

SERVICE GUIDELINES

Early Years Service Hub



**ORANGA
TAMARIKI**
Ministry for Children

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1. ABOUT THE GUIDELINES

Introduction

These Service Guidelines are for the Provider that Oranga Tamariki—Ministry for Children (Purchasing Agency) contracts with to provide these services. The guidelines form part of the Outcome Agreement.

Outcome Agreements with Providers for these services require that they are delivered in accordance with the guidelines. The guidelines are a living document and may be varied at the discretion of the Purchasing Agency. The Purchasing Agency will inform the Provider of any variation to be made to the guidelines.

Purpose of the guidelines

The guidelines have been developed to assist Early Years Service Hubs stakeholders by providing:

- detailed information about service delivery and practice in a more easy-to-read format than is possible to include in a Outcome Agreement
- a resource tool to help Providers deliver services consistently and in line with the national goals
- a way for the Purchasing Agency to improve its responsiveness to feedback regarding changes to the service delivery component of the Outcome Agreement.

Using the guidelines

The guidelines should be seen as setting the minimum standard from which the Provider can develop a service that reflects their organisation's philosophical base, incorporating local need and the culture within which the Provider works. The Provider should use the guidelines to assist them to competently deliver the service.

Guideline reviews

The guidelines are reviewed on a regular basis. The review process ensures that the:

- guidelines reflect the most current decisions of the Government that affect the service and the activities being funded

- reporting measures are up-to-date, relevant and collecting the most useful information on service delivery and effectiveness.

The Provider is invited to participate in the review of the guidelines. Feedback on these can be sent at any time using the feedback form in Appendix 2. In addition, Providers will be contacted prior to the review and invited to engage on the reporting measures and usability of the document.

2. WORKING TOGETHER

Relationship principles

Both parties shall collaborate to ensure the services are effective and accessible. In so doing they recognise that the service is a joint endeavour, in which both parties have a shared goal to achieve positive benefits for the target group.

The following principles guide all our dealings under the Outcome Agreement. Both parties agree to:

- act honestly and in good faith
- communicate openly and in a timely manner
- work in a collaborative and constructive manner
- recognise each other's responsibilities
- encourage quality and innovation to achieve positive outcomes.

Both parties shall appoint Contract Managers who will be responsible for effectively managing the contract relationship between us, by providing assistance and support as required. Details of the Contract Managers nominated by both parties are set out in the Outcome Agreement.

Cultural responsiveness

Both parties recognise the needs of all people, including Māori, Pacific, ethnic communities and all other communities, to have services provided in a way that is consistent with their social, economic, political, cultural and spiritual values.

Good practice approach

Both parties support the development of good practice in the delivery of the service.

This includes:

- basing the service on current good practice approaches, taking into account the local context and community and the knowledge and skills relevant to the purpose and focus of this service
- being client focused – including:

- involving clients appropriately in decisions about the delivery of the support they receive
 - recognising the importance of cultural responsiveness in service delivery
 - designing services and physical facilities in a way that supports accessibility to services for clients.
- using a collaborative approach across services and agencies where possible
 - undertaking regular review, reflection and monitoring of the effectiveness of the service, including client, staff and external feedback, and changing and modifying practice in response
 - ensuring that formal feedback processes are used for reporting purposes and that clients participating in them are aware of how the information they provide will be used
 - undertaking relevant professional development and (where appropriate) supervision
 - engaging with a 'community of practice' to share ideas, information and build professional practice knowledge.

Results-based accountability (RBA)

The Purchasing Agency has adopted a Results-Based Accountability approach to contract reporting and monitoring. This approach uses a simple framework to help the Purchasing Agency and Providers focus on achieving positive outcomes / results. This approach means the Purchasing Agency can work better with the Provider to ensure that programmes are effective and achieving the right outcomes for individuals, families and communities.

RBA identifies two types of accountability that are interconnected:

- **population accountability:** which is focused on high-level outcomes for a particular population (e.g. a specific demographic or geographic community)
- **performance accountability:** which is focused at the service delivery and client outcome level which contributes to population outcomes. Performance accountability has a dual emphasis on ensuring that agencies deliver the type and volume of services they are contracted to deliver and that these services are achieving the expected results.

The Purchasing Agency's Outcome Agreements mainly require reporting information on performance accountability, and will ask the Provider to report on three types of measures:

- **accountability measures:** how much did we do? How well did we do it?
- **outcome / result measures** – Was anyone better off?
- **audience measures:** measures that we are required to report on for a specific reason (e.g. it is a government requirement, or the information is being collected for a specific purpose).

The first two types of measures are developed through the RBA process, while audience measures are reporting requirements the Purchasing Agency has as a government agency with responsibility for public funds.

The data is backed up by a narrative report which forms part of the Outcome Agreement. A guide to writing the narrative report is found in the list of reporting measures contained in these guidelines as well as in the Outcome Agreement.

More information on RBA can be found at:

- <http://www.business.govt.nz/procurement/for-agencies/buying-social-services/results-based-accountabilitytm-rba/>
- <http://www.msd.govt.nz/what-we-can-do/providers/results-based-accountability/index.html>

Your Purchasing Agency's Contract Manager, as identified in your Outcome Agreement, will also be able to assist and provide further information on RBA.

3. SERVICE OVERVIEW

Service summary

Target group definition

- Vulnerable families with high needs children aged from pre-birth to six years.

Outcomes / results we expect to achieve

- Improve social, health and educational outcomes for children pre-birth to six years through developing a network of quality early years services.

Services

- Develop a high quality network of early years services
- Implement activities to improve access to services for vulnerable families with children pre-birth to six years of age.

Social Sector Accreditation Standards

Providers delivering the Early Years Service are required to meet Level Four, Ministry of Social Development (MSD) specific accreditation standards. Providers are required to maintain their Accreditation Level according to MSD's relevant Social Sector Accreditation Standards.

Background

The Early Years Service Hub initiative was established in 2006 as part of a suite of early years services to assist children to have the best start in life, flourish in early childhood and be supported to reach their potential.

International evidence demonstrates that early intervention can improve children's lives¹. While the core infrastructure of universal Early Years Services is already in place in New Zealand, Early Years Services and support provided in isolation often fail to address the complex and inter-related needs of vulnerable children.

¹ Karoly, L.A., Kilburn M.R. & Cannon J.S., 2005, early childhood interventions: Proven results, future promise. California

Service integration, through Hubs, will improve outcomes for families, especially vulnerable families with high needs children, aged pre-birth to six years, through improving access to services and improving service co-ordination.

Early Years Service Hubs integrate seven core services on-site or close by:

- ante-natal
- WellChild – Tamariki Ora
- early childhood education
- parenting information
- education and support
- home visiting
- supported referrals to off-site services
- outreach to engage with and retain the target group.

The aims of the Early Years Service Hub initiative are to:

- develop a high quality network of early years services through collaborative cross-service working practices
- improve the conditions of services to assist families with high needs who have children pre-birth to six years
- enhance access to seven core early years services within communities so that families with young children have the support they need
- ensure families with high needs can access and be referred appropriately to the services best able to meet their needs
- assist families with high needs to: understand the roles and responsibilities of relevant agencies; know which services they can contact for help; and be referred to the most appropriate agency.

Purpose of Early Years Service Hub

The Early Years Service Hub initiative aims to improve outcomes for families, especially vulnerable families with high needs children aged from pre-birth to six years, through improving access to services and improving service co-ordination.

Outcomes / results

The expected outcomes / results for the Early Years Service Hub initiative are:

- the co-ordination of services to families with high needs children from pre-birth to six years is improved
- agencies that provide core early years services, community groups and other relevant stakeholders are supported to effectively identify, refer, assess and deliver services to children with additional needs through collaborative working practices
- children and their families can access the support they need through improved co-ordination of services
- parents/guardians and/or caregivers of children will be able to identify the services available for their support, and access responsive and integrated early years services.

Reporting measures

The reporting measures for this service are listed below. Provider Return Report templates are contained in the Outcome Agreement.

Type of measure		Measures
Output Measure	Quantity How much?	Number of new clients accessing the service Number of children aged 0-6 who received the service Number of agencies worked with
	Quality How well?	Number of clients who provided feedback Number of agencies who provided feedback
Outcome / Result Measure	Effectiveness Is anyone better off?	Percentage of clients who reported that the service helped them access / connect to other services and the support they needed Percentage of agencies who reported that the Hub has helped reduce access barriers for clients Percentage of agencies who reported that the Hub has improved collaboration, including co-ordination between early years agencies Percentage of agencies who reported that the Hub has improved referral pathways between early years agencies

Provider narrative report – to support the data

1. What is the “story behind the data”? (e.g. environmental factors impacting on client results including issues, gaps, overlaps and trends).
2. What are your areas for improvement towards achieving better results for clients (continuous improvement)?
3. Who are your partners that help you achieve results, and what joint activities have you participated in?
4. What combination of services do you think is most effective for your clients?
5. Provide examples of strategies or practices used to encourage ‘hard to reach’ clients to engage.
6. Provide an explanation of the variances (if any) between the volumes contracted and volumes delivered.

Units of measures

The contracted volume of measure for Early Years Service Hubs is 'clients'.

A client is defined as a family/whānau unit, including children aged pre-birth to six years, presenting to the Early Years Service Hub for support.

Agencies are defined as local and central government agencies, voluntary and community based groups and service Providers who work with children and their families.

Service is defined as co-ordination.

Providing reports

Reports are necessary to ensure accountability to Government for the funding provided in the terms of the Outcome Agreement.

The Purchasing Agency has agreed on the quantity and nature of the services that government funding supports and we are required to report to Government that this has been achieved.

You will need to send the following reports about the provision of the services to the Contract Manager on the due dates set out in the Outcome Agreement:

- Provider Return Report including Statistical and Narrative Report (refer to the Outcome Agreement for reporting frequency)
- annual independently audited financial accounts.

Reports may be made available electronically where we have established such reporting facilities. Alternatively, reports may be provided in the format specified in the Outcome Agreement.

Through the term of the Outcome Agreement with the Purchasing Agency, Providers must ensure that their organisation is listed on the Family Services Directory (<https://www.familyservices.govt.nz/directory/>), and that necessary information is updated when required.

4. SERVICE DELIVERY

Focus of service activities

Early Years Service Hubs are expected to take a leadership role in the voluntary and community sector and consult with agencies in order to identify the range of priority early years services that will be co-ordinated at the Hub.

It will be necessary for the Hub to co-ordinate the provision of and access to priority early years services within the community, such as:

- ante-natal services such as preventative care, counselling, psychosocial support, screening for risks to maternal and foetal health, advice on nutrition, specialist referrals and preparation for birth
- WellChild – Tamariki Ora programme
- Early Childhood Education programme (ECE)
- parenting information, education and support, including access for parents to programmes such as SKIP, early childhood education-based Parent Support and Development, HIPPIY, Parents as First Teachers, and Toddlers Without Tears
- home visiting, including access to programmes where appropriate, such as Family Start, Barnardos and WellChild – Tamariki Ora
- supported referrals to off-site services such as general practitioners, WellChild – Tamariki Ora and Family Start
- outreach to engage with and retain the target group, including particular support for families who experience barriers to accessing early years services.

We expect the Hub will have suitable opening hours so that families can access its services as required and without the need to make an appointment. This may involve providing access to the Hub and/or the core services associated with the Hub outside normal working hours.

Employing and supporting a service co-ordinator

In order to meet the programme aims it will be necessary for you to employ a suitable service co-ordinator.

It is important that the service co-ordinator possesses the necessary skills and experience for the position, such as:

- holding a professional qualification, eg social work, teaching, health, early childhood education or similar at level 6 through the New Zealand Qualifications Framework
- experience in a professional leadership capacity and demonstrated skills in co-ordination and facilitating inter-agency collaboration
- being willing to access professional supervision
- knowledge of early childhood education and development, and early childhood health and social services provided by Government and non-government agencies in the local community
- experience working with families; in particular, experience with the target group.

In supporting the service co-ordinator you employ, it is important that you:

- provide day-to-day support, administrative supervision and management
- ensure that the service co-ordinator has access to mentors and on-going professional supervision.

Role of the service co-ordinator

In order to achieve the aims of the programme you will need to make sure that the service co-ordinator co-ordinates a network of early years services.

Early years services provided in isolation often fail to address the complex and inter-related needs of vulnerable children. A key role for the service co-ordinator is to co-ordinate the development of an integrated continuum of local services. This will promote responsive, child-centred service provision and help address gaps in service coverage and quality.

Activities to promote service co-ordination include:

- developing and establishing functional relationships with the agencies to improve the co-ordination of early years services, particularly the seven core services (refer to Focus of Service Activities 1.2 a–g). This may be supported by an interagency protocol that clarifies roles and responsibilities

- developing communication processes and systems to support the Early Years network. This could include newsletters, network meetings or a network website
- developing, implementing, monitoring and documenting an early years referral system to support the early years network to effectively identify, refer and assess children with high needs
- providing a referral point to connect families with the appropriate services working with the community to plan and respond to family needs. This may include gathering, analysing and acting on feedback from children and families; and developing a strategic plan with other agencies to outline how they will work across organisational boundaries and integrate services in ways that improve outcomes for children.

It is important that the service co-ordinator implements activities to improve access to services for vulnerable families with children pre-birth to six years of age. Many of the most vulnerable families who have the most to gain from accessing services do not know that they exist or lack the resources or confidence to access them alone. Barriers to access include transport, service location, language, negative experiences of services and stressful life circumstances that reduce opportunities for future planning and appointment keeping.

Activities to improve access to services include:

- providing supported referrals to off-site services
- outreach strategies (e.g. mail drops, door knocking, promoting early years services at community events and local places such as the shopping centre)
- responding to access barriers (e.g. establishing an antenatal class for migrant mothers with a bilingual tutor).

APPENDIX ONE

High Need Family Identification Criteria

If several of the factors mentioned below are present this may identify the family as high need:

Unsupported parent

Caregiving parent is a sole parent bringing up the child in the absence of a cohabiting partner or other significant parental or whānau support.

No or minimal ante-natal care

No or late ante-natal care, i.e. after six months of pregnancy.

Young parent

Either parent aged less than 18 years.

Mental health needs

Either parent has past or current mental health problems, including:

- post-natal depression
- any other type of depression.

Substance abuse

Caregiver or partner considers either one has a problem with alcohol or illicit drug use.

Relationship problems

Evidence of any significant relationship problems or difficulties with partner, e.g. family violence, conflict or lack of support.

Low income status

Evidence of low income, e.g. receipt of income support or low wage.

Lack of essential resources

One or more of the following applies:

- family housing situation is unstable or unsuitable for their current needs, e.g. serious lack of space, very insecure tenure
- lack of access to a telephone or transport
- lack of basic amenities, e.g. power disconnected.

Frequent change of address

Caregiver's changed address more than twice in the last 12 months.

Low parental educational qualifications

- either parent left school without any formal educational qualifications
- either parent lacks qualifications, e.g. not one School Certificate or National Certificate of Educational Achievement subject gained.

SIDS factors

- mother smoked while she was pregnant
- baby has not been breastfed, or has only been breastfed for a short period
- mother experienced difficulty in establishing successful breastfeeding
- baby was of low birth weight, ie less than 2500 grams
- baby was premature, ie less than 33 weeks gestation.

High number of dependent children aged 0-6 Caregivers parent's responsible for three or more dependent children aged between 0-6.

Caregiving parent's responsible for a child or children who have the following conditions that require additional support:

- learning difficulties, e.g. speech and language, academic skills disorders, dyslexia, dyscalculia², dysgraphia³
- developmental delay, e.g. dyspraxia⁴, motor movement co-ordination
- behaviour problems, e.g. attention deficit disorder (ADD)
- on-going health problems, e.g. asthma, severe allergies, diabetes
- disabilities, e.g. autism, asperger's, cerebral palsy, muscular dystrophy, blindness, hearing impairment

² Dyscalculia is a term referring to a wide range of life-long learning disabilities involving maths. There is no single form of maths disability, and difficulties vary from person to person and affect people differently in school and throughout life.

³ Dysgraphia learning disability that affects written expression and makes the act of writing difficult. Individuals with dysgraphia can have difficulty organizing letters, numbers and words on a line or page.

⁴ The Dyspraxia Foundation of Great Britain describes dyspraxia as an impairment or immaturity in the organisation of movement with associated problems of language, perception and thought'.

APPENDIX TWO

Provider Feedback Form

Provider Feedback Form		
Please email to your Purchasing Agency's Contract Manager		
Name of service		
Summary of, and reasons for, suggested change		
Topic	Reference (section/page)	Suggested change/description
Contact name:	Position:	
Provider name:		
Provider email:		
Provider phone:	Date submitted:	