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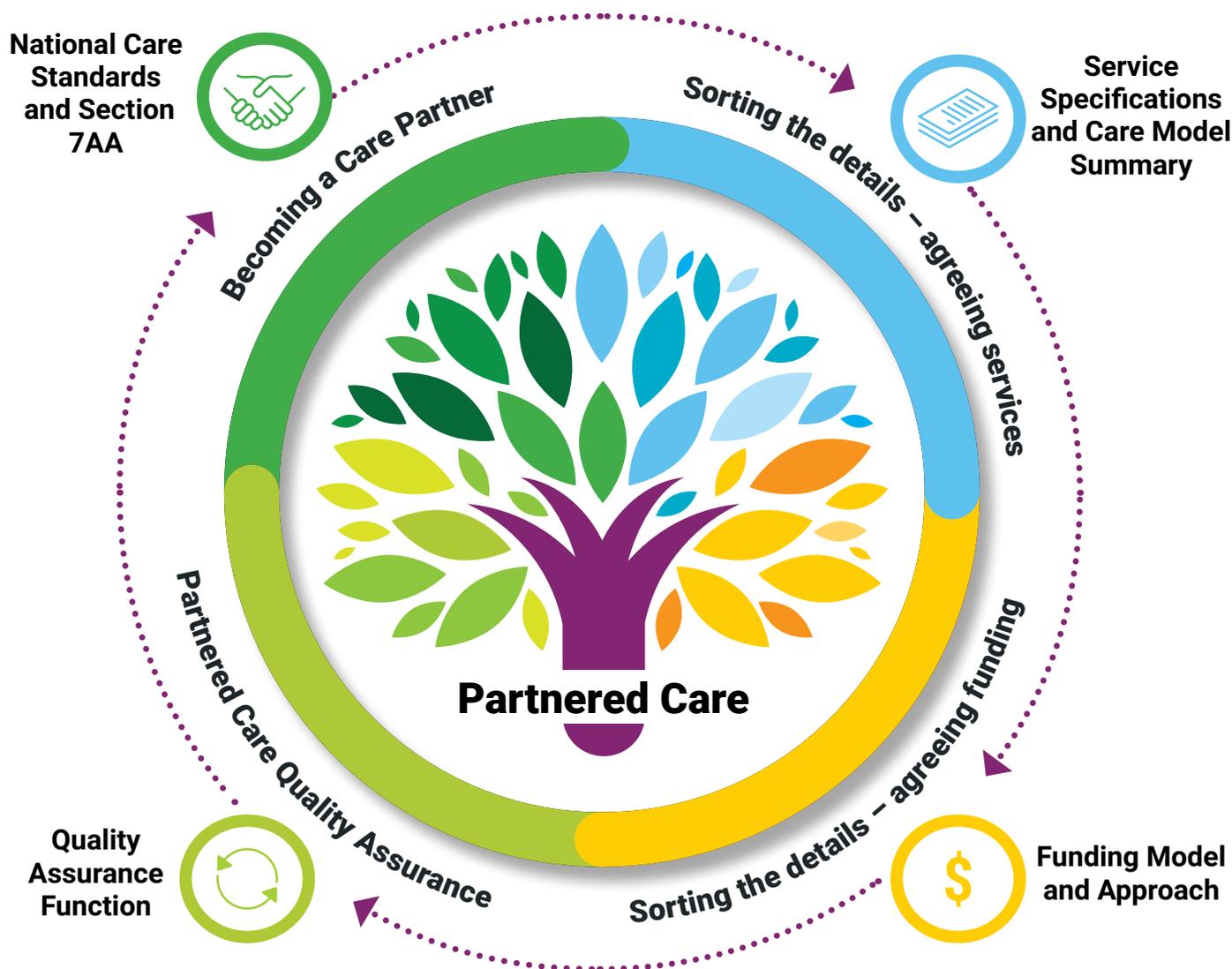


# Partnered Care

## How we work together with Care Partners

The way we work with Care Partners is aligned with the intent and aspirations of the National Care Standards and our wider commitments such as Section 7AA. We are committed to a collaborative approach of working together that is focused on meeting our collective obligations, continuous improvement, and achieving better outcomes for children and young people in care.

Child-centric agreements give us a clear, shared understanding of partners' care models, our respective roles and responsibilities, and how we work together in partnership.



The Quality Assurance approach is centred on building partnerships and understanding the experiences of the children, young people, carers, and whānau or family involved in care.

The 'all-in' funding approach for partnered care and the child-centred Dynamic funding model enable partners the flexibility to respond to the individual needs of the children in their care.



# Partnered Care

## Service Specifications and Care Model Summary

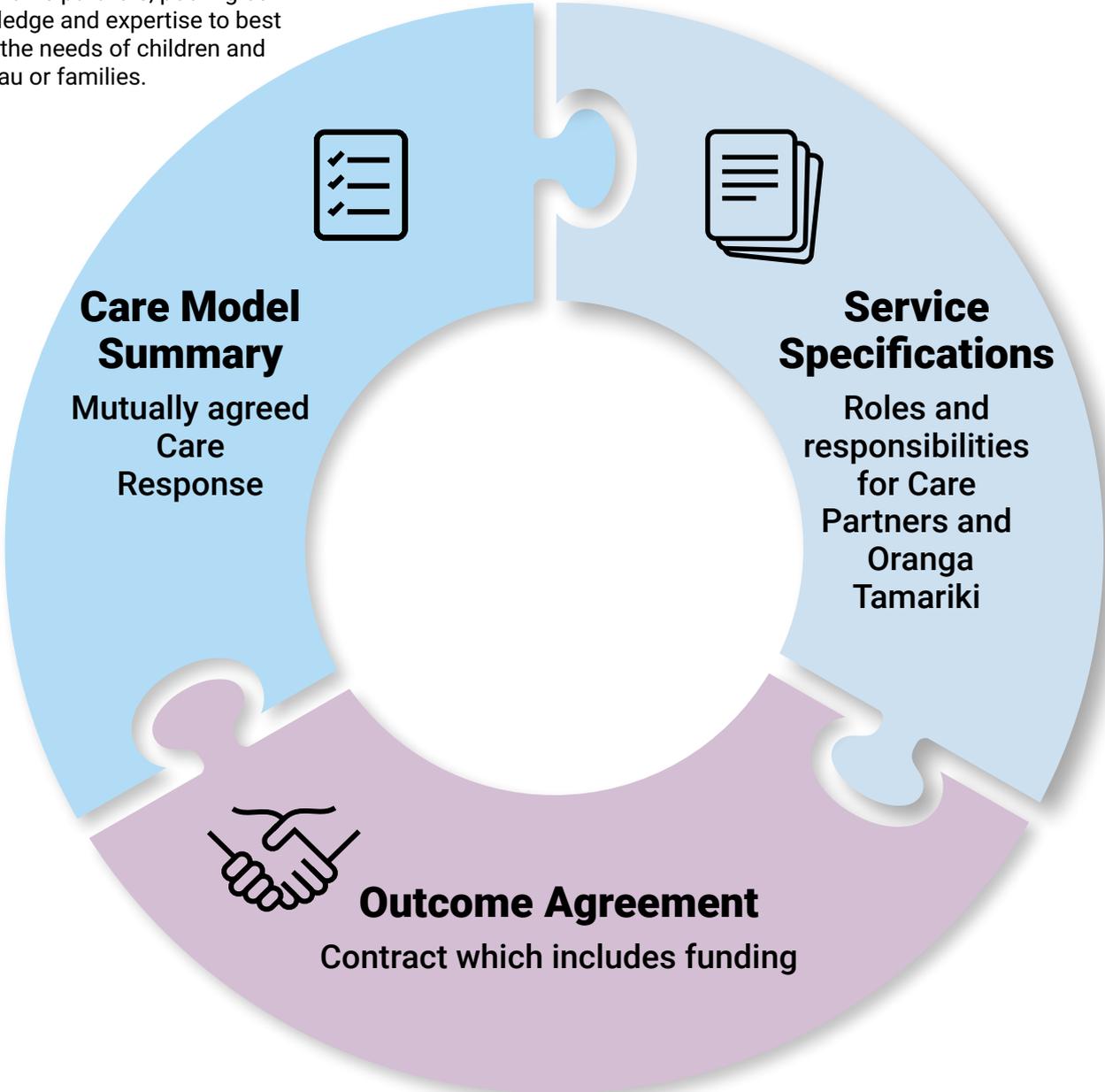
Our ways of working together with Care Partners focus on improved practice, partnerships, and outcomes.

The Service Specifications and Care Model Summary documents are aligned to this vision and directly acknowledge the importance of Care Partners and Oranga Tamariki working together as genuine partners, pooling our knowledge and expertise to best meet the needs of children and whānau or families.

### Purpose of the documents

We want to enable flexibility for Care Partners and Oranga Tamariki to focus on responding to the child or young person’s needs, strengths and aspirations - so the **Service Specifications** will outline what our roles, responsibilities and requirements are, but will not specify exactly how these are to be carried out.

The **Care Model Summary** template confirms details about the care response partners are providing. It is individual to each organisation and forms part of the Outcome Agreement (along with the service specifications).





# Partnered Care

## Funding

There are three funding models for partnered care: Fixed, Individualised, and a flexible Dynamic model aligned to tamariki and caregiver support needs.

All three models provide 'all-in' funding, meaning the rates should cover the majority of costs for supporting tamariki needs. The 'all-in' funding approach for partnered care is designed to reduce administrative burden, and provide flexibility and autonomy for partners to meet the specific needs of the children in their care.

As part of the funding approach for partnered care, Oranga Tamariki is committed to ensuring:

- Care funding rates cover the cost of high-quality care and support
- We have the right care options available for tamariki and rangatahi
- Care partners are not compromised financially as a result of decisions or actions taken by Oranga Tamariki
- We meet our accountabilities as a Crown Agency.

### Funding Policy and Guidance for Partnered Care:

- overview of three funding models
- additional funding processes (ad-hoc requests and negotiating an additional support rate)
- reconciliation and escalation processes
- property-related cost guidance.



### Dynamic Model

The **Dynamic Funding Model** is well suited to caregiver-based care options, where costs to the partner largely depend on the support needs of the child and caregiver. Typically, this model is used to support tamariki with 'general' or 'additional' support needs. This model sets a 'general support rate' for each child per 24-hour period, which has been designed to account for the costs required to support most children, most of the time. This model allows for flexible use of funding across a number of children in the care of the care partners.



### Fixed Model

The **Fixed Funding Model** best suits care options with significant fixed or pre-configured costs to the partner, and is typically used for multiple tamariki with 'greater' or 'high' support needs. The model may be well-suited to accommodation-based care options, with significant fixed accommodation costs or staff working on a roster.



### Individualised Model

The **Individualised Funding Model** enables partners and Oranga Tamariki to agree a separate funding rate for an individual young person. This should only be used if the child or young person needs significant support to stay safe and well which cannot be provided through other care options. These tamariki will be assessed as requiring a very 'high' level of support, and usually require specialist input and advice from High Needs Services.



For more info,  
scan here:



# Partnered Care

## Quality Assurance

The Quality Assurance function within Partnering for Outcomes will support practice quality and learning across partnered care. The Quality Assurance approach is relational. We will focus on building partnerships and understanding the experiences of the children, young people, carers, and whānau or family involved in care.

The function was designed with a collaborative approach between Care Partners and Oranga Tamariki. It will continue to develop, evolve and be further refined over time as we learn together as a sector.

Continuous improvement and collaboration are some of the foundational principles that have been agreed between Care Partners and Oranga Tamariki – these principles have shaped the development of the Quality Assurance function and continue to be the focus guiding our mahi.

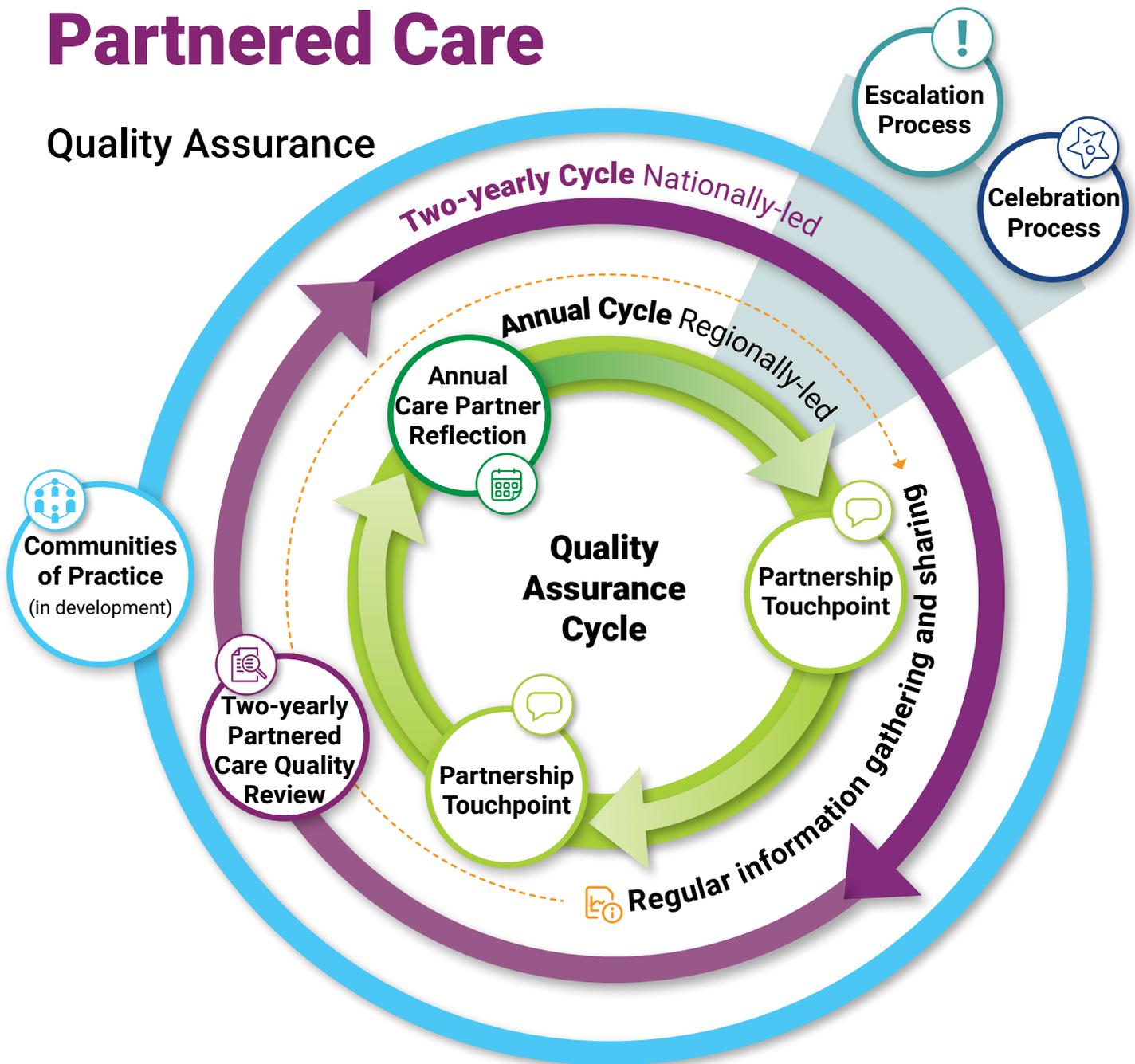
### **Together, we committed to upholding these guiding principles to ensure the Quality Assurance function for partnered care:**

- focuses on the primacy of outcomes for tamariki
- facilitates continuous improvement that shares and builds on strengths
- promotes openness and transparent practice, informed by feedback loops
- embeds mana tamaiti, whakapapa, and whanaungatanga principles
- enables a collaborative approach between partners and Oranga Tamariki
- provides independent practice judgment on quality
- minimises duplication of effort for all parties
- shares mutually beneficial information, valued and used by both parties
- provides timely, robust advice to inform decision-making
- clarifies lines of accountability for all parties
- ensures a consistent approach to Quality Assurance and provides an integrated view of care.



# Partnered Care

## Quality Assurance



**Annual Care Partners Reflections** are intended to create space once a year for care partners and Oranga Tamariki to celebrate positive outcomes, discuss the quality of practice, successes, pockets of excellence, and areas for continuous improvement.



**Partnership Touchpoints** occur throughout the year and are intended to create regular space for Care Partners and Oranga Tamariki to reflect on how the partnership is working, discuss practice related to the Quality Assurance framework, share successes, and address any concerns as early as possible.



**Regular information gathering and sharing** will occur throughout the Quality Assurance cycle. The Quality Assurance function will rely on a combination of quantitative and qualitative information that may be gathered through conversations and directly from the systems of Oranga Tamariki and care partners.



**The Partnered Care Quality Review** will involve a holistic assessment on the quality of practice and the system across partnered care on a two-yearly basis. This will inform the Care Partner confirmation process.



**Communities of Practice** are regular learning forums to share insights, learnings, challenges and work towards a joint approach to quality in partnered care.



**The Escalation Process** was developed to ensure all individuals and organisations involved in partnered care have an avenue to express, raise and escalate concerns to resolve issues as early as possible. This process can be triggered at any point throughout the Quality cycle.



**The Celebration Process** is an opportunity to share successes and highlight positive experiences and quality practice.