and young people from needing to enter state care in the first place.

Available services often do not meet the multiple and complex needs of children and young people most at risk (to prevent them from entering and re-entering state care)

- 16 Currently, statutory social workers look to access the most appropriate services available for children and young people assessed as being at risk of harm, often referring them and their families and whānau to community-based services and other early intervention responses. These responses include, for example, multi-agency approaches to co-ordinating services, such as Children's Teams and Strengthening Families.
- 17 However, community-based services are more appropriate for those with earlier need. They are often designed to improve wider elements of family and whānau wellbeing, and are not well placed to handle the higher-risk situations relating to child harm. These higher-risk situations require a highly skilled workforce to provide intensive and protective support focused specifically on reducing the risk of harm.
- 18 Additionally, some early intervention services are not funded for the capacity and capability necessary to undertake the complex work required and there is often inconsistent and limited access to specialist services, for those children and young people believed to be in need of care or protection (but who are not 'in state care').²
- 19 State care, however, is also not an appropriate response when evidence indicates that a child could be cared for safely at home (including with wider family and whānau) if support was provided to their families, whānau, hapū, iwi and family groups. While ensuring the safety of the child is paramount, it is critical to work with families and whānau to ensure a positive connection between them and their children and young people, and that there is support for those families and whānau to change and grow.
- 20 The intensive intervention function is therefore primarily about providing a new option for children and young people who Oranga Tamariki believes to be at risk of harm, but are able to be cared for safely at home (including with wider family and whānau) with the right intensive support.

² These specialist services include specialist assessments, Positive Parenting Programmes, various trauma-informed therapies and services such as Functional Family Therapy, Multi-systemic therapy, Trauma-focused Cognitive Behaviour Therapy and Specialised Behaviour Support.

In June 2018, the Cabinet Social Wellbeing Committee considered the future direction of the intensive intervention function for Oranga Tamariki

- 21 In June 2018, the Cabinet Social Wellbeing Committee agreed that the intensive intervention function for Oranga Tamariki has the key purpose of reducing the risk of harm, and helping to prevent the need for entry and re-entry into state care, for children identified as being at risk of harm [SWC-18-MIN-0074 refers].
- 22 Cabinet also agreed that the intensive intervention function would initially focus on children who are assessed as being in need of care or protection and who therefore currently receive a statutory response (but who are not in state care) [SWC-18-MIN-0074 refers].³ Over time, there is the intention to expand this focus to a wider group of children who are not believed to be in need of care and protection, but who are still at risk of harm.
- 23 Additionally, Cabinet noted:
- 23.1 that a child's link with their families, whānau, hapū and iwi is critical to their sense of identity, belonging and ability to flourish as adults, and that maintaining whakapapa connections is particularly important for Māori children and young people (who are currently over-represented in the care and protection system)
- 23.2 the key characteristics of effective interventions or practices for children's services as a starting point for development of options for the Oranga Tamariki intensive intervention function
- 23.3 that the function will need to ensure a seamless and child-centred response for children and their families and whānau engaged with the Children's Teams and any other services currently working with these target cohorts [SWC-18-MIN-0049 refers].

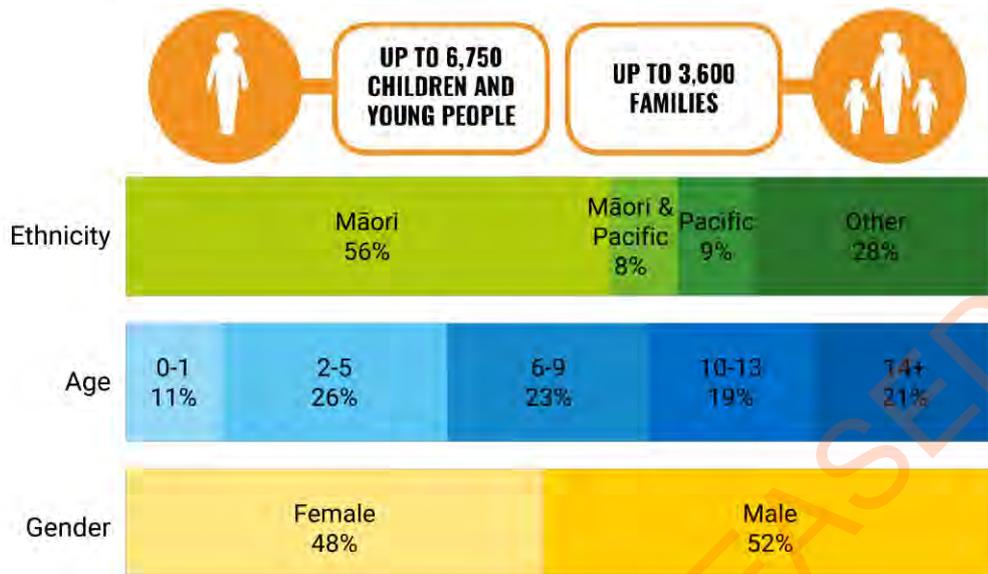
Children and young people most at risk of entering or re-entering state care, and their families and whānau, have complex and extensive needs

- 24 The new intensive intervention function would be tightly focused on those children and young people at an elevated risk of harm, and therefore at a higher risk of needing to enter or re-enter state care.
- 25 There are approximately 5,700-6,750 children and young people who are considered to be most at risk of entry and re-entry into state care, and therefore might receive a service as part of the intensive intervention function.⁴ These children and young people are connected to around 5,500 siblings and are from 3,100-3,600 families and whānau.

³ Belief that a child is in need of care or protection includes on the grounds that the child may be suffering or likely to suffer serious harm such as neglect, physical, sexual or emotional abuse (as per new s14AA(1) of the Act coming into force 1 July 2019).

⁴ Estimate (using data from January 2016 to June 2018) of the number of children either: at risk of entry to care (those who had an FGC during the period, but did not enter out of home care placement within the next month); or at risk of re-entry to care (those who exited an out of home placement, excluding those who aged out). Those in this cohort who were in the custody of the chief executive in a return/remain placement (and therefore whose families/whānau may still require support to provide a safe, stable and loving home for that child) are also included in costings outlined in *Paper Four: Care*.

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26 The diagram above provides a breakdown of the initial focus cohort for the intensive intervention function. Data suggests that these children and young people tend to go on to experience outcomes that are no better, and sometimes worse, than those who enter state care. Wellbeing challenges faced by this cohort are wide-ranging and complex, and families and whānau are disadvantaged across multiple life domains. The intensive intervention function will need to facilitate support for a variety of needs including a combination of:

- family harm, including violence and offending
- income support (and sustainable work)
- mental health
- substance abuse
- education
- housing (suitability and affordability).⁵

27 Oranga Tamariki will therefore need to work effectively with a range of other agencies and community groups – while continuing to ensure an integrated focus on the intensive child protection elements of the service. For example, linkages can be made between the needs listed above and initiatives such as: the Joint Venture Family Violence and Sexual Violence; the public housing fast-track for eligible households with children and young people who are, or have been in care; and the cross-agency work underway as part of the Child and Youth Wellbeing Strategy to consider preventative and early interventions to support children and their families and whānau in the pre-natal to six years age group.

28 We know that there are increasingly larger proportions of Māori children and young people as the level of Oranga Tamariki involvement increases. Design and delivery of the intensive intervention function must work for Māori children and young people and their families and whānau and be aligned with the Mana Tamaiti objectives outlined in *Paper Two: Improving Outcomes for Tamariki Māori*. Research suggests that this involves effective engagement

⁵ Needs identification is supported by Integrated Data Infrastructure (IDI) analysis on the proportion of children 0-15 years at June 2015 with selected parent factors.

and communication with the whole of the whānau, building on strengths, recognising cultural and whānau led approaches, and working collaboratively with other agencies and groups to deliver pathways to whānau over the long term.⁶

- 29 Appendix B provides further information on those in our initial focus cohort who are of Pacific ethnicity, or who are disabled.

The intensive intervention function will make a lasting difference in the lives of these children and their families and whānau

- 30 Effective investment in establishing or improving intensive child protection services, including through systemic social work models, has been seen to achieve significant reductions in state care populations. During my recent visit to England, I saw a number of local authorities that have invested in effective models to this effect with impressive results.⁷
- 31 A family would only receive services as part of the intensive intervention function if their child has been assessed by a statutory social worker as being at risk of harm. Therefore, the three primary objectives for the intensive intervention function are:
- 31.1 *More children and their families and whānau are safe and flourishing at home* – the risk of harm to children is substantially lowered so children are able to be kept safely at home (including with wider family and whānau).
 - 31.2 *Families and whānau are better supported to provide safe, stable and loving homes* – parenting, self-confidence, and resilience to future adversity are improved, and there is successful family reunification after separation.
 - 31.3 *Fewer children need to enter or re-enter state care* – as noted previously, there is evidence from other jurisdictions that high quality intensive intervention services can reduce the need for children to enter state care.
- 32 To support sustainable reduction of risk of harm, I would expect Oranga Tamariki and partners to take a holistic approach to addressing wider family and whānau needs and wellbeing. Therefore, a secondary aim of the service would be:
- 32.1 *Children and their families and whānau have their needs addressed earlier, preventing escalation* – outcomes across a wide range of domains should be enhanced. In the first instance, we would expect to see improvements to safety and security. Over the longer term we would expect education, health, cultural and broader wellbeing to improve, for example cognitive and behavioural gains.

Key principles have been identified for the intensive intervention function for Oranga Tamariki

- 33 Officials have gathered insights from NGO providers, iwi/Māori providers, the Oranga Tamariki Māori Design Group, government agencies, community members and local Oranga Tamariki staff on what the intensive intervention function could look like. These insights and further research have been used to consolidate previously identified key characteristics of effective interventions or practices for children's services into a set of key principles for the

⁶ See Families Commission Research Report, August 2013.

⁷ Models include, for example, those described in: Forrester, D., Westlake, D., McCann M., Thurnham, A., Shefer, G., Glynn, G., and Killian, M. (2013) *Reclaiming Social Work? An Evaluation of Systemic Units as an Approach to Delivering Children's Services*, University of Bedfordshire.

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Oranga Tamariki intensive intervention function [SWC-18-MIN-0074 refers]. Services offered as part of the intensive intervention function must, at a minimum, provide for:

- a) a trusted and highly skilled key worker with time to engage, build relationships, and coordinate early, consistent and non-episodic support until it is no longer needed (and that can taper out as appropriate)
- b) child-centred support in the context of the child or young person's family and whānau, that has regard to their mana and whakapapa
- c) a strengths-focused, holistic approach that has regard to the whanaungatanga responsibilities of their family and whānau, hapū, iwi, and family group
- d) the specific needs of each individual child or young person and their families and whānau and, in particular, those who are Māori, Pacific, or disabled
- e) continuous risk assessment and identification of protective factors for effective and timely responses that meet immediate needs when required
- f) culturally appropriate and responsive working
- g) active partnership opportunities with iwi, Māori organisations, and services across the government and community sector
- h) integrated agency approaches and multi-professional working and information sharing.

Cross-government, iwi and Māori and community partnerships will be key to success

- 34 There is also a need to build and reinforce partnership relationships with communities in the development of the intensive intervention function, to create sustainable change. We have learnt from the Children's Teams evaluation (see *Paper One: Overview*) that ground-up, community responsive design is more likely to achieve community buy-in, and this will look different for different communities. This method of design is also likely to contribute to a range of additional benefits, such as improvements to community wellbeing, accessibility, experience, efficiency and effectiveness of services. Any option for the intensive intervention function will need to ensure flexibility to respond to needs as they evolve.
- 35 In 2015, the Expert Panel Final Report envisaged that Oranga Tamariki would take on responsibility for ensuring children and young people get the services they need from other agencies. However, the Report noted that a 'negotiation and best efforts' approach across the system, particularly with respect to government agencies, had failed to ensure that children get the services they need, when and where they need them. The Oranga Tamariki Action Plan (OTAP) provides a mechanism for ensuring agencies work together more effectively to improve outcomes for the core populations of interest to Oranga Tamariki, including those in our initial focus cohort (see *Paper One: Overview*). The OTAP is expected to be developed for mid-2019 in line with statutory timeframes for adoption of the related Child and Youth Wellbeing Strategy (an OTAP dependency).

Options for the intensive intervention function have been developed and assessed

- 36 Building on research, evidence, and stakeholder engagement, officials have developed options for the design of the intensive intervention function. These options address a gap in the current system, recognising the need to take a relational, trust-based approach in responding to the needs of those most at risk of entering and re-entering care.

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- 37 The options for the intensive intervention function are detailed in the table below. Initial stakeholder consultation has identified some key elements to meet the needs of our initial focus cohort that are included in both options (see table below). The key decision in regards to which of the two options to progress is around the approach to delivery.

Option	Description
<p>Option One: Oranga Tamariki led</p>	<p>This option would implement a more intensive Oranga Tamariki statutory social worker to child ratio (on average) for the initial focus cohort (to be around 1:10, down from current estimates of 1:25). This lower ratio would allow for the social worker to provide a more intensive response, including in-home parenting support, mentoring, or therapeutic support in a culturally appropriate way. A lower average caseload would provide time for the social worker to work in a direct, relational way and work more effectively to ensure children, young people and their families and whānau receive required services.</p>
<p>Option Two: Partnered learn-and-grow</p>	<p>This option introduces a ‘family/whānau intensive support worker’ role (detailed in Appendix D) where needed and appropriate to work directly with families and whānau, delivering intensive services at a ratio of between 1:5 and 1:8, worker:family/whānau.</p> <p>Workers that fulfill this role would be highly skilled; they could be social workers or from other appropriate professions. Their role could include delivering services such as in-home parenting support, mentoring, or therapeutic support in a culturally responsive and appropriate way (flexible to meet the needs of children, young people and their families and whānau). A flexible approach would be taken (where possible) to locate the best placed family/whānau intensive support worker to conduct direct relational work and support to help implement a plan for a family and whānau.</p> <p>Critically, the family/whānau intensive support worker would work closely – and in partnership – with the statutory social worker who will remain responsible for fulfilling their statutory role under the Act and (on behalf of the Oranga Tamariki chief executive) continually assessing the levels of risk and strength.</p> <p>This option also looks at improving the average Oranga Tamariki statutory social worker to child ratio to be around 1:20 - helping to ensure a more appropriate and effective average caseload so as allow for more quality social work to be undertaken. Improved social worker assessments will help to build a picture for future service commissioning (including specialist services, the availability of which is currently limited).</p> <p>Detailed design would be developed with communities. Officials would work to explore and ensure that, in locations where existing Whānau Ora initiatives or other agencies have developed relationships with families and whānau that we are focused on, opportunities to collaborate and support are prioritised.</p>
<p>Elements common to both options:</p>	<ul style="list-style-type: none"> • a small flexible fund to meet some immediate material needs of a family and whānau where there is a gap in support (but not, at this stage, direct purchasing of specialised services) – this would be, for example, no more than the equivalent of \$2,000 per family, as required • improving our understanding of which services are effective through continuous evaluation (supported by tracking and monitoring of referrals, outcomes, risks, and service gaps) to more systematically inform decision-making around funding and referrals • undertaking work to support a collaborative cross-agency approach to provision of services for the initial focus cohort (eg through OTAP).

- 38 Appendix C outlines assessment of options, in comparison with the status quo. The set of criteria developed for assessing options primarily considers to what extent each option:

- 38.1 meets the key principles and service objectives
- 38.2 supports existing and soon to be in force legislative obligations (outlined in Appendix A), including new principles and purposes of the Act that reinforce a preventative

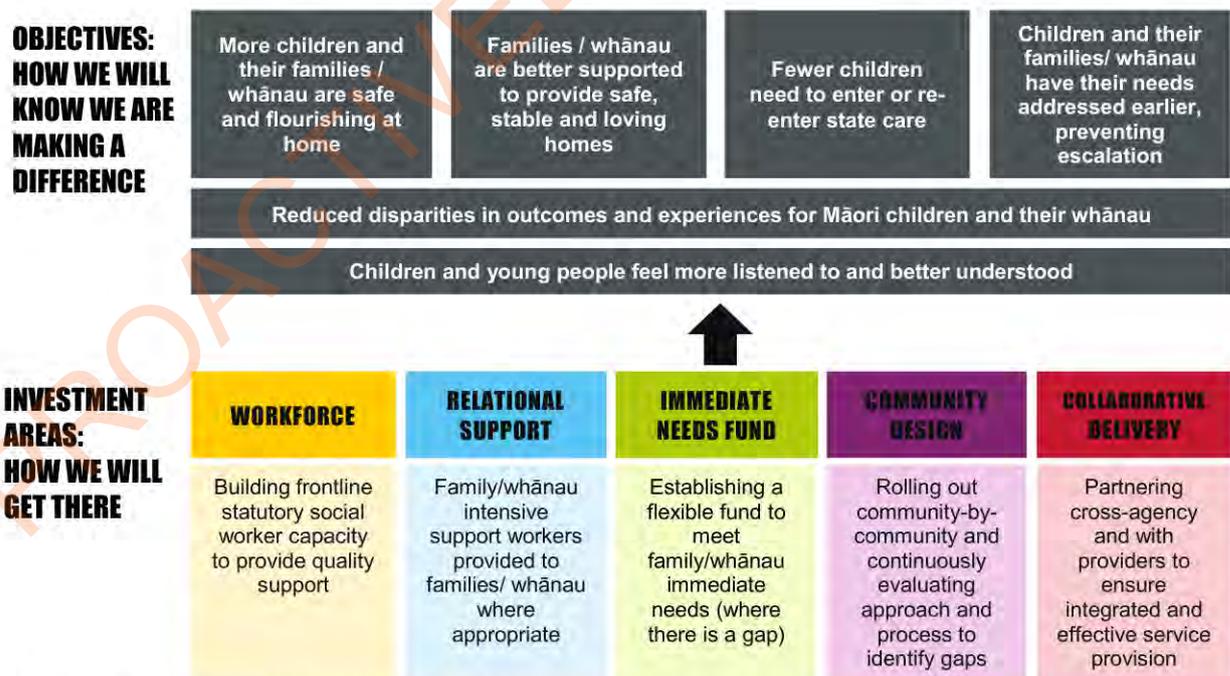
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approach, and new section 7AA duties of the chief executive in relation to the Treaty of Waitangi (te Tiriti o Waitangi)

- 38.3 is able to be developed and delivered flexibly alongside communities
- 38.4 is feasible to implement (including alongside other agencies and partners)
- 38.5 provides value for money.

I propose investment in family/whānau intensive support workers

- 39 I believe that developing an intensive intervention function in the way outlined in Option Two offers the best opportunity for significantly shifting the operating model of the care and protection system, and the best value for investment.
- 40 I consider that Option Two is more likely to lead to success than Option One. It would be particularly challenging to source the workforce required for Option One, even if it were staged or phased over time, given the increased pressure on recruiting Oranga Tamariki case-holding social workers. Option Two uses a balance of family/whānau intensive support workers and statutory Oranga Tamariki social workers to enable sustained access to, and medium-term relationships with, families and whānau (where this currently proves challenging). The options assessment in Appendix C supports Option Two as the preferred option.
- 41 My aim, through delivery of Option Two, is to build a genuinely intensive and protective service for children, young people and families and whānau that need it, which allows the flexibility to work with and alongside partners and communities with existing networks. Key investment areas that comprise my proposal, including community-by-community design, are as follows:



- 42 Analysis has shown that children and young people who need this kind of support are spread across New Zealand. Therefore, for the system to be effective for all of these children and young people and significantly improve intensive child protection support in New Zealand, I wish to commit to nationwide coverage. Detailed operationalisation will need to be designed

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alongside each community. This will take time to deliver, and will depend heavily on the ability to find and support the required highly skilled workforce.

- 43 Appendix D provides further detail on the role of the proposed family/whānau intensive support worker, the small flexible fund to meet the immediate needs of families and whānau, and the approach to continuous evaluation and monitoring.

Getting this right will mean significant gains for our initial focus cohort

- 44 If Option Two is implemented, I expect risks of harm for children and young people in their family environment to be addressed and families and whānau to be strengthened. This will mean that more children and young people will be cared for at home, and therefore prevented from entering state care. Supporting these children to remain safe and stable within the home environment will also significantly reduce trauma.
- 45 In addition to supporting these children and young people to remain in their homes, I expect that achieving these shifts will lead to significant improvements in life outcomes for these young people and narrow the gap in wellbeing between them and other young people. A stable home environment will better support them to engage and achieve more at school, avoid offending, and maintain their physical and mental health.
- 46 Oranga Tamariki will work to quantify the benefits of the agreed option for the intensive intervention function, as part of the Budget 2019 process. In the long term, evaluation will be able to provide insights as to whether these benefits are realised.

There are risks and challenges to implementing this kind of intensive support service

- 47 There is a risk that suitable workers are not available for this work. Officials have already begun conversations with iwi, Māori and other NGO social services providers and others on how we may be able to make best use of some of the most skilled workers in the current workforce to undertake this critical and complex work. *Paper One: Overview* provides detail on issues of workforce capacity and *Paper Two: Improving Outcomes for Tamariki Māori* details proposed cultural competency building.
- 48 Approaches to partnering for delivery would include partnering with iwi. We know that some iwi already have similar roles with responsibilities similar to that envisaged for the 'family/whānau intensive support worker', and have existing trusted relationships with whānau that are known to Oranga Tamariki. Where we are seeking to partner with iwi in a community for delivery of services as part of the intensive intervention function, this type of existing role could be expanded, and up-skilled where necessary to do the intensive work needed to walk alongside families and whānau and prevent their children and young people coming into state care.
- 49 If the workforce is unavailable or inappropriate for this level of intensity of service, or if design and delivery is otherwise not undertaken effectively, there is a risk that provision will not meet the needs of those children and young people most at risk of entering and re-entering care. It is therefore important that we partner with highly skilled workers for delivery, underpinned by an evidence-based approach, and ensure that there is a robust process for continuous monitoring and improvement of the service.

I intend that the preferred option would be implemented through a learn-and-grow model

- 50 The main point at which a child or young person (and their family and whānau) might be referred to services as part of the intensive intervention function is when an Oranga Tamariki

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social worker forms a belief that they are in need of care or protection. Accordingly, the rollout of these services needs to be well embedded within the broader Oranga Tamariki framework, to enable appropriate alignment and visibility. Therefore, phased rollout should be planned on the basis of existing Oranga Tamariki site (site) locations.

- 51 As part of a learn-and-grow model, rollout would begin with a small number of sites with required capacity. Note that these initial sites would not be considered 'pilots', but rather opportunity to learn more about effective implementation and to test key service aspects of the proposed approach such as:
- 51.1 critical success factors and skills to enable the family/whānau intensive support worker to deliver desired outcomes, including their role in relation to the Oranga Tamariki statutory social worker
 - 51.2 the ratios of social worker, and of the family/whānau intensive support worker, to family and whānau
 - 51.3 methods of ensuring cultural appropriateness and responsiveness
 - 51.4 the use, governance, and effectiveness of the proposed small flexible fund to help meet immediate family and whānau needs
 - 51.5 process and approach to community-by-community design and rollout, and methods of partnering and commissioning solutions that reflect local context (including existing services)
 - 51.6 need and demand for services from other agencies and community groups.
- 52 Further work will determine timing and locations for rollout. Considerations for site selection (for initial sites, in particular) could include, for example:
- 52.1 the proportion of population that is part of our initial focus cohort
 - 52.2 the readiness, willingness and capacity of Oranga Tamariki sites and the wider community (including iwi, Māori and other NGO social services)
 - 52.3 the presence of complementary initiatives such as Children's Teams, Whānau Ora, Oranga Tamariki kairaranga roles and iwi involvement in supporting FGCs
 - 52.4 specificities such as predominately Māori or Pacific communities, or urban or rural contexts (to develop models that are specific to community context).
- 53 Following Cabinet agreement to the direction of Option Two, further detailed work will be undertaken to determine the phasing and location of site rollout over the four years. There will be choices around the speed and scale of rollout, which will be addressed as part of the Budget 2019 process. Changing variables such as more families per worker, or less long-term intervention would reduce intensity of service and therefore reduce effectiveness. Therefore, any scaling or phasing would preferably involve the pace of rollout. Once implementation begins, insights will be able to inform rollout decisions as part of the learn-and-grow approach.
- 54 I envisage rollout to various locations or sites phased incrementally over each financial year, taking into account the readiness of each site or location. [REDACTED] 9(2)(g)(i)
- 55 Budget 2019 initiatives proposed to support implementation of the Oranga Tamariki operating model will include a suite of evaluation, research, analysis and monitoring activities

designed to ensure our proposals are implemented as expected and have the anticipated impacts (particular as they relate to Māori children and young people). Appendix D provides more detail on proposed evaluation for the intensive intervention function, and *Paper One: Overview* outlines the overarching evaluation approach for the operating model.

Implementation will ensure responsiveness to tamariki and whānau Māori

- 56 Developing an effective, highly skilled, culturally responsive intensive intervention function for children and young people is our best hope of safely reducing the number of Māori children (who are currently disproportionately represented) in state care.
- 57 Option Two will work to fulfil the principles of the Treaty of Waitangi (te Tiriti o Waitangi), including through helping to meet obligations under new section 7AA of the Act. The intensive intervention function will meet the following Mana Tamaiti objectives (outlined in *Paper Two: Improving Outcomes For Tamariki Māori*):
- 57.1 ensure the participation of Māori children, young people, whānau, hapū and iwi in decisions affecting them at the earliest opportunity to enhance their wellbeing and safety
 - 57.2 support, strengthen and assist whānau Māori to care for their children and young people to prevent the need for their removal from home into care or a youth justice response
 - 57.3 support Māori children and young people to establish, maintain or strengthen their sense of belonging through cultural identity and connections to whānau, hapū and iwi.
- 58 The intensive intervention function also aligns with the broader direction of provisions under new section 7AA, including through providing opportunities to, and inviting proposals from, iwi and Māori organisations to improve outcomes for Māori children, young people and their family and whānau in our initial focus cohort.
- 59 Detailed design will need to occur, on a community-by-community basis, alongside Māori children and young people and their families and whānau, hapū, iwi and family groups to ensure it effectively supports Māori children and young people to be safe and to flourish in their own homes.
- 60 There is a growing body of research that promotes a culturally responsive, whānau-centred approach to assisting better wellbeing outcomes for Māori.⁸ Therefore, in order to achieve the wellbeing outcomes that Māori aspire to, a whānau-centred approach is needed.
- 61 A key platform of the whānau-centred approach is the recognition of the strength and resilience of whānau as holding untapped potential for change on the one hand, and as agents of change on the other hand. Support for whānau will require growing a workforce that has developed the skills, knowledge and experience that is as much whānau centred as it is child centred.

Whānau Ora contribution to design and delivery will be worked through on a community-by-community basis

- 62 Whānau Ora navigators work with families and whānau in a holistic and co-ordinated way to undertake whānau centred planning and preparation to address need, and to identify and support aspirations. [REDACTED]

9(2)(f)(iv)

⁸ Social Policy Evaluation and Research Unit, 2018

[REDACTED]

9(2)(f)(iv)

- 63 Whānau Ora initiatives, through the North and South Island Commissioning Agencies, enable a delivery focus on the characteristics, aims and aspirations of the communities they work with.

[REDACTED]

9(2)(f)(iv)

- 64 The final report of the Whānau Ora review is due in November 2018. The review has focused on the applicability of a whānau-centred approach in improving outcomes for whānau, the ability of the Whānau Ora commissioning approach to effect sustainable change in the wellbeing and development potential of whānau; and the accountability and transparency of its service delivery model and commissioning approach. We will use the findings of the review to inform our work and advance opportunities identified to improve outcomes for children, young people and their family/whānau.

There are opportunities to improve connections across multiple agencies and other existing initiatives

- 65 Community-by-community design will allow us to draw on existing strengths and capitalise on local relationships, capabilities, and capacity. It will involve inviting proposals from providers that aim to streamline local service co-ordination and delivery in a way that works locally, or who may already be supporting family and whānau via roles similar to our envisaged family/whānau intensive support worker.

- 66 I believe that implementation at a community level will help ensure strong linkages with existing complementary cross-agency initiatives. For example, we know that issues relating to family violence are present for a proportion of our initial focus cohort.⁹ Therefore, work being undertaken as part of the Joint Venture Family Violence and Sexual Violence will likely be able to support initial site design for the intensive intervention function. In particular, the multi-agency pilot of the Integrated Safety Response (ISR) delivers services to address family violence and sexual violence, including some intensive case management, and a whānau-centred approach. ISR is provided in locations identified as having diverse populations including a higher proportion of rural and Māori communities, and is considered to be an essential component of Police response to family harm in those locations.

- 67 It is also important that established services are available to meet the needs of the child or young person and their family and whānau (for example around parenting, family violence, income support, education, substance abuse and mental health). While some services are accessed under current business-as-usual processes, enduring change for these children and their family and whānau will require strengthened cross-agency partnering in this space.

- 68 New, more flexible, information sharing provisions in the Act will come into force on 1 July 2019. I expect that, as Oranga Tamariki implements its intensive intervention function, these provisions will be used to enable information about children in our initial focus cohort to be shared, with appropriate safeguards. Information sharing will help relevant parties better understand the needs of children subject to the intensive intervention function.

⁹ IDI analysis indicates that 57 percent of those children and families and whānau in our initial focus cohort had a family violence indicator in the last year.

Consultation

- 69 The proposals in this paper have been informed by engagement by officials with stakeholders, including frontline professionals, representatives from social sector agencies, iwi and Māori providers, NGOs, the Oranga Tamariki Māori Design Group, the Oranga Tamariki Pacific Panel, and other groups.
- 70 This paper was prepared by Oranga Tamariki. The following agencies were consulted in the preparation of the paper: the Ministries of Health, Education, Justice, Social Development, and Youth Development; the Ministry of Business, Innovation and Employment; the Ministry of Housing and Urban Development; the Ministry for Pacific Peoples; the Ministry for Women; Te Puni Kōkiri; the Department of Corrections; the New Zealand Police; the Office of Disability Issues; the Accident Compensation Corporation; Inland Revenue; the Joint Venture Family Violence and Sexual Violence; the Tertiary Education Commission; the State Services Commission; the Treasury; the Policy Advisory Group, Child Wellbeing Unit and the Child Poverty Unit at the Department of the Prime Minister and Cabinet; and the Office of the Children’s Commissioner.

Financial implications

- 71 I have considered two options for funding the intensive intervention function and have selected a preferred option, Option Two. Appendix C outlines assessment of the options.
- 72 The key components of costs in my proposed approach, Option Two, include: family/whānau intensive support workers; additional statutory social workers; allowance for a small flexible fund to meet the immediate needs of family and whānau; community-by-community design; as well as monitoring, assessment and evaluation. This approach would position the service well to meet the needs of children and young people and their families and whānau and to deliver on legislative intent and the service objectives for the intensive intervention function.
- 73 Indicative year-by-year costings, assuming ambitious linear growth over four years, are outlined below:

	\$m				Total cost
	Year 1 2019/20	Year 2 2020/21	Year 3 2021/22	Year 4 2022/23	

9(2)(g)(i)

- 74 Subject to Cabinet agreement to Option Two for implementing the intensive intervention function, officials will refine these costs to inform Budget 2019 initiatives.
- 75 There may be funding implications for agencies delivering required services for children and young people and families and whānau in the initial focus cohort. Further work is required to determine any flow on costs for additional services in the social sector.

Legislative implications

- 76 This paper has no legislative implications.

Impact analysis

77 Impact analysis requirements do not apply to this paper.

Human rights

78 The policy proposals in this paper are consistent with the New Zealand Bill of Rights Act 1990 and the Human Rights Act 1993. The proposals will increase New Zealand's alignment with the United Nations Convention on the Rights of the Child (UNCROC), in particular Article 19. These proposals also align with New Zealand's statement of support for the United Nations Declaration on the Rights of Indigenous Peoples.

Gender implications

79 Women are more likely than men to be the primary caregivers for children. Proposals outlined in this paper may positively impact on women primary caregivers, particularly if executed effectively to achieve sustainable change, as they support women's economic independence, safety and wellbeing.

Disability perspective

80 The proposals in this paper apply to all children and young people in the initial focus cohort for the intensive intervention function, including those with disabilities. Disabled children and young people are more likely to experience poor outcomes (for example, abuse and neglect). I expect that delivery of services as part of the intensive intervention function will need to take special care that the needs of disabled children and young people are met.

81 As a result of legislative amendments, disabled children and young people will access out-of-home care through the mainstream care and protection pathway. The Ministry of Health and Oranga Tamariki are working together to strengthen supports provided to families and disabled children at risk of entering care, and to ultimately reduce the number of disabled children in statutory care.

Publicity

82 Any announcements relating to final Budget 2019 decisions for Vote Oranga Tamariki will be made following Budget release day in May 2019. Any announcements will be co-ordinated with the Office of the Minister for Children.

Proactive release

83 Consistent with section 9(2)(f)(iv) of the Official Information Act 1982, the content in this paper is under active consideration until final decisions relating to Budget 2019 have been made. Proactive release of this paper will be considered closer to Budget release day in May 2019.

Recommendations

- 84 The Minister for Children recommends that the Committee:
- 1 **note** previous decisions made by the Cabinet Social Wellbeing Committee in June 2018 that the intensive intervention function for Oranga Tamariki:
 - 1.1 has the key purpose of reducing the risk of harm, and helping to prevent the need for entry and re-entry into state care, for children identified as being at risk of harm
 - 1.2 will initially focus on children who are assessed as being in need of care or protection and who therefore currently receive a statutory response (but who are not in state care), with the intention to expand this focus to a wider group of children who are not believed to be in need of care and protection but who are still at risk of harm [SWC-18-MIN-0074 refers].
 - 2 **note** that, currently, the support we provide for children and young people at risk of harm, and their families and whānau, varies and services frequently do not meet the needs of those who require intensive support
 - 3 **note** that stakeholder engagement has informed a set of key principles to underpin the intensive intervention function for Oranga Tamariki—Ministry for Children, and that further engagement will occur, including with children and young people and families and whānau, to inform any detailed service delivery
 - 4 **note** that two options have been assessed for the intensive intervention function for Oranga Tamariki—Ministry for Children, compared to the status quo:
 - 4.1 *Option One: Oranga Tamariki led* – focused on implementing a lower Oranga Tamariki statutory social worker to child ratio on average (to around 1:10) to allow for the social worker to provide a more intensive response
 - 4.2 *Option Two: Partnered learn-and-grow* – focused on introducing a ‘family/whānau intensive support worker’ role to work directly and intensively with families and whānau (with a caseload of between 1:5 and 1:8) where appropriate, and improving the Oranga Tamariki statutory social worker to child ratio (to around 1:20 on average) to facilitate more effective social work
 - 5 **note** that both Option One and Option Two include components around: a small flexible fund for meeting immediate material family and whānau needs; continuous evaluation; and supporting a collaborative cross-agency approach
 - 6 **agree** to Option Two (the preferred option), which will deliver the fundamental elements of intensive intervention in a phased manner via a learn-and-grow model and community-by-community approach, subject to Budget 2019 decisions
 - 7 **note** that choices around phasing and scaling will be worked through as part of the Budget 2019 process

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- 8 **invite** the Minister for Children to submit a detailed bid for Budget 2019 that reflects the direction agreed in recommendation 6.

Authorised for lodgement

Hon Tracey Martin

Minister for Children

PROACTIVELY RELEASED

Appendix A: Legislative obligations relevant to intensive intervention

Oranga Tamariki must fulfil its existing legislative obligations in terms of providing services to those that require it. At present, the Oranga Tamariki Act 1989 provides for:

- social worker investigation of reports of concern received (s17)
- referral to a co-ordinator for a family group conference (FGC) if the social worker believes the child or young person is in need of care and protection (s18)
- holding of FGC (s20-32)
- social worker to apply to the Court to have a child or young person declared to be in need of care or protection either in the event that there is agreement to that at an FGC or if there is no agreement at FGC (but the social worker determines that Court orders are required) (s31, s34)
- chief executive (CE) to give effect to decisions/recommendations/plans from the FGC and any orders from the Court (see below) (s34)
- the Court may direct the CE (and others) to provide services to caregivers and to support children and young people in need of care and protection and their families (s86, s91)
- those children and young people to either be returned to their family, whānau, hapū, iwi and family group (if it can be done safely) or placed with another appropriate family group. (s5, s13)

The Children, Young Persons and Their Families (Oranga Tamariki) Legislation Act 2017 made various amendments reflecting intent to take more of a **preventative approach** (that come into force 1 July 2019, or earlier by Order in Council) including through:

- new and amended purposes, and care and protection principles, for the Act that support early assistance being provided to families, whānau, hapū, iwi and family groups to care for and meet the needs of their children and young people, including where there is a risk of a child needing to be removed from home (*new s4*)
- specifying that the CE can only take no further action following investigation of a report of concern if there is no identifiable risk of harm that can be dealt with under the Act or if appropriate action has already been taken (*new s17(2A)*)
- enabling a FGC to be convened to formulate a plan for a child or young person who is not believed to be in need of care or protection (*new s18AAA*)
- a new youth justice principle providing that a child or young person in the youth justice system should be referred to care, protection or wellbeing services under the Act if it would be of benefit to them. (*new s208*)

Additionally, a new section was inserted into the Act (section 7AA) that outlined **duties of the chief executive in relation to the Treaty of Waitangi (te Tiriti o Waitangi)**. These are detailed in *Paper Two: Improving Outcomes for Tamariki Māori*.

Appendix B: Pacific children and disabled children and their families and whānau

Pacific children and young people and their families

- 1 Around 17 percent of the initial focus cohort is of Pacific ethnicity. IDI analysis shows that a disproportionate number of those with Pacific ethnicity are showing indications of need although typically these are slightly lower indications of need than is the case for Māori. For example:
 - one quarter of all those with Pacific ethnicity are priority A or B on the Social Housing Register - this suggests that housing suitability and affordability is a substantial issue for Pacific people in our initial focus cohort
 - 87 percent of those in the initial focus cohort had a family violence indicator over their lifetime (compared to 79 percent for NZ European Other).

Disabled children and young people and their families and whānau

- 2 We know from international research that abuse and disability often coexist in the lives of children. Children who are abused are at a higher risk of developing a disability, and children with a disability are at a higher risk of being abused and neglected¹⁰. Disability is prevalent among the care population. For example, a study by Schofield and others (2007) in the UK found that of children who had been looked after (or in care) for 4 years or more, 34 percent of them were disabled or had an on-going health condition.¹¹
- 3 It is unclear exactly how many of the children or young people that Oranga Tamariki works with have a disability because this information is not captured consistently in the case management system (CYRAS). Oranga Tamariki is looking to improve this information collection, which initially will require working through definitional and methodology challenges.
- 4 Estimates vary, but foetal alcohol spectrum disorder (FASD) is known to be highly prevalent amongst the care population.¹² Because of their significant behavioural, emotional, and cognitive difficulties, children with FASD can be extremely challenging for parents and caregivers. Without the right in-home support and services, these children can end up in statutory care, and in out-of-home placements. The proposed initial focus areas for the Child and Youth Wellbeing Strategy include a focus on safe and positive pregnancies, reinforcing the need for prevention efforts in this area.

¹⁰ National Society for the Prevention of Cruelty to Children (2014). 'We have the right to be safe' protecting disabled children from abuse. NSPCC: England

¹¹ See Schofield, G., Thoburn, J., Howell, D. & Dickens, J. (2007) The Search for Stability and Permanence: Modelling Pathways of Long-Stay Looked After Children. *British Journal of Social Work*, 37, 619-642)

¹² For example, 'Taking Action on Fetal Alcohol Spectrum Disorder: 2016–2019: An action plan. Wellington: Ministry of Health' p2 (FASD Working Group, 2016) refers to evidence that suggests that FASD is likely to affect about 50 percent of children and young people in state care. Another study found that children in state care are 10-15 times more likely to have FASD than other children (see p2 of Walker, Prue 'Fetal Alcohol Spectrum Disorder in the Child Protection System: Opportunities for Prevention and Intervention' Submission #29 to Parliament of Australia Inquiry into Foetal Alcohol Spectrum Disorder).

Appendix C: Option Assessment

KEY 0= Poor, 1= Fair, 2= Good

ANALYSIS	CRITERIA	STATUS QUO	OPTION ONE: ORANGA TAMARIKI LED	OPTION TWO: PARTNERED LEARN-AND-GROW		
	Key principles	<ul style="list-style-type: none"> A statutory social worker is the key point of contact for the child and their family in regards to planning services and support around the child's need. The current responsibilities of the social worker are extensive. The urgency of new cases and the complexity of issues arising for children or young people in the care of the CE can constrain the capacity of social workers Oranga Tamariki may fund providers that work alongside families (but not specifically to deliver the) Includes the family and whānau at FGC stage in decision-making, and may refer them to services such as parenting support. Capacity constraints sometimes limit the ability of statutory social workers to support family and whānau to navigate and co-ordinate services and interventions following FGC. Inconsistent, limited access to specialist services including specialist assessments, Positive Parenting Programmes, various trauma-informed therapies and services such as Functional Family Therapy, Multi-systemic therapy, Trauma-focused Cognitive Behaviour Therapy and Specialised Behaviour Support. Limited clinical specialist services and support are available, such as access to in-house psychologists. Implementation of kairaranga and iwi FGC co-ordinators will support focus on needs of Māori children and young people and their families and whānau as part of FGC process. Plans are formed to mitigate risk at FGC stage, but risk assessment is not necessarily continuous or timely. Mechanisms to meet immediate needs of family and whānau are limited. 	0	<ul style="list-style-type: none"> A more intensive statutory social worker to child ratio will help provide additional time to work with families/whānau. This additional time to provide quality social work will contribute to: <ul style="list-style-type: none"> improved identification and response to risk and protective factors strengthened relationship with child or young person and their family and whānau. The ability of the statutory social worker to engage with and develop a trusted relationship with families and whānau may be challenging due to their statutory decision-making role. Statutory social workers may require additional training and capability building to provide required type of highly skilled support (eg in-home parenting support; therapeutic support) Additional measurement of outcomes may better tailor plans to more effectively address need, including the cultural responsiveness of services that a child or young person and their family and whānau are referred to. Improved social worker assessments will help inform future service commissioning (including specialist services). Small fund in place to meet immediate needs of family and whānau. Commitment made by government agencies around how to work best together to respond effectively to this cohort, including through Oranga Tamariki Action Plan mechanism. 	1	<ul style="list-style-type: none"> A family/whānau intensive support worker separate to the statutory social worker, can provide the time to provide non-episodic support and can build a trusting relationship with a child or young person and their family and whānau. There may be opportunities for the family/whānau intensive support worker to be a consistent point of contact throughout the child's or young person's interaction with the care and protection or youth justice system. Looks to improve outcomes for the family and whānau as a whole, and build lasting relationships and connections to create sustainable change. Partnering for delivery may better provide framework, competency and skills required to respond effectively to specific needs of Māori, Pacific and disabled children and young people and their families and whānau. Family/whānau intensive support worker will be able to input into risk and protective factor identification throughout their work with a family and whānau. This will be supported by systematic tracking of this information. Small fund in place to meet immediate needs of family and whānau. Implementation and design will be catered to local needs. Family/whānau intensive support worker will be skilled in working in different cultural context, and would be allocated to a family and whānau according to need (eg a particular worker may be skilled with responding to needs of disabled children). Improved social worker assessments will help inform future service commissioning (including specialist services). Partnerships with iwi, Māori, NGOs, and government and community services will be actively sought as part of design and implementation. Commitment made by government agencies around how to work best together to respond effectively to this cohort, including through Oranga Tamariki Action Plan mechanism. Family/whānau intensive support worker acts as a co-ordinator to access services, however agencies are not necessarily lined up to support an agreed plan.
Meets legislative requirements	Will meet legislative obligations, but may not meet the full intent of the preventative amendments coming into force as part of the Oranga Tamariki Act 1989. Does not fully support new section 7AA – ie CE duties in relation to the Treaty of Waitangi (te Tiriti o Waitangi).	0	Will meet legislative obligations, but does not fully support new section 7AA – ie CE duties in relation to the Treaty of Waitangi (te Tiriti o Waitangi).	1	Provision of a family/whānau intensive support worker will allow for continuous engagement with the child or young person (and their family and whānau) and help to meet other principles and purposes set out in the Oranga Tamariki Act 1989 (coming into force 1 July 2019 or earlier by Order in Council). Section 7AA obligations are supported, including through iwi partnerships and improving and measuring outcomes for Māori children, young people and their family and whānau.	9(2)(g)(i)
Flexible design	Little flexibility due to current constrains for statutory social workers.	0	Some flexibility once there is greater understanding of effectiveness.	1	Due to the evolving nature of the initial sites for iterative development, and therefore ability to be responsive to local needs, this option offers a lot of flexibility in approach.	9(2)(g)(i)
Feasibility of implementation	Already in place.	2	Builds on status quo, and would provide more control to Oranga Tamariki. However, requires major social worker recruitment that may be challenging.	1	Feasible, but reliant on ability to fill family/whānau intensive support worker roles and will require more time and intensive work to put in place. Will be difficult to get firm commitment from agencies on provision of services for initial focus cohort.	9(2)(g)(i)
Value	Current state	0	Approximately \$71.3m annually by year 4, having rolled out to 66 sites. Based on a 1:10 social worker-child caseload; and assumptions of a 85 percent uptake rate, around \$2,000 per family or the fund, and that there are already approximately 300 existing Oranga Tamariki social workers (and that will continue to be available) in this space.	1	As a result of working with whole family, other siblings would also benefit from family and whānau support. Children in the custody of the CE who may receive services as part of intensive intervention (to support their families/whānau to provide safe, stable, loving care) will be included in indicative costings as part of Paper Four: Care.	9(2)(g)(i)
Overall assessment	Status quo does not meet the criteria, change is required.	2	Meets the criteria moderately.	5	Preferred option - Meets the criteria best overall.	9(2)(g)(i)

Appendix D: Further detail on some key investment areas for Option Two

Family/whānau intensive support worker

- 1 Currently, the navigation and co-ordination of services for children and young people who are believed to be at risk of harm, and their families is delivered by a statutory (Care and Protection) social worker. Their responsibilities are extensive and can include: supporting family and whānau to navigate and co-ordinate services and interventions following a FGC; and also supporting children and young people to return back to their family and whānau if they have been in state care. This work often requires strengths-based and relational collaboration with family and whānau to reduce risk. Having the time to execute this kind of work effectively is currently challenging for statutory social workers, given their high caseloads and resulting capacity constraints.
- 2 Option Two introduces a critical new role of the family/whānau intensive support worker (as the 'skilled key worker') who provides intensive in-home and relationship-based support and co-ordinates the delivery of multi-agency support. This could be a role commissioned by Oranga Tamariki from an iwi or social services provider, or an Oranga Tamariki social worker, and may vary depending on the needs of a family and whānau and the community context.
- 3 In 2015, the Expert Panel Report noted that it is communities and iwi who are closest to families and can bring the connections, support and care required to support children and young people. Building relationships and facilitating connections will be a key aspect of the family/whānau intensive support worker role to promote whanaungatanga (an effective tool for connecting and building whānau capability)¹³ and strengthen family and peer support networks, so as to improve personal and collective resilience. The reach of the family/whānau intensive support worker would therefore stretch beyond the immediate family or parents to wider whānau. Relationships formed will be important for the success of the service and to contribute to a more therapeutic experience.
- 4 Research and guidance on the employment of 'skilled key workers' in this regard suggests that they are highly valued by the community, provided that the role is specified well and monitored carefully.¹⁴ This research emphasises that they are most likely to be successful when they have a relatively low caseload, and that they perform four critical functions: generating engagement; acting as a single point of contact for families; ensuring that interventions are delivered; and reducing service overlaps. Research from New Zealand and abroad suggests that this role would require wide-ranging attributes and success factors, including:
 - building trust with the family and whānau and empowering them to make change(s), but recognising that this will take time
 - enabling family and whānau rangitiratanga
 - communicating and engaging effectively with the family and whānau
 - demonstrating honesty and transparency with the family and whānau
 - collaborating with other practitioners, organisations and agencies
 - understanding and applying risk and protective factors and knowing what to do if there are safeguarding concerns
 - knowing about and understanding how local services can be accessed

¹³ See Te Puni Kōkiri (2015) Understanding whānau centred approaches.

¹⁴ Institute of Public Care. (2012). Early intervention and prevention with children and families getting the most from team around the family systems. London.

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- convening and facilitating meetings around the child and their families that generate useful contributions from families as well as practitioners
 - requesting and sharing information appropriately
 - appropriately challenging families and whānau to change¹⁵
- 5 Design of the intensive intervention function will also consider how children and young people and their families and whānau may interact with other parts of the operating model. For example, we will seek to ensure relationship continuity and sharing of information/assessments where, despite best efforts, children and young people need to be taken into state care. Further details on the relationship and accountabilities between the family/whānau intensive support worker and the Oranga Tamariki social worker will need to be worked through and may depend on the needs of community and provider partnerships.

Fund for immediate needs

- 6 International literature cites flexible budgets for use with individual families as a way to fund, for example, travel to and from services that are part of the family's plan; child attendance at activities; and essential house repairs that need to be undertaken quickly. Research shows that this kind of attention to overcoming practical difficulties for families can be instrumental in securing engagement in wider (including parenting focused) interventions and plans.¹⁶
- 7 Cross-agency working would be required at a national and local level to progress detailed work regarding the proposed small flexible fund for immediate needs, including development of criteria for its use, appropriate governance, and to ensure it interacts appropriately with payments made under the Social Security Act 1938 and other family and whānau direct payments used (for example, as part of the Whānau Ora approach). Alongside this fund, families and whānau would be directed towards other existing financial support.

Evaluation, monitoring, and continuous improvement

- 8 Community-by-community design and evaluation will offer the opportunity to test and reflect on the proposed approach. This co-creation process will be supported through incorporating a developmental evaluation for the initial phases of rollout. As part of a learn-and-grow model, it is well-suited to the innovative and complex intensive intervention space. Developmental evaluation processes:
- focus on relationships and values in the context of complex issues and social system's within communities
 - involve long-term partnered relationships between evaluation teams and those engaged in the innovative projects and programmes and their development
 - importantly, ask evaluation questions and gather evaluation information to provide iterative feedback and support ongoing decision-making to help guide changes and adaptations as required.
- 9 Over time, the evaluation will support the assessment of effectiveness and efficiency during and after implementation; measuring outcomes and impacts in order to assess whether anticipated benefits have been realised. This will also help to feed in to future funding decisions around business-as-usual services (which would continue to be available for children and young people and their families and whānau in our initial focus cohort for intensive intervention).

¹⁵ Families Commission Research Report (August 2013); Te Puni Kōkiri (2015); Institute of Public Care (2012).

¹⁶ Institute of Public Care. (2012).



Cabinet Social Wellbeing Committee

Minute of Decision

This document contains information for the New Zealand Cabinet. It must be treated in confidence and handled in accordance with any security classification, or other endorsement. The information can only be released, including under the Official Information Act 1982, by persons with the appropriate authority.

Transforming Our Response to Children and Young People at Risk of Harm - Paper Three: Intensive Intervention

Portfolio Children

On 31 October 2018, the Cabinet Social Wellbeing Committee (SWC):

- 1 **noted** that in June 2018, SWC agreed that the intensive intervention function for Oranga Tamariki—Ministry for Children (Oranga Tamariki):
 - 1.1 has the key purpose of reducing the risk of harm, and helping to prevent the need for entry and re-entry into state care, for children identified as being at risk of harm;
 - 1.2 will initially focus on children who are assessed as being in need of care or protection and who therefore currently receive a statutory response (but who are not in state care), with the intention to expand this focus to a wider group of children who are not believed to be in need of care and protection but who are still at risk of harm;

[SWC-18-MIN-0074]
- 2 **noted** that the support that the government currently provides for children and young people at risk of harm, and their families and whānau, varies, and services frequently do not meet the needs of those who require intensive support;
- 3 **noted** that stakeholder engagement has informed a set of key principles to underpin the intensive intervention function for Oranga Tamariki, and that further engagement will occur, including with children and young people and families and whānau, to inform any detailed service delivery;
- 4 **noted** that two options have been assessed for the intensive intervention function for Oranga Tamariki, compared to the status quo:
 - 4.1 option one: Oranga Tamariki led – focused on implementing a lower Oranga Tamariki statutory social worker to child ratio on average (to around 1:10) to allow for the social worker to provide a more intensive response;
 - 4.2 option two: Partnered learn-and-grow – focused on introducing a ‘family/whānau intensive support worker’ role to work directly and intensively with families and whānau (with a caseload of between 1:5 and 1:8) where appropriate, and improving the Oranga Tamariki statutory social worker to child ratio (to around 1:20 on average) to facilitate more effective social work;

- 5 **noted** that both option one and option two include components around: a small flexible fund for meeting immediate material family and whānau needs, continuous evaluation, and supporting a collaborative cross-agency approach;
- 6 **agreed** to option two (the preferred option), which will deliver the fundamental elements of intensive intervention in a phased manner via a learn-and-grow model and community-by-community approach, subject to Budget 2019 decisions;
- 7 **noted** that choices around phasing and scaling will be worked through as part of the Budget 2019 process;
- 8 **noted** that the Minister for Children will submit a detailed bid for Budget 2019 that reflects the decision in paragraph 6.

Jenny Vickers
Committee Secretary

Present:

Rt Hon Jacinda Ardern
Rt Hon Winston Peters
Hon Kelvin Davis
Hon Grant Robertson
Hon Andrew Little
Hon Carmel Sepuloni (Chair)
Hon Dr David Clark
Hon Nanaia Mahuta
Hon Jenny Salesa
Hon Tracey Martin
Hon Aupito William Sio
Hon Julie Anne Genter
Michael Wood, MP
Jan Logie, MP

Hard-copy distribution:

Minister for Children

Officials present from:

Office of the Prime Minister
Department of the Prime Minister and Cabinet
The Treasury
Ministry of Education
Office of the Chair
New Zealand Police
Oranga Tamariki–Ministry for Children
Officials Committee for SWC