



**ORANGA  
TAMARIKI**  
Ministry for Children

New Zealand Government

# Towards Wellbeing: Youth Suicide Prevention

Service Specification

## Publication details

### Acknowledgements

We thank the Towards Wellbeing partner for sharing their expertise throughout the creation of this service specification, 2022–2023.

### Publication status

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Service specifications will be updated as required – depending on the nature of the update, it may or may not require a contract variation. While Oranga Tamariki will make best efforts to inform all relevant partners of any updates, it is safest to check back to the list of service specifications published on the website, to ensure you are using the current version. All current specifications are published under [Service providers/Information for providers and partners/Service Specifications/Guidelines](#).



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# 1. About this service specification

## 1.1. Who is this specification for?

This service specification is for partners that Oranga Tamariki—Ministry for Children (“Oranga Tamariki”) contracts with to provide the Towards Wellbeing Youth Suicide Prevention programme (“Towards Wellbeing”, “the programme”).

Partners delivering Towards Wellbeing need to meet and maintain Level Five of the Social Sector Accreditation Standards.

## 1.2. What is the purpose of this specification?

This service specification forms part of the Outcome Agreement with Oranga Tamariki. It sets out the shared responsibilities and minimum requirements for the programme. It also provides mutually agreed practice principles and values to guide the service delivery and desired outcomes.

Partners can develop a service that reflects their organisation’s philosophical base, incorporating local need and the cultures within which they work.



## 2. About Towards Wellbeing

### 2.1. What is Towards Wellbeing?

The Towards Wellbeing: Youth Suicide Prevention programme aims to increase the wellbeing of children and young people who are in contact with Oranga Tamariki and who are identified as having suicide risk factors. It is designed to reduce their current and future suicide risk by providing professional advice and support to the Oranga Tamariki social workers (“social workers”) who are working with them.

The programme uses a screening, monitoring and case review system to help develop, implement and monitor a suicide risk management plan to support the young person’s wellbeing.

Towards Wellbeing was developed at the Wellington School of Medicine, University of Otago in 2000, and originally delivered by clinical advisors. Responsibility for the programme transferred to the Ministry of Social Development in 2005 then to Oranga Tamariki in April 2017.

### 2.2. Who is the client group?

The client group is those young people in contact with Oranga Tamariki who are identified as being at risk of suicide. (Note that this service specification uses the term “young people” to refer to both children and young people, under 18 years of age.)

Towards Wellbeing will always be prioritised to those young people identified as at greatest risk. Accordingly, the partner provides a practice of triage (see Appendix One, Section B) to determine whether the young person should be referred to the programme and the type of service they should receive.

### 2.3. What is Towards Wellbeing seeking to achieve, and how?

The programme supports young people and their families/whānau, through the following vision, objectives, outcomes and principles.

#### 2.3.1. Vision

Towards Wellbeing increases opportunities for young people at risk of suicide to flourish and achieve mauri ora, and reduces the numbers of young people at risk of suicide.

#### 2.3.2. Objectives

Towards Wellbeing:

- maintains a screening, monitoring and case review system based on best practice principles for young people identified to be at risk of suicide
- provides specialist advice, support and monitoring to social workers and their supervisors, to inform and strengthen appropriate service provision
- advises about accessing appropriate mental health services for those young people at suicide risk



- provides Oranga Tamariki with up-to-date information and statistics about young people on the programme, including best practice, trends, developments and any service gaps

### 2.3.3. Outcomes

The desired results are:

- reduction in the risk factors of suicide in young people's lives
- increase in the presence of protective factors in young people's lives
- reduction in the numbers of young people who die by suicide while on the programme
- increased confidence and competence in working with young people at suicide risk reported by social workers receiving Towards Wellbeing services

### 2.3.4. The principles underpinning the approach

These principles underpin Towards Wellbeing's philosophy of treatment and care:

- **A focused approach that fosters access to a secure identity:** establishing the dimensions of identity that contribute in a positive way to the wellbeing of young people and their families/whānau
- **A multi-systems approach:** using a range of service options at all times as appropriate so that nothing occurs in isolation or disrupts the seamlessness of treatment and services within the programme; and to ensure that every intervention contributes to a larger systemic movement towards wellbeing outcomes for each individual young person and their families/whānau
- **Best practice service:** defined as an efficient, effective, ethical, professional and – wherever possible – evidence-based service reflecting both cultural and clinical knowledge on the further prevention of suicide

## 2.4. Cultural responsiveness

Both the partner and Oranga Tamariki recognise the rights of all people to have services provided in a way that supports their identity and cultural needs and values.

Care responses for all young people must be designed to affirm mana tamaiti – that is, the intrinsic value and inherent dignity derived from the whakapapa of the young person and their belonging to a whānau, hapū, iwi or family, in accordance with tikanga Māori or its equivalent in the culture of the young person.

## 2.5. How does Towards Wellbeing work?

This list gives a brief overview of the process. The full process is detailed in Appendix One: Operational responsibilities.

*Screening (Appendix One, Section A)*

1. A social worker is concerned that a young person may be at risk of suicide and makes a referral via Oranga Tamariki processes to the partner – and/or the partner receives



Oranga Tamariki suicide screening reports and reviews to identify any young people at risk of suicide.

*Triage (Appendix One, Section B)*

2. The partner screens the referral to determine if the young person should be accepted into Towards Wellbeing.
3. If the young person does not meet the risk threshold for the programme, the partner confirms this with the social worker and advises regarding any risk indicators, if appropriate.
4. If the young person meets the risk threshold, they are accepted into Towards Wellbeing, and the partner confirms this with the social worker.

*Risk management plan (Appendix One, Section C)*

5. The partner develops a risk management plan in partnership with the social worker and places the young person on a monitoring plan (weekly, fortnightly, monthly or four-monthly), in accordance with their risk assessment. (Note: the monitoring level may be changed in response to assessed risk throughout the time that the young person is on the programme).

*Active case monitoring (Appendix One, Section D)*

6. The social worker implements and monitors the risk management plan with monitoring support and case summaries from the partner, particularly when the young person's vulnerability is high (eg, when moving to a new placement setting).

*Case note monitoring (Appendix One, Section E)*

7. Once the young person is moved off active monitoring, the partner moves to case monitoring. They monitor CYRAS notes weekly for possible increased risk to determine whether the young person needs to return to active monitoring, and send case note summaries to the social worker every four months.

*Discharge/transition (Appendix One, Section F)*

8. Before the young person transitions out of Towards Wellbeing (either because they are no longer at risk, or there is a planned exit from Oranga Tamariki services), the partner develops a discharge plan in partnership with the social worker to ensure appropriate risk management going forward.
9. The young person's case is closed on the programme.

## 3. Working together

### 3.1. Relationship principles

Both the partner and Oranga Tamariki bring valuable expertise to this working relationship. The parties acknowledge the relationship principles included in the Framework Terms and Conditions of the Outcome Agreement<sup>1</sup> and 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

In delivering this service, the partner will work with many Oranga Tamariki staff, including social workers, residential staff, managers, practice leaders, residential case leaders and regional advisors, including disability advisors and learning advisors. The partner will guide and support Oranga Tamariki staff in understanding the programme’s purpose and using it appropriately to enhance their practice when working with young people at risk of suicide.

Both parties will work to develop and maintain positive relationships and discuss service trends, challenges and opportunities arising.

#### 3.1.1. Escalation process

If either the partner or Oranga Tamariki has a question or concern about whether the other party has met a responsibility outlined in this service specification, or whether the actions of the other party are best suited to the wellbeing of the young person, it can apply the relationship principles at 3.1 and ideally handle this matter promptly at local level by discussing directly with the people immediately involved.

If local discussion has not resolved the matter, the partner follows this escalation process:

1. Escalate the issue to the social worker’s supervisor.
2. If there is failure to contact and/or achieve resolution with the supervisor, raise the issue with the Oranga Tamariki practice leader and site manager.
3. Further failure to achieve resolution is referred to the Oranga Tamariki regional manager.
4. Further failure to achieve resolution is escalated to the partner’s contract manager.

When escalation is urgently required, the partner should start the process at the Oranga Tamariki regional manager level.

**See also the Escalation process for communication delays, at the beginning of Appendix One.**

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<sup>1</sup> These Terms and Conditions are set by the Ministry of Business, Innovation and Employment, and can be accessed at [Framework terms and conditions - 3rd Edition \(procurement.govt.nz\)](https://www.procurement.govt.nz/framework-terms-and-conditions-3rd-edition).



# 4. Service delivery

## 4.1. Key roles and responsibilities

Oranga Tamariki and the partner will work together to fulfil their respective responsibilities in delivering this service, as detailed further under Appendix One: Operational responsibilities.

This section gives an overview of the key roles and responsibilities involved for each party.

### 4.1.1. Roles and responsibilities: the partner

The partner will:

- establish, maintain and document a triage process which determines whether a young person is to be placed on Towards Wellbeing
- establish, maintain and document a process that determines the level of monitoring required for each young person accepted. Monitoring levels will change as the risk level decreases (or increases) and will vary in frequency – eg, weekly, fortnightly, monthly or four-monthly case monitoring, dependent on the young person’s risk level and current protective factors and supports in place. Monitoring is done by the partner
- establish, maintain and document a case closure process that determines when a young person’s case should be closed
- establish, implement and document a triage process to manage the screening of young people, especially for when the volume exceeds the daily screening volume capacity
- support social workers (including their supervisors and practice leaders) to enable them to assess the nature and level of suicide risk, with appropriate risk assessment tools
- work with social workers to draft risk management plans
- monitor risk management plans in partnership with the social workers
- advise the young person’s social worker and the social worker’s supervisor/practice leader about the coordination of mental health services required for the young person, to strengthen the social work response
- monitor and facilitate the young person’s timely access to mental health services, as outlined in the risk management plan
- provide a case summary for the social worker that outlines each young person’s key risks for suicide
- advise the social worker when a young person’s placement is about to change, or a significant event is occurring for the young person that may increase their suicide risk
- provide consistent advice for rangatahi Māori to achieve mauri ora in alignment with indigenous suicide prevention practices

- ensure all cultural needs for the young person are highlighted as part of the risk management plan or work done with the young person
- record details of young people on the programme in the case management system set up for this purpose
- report on data maintained on young people on the programme as well as trends, developments, and any service gaps
- advise on relevant ongoing policy developments and training programmes targeting welfare and mental health services to young people at high risk of suicide, within resource restrictions
- participate in any research, reviews or evaluation relating to the programme, within resource restrictions
- escalate issues through agreed processes (see section 3.1.1)
- treat all personal information belonging to the young person in accordance with the Privacy Act 2020 and the Health Information Privacy Code 2020

In terms of its own staff, the partner will provide appropriate induction, ongoing professional development and practice supervision for its clinical advisors, including:

- current trends and research in suicide prevention
- culturally safe practice
- knowledge of suicide prevention practices for tangata whenua
- legal obligations as they relate to the Outcome Agreement, including the use of CYRAS information, Privacy Act 2020, Health Information Privacy Code 2020 and Health and Safety at Work Act 2015

#### **4.1.2. Roles and responsibilities: Oranga Tamariki**

Social workers will:

- operate as the lead case worker for the young people referred to Towards Wellbeing
- identify and refer young people who may be at risk of suicide, via approved processes
- use approved risk assessment tools correctly to assist in identifying young people at risk of suicide
- work with the young person throughout the duration of the programme to support them and determine any changes in their wellbeing
- provide ongoing, detailed information to the partner (including education, health and welfare) to enable the partner to determine the young person’s risk level at any stage
- work with the partner to develop risk management plans, including working with any other agencies identified within the plan
- work equally with the partner to monitor and update both risk and protective factors of the young person, throughout the duration of the programme
- implement and monitor the risk management plan
- study the young person’s case summaries that the partner provides

- enter the young person’s risk management plan and case summaries into CYRAS
- notify the partner of any changing status of the young person (eg, change of placement), in a timely manner wherever possible, so a transition or exit plan can be completed with the partner
- update and escalate issues regarding the young person to their supervisor/case manager
- identify, refer to, and work with other local agencies as needed to support the young person
- respond in a timely manner to queries from the partner about the young person under their case management

Site managers / supervisors / case leaders / team leaders of clinical practice at Oranga Tamariki sites or residences will:

- know whether any young people they are responsible for are on Towards Wellbeing
- ensure that young people on the programme are allocated to a key social worker
- monitor the progress of the referrals
- respond in a timely manner to partner queries
- understand and promote the use of Towards Wellbeing to social workers

## 4.2. Referral to other agencies

Referrals to local Child and Adolescent Mental Health Services (CAMHS) or other mental health services are the responsibility of the social worker, in consultation with the partner, as part of the development and ongoing monitoring of each young person’s risk management plan.

When a young person on Towards Wellbeing is transferred to a local mental health service, the partner will revise the level of monitoring support and determine the level of input needed. The partner will also advise how the young person’s case is to be managed between the social worker, local mental health service, and the partner.

### 4.2.1. Resolution of clinical advice between the partner and other mental health services

If a local mental health service becomes the lead case manager for a young person at risk of suicide at any stage, and that young person has also been referred to the partner, the social worker will co-ordinate information between the mental health service and the partner.

If the lead case manager and the partner provide different advice, they must discuss this. If they can’t agree, the lead case manager’s plan will be implemented. The partner’s views must be recorded and given to the social worker to enter into CYRAS.

# 5. Measuring and reporting

## 5.1. How do we know if Towards Wellbeing is working?

Oranga Tamariki needs to demonstrate whether service outcomes are being achieved. It does this through various reporting requirements, which are based on a Results Based Accountability (RBA) framework.<sup>2</sup>

To this effect, the partner needs to collect data that will demonstrate:

- how much they did
- how well they did it
- if anyone was better off

The data is backed up by a narrative report.

As per the Outcome Agreement, the partner fills out and sends quarterly information reports to the relationship manager (see Appendix Two: Report template).

Additional opportunities for evaluation and review can be identified by the partner and Oranga Tamariki as needed, to ensure that Towards Wellbeing continues to provide evidence-based effective service for young people and their families/whānau.

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<sup>2</sup> [Results Based Accountability - Ministry of Social Development \(msd.govt.nz\)](https://www.msd.govt.nz)

# Appendix One: Operational responsibilities

Oranga Tamariki and the partner will work together to fulfil their responsibilities in delivering this service, as outlined in the sections of this Appendix:

- A: Screening
- B: Triage process
- C: Developing the risk management plan
- D: Active case monitoring
- E: Case note monitoring
- F: Discharge/transition
- G: Management and reporting processes
- H: Management of suicide
- I: Training Oranga Tamariki staff

In all these contexts, the following communication expectations apply.

## Escalation process for communication delays

To ensure that work in relation to young people at risk of suicide is quick and efficient, whenever the partner communicates with a social worker and a timely response is required, the partner will specify the timeframe for response.

Oranga Tamariki expects its staff to respond within specified timeframes when possible.

If the social worker has not responded within the specified timeframe:

1. The partner re-contacts the social worker asking them to respond and gives a second response timeframe.
2. If the second timeframe is not met, the partner emails the social worker and their supervisor (if not known, the practice leader and/or site manager), outlining the issue and including a third response timeframe.
3. If the third timeframe is not met, the partner contacts the practice leader and/or site manager outlining the issue and including a fourth response timeframe.
4. If the fourth timeframe is not met, the partner contacts the regional manager outlining the issue and including a fifth response timeframe.

The partner will report any ongoing communication issues that have the potential to put the effective implementation of a young people's risk management plans at risk, at the regular meetings with Oranga Tamariki.

## Section A: Screening

### The partner – responsibilities

#### Screening

- Triage all direct (phone calls, emails) and indirect referrals (via Kessler and Suicide (SKS) assessment, Suicide Risk Assessment, a Suicide Person Characteristic raised in CYRAS and data mining of CYRAS records) by Oranga Tamariki to identify young people who may need to be referred to the programme
- Provide phone and email support and consultation within working hours via the Towards Wellbeing helpdesk, responding within two hours. On the first day of a young person's entry to a residence, when the social workers contact the partner, the partner confirms whether a young person is or has been under the programme and, if so, the partner provides a case summary
- Educate Oranga Tamariki staff about referral processes, including appropriate use of the programme's screening tools and assessment for suicide risk, through 1:1 phone and email contact with social workers and handouts/information packages for social workers and supervisors
- Educate Oranga Tamariki staff about groups at high risk for suicide and the need for screening, assessment of risk and where necessary referral to Towards Wellbeing
- Monitor and report on the Oranga Tamariki referral processes including tool use and referral rates by sites

The partner implements a different triage screening process when screenings go over the allotted daily volume. Highest risk young people are dealt with first with high-risk scores and direct phone referrals – any remaining referrals are transferred to the next working day.

#### Oranga Tamariki – responsibilities

##### ***Social workers (Care and Protection and Youth Justice)***

- Identify young people from their caseload who may be at risk of suicide
- Refer them to the partner either directly (phone/email) or indirectly (by completing a Kessler and Suicide (SKS) assessment, Suicide Risk Assessment or by raising a Suicide Person Characteristic in CYRAS)
- Bring knowledge of the young person, their whānau/family, community, education, welfare, health, resources and supports to the referral
- Notify their supervisor of the status of the young person
- Respond to email/phone queries within the timeframe specified by the partner

##### ***Residential case leaders (Care and Protection and Youth Justice)***

- Email the partner to confirm the young person's status with Towards Wellbeing on arrival to residence, or contact the partner if the young person has a high risk presentation when they are admitted to residence
- Where possible, bring knowledge of the young person, whānau/family, community,

education, welfare, health, resources and supports to the referral

- Do a SKS assessment within 24 hours of the young person coming into residence
- Notify the referring site manager of the young person's status
- Respond to queries within the timeframe specified by the partner

***Supervisors/Case leaders/Team leaders***

- Monitor the status of cases referred to Towards Wellbeing
- Respond to email/phone queries within the timeframe specified by the partner

***National office***

- Maintain the Practice Centre website, which supports staff to understand how to complete the screening tools correctly, and about the supports available to them through Towards Wellbeing
- Ensure that staff are notified of any changes to the practice or processes
- Attend regular meetings with the partner to identify and respond to any issues raised by either party, and to review any specifications, protocols and guidelines as required

## Section B: Triage process

### The partner – responsibilities

#### **Triage process**

Screen all direct and indirect referrals to determine if the young person:

- meets Towards Wellbeing entry criteria
- requires further investigation
- requires immediate referral onto the programme

As soon as the young person's referral status is determined – that is, accepted or not accepted into Towards Wellbeing – let the social worker or residential worker know.

If the young person has some indicators of suicide but does not meet the Towards Wellbeing threshold, the partner will, where appropriate, let the social worker know by email or consultative phone call:

- what the risks are (from the information they have available)
- how to manage and monitor the risks
- how to refer back if the risks escalate or there are further concerns

### Oranga Tamariki – responsibilities

#### ***Social workers and residential case leaders (Care and Protection and Youth Justice)***

- Provide any information the partner requests about the young person they have referred
- Respond to queries within the timeframe specified by the partner

#### ***Supervisors/Case leaders/Team leaders***

- Monitor the status of the cases their staff have referred
- Respond to queries within the timeframe specified by the partner

#### ***National office***

- Maintain the Practice Centre website, to support Oranga Tamariki staff on how to refer and the acceptance process
- Work with the partner to resolve any communication issues that may occur



## Section C: Developing the risk management plan

### The partner – responsibilities

#### *Risk management plan*

- Lead the development of young people’s risk management plans, in partnership with the social worker, via phone and email. Focus on increasing current safety as well as reducing longer term risks and developing protective factors
- Mutually decide the level of the partner’s ongoing input, which will vary according to the determined level of risk, eg, weekly, fortnightly, monthly, case note monitoring – four monthly
- Provide phone and email support and consultation within working hours via the Towards Wellbeing helpdesk, responding within two hours

### Oranga Tamariki – responsibilities

#### *Social workers and Residential case leaders (Care and Protection and Youth Justice)*

- Work with the partner to help develop risk management plans, including by providing welfare and education information and identifying appropriate local agencies to refer the young person to
- Work with the young person throughout the duration of Towards Wellbeing to support the plan’s implementation for the young person and their family/whānau, and determine any changes in the young person’s wellbeing status
- Respond to queries within the timeframe specified by the partner
- File risk management plans, case summaries and all other information provided by the partner in CYRAS
- Record ‘Towards Wellbeing person Characteristic’ on CYRAS to alert those working with the young person now or in the future of potential suicide risk

#### *Supervisors/Case leaders/Team leaders*

- Support social workers to understand the local agencies and supports they can access when developing the risk management plans
- Review the completed plans and frequency of monitoring (weekly, fortnightly, monthly or case note monitoring – four monthly)
- Respond to queries within the timeframe specified by the partner

#### *National office*

- Maintain the Practice Centre website, to support staff about practice and processes regarding risk management plans
- Work with the site manager to discuss and resolve any process issues
- Work with the partner to resolve any communication issues that may occur

## Section D: Active case monitoring

### The partner – responsibilities

#### **Active case monitoring**

- Record details of the Towards Wellbeing levels of response on the partner's database
- Record information about the young people on the database, including demographic details, case summaries, risk analyses, risk management plans and case notes
- Provide resources/handouts to assist social workers in appropriate planning for young people at risk
- Provide case summaries to Oranga Tamariki staff when the young person's placement is about to change, there is a significant event that could increase their risk, or their case is closed
- Provide advice and support regarding access to and coordination with mental health services as required by the young person, to strengthen the Oranga Tamariki response. When necessary, help liaise with and facilitate access to the services
- Give support and monitoring via email and phone to social workers and their supervisors within working hours, through the partner's clinical advisors allocated to sites and the Towards Wellbeing helpdesk
- Check CYRAS notes to help monitor the level of management of the young person and encourage early recognition of possible increased risk against the agreed monitoring rate (that is, weekly, fortnightly, monthly, and case note monitoring – four monthly)
- Provide resources/handouts to increase social worker confidence and competence in identifying and working with young people at risk of suicide
- Develop and maintain an internal database of mental health services available in each region, to be able to provide this information to Oranga Tamariki staff
- Email practice leaders and site managers monthly, listing young people from their site on the programme, and the levels of monitoring

#### **Levels of monitoring**

- Take the lead in contacting the social worker at the agreed level of monitoring (that is, weekly, fortnightly, monthly, or case note monitoring – four monthly).
- Once the young person is moved off weekly monitoring, the partner moves to monthly monitoring, even if the young person is on fortnightly monitoring levels by the Oranga Tamariki residence. However, the partner will still support the residential social worker if they request additional information/support at other times outside the monthly reporting.

### **Oranga Tamariki – responsibilities**

#### ***Social workers and Residential case leaders (Care and Protection and Youth Justice)***



- Do the tasks specified in young people’s risk management plans
- Communicate with the partner at the specified intervals about the young person’s current situation and progress of tasks from the risk management plan
- Tell the partner if any event occurs that may increase a young person’s risk, including transitions, relationship or placement breakdowns and discharge from Oranga Tamariki
- Bring knowledge of the young person, family/whānau, community, education, health, resources and supports to the management of risk
- File the risk management plan and any case summaries in CYRAS

***Supervisors/Case leaders/Team leaders***

- Review risk management plan tasks and the monitoring frequency (weekly, fortnightly, monthly, or case note monitoring – four monthly) required for each young person

## Section E: Case note monitoring

### The partner – responsibilities

#### **Case note monitoring**

- Review the young person’s CYRAS notes weekly and email or phone the social worker if there are concerns about possible increased risk or possible triggers (individual or evidence based)
- If an ongoing concern is identified, consult with the social worker about managing this risk, including whether the young person needs to return to Towards Wellbeing active monitoring for a time
- Email the social worker every four months, noting that the young person remains on Towards Wellbeing case note monitoring, providing the last case summary, and indicating that the social worker can contact the partner if there are any concerns or when closing the case
- Give support and monitoring via email and phone to social workers and their supervisors within working hours, through the partner’s clinical advisors allocated to sites and the Towards Wellbeing helpdesk

### Oranga Tamariki – responsibilities

#### **Social workers and Residential case leaders (Care and Protection and Youth Justice)**

- Update the plan and case notes, and put their and the partner’s notes into CYRAS
- Tell the partner if any event occurs that indicates increased risk for the young person, such as suicidal ideation or attempts, or if the case is to be closed
- Respond to queries in the timeframe specified by the partner

#### **Supervisors/Case leaders/Team leaders**

- Keep up to date with the number of young people on the national monitoring and case review system and any changes in their wellbeing and monitoring status

## Section F: Discharge/transition

### The partner – responsibilities

#### *Discharge/transition*

- Provide advice and support around planning for periods of transition, including discharge from Oranga Tamariki
- Provide information about a young person's risk and best practice to manage this across transitions within Oranga Tamariki, eg, from site to site, changes in social worker and between sites and residences
- Provide information around discharge planning (both individual and generic) to the social worker before the discharge (where they are informed of this), with a focus on addressing any ongoing risk factors, identifying potential triggers and putting supports in place. Work with the social worker on a discharge plan to reflect this
- Review cases for closure after the young person has been on case note monitoring for 18 months or before the young person turns 18

### Oranga Tamariki – responsibilities

#### ***Social workers and Residential case leaders (Care and Protection and Youth Justice)***

- Wherever possible, confirm the date of change of placement or any other transition
- Update the plan and case notes, and put their and the partner's notes into CYRAS
- Communicate risk history and Towards Wellbeing involvement when there are transitions between sites, to residences or between social workers
- Before discharge, work with the partner to identify agencies to provide ongoing support for the young person and communicate risk history and Towards Wellbeing involvement as appropriate

#### ***Supervisors/Case leaders/Team leaders***

- Keep up to date with the number of young people being discharged from the programme and ensure that the social worker has put a transition plan in place

## Section G: Management and reporting processes

### The partner – responsibilities

#### **Management and reporting**

The partner and Oranga Tamariki will meet regularly (at mutually agreed times), to:

- review the volume of referrals, active cases and discharges to manage the volume of cases in the programme
- review any agreed changes to practice or process to determine impact
- advise about relevant policy developments and training programmes for welfare and mental health services to young people at suicide risk, within resource restrictions
- record and report to national office any concerns about practice, process or communication
- report on data maintained on young people on the programme as well as trends, developments and any practice/policy/process gaps
- report quarterly the number of young people on the programme and their status
- report quarterly any trends, developments and service gaps noted

### Oranga Tamariki – responsibilities

#### **National office**

Discuss any issues about social workers or practice/policy/processes with the site manager.

Give regional staff relevant information from the partner reports to enhance practice.

Meet the partner regularly (at mutually agreed times), to:

- review the volume of referrals, active cases and discharges to manage the volume of cases in Towards Wellbeing
- review any agreed changes to practice or process to determine impact
- bring knowledge of internal projects (national office and site staff)
- relate Towards Wellbeing and services to the expected outcomes in the NZ Suicide Prevention Action Plan (national office)
- reference use of Towards Wellbeing and screening and assessment tools in training packages and appropriate service protocol documents (national office)
- identify internal initiatives/practices that may affect Towards Wellbeing, and help liaise to maximise coordination and minimise cross over or conflict in service provision
- identify internal site issues, good practice or national practice trends
- identify any changes in best practice that should be incorporated into the partners' or Oranga Tamariki processes

## Section H: Management of suicide

The Memorandum of Understanding between the Ministry of Health, Clinical Advisory Services Aotearoa and Oranga Tamariki permits the sharing of information to prevent further suicides.

### The partner – responsibilities

As per this Memorandum, the partner informs national office if a suicide is suspected of a young person who is either currently on the programme or known to Oranga Tamariki but not on the programme.

The purpose of sharing this information is to:

- ensure that Oranga Tamariki has timely and reliable information to minimise the risk of contagion to other young people known to Oranga Tamariki, to prevent further suicide
- support Oranga Tamariki participation in cross-agency collaboration in respect of responding to suicide clusters/contagion involving young people under 25 years of age

### Oranga Tamariki – responsibilities

If the partner notifies the suspected suicide of a young person involved with Oranga Tamariki, Oranga Tamariki identifies and directs the partner to the local point of contact so that the partner can support Oranga Tamariki staff and minimise the risk of contagion to other young people involved with Oranga Tamariki.

## Section I: Training Oranga Tamariki staff

### The partner – responsibilities

Work with Oranga Tamariki to identify whether staff need training to strengthen their usage of Towards Wellbeing and how best to deliver the training within this Outcome Agreement's funding allocation.

### Oranga Tamariki – responsibilities

In consultation with the partner, determine if and how training is delivered to Oranga Tamariki staff to strengthen their usage of Towards Wellbeing, within the funding level provided within the Outcome Agreement.



# Appendix Two: Report Template

This report is for the partner to provide quarterly information demonstrating that they have met the reporting requirements under the Outcome Agreement. Any changes to this report structure would require a variation to the Outcome Agreement.

## Submission details

[Name and role of the submitter + date of submission]

## Executive summary

[Summarise the key points from each section of this report.]

## Recommendations

[Add any recommendations that should be the focus of the next quarter.]

**Table 1: Referrals by each quarter for the period of the Outcome Agreement**

	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June
Number of young people referred								
Number of referrals year to date								
Number of referrals comparative period last year								
Number of young people triaged								
- Automatic email								
- Consulted email (helpdesk sends email after brief review)								
- Consulted (helpdesk or clinical advisor consult with social worker)								
Number of intakes								

- New intake								
- Re-intake								
- Previously triaged – auto email								
- Previously triaged – consulted								
Number of cases closed								

<b>Figure 1: Total number of young people on Towards Wellbeing at quarter-end for the last three years</b>	
	Narrative:

**Figure 2: Graph of the total number of programme referrals per quarter for the last three years**

Narrative:

**Figure 3: Graph of the total number of programme intakes per quarter for the last three years**

Narrative:

**Figure 4: Graph of the number of referrals by ethnic group six monthly for the last five years**

European, Māori, Pasifika, Asian, Other.

Narrative:

**Figure 5: Graph of the number of intake by ethnic group six monthly for the last five years**

European, Māori, Pasifika, Asian, Other.

Narrative:

**Figure 6: Number of young people on Towards Wellbeing, by ethnic group**

European, Māori, Pasifika, Asian, Other.

Narrative:

**Figure 7: Number of Māori and Pākehā young people on Towards Wellbeing, by gender**

Descriptions of gender include:

- Cis female
- Cis male
- Non-binary
- Intersex
- Transgender male to female
- Transgender female to male
- Another gender

Narrative:

## Comment on Towards Wellbeing numbers, referrals and intakes

**Table 2: Risk management plans**

The number and percentage of young people who have been accepted into Towards Wellbeing and have a risk management plan within seven days of acceptance.

	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June
Number of plans developed within seven days of acceptance								
Percentage of plans developed within seven days of acceptance								

**Table 3: Helpdesk response**

Number of responses, and the percentage of these that were within a working hour of initial contact.

	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June
Helpdesk responses to social workers – number and % of responses within an hour								
Helpdesk responses to residences – number and % of responses within an hour								
Helpdesk responses to sites – number and % of responses within an hour								

**Table 4: Suicide and suicide attempts**

The percentages are in relation to the average number of young people on Towards Wellbeing during each quarter.

	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June
Number of suicide attempts by young people on the programme (and %)								
Number of young people on the programme who made a suicide attempt (and %)								
Number of deaths by suspected suicide by young people on the programme (and %)								

**Figure 1: Graph of the number of deaths by suspected suicide of young people on Towards Wellbeing by number per annum since 2005**

	Narrative:
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**Table 5: Additional communications with Oranga Tamariki staff**

Add any numbers or comments in any of these categories as appropriate for that quarter. It's not essential to complete every row in every quarter.

	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June
Site/staff visits								
Practice curriculum training								
Residence training								
Practice clinics								
Caregiving whānau training								
Site engagement and specific training visits								
National level involvement								

**Table 6: Towards Wellbeing contractors**

Add any comments in these categories as appropriate for that quarter.

	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June	Q1 FXX July–Sept	Q2 FXX Oct–Dec	Q3 FXX Jan–Mar	Q4 FXX April–June
Overview of current contractors								
Overview of changes in quarter								
Contractors with Oranga Tamariki laptops and CYRAS access								