Te Mana Whakamaru **Tamariki Motuhake** | Monitor

Independent Children's



Experiences of Care in Aotearoa: Agency Compliance with the National Care Standards and Related Matters Regulations

Reporting period 1 July 2020 - 30 June 2021

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Introduction

Poipoia te kakano kia puāwai Nurture the seed and it will blossom

Welcome to the first full report on all the National Care Standards and Related Matters Regulations.

This report shares how agencies that hold responsibility for caring for tamariki and rangatahi are meeting their obligations. It also speaks to the experiences of those in care, their whānau, their caregivers or foster parents as well as those who are working directly with them to make sure their experience is positive, and they are getting what they need and having the same opportunities as every tamariki in Aotearoa.

It is a privilege in the current context that our kaimahi have been able to travel around Aotearoa hearing stories about how amazing their social worker has been or how well they have been supported by their iwi and how passionate kaimahi are when talking about the success of a whānau. We also heard some not so good stories, and they need sharing as well, to learn and support those delivering services to be the best they can and that the tools and resources they need to do their job are provided.

The intention of this report is to be helpful. It is the first time much of this data has been made publicly available and while some of the results may not be where we all want them to be, there are examples of strong practice as well as hope for the future. As we take a systems view of how services are delivered, we highlight what is supporting strong practice and what barriers may be in the way.

We are at the start of this journey and as we engage more with whānau, tamariki and those supporting them, there will be additional information as to what is creating environments for tamariki and rangatahi to achieve good outcomes. We will also be drawing on additional data sources to expand our understanding of how other services, such as health, housing and education are contributing to good lives.

Following several reports, including the Oranga Tamariki Ministerial Advisory Board's interim report *Kahu Aroha*, Oranga Tamariki has a significant change programme ahead. They will need the support of others across the social sector and beyond to make change happen. As this is the first report on compliance with the NCS Regulations it provides a baseline. We will continue to report on compliance through future annual reports. In this way, we hope to show where progress is being made, provide insight into the reasons why, or the barriers that prevent outcomes from being achieved.

In closing, we would like to thank everyone who gave us time to hear their stories and to be open and honest about what is working well and what needs to change. We would also like to thank the kaimahi at the Monitor who engaged so well in the communities, who delivered great feedback on your korero with them.

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Executive summary

About this report

In Aotearoa New Zealand, protecting and nurturing our tamariki and rangatahi are at the forefront of our social considerations. This report has been completed at a time when Oranga Tamariki is under considerable scrutiny.

The Waitangi Tribunal found a disproportionate number of tamariki Māori (Māori children) are involved with Oranga Tamariki, which breaches the Treaty of Waitangi. The Royal Commission of Inquiry into Abuse in Care is investigating how things have gone wrong in the past, and how to avoid these mistakes in the future. The Oranga Tamariki Ministerial Advisory Board (the board) was also established in 2021 to provide independent advice and assurance to the Minister for Children. In July the Board completed their initial report, Kahu Aroha, which focused on Oranga Tamariki, and changes they see as necessary to improve the response to tamariki and whānau.

In 2020, the Office of the Children's Commissioner, and the Ombudsman, reported on the uplift of Māori pēpi, and the Office of the Children's Commissioner continues to monitor Oranga Tamariki residences, in accordance with the United Nations Optional Protocol to the Convention against Torture and other Cruel, Inhumane or Degrading Treatment or Punishment (OPCAT).

This is the first report that looks at compliance with the Oranga Tamariki (National Care Standards and Related Matters) Regulations 2018 (NCS Regulations) and covers the period between 1 July 2020 and 30 June 2021.

The NCS Regulations set out the standard of care every tamariki and rangatahi needs to do well and be well, and the support that caregivers can expect to receive. They are consistent with good practice and have been informed by what tamariki and rangatahi have told Oranga Tamariki they need, such as supporting them to express their views, keeping them connected to their family and whānau, giving them opportunities to participate in their culture, and ensuring that their health and education needs are met.

In preparing this report we have gathered data and information from the agencies that have custody of tamariki and rangatahi, and we have gathered stories from tamariki and rangatahi in care, alongside their whānau. We have also listened to the voices of professionals and caregivers who work hard to help tamariki and rangatahi keep safe from harm and guide our rangatahi into their futures.

About the Monitor

The Monitor was established on 1 July 2019 to monitor the NCS Regulations. Our purpose is to ensure that agencies promote, and contribute to, positive outcomes for tamariki and rangatahi in their custody. We provide assurance of the quality and standard of care that tamariki and rangatahi are receiving, compared with the NCS Regulations, and an indication of the outcomes being achieved by young New Zealanders in care.¹

One of our objectives is to provide greater transparency about the quality of care, and by doing so, support better decisions making by government, agencies and communities. Our role is not to make recommendations or suggest solutions, it is about making information on what is working and what needs to improve, available.

We need to understand how the agencies work together, and with other government and non-government agencies to meet the health and education needs of tamariki and rangatahi, and to ensure that agency services are equitable and accessible. To do this, we talk to organisations that provide health and education services and NGOs that provide social services. We also listen to tamariki and rangatahi, and their whānau, caregivers and communities, to understand what is working well and what could be done better. We use all these voices of experience to better understand the data we gather from the four agencies we monitor.

We also apply the Monitor's Outcomes Framework (see Appendix 1) to the data we gather, to help us measure outcomes, for tamariki and rangatahi, related to the NCS Regulations. As we listen further to communities, this helps us to understand why care is experienced in the way that it is. Our assessment framework supports us to seek out the root cause of why something is happening in the way that it is. By highlighting this and making it visible the Monitor can support positive change.

All tamariki and rangatahi, regardless of whether they are in care, ought to have good lives, opportunities to influence and shape their own futures, and access to the same positive outcomes. Therefore, we look at multiple aspects of their wellbeing. We will continue to work alongside agencies and aim to contribute to positive outcomes for our future generations.

Work is underway on legislation that will widen our scope to monitor the whole Oranga Tamariki system (refer to our website for more information on the legislation). As the Monitor matures, and when the new legislation is introduced, we intend to use additional data sources to monitor agencies' compliance with the NCS Regulations and provide a better picture of whether outcomes for tamariki and rangatahi are being achieved.

Key findings

This section sets out key findings. A number of these findings are relevant to all monitored agencies with the focus predominantly on Oranga Tamariki who have ninety-nine percent of tamariki and rangatahi in their care and custody.

Gaps in monitored agency data limits our ability to fully understand how they are meeting their obligations under the NCS Regulations

In the Monitor's request for information from the agencies, we advised the information received would support answering our primary question, "To what extent is the Oranga Tamariki system meeting its obligations and supporting positive outcomes for tamariki and their whānau, including tamariki and whānau Māori and disabled tamariki and their whānau?

The agencies individual compliance statements provide an answer to this question, based on what data they could provide from their self-monitoring. However, based on the Monitor's analysis of the data provided combined with what we heard from our community visits, we are unable to definitively say Oranga Tamariki and Open Home are meeting all obligations for tamariki Māori or disabled tamariki, or for all tamariki and rangatahi in care. This is because of gaps in their self-monitoring data.

What we can say is that Open Home Foundation, who could provide data on all tamariki, it is mostly meeting its obligations and supporting positive outcomes against those measures they could provide data for.

Oranga Tamariki is meeting some of the obligations based on the data provided. Barnardos and Dingwall Trust are meeting most, if not all obligations.

Staff and caregivers genuinely care for tamariki in care and want to improve their outcomes

During our community visits we consistently heard about the hope of people working with tamariki and rangatahi to improve outcomes. Health and education staff, Police and NGOs; and caregivers shared examples and stories that reflect their desire to improve the lives of tamariki and rangatahi they work with or care for. Their willingness to speak openly with us and share their views on what works well and what needs to improve, reflects this desire.

Staff of the monitored agencies say their organisations' strength is their genuine care for tamariki. One staff member of Oranga Tamariki said:

Your own presence is important to be the best practitioner we can be. ... If that was your boy or girl, would you treat them any different? By walking in and treating them as if they are our own, it lifts our practice. Some of our young people aren't getting love and if they can get that from us, why not? The more love to share with young people, the better off they will be, in my opinion.

Staff openly acknowledge more work is needed to improve the experience of care and this report supports that view. However, it was also heartening to hear tamariki in care emphasise more positive than negative experiences of aroha. Most tamariki Māori told us they felt genuinely loved and cared for. One said, "I am the happiest I have been in my life [since] I moved in with [caregiver]," and another told us, "I feel loved by my family. The past years have been hard, but they always love me."

Self-monitoring of compliance with NCS Regulations needs to improve, so we can understand the quality of care and how to improve

NCS Regulation 86(1) requires the agencies to monitor their compliance with the NCS Regulations.

As Barnardos and Dingwall Trust have small numbers of rangatahi in their custody, they can monitor their compliance through manual audits and data systems. Barnardos and Dingwall Trust were able to provide a comprehensive picture of the quality of care and compliance with NCS Regulations.

We are concerned that Oranga Tamariki and, to a lesser degree, Open Home Foundation, do not yet have comprehensive systems to self-monitor their compliance with the NCS Regulations.

Open Home Foundation were able to provide a response to 43 percent of the questions in relation to all tamariki and rangatahi in their custody, which, for an NGO is creditable. Appendices 2a and 2b provide a breakdown of which measures Open Home Foundation could and could not report on, and its level of compliance with specific NCS Regulations. Oranga Tamariki was able to answer fifty-seven percent of the questions, however only five percent of the questions could be answered for all children in their care, using its administrative database. Appendices 3a and 3b provide a breakdown of which measures Oranga Tamariki could and could not report on, and its level of compliance with specific NCS Regulations.

The data that agencies gave us clearly shows areas that need improving, although the gaps in available data prevent a comprehensive view of the quality of care. For example, Oranga Tamariki cannot report on tamariki and rangatahi access to health services, and whether they are informed of, and understand their rights; or whether caregivers are given appropriate training and information about the tamariki they care for.

This lack of data means the Monitor cannot provide the required level of assurance across the care system; cannot say whether tamariki and rangatahi in care are getting what they need; and cannot say if they are, therefore, better off because of the NCS Regulations. It also hampers our ability, and that of Oranga Tamariki, to gain insights into what would help improve the quality of care.

As self-monitoring matures, agencies will have more confidence and ability to accurately identify their strengths, areas where they have made sustained improvement over time and areas where they need to do more work. Agencies will be able to identify which practices support positive outcomes for tamariki and rangatahi, and their whānau, and which areas to focus on improving. The Monitor will then be able to confidently report on improved outcomes for tamariki and rangatahi.



Tamariki and rangatahi do not know and understand their rights

Oranga Tamariki data shows that not all tamariki and rangatahi in care know their rights, including their right to be consulted on things that affect them and their right to complain if they are unhappy. This was also consistent with what we heard from tamariki and rangatahi.

Tamariki make very few complaints. The data available does not tell us if this is because they are satisfied or because they do not know about, or are comfortable with, the complaints process. Our conversations with tamariki and rangatahi in care reveal, overall, they feel powerless to change their circumstances. Most we spoke with said they often do not know about changes planned for them, including placement changes, or the reason for these changes.

For tamariki and rangatahi in residences,² Oranga Tamariki acknowledge that it needs to provide an independent grievance process, rather than requiring rangatahi to register complaints with the staff that care for them and make decisions about their time in residence.

Some whānau members said that they are not involved in decision making or are not informed about things that affect their tamariki. This is also reflected in the Oranga Tamariki complaints data. Over three-quarters of complaints were made by whānau members, and 26 percent of issues raised were about communication. Complaints also raise concerns about fair treatment, including worries not being addressed and not enough support being provided.

Connections with whānau and culture are important for tamariki Māori in care

Having connections with whānau is important for all tamariki and rangatahi, and it is particularly important to the wellbeing of tamariki Māori.

For 85 percent of tamariki Māori, Oranga Tamariki had identified, and arranged to make, connections with the important members of their whānau. However, the Oranga Tamariki review of 352 tamariki Māori in care shows that, 38 percent had not had an assessment of their identity, cultural, connection or belonging needs; and 61 percent had not had their wider cultural connections identified (this includes making contact arrangements with important members of their hapū and iwi).

Some tamariki Māori told us they wanted more time with their whānau, while others felt completely disconnected. Staff of service providers say that the system (bureaucracy, policies and processes) disrupts and gets in the way of tamariki Māori connecting with whānau. When communication or contact with whānau gets lost, it prevents tamariki building their cultural identity. One iwi social-services provider said, "Some of them have never seen their moko, and some tamariki have never met their nannies and this can be overwhelming."

In their initial report, *Kahu Aroha*, the Oranga Tamariki Ministerial Advisory Group comment on how relationships with families, whānau, hapū, iwi and Māori can be strengthened. The primary solution they see is to "prevent the need for so many tamariki and whānau to come to state attention, and for those that do, that the time they are engaged with the system is short as possible, and that their whānau are supported to heal so that they can safely take back their tamariki." ³ Although this report on the NCS Regulations is about tamariki in care, our future work (once enabling legislation has been passed) will allow us to look beyond care, and, how whānau are supported to prevent tamariki entering care.

Oranga Tamariki respond well when tamariki enter care; practices weaken during their time in care

Oranga Tamariki self-monitoring data identifies good practice when tamariki and rangatahi come into care, although practices weaken as they progress through their care journey. For tamariki and rangatahi to achieve positive outcomes, it is important to understand, support and meet their needs throughout their time in care, and more effort is required across the duration of care.

Oranga Tamariki initial assessments and plans appear sufficient; for most tamariki plans include identifying safety and general-support needs, and promptly providing financial support to meet those needs. However, in nearly two-thirds of cases, tamariki are not visited as often as outlined in their plan. This means there may not be opportunities to continue assessing their safety, wellbeing, and health and education needs.

Oranga Tamariki and Open Home Foundation need to keep tamariki needs assessments and plans up to date (the NCS Regulations require updates every six months). Tamariki needs can change quickly, and agencies cannot monitor these changes if they don't visit or contact tamariki regularly.

In 40 percent of Oranga Tamariki planned changes in care arrangements, the necessary steps for a positive care transition were not assessed, while 70 percent did not involve developing a care-transition plan or identifying the support tamariki would need. The data also shows that 55 percent of tamariki did not know why their planned care transition was happening and were not encouraged or helped to take part in planning.

We see a similar trend in addressing allegations of abuse and neglect: performance starts strong and then drops off. This reflects findings in our previous reports that, when there are allegations of abuse against tamariki in care, agencies complete initial actions well. Although Oranga Tamariki data shows improvement from the previous year, as they continue to manage those allegations, they share less information and perform fewer actions. For example, in 87 percent of allegations reviewed by Oranga Tamariki, the initial response and safety screening was prompt. However, only 31 percent of subsequent investigations were timely, and 33 percent of tamariki or rangatahi were informed of the outcome where it was appropriate to do so (both requirements of the NCS Regulations).

For tamariki and rangatahi to achieve positive outcomes, it is important to understand, support and meet their needs throughout their time in care, and more effort is required across the duration of care.

Oranga Tamariki social workers told us it is often challenging to focus effort beyond the initial imperative of keeping tamariki safe when they first come to their attention. This can be due to caseload numbers and competing administrative tasks. Balancing the needs of tamariki already in care, with assessing or investigating reports of concern, is a challenge when urgent actions are required.

Caregivers need more support

Agencies' data shows that their processes to screen and approve potential caregivers are strong. They also consider the views of caregivers when they assess, and plan for, the needs of tamariki and rangatahi in care.

Oranga Tamariki does not record the support it provides caregivers (the NCS Regulations require agencies to provide support, including information about tamariki in their care). The data does show that fewer than half of caregivers have a caregiver-support plan or receive support to meet the needs of tamariki in their care. Oranga Tamariki data also shows that in 76 percent of cases social workers did not meet caregivers at the frequency stated in caregiver-support plans.

Caregivers we spoke with often told us that ongoing support from Oranga Tamariki was limited. One caregiver told us: "I had to beg OT [Oranga Tamariki] for money to buy the girls clothes. They came with nothing. They told me I could have a \$200 clothing or food voucher. I felt like I had to choose between the girls being naked or having food."

A whānau caregiver said:

"I feel inadequate because it feels like I am growling them all the time. The girls are constantly screaming, crying and demanding behaviour. One minute they are cranky and next they are all huggies and loving. I've told the social worker I need someone to vent to, because you are telling me to provide a safe haven for them, but what about me? What support do I get?"

Supporting caregivers supports a safe and stable home. When Oranga Tamariki tell us that the biggest barrier to placing tamariki in stable and loving homes is the availability of caregiver and placement options, it underlines the importance of supporting existing caregivers.

Agency support of health needs, especially mental health needs, is variable

Approximately three-quarters of tamariki and rangatahi in Oranga Tamariki custody have their health needs assessed, have a plan that identifies their needs and are promptly given support to meet those needs. Despite this, there are some gaps in support for tamariki health needs.



Oranga Tamariki data shows that 40 percent of tamariki and rangatahi in its care are not currently registered with a general practitioner (GP) or medical practice, although almost all tamariki in custody of the other three agencies are. Oranga Tamariki data does not show if tamariki have annual health and dental checks. Oranga Tamariki data shows that the assessments and plans of 37 percent of tamariki do not include expert opinions.

While 83 percent of tamariki in its care had at least one Gateway assessment, 4 many of those assessments were old — some dated back to 2011 — which means their health and education assessments could be very outdated. Oranga Tamariki screening for substance use, psychological distress and suicide risk is also very low.

Oranga Tamariki staff frequently told us that it can be difficult to get tamariki and rangatahi the support they need. This can be due to poor communication between agencies, resources being unavailable in the areas where rangatahi live, or services being overwhelmed or understaffed. One staff member said, "If it is so hard for us to access these needed supports for our rangatahi, imagine how hard it is for our whānau." Communities also told us that accessing health services, particularly mental health services, is a barrier. This is even more difficult in rural communities.

Some caregivers told us that, while tamariki may have their physical health needs met, they may not have their mental health needs supported or be helped to process and recover from trauma. Caregivers mentioned how difficult it is to get assessments done and how they would benefit from training to deal with rangatahi or tamariki mental health issues. For example, one caregiver said: "I think there is a sense of complacency, even though the kids have suffered and been exposed to trauma. Counselling should be mandatory because caregivers can't do it at home themselves."

Tamariki and rangatahi in care are struggling with trauma as well as their general wellbeing. Most said that, even if they know they need support, they are unsure where or how to find help. For those that do access support like therapy, they can come out of it feeling unheard and misunderstood. For example, one rangatahi told us: "I don't talk to many people about my problems. I have had therapy, I feel alone. Every day I try and be this happy girl but inside I am depressed'. I don't talk to anyone about it." Another said: "We need better people in the system. How to look after a kid, how to understand a kid. What to do when a kid is angry. Try to let them calm down."

Conversely, tamariki and rangatahi say that, when the right supports are in place for their health needs it can help them experience positive outcomes. For example, one rangatahi told us: "[I] had counselling, [it] helped [me] open up, I want to go again."

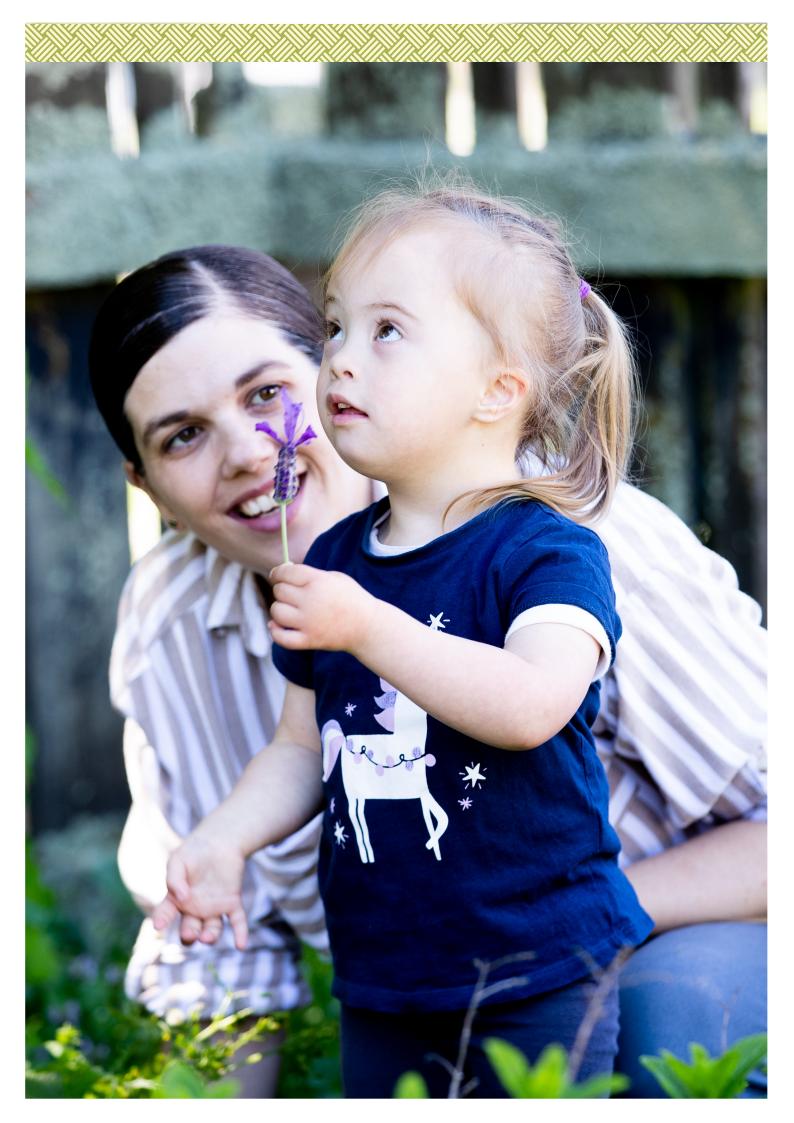
Agencies not communicating and working together effectively is a common barrier to achieving outcomes

People in communities we visited, frequently told us of their desire for tamariki in care to achieve positive outcomes. They said that better outcomes are achieved when the agencies work with iwi, cultural specialists and NGOs. We heard from some that Oranga Tamariki is now more willing to communicate with, and work alongside, NGOs. There are examples of regular communication that has created opportunities for Oranga Tamariki and NGO staff to get to know each other, visit each other's workplaces and understand their systems. This has helped them work better together.

Overall people consistently said that connections between Oranga Tamariki, health and education providers, and NGOs are splintered; communication and partnership are ineffective; and the role and responsibilities for supporting tamariki in care to achieve the best outcomes are unclear. One NGO staff member said: "A lot of work and service providers seem to work in silos — you just do you. This needs to improve; more communication and collaboration would likely help," while another said: "Get rid of the silos and see what magic we can do without the barriers and patch protection." A staff member of Oranga Tamariki told us: "Health, education and Oranga Tamariki do not work well [together]. It feels like once a child comes into Oranga Tamariki, they do hands off and leave it all up to us."

Oranga Tamariki and education staff both say poor communication and collaboration, is a barrier to achieving mātauranga. Without adequate information about tamariki, and access to resources, they are concerned that tamariki and rangatahi can "slip through the cracks." Keeping tamariki, rather than individual organisations' needs, at the centre is critical, but doesn't always happen. One representative of New Zealand Police told us: "We say we put the child in the middle, but then every agency just goes off and does their own thing."

The *Oranga Tamariki Future Direction Action Plan*⁵ acknowledges the need for authentic and genuine partnership and participation. We encourage this while also recognising it is a challenge. This is an area of future focus for the Monitor.



The context for tamariki and rangatahi in care

Approximately 1.1 million New Zealanders are aged 18 years and under, which is equivalent to around one quarter of Aotearoa New Zealand's total population.⁶ According to the 2018 census, 71 percent of young New Zealanders identify as NZ European, 26 percent as Māori, 14 percent as Pacific peoples and 17 percent as other ethnicities.⁷

Rights and expectations

In 2018, OCC and Oranga Tamariki asked over 6000 tamariki and rangatahi what wellbeing means to them, and what a "good life" is.⁸ The most common explanations of a good life relate to having fun and feeling contented, having supportive whānau and friends, and having basic needs met. Other responses relate to being healthy (this includes being mentally healthy), feeling safe, having a good education, and feeling valued and respected.⁹ These factors that contribute to a good life are reflected in the NCS Regulations and the Monitor's Outcomes Framework. You can read more about our Outcomes Framework in 'The Outcomes Framework' section of this report and in Appendix 1, or on our website.

The United Nations Convention on the Rights of the Child explains the rights that Aotearoa's tamariki are entitled to and should expect. These rights include access to the best possible healthcare and high-quality education; clean water to drink; healthy food to eat; and a safe, clean environment to live in.¹⁰ We discuss these rights in the 'Rangatiratanga' section of this report.

Health outcomes

Overall, Aotearoa's tamariki are doing well and achieving positive outcomes. Most live in supportive and loving homes, where they receive the care they need and have access to health, education and social services that support them to thrive. 11 State of Child Health in Aotearoa New Zealand, published in 2020, reports that 70 percent of Aotearoa's tamariki have access to the foundational support they need to thrive, including healthcare to prevent dental disease, respiratory illness and skin conditions. 12 Poverty and deprivation in Aotearoa mean that not all tamariki and rangatahi have the same outcomes for these three preventable health conditions. Our background research indicates that, in Aotearoa, there is limited healthcare data for several groups of tamariki and rangatahi who experience health inequalities, including those who are in care. 13

Education enrolment and achievement

Similarly, most of Aotearoa's tamariki are doing well in school and achieving educational qualifications. Compared with other countries in the OECD,¹⁴ a high proportion of our tamariki take part in early childhood education (ECE). In 2019, 44 percent of tamariki aged under three were enrolled in formal ECE in Aotearoa compared with an average of 26 percent in OECD countries.

These enrolment rates increase to 90 percent of 3-year-old tamariki (compared with an average of 77 percent in OECD countries) and 96 percent of 4-year-old tamariki (compared with an average of 87 percent in OECD countries). ¹⁵

In 2020, 88.4 percent of rangatahi who left school in 2020 achieved NCEA Level 1 or above, which is a 0.1 percent increase on 2019. ¹⁶ Research in 2019, by the Oranga Tamariki Voices of Children and Young People team, finds that fewer rangatahi with experience of care (55 percent) achieve NCEA qualifications than rangatahi with no experience of care (84 percent). They also have a higher rate of disengagement from education (this is due to being stood down, excluded or enrolled in alternative education) and change schools more frequently (25 percent of tamariki with experience of care had at least three school changes, compared with 3 percent of tamariki with no experience of care). The disparities in educational achievement between different ethnic groups are less among tamariki with experience of care than among tamariki with no experience of care.

Although this research was in 2019, it has not led to ongoing reporting of tamariki attendance at school and educational achievement, which is needed to see whether tamariki in care are achieving at the same levels as all children in Aotearoa.

Demographic information

Of the four agencies we monitor, Oranga Tamariki has care and custody of ninety-nine percent of tamariki and rangatahi. Between 1 July 2020 and 30 June 2021, 7153 tamariki and rangatahi were in care: Oranga Tamariki had 7056; Open Home Foundation had 93; Barnardos had three; and Dingwall Trust had one.

The information in this section draws on responses from the four agencies we monitor.



Figure 1 - Number of tamariki and rangatahi in care in the four monitored agencies

Ethnicity

Table 1 - Ethnicity of tamariki and rangatahi aged 0-17 years in Aotearoa and in care

| | Number of tamariki in Aotearoa | Number of tamariki in care | Tamariki in care (% of total population) | Tamariki in care (% of care population) |
|----------------|--------------------------------------|----------------------------------|---|--|
| Total | 1,120,170 | 6817* | 0.6% | |
| Māori | 295,623 | 4644 | 1.6% | 68% |
| Pacific | 157,233 | 1112 | 0.7% | 16% |
| European/Other | 714,285 | 3572 | 0.5% | 52% |

Note: * The total tamariki in care excludes those 18 years and older and so will differ from the 7153 reported elsewhere.

Source: Ethnicities of tamariki and rangatahi in care provided by Barnardos, Dingwall Trust, Open Home Foundation and Oranga Tamariki. Statistics New Zealand data from 2019.

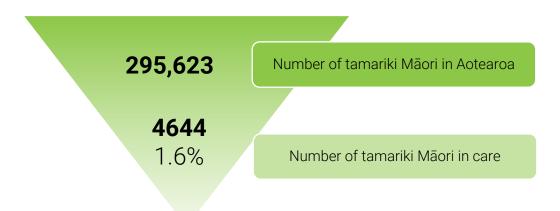


Figure 2 - Number of tamariki Māori in Aotearoa and in care during the 20/21 reporting period

Disability

Of the 7153 tamariki and rangatahi in care during the reporting period 12 percent were recorded as being diagnosed with or known to have a disability, with the remaining 88 percent having no recorded diagnosis or known disability identified.

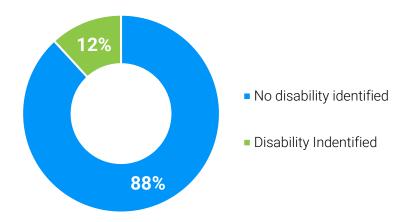


Figure 3 - Distribution of tamariki and rangatahi with identified disability in care during the 20/21 reporting period

Note: A limitation of these numbers is that they only reflect known and met need of tamariki and rangatahi, as detected by their service contact. This excludes children and young people with an unknown and/or unmet need, such as those who have impairments which are not yet diagnosed, or who are not in contact with services.

Source: Data provided by Barnardos, Dingwall Trust, Open Home Foundation and Oranga Tamariki

Geographic location

When tamariki and rangatahi are in care, the monitored agencies have a legal responsibility to keep them safe and secure, and ensure their needs are being met. Tamariki and rangatahi who are in care and custody live in various circumstances. These include living with whānau or other caregivers, in a residence run or funded by Oranga Tamariki¹⁸ or in other supported accommodation. A few live independently or have returned home to live with parents but remain in Oranga Tamariki custody. From the data provided by the agencies, we have calculated the numbers of tamariki and rangatahi living in care in each region (see Figure 4).

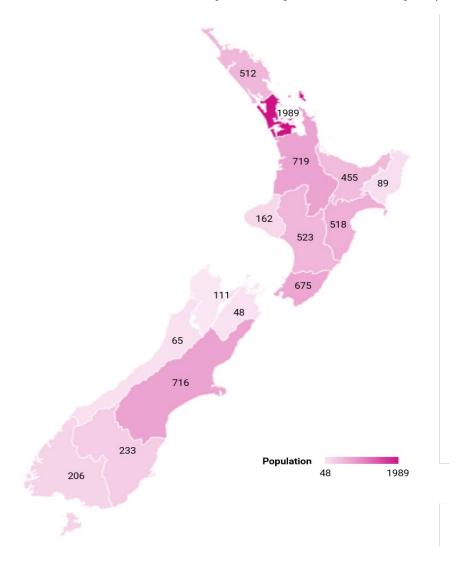


Figure 4 - Estimated numbers of tamariki and rangatahi in care, by Aotearoa New Zealand regions during the 20/21 reporting period

Note: Some agencies have sites that span multiple regions, and tamariki and rangatahi do not always live in the same location as these sites. Therefore, these numbers are only approximations.

Agencies do not have sites in the Tasman region; therefore, we have combined figures for Tasman and Nelson regions. We have excluded 132 tamariki or rangatahi in care who were not assigned to a site.

Source: data provided by Barnardos, Dingwall Trust, Open Home Foundation and Oranga Tamariki

Age

Of all tamariki and rangatahi in care, 19 percent are aged under five years; 25 percent are aged between five and nine; 29 percent are aged between 10 and 14; and 27 percent are aged 15 years and over (this group includes rangatahi aged 18 to 20 years, who are transitioning out of care) (see Figure 5).

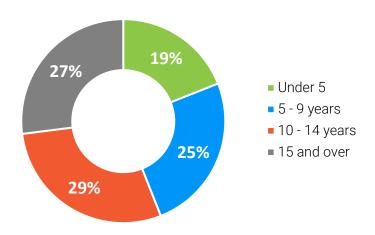


Figure 5 - Ages of tamariki and rangatahi in care during the 20/21 reporting period

Source: data provided by Barnardos, Dingwall Trust, Open Home Foundation and Oranga Tamariki

Gender

Of all tamariki and rangatahi in care, 56 percent are male, and 44 percent are female. The gender of 0.3 percent is unknown and 0.3 percent identity as gender diverse. The gender diverse field was introduced recently, so it may not yet be an accurate representation of the percentage of tamariki and rangatahi in this group (see Figure 6)

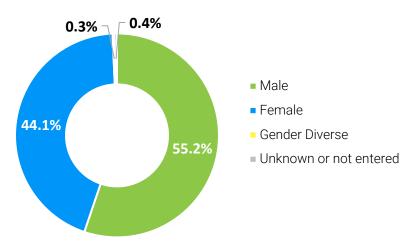


Figure 6 - Gender distribution of tamariki and rangatahi in care during the 20/21 reporting period Source: data provided by Barnardos, Dingwall Trust, Open Home Foundation and Oranga Tamariki

Types of care

A snapshot, as at 30 June 2021, revealed 5409 tamariki and rangatahi were in care. This is less than the 7153 recorded as being in care over the reporting period, as 1744 had their legal orders discharged, which means they were no longer in custody.

From the data provided by the agencies, we have calculated the numbers of tamariki and rangatahi in different types of placements (see Figure 7).

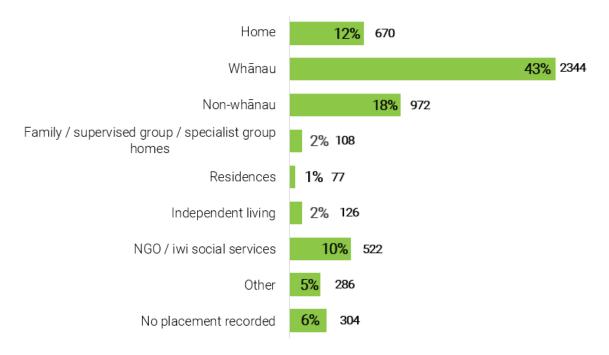


Figure 7 - Number of tamariki and rangatahi in care, by placement type as at 30 June 2021 Source: data provided by Barnardos, Dingwall Trust, Open Home Foundation and Oranga Tamariki

Stability of care

Stable placements can support tamariki and rangatahi to experience healthy relationships, love and belonging, continuity at school and with health services, and consistent social connections with whānau and peers. Having a consistent social worker can protect tamariki and rangatahi and create a feeling of safety and security.

When tamariki and rangatahi in care experience repeated changes in their living situation, or their assigned social worker, it can contribute towards their mental health and social behaviour deteriorating ¹⁹ and make them more complex to care for in future placements. ²⁰ Disrupted placements can have an impact on caregivers' commitment and willingness to continue caring for tamariki and rangatahi. Factors that influence this include caregivers wanting to avoid further emotional pain and loss that they experienced when past placements were disrupted, or caregivers finding it too hard to parent tamariki who exhibit complex or difficult behaviours. ²¹

Table 2 presents four potential measures of stability and change that tamariki and rangatahi in care have experienced during their time in care. While the caregiver and social worker

usually change when tamariki and rangatahi re-enter care or transfer to another region, this does not wholly account for the leave of change observed.

Table 2 - Four measures of care stability for tamariki and rangatahi across their entire life-time experience in care

| | Care and protection orders* | | | Youth justice orders^^ | | |
|-----------------------------------|-----------------------------|--------------------------|-------------------|------------------------|--------------------------|-------------------|
| Stability measure | Average | Most common number | Highest number | Average | Most common number | Highest number |
| Care entries | 1 | 1 | 5 | 3 | 1 | 17 |
| Site or service centre transfers^ | 2 | 1 | 12 | 2 | 1 | 6 |
| Caregivers (number) | 4 | 1 | 36 | 5 | 1 | 28 |
| Social workers (number) | 10 | 5 | 39 | 10 | 7 | 35 |

Note: * The data for rangatahi on youth justice orders was provided by Oranga Tamariki; the data for tamariki and rangatahi on care and protection orders was provided by Open Home Foundation and Oranga Tamariki. Tamariki and rangatahi are included in youth justice or care and protection categories depending on the legal orders they were on, as at 30 June 2021.

[^] The data on transfers exclude those who have not transferred site or service centre in the reporting period.

^{^^}The data for rangatahi on youth justice orders may include stability counts for their time on care and protection orders if part of their care experience.



The Monitor's approach

The Outcomes Framework

The Monitor's Outcomes Framework (the Framework) (see Appendix 1) represents our perspective of what matters for tamariki, rangatahi and whānau in care, now and into the future. We use the Framework to measure what outcomes, related to the NCS Regulations, tamariki and rangatahi are experiencing.

The Framework draws on the Government's *Child and Youth Wellbeing Strategy 2019*, ²² and key dimensions from *The Whānau Ora Outcomes Framework* ²³ and the Oranga Tamariki *Outcomes Framework*. ²⁴ The Framework has also been informed by the Monitor's regional hui with Māori communities, and these Māori and tamariki- and rangatahi-centred models: Te Hiringa Tamariki: A wellbeing model for tamariki Māori (Unicef); ²⁵ Rangatahi Suicide Prevention Fund (Te Puni Kōkiri); ²⁶ Te Whare Tapa Whā (Tā Mason Durie); ²⁷ and Mana Mokopuna (Office of the Children's Commissioner). ²⁸ We are grateful to Te Kāhui, the Monitor's Māori advisory group, which gave advice on the Framework and approved it.

The Framework's key features are:

- it is strengths-based²⁹ and takes a positive approach to youth development
- it is focused on Māori it centres around whānau, builds on Māori strengths and reflects their diverse realities
- it is relevant to different cultures and ethnicities
- it involves tamariki, rangatahi and whānau, by incorporating responsibility and reciprocity.

The Framework's definitions and indicators reflect the context of the Monitor's work and a state of wellbeing we hope that tamariki and rangatahi can enjoy. Our definitions draw on traditional Māori wellbeing concepts for tamariki, rangatahi and whānau.

The Framework has six outcomes:

- Manaakitanga
- Whanaungatanga
- Rangatiratanga
- Aroha
- Kaitiakitanga
- Mātauranga.

We have mapped the NCS Regulations against the outcomes (see Appendix 4). This enables us to measure, monitor and demonstrate whether the quality of care and experiences of tamariki and rangatahi in care, are improving to the extent we expect them to improve for all tamariki in Aotearoa.

The Assessment Matrix

To fulfil its duties, the Monitor focuses not only on agencies' compliance with NCS Regulations, but also on the impact that the agencies have on tamariki in care, and their caregivers and whānau. We do this by putting the six outcomes in the Monitor's Outcomes Framework at the centre of the assessment approach we use to gather information from community visits.

We focus on gathering data from different groups of people in a consistent way. For example, whether we are talking with tamariki or adults, we ask the same types of questions, although the way we ask the questions differs. This consistent approach means we can compare findings year on year and look for changes and improvements.

To assess trends in our findings, we have developed the Assessment Matrix (see Appendices 6a and 6b). This is a matrix of assessment prompts and methods to obtain and combine data about the outcomes and "elements" that underpin how people perform and are supported to meet the NCS Regulations.

To identify which elements we need to focus on, we looked at how other organisations and industries (for example, the aeronautical industry, health and safety organisations, and social services) assess serious events or accidents. In the industries we studied, there are certain core elements that determine how well they, and their people, can perform their roles. This led us to decide to focus on "enablers and barriers" and the "service experience."

Enablers

We look at three types of enablers to assess what enables people to perform their roles and what barriers they face:

- People the values, knowledge and skills that people bring to their roles
- Culture and leadership the physical environment and culture that people work in; and the leadership they receive to guide their practice
- Tools and resources the tools and resources (such as policies, practice guidance, supervision, training, funding and professional-development opportunities) that people, including caregivers, receive to perform their roles

Service experience

The service experience element assesses the quality of the service experience for tamariki and rangatahi, their whānau and caregivers, and others who receive services. We examine two parts of the service experience.

"Services and support work well for me" — this assesses how well services are helping people (staff, tamariki and rangatahi and their whānau and caregivers, and other people or groups we talk with) achieve what they need to

"Services and support work well together" — this assesses how well services are integrated and helping people achieve the outcomes they need to do their best work or be their best selves.

Service experience adds a wider view of the system. It looks at how services across areas, departments or wider, integrate for people who experience the services.

Elements and outcomes

The elements provide two perspectives.

- An "inside-out" view, from service providers
- An "outside-in" view, from people who receive the services.

When we combine our findings about the elements with the outcomes, we get a better picture of how practices are affecting outcomes for tamariki.

Identifying what enables and prevents outcomes helps us understand the root causes of why things are, or are not, happening. When we can identify which system elements are the likely root causes, it allows agencies to focus their attention on the enablers and capabilities that will help them continually improve their services.



Agency responsibilities for self-monitoring and self-assurance

In Aotearoa, values such as openness, reliability and integrity contribute to New Zealanders' trust in the public sector.³⁰ It is important to the public that agencies admit mistakes and learn from the past.³¹ Measuring and monitoring services—to check they are effective, and understand their consequences—helps public-sector agencies think about how to continuously improve those services by making changes to the systems they operate in. It also upholds values that are meaningful to the public.

Monitoring performance of public-sector agencies and their services is essential to understand what is improving and why. Data and evidence are vital for monitoring; they allow agencies to make evidence-based strategic decisions that improve services and achieve better outcomes for children and families.³²

Agencies' monitoring requirements

Oranga Tamariki (National Care Standards and Related Matters) Regulations 2018 (NCS Regulations)

Regulation 86: self-monitoring

- 1. The chief executive and an approved organisation with a child or young person in care or custody must monitor their own compliance with these regulations (self-monitoring) by:
 - a) having systems in place for continuous improvement that identify and address areas of practice that require improvement, and
 - b) using a system for self-monitoring designed to ensure the collection of information that will support the independent monitor to fulfil its monitoring role.

Regulation 87: reporting to the Minister and independent monitor on results of self-monitoring

- The chief executive and an approved organisation with a child or young person in care or custody must report to the Minister and the independent monitor on their own selfmonitoring, including:
 - a) their response to any findings of non-compliance with these regulations; and
 - b) the identification of areas for improvement and reporting on progress in service improvement; and
 - c) providing a plan setting out the actions to be taken.

The 2018 NCS Regulations include requirements for the agencies to self-monitor—Regulation 86(1)—and report on the results of self-monitoring—Regulation 87(1).³³ As part of self-monitoring, the agencies must assure themselves that the NCS Regulations are being upheld.

Agencies' self-monitoring

The Government agreed the NCS Regulations in July 2018, and they came into effect in July 2019. It is now two years since Regulation 86 required agencies to self-monitor their compliance with the NCS Regulations. In our previous three reports we have reported on a lack of robust information across the NCS Regulations and commented that agencies need self-monitoring processes.

As Barnardos, Dingwall Trust have small numbers of rangatahi in their custody, they can monitor their compliance through manual audits and data systems. Barnardos and Dingwall Trust were able to provide a comprehensive picture of the quality of care and compliance with NCS Regulations.

However, we are concerned that Oranga Tamariki and, to a lesser degree, Open Home Foundation, do not yet have comprehensive systems to self-monitor their compliance.

Although progress is being made, without having comprehensive self-monitoring systems, they are unable to know themselves, if they are achieving the standards set for tamariki in care. It also hampers the ability to develop insights, measure the impact of initiatives and identify areas that require greater effort. It also means, as a Monitor, that we cannot comment on the extent to which they are complying with the NCS Regulations and, therefore, cannot provide a view of how well tamariki are doing across the NCS Regulations. For example, we would like to know what proportion of tamariki have the majority of care standards met.

Oranga Tamariki has several internal quality-assurance and monitoring mechanisms. These include its Safety of Children in Care unit; the compliments, complaints, and suggestions feedback mechanism; a quality-assurance function within the Quality Systems team in the Professional Practice Group, and other efforts to strengthen the quality assurance of its general practice. These mechanisms give Oranga Tamariki a level of assurance over the quality of care, however they are not comprehensive.

Oranga Tamariki has stated that its self-monitoring is sufficient to "make fairly strong conclusions about the overall quality of their practice and to identify areas that need more focused effort." Data provided highlights areas of practice that need improving, however the gaps in available data prevent a comprehensive view of the quality of care. From our data and information request, Oranga Tamariki was able to answer fifty-seven percent of the questions. (Appendices 3a and 3b provide a breakdown of which measures Oranga Tamariki could and could not report on, and its level of compliance with specific NCS Regulations). For example, Oranga Tamariki cannot report on tamariki and rangatahi access to health services, and whether they are informed of, and understand their rights; or whether caregivers are given appropriate training and information about the tamariki they care for.

Oranga Tamariki can provide data for only five percent of the 199 measures for all children in their care, using its database. The remainder of data provided comes from quality practice tools, surveys and manual analysis of case files (sampling). Case file analysis is a useful and important component of self-monitoring, however the low level of structured data available limits its ability to assure itself of the standard of care for every tamariki or rangatahi in their care.

We also question whether the Oranga Tamariki case file analysis 'sampling' approach is adequate for a long-term and on-going understanding of the quality of care experienced by tamariki with such diverse care circumstances. Their approach is based on a randomised

sample and therefore not necessarily reflective of the diverse and complex differences in the care population. Although stratification is used to an extent (to account for ethnicity and region), we understand it does not take into account other factors such as age, duration of care, number of entries into care, health and education needs. Insufficiently stratifying the sample risks producing a different profile each year, making it difficult to explain and rely on trends over time.

In its Future Direction Action Plan (September 2021), Oranga Tamariki has committed to improving data and information practice, to support and inform decision making. This includes capturing more detailed information on the needs and experience of tamariki that they interact with. It has also explained that improvements to their case file analysis are being made, to produce insights for different population groups each year.

Developing comprehensive systems will require help from other agencies. For example, measuring Mātauranga requires information to be made available by the Ministry of Education. Although Oranga Tamariki can measure enrolment, greater insight would be gained in being able to measure tamariki attendance. Although not a requirement of the NCS Regulations, understanding achievement is vital if we want tamariki in care to have the same opportunities as all tamariki in Aotearoa. Oranga Tamariki, with the help of partner agencies, must make progress in this area, including establishing its own measures for the NCS Regulations.

Open Home Foundation has been open and transparent about limitations in reporting on the measures required in the 2021 report. It has advised that they would report predominantly from their current OSCAR³⁴ database (case management system), aware that there were gaps in what they were recording. In responding to the Monitor's data and information request, Open Home Foundation was able to provide a response to 43 percent of the questions (Appendices 2a and 2b provide a breakdown of which measures Open Home Foundation could and could not report on, and its level of compliance with specific NCS Regulations).

Where Open Home Foundation was able to provide responses, they were able to do so for all tamariki and rangatahi in their care, rather than reviewing a sample. This means they can assure compliance for every tamariki in its custody, which for an NGO, is creditable.

Open Home Foundation shared their intention to continue to develop their data system and carry out a more in-depth case analysis in the next reporting period. Open Home Foundation stated that:

"ongoing OSCAR reviews will identify areas that require focused attention to ensure that we will do, what we will say we will do. We believe the improvements in OSCAR will assist us to confidently answer all 191 measures. We are also working on how to increase the people resource that we will need to ensure that we can report on all measures in 2022."

It is acknowledged that NGOs do not necessarily have the 'people resource' to carry out intensive sample reviews, while at the same time implementing changes to a case management system, however we are encouraged by their plans to improve systems and look forward to improved reporting for our next report.

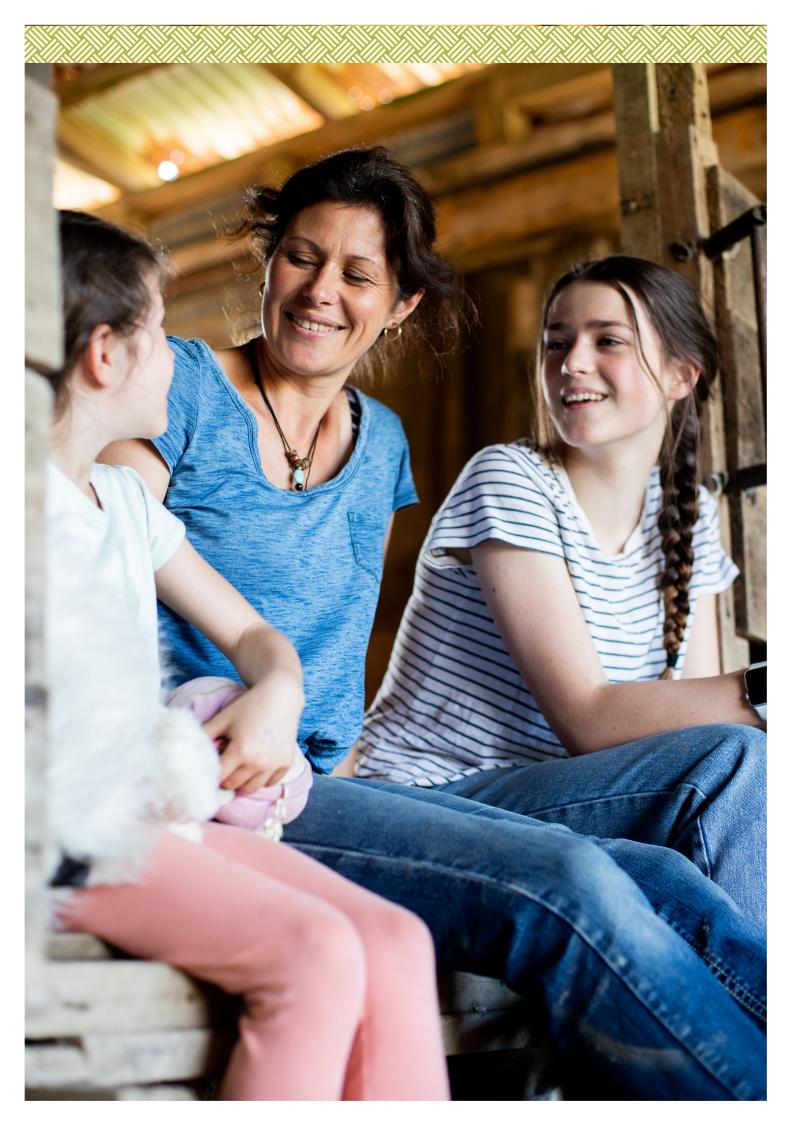
Compliance with NCS Regulations

We asked the agency statements

We asked the agencies to make an overarching statement about their compliance and non-compliance with the NCS Regulations and the progress they are making with self-monitoring. Table 3 shows a summary of the agencies' statements.

Table 3 - - Summary of agency statements about compliance with NCS Regulations

| | Compliance with NCS Regulations | Compliance with self-monitoring |
|----------------------------|---|--|
| Barnardos | Barnardos complies with most of the NCS Regulations. It is currently focused on quality-assurance practices. | Barnardos has improved its quality assurance, s7AA action plans, upskilled its workforce, updated its Children's Charter, developed a self-audit tool, and improved its funding process to ensure rangatahi are receiving entitlements. |
| Dingwall Trust | Dingwall Trust is satisfied that it complies with most aspects of the NCS Regulations. | Dingwall Trust recognised that for self-monitoring to be effective and meaningful, it needed to make significant investments across key domains. This led the Dingwall Trust to develop the Dingwall Model and undertake internal quality-assurance activities focused on compliance and outcomes. |
| Open Home Foundation | Open Home Foundation's compliance with the NCS Regulations is reasonable. There are areas that could do with improvement. | Open Home Foundation has identified that it can organise, compare and report on information from various sources, by developing how it gathers and analyses information and uses its reporting technology (this includes OSCAR). It has processes and systems in place to guide and show evidence of its compliance with the NCS Regulations. In areas it needs to improve, it has clear timebound plans in place. |
| Oranga Tamariki | Oranga Tamariki complies with some of the NCS Regulations. | Oranga Tamariki reports that, since the NCS Regulations were introduced, its self-monitoring capability has improved. It is investigating options to resolve information gaps. |



Methodology

This section explains where and how we obtained the data for this report, how we analysed it and how we shared our findings from the community visits.

Two main sources of data informed this report:

- Self-monitoring data provided by agencies, which includes demographic data about tamariki in care (most of this data is quantitative data)
- Data we gathered from visits to organisations that provide services, and from meeting with tamariki in care, whānau and caregivers (this is qualitative data).

Combining quantitative and qualitative data gives us a richer understanding of the quality of care rather than relying on one source. It also helps balance the limitations of one type of data with the strengths of another. For example, quantitative data can tell us how often the views of tamariki and rangatahi are included when plans are made for their care, and when we talk with them, we can understand whether this was a positive experience.

Visiting organisations and meeting tamariki in care, whānau and caregivers gives us the opportunity to validate data provided by agencies. It also enables us to learn about why some things work well (enablers), and what gets in the way of good practice and positive experiences (barriers). We started these visits in March 2021, and therefore we are at the early stages of building the dataset.

Our reference to and reliance on this qualitative dataset is limited in this report, however we expect to gain more insight from it in the future. As we speak more with tamariki, whānau, service providers and the agencies, our ability to validate data provided by the agencies increases. This is essential to our monitoring programme, as relying on quantitative data alone risks that data under reports, or in some cases over reports what is happening for tamariki and rangatahi in care.

Requests for self-monitoring data from agencies

To monitor the agencies' compliance with the NCS Regulations, we asked Barnardos, Dingwall Trust, Open Home Foundation and Oranga Tamariki to provide us with:

- their assessment of how they are achieving the NCS Regulations
- their assessment of whether they are providing tamariki, in their care and custody, with what they need
- their plans to strengthen their self-monitoring
- their assessment of areas of concern and non-compliance, and their plans to improve.

In March 2021, the Monitor sent each agency a request for information about the tamariki in their custody between 1 July 2020 and 30 June 2021 (see Appendices 2a, 2b, 3a, 3b and 6 for details of the requests). The requests were tailored to the number of tamariki the agency had in their custody, so that the reporting requirements did not overburden the smaller agencies.

Agencies provided data for the measures in the requests using a range of methods and data sources, including administrative data (this was generally from a database of information about all tamariki in the custody of that agency) and casefile analysis (a manual review of a subset of cases). More details about these sources and methods are available in Appendix 7.

Response from Barnardos

Barnardos had three tamariki in its custody in the reporting period. To protect the privacy of these tamariki, we asked Barnardos to provide a narrative response to the measures. It did this through a practice audit and summary statements.

Response from Dingwall Trust

Dingwall Trust had one tamariki in its custody in the reporting period. To protect the privacy of this tamariki, we asked Dingwall Trust to provide a narrative response to the measures. It did this through a practice audit and summary statements.

Response from Open Home Foundation

We asked Open Home Foundation to respond to 192 measures, of which it could provide data for 82 (43 percent) (see 'Data and information from Agencies' section). Open Home Foundation used OSCAR, to provide data for 95 percent of the 82 measures. It used survey information to provide data for the other five percent of measures.

Response from Oranga Tamariki

We asked Oranga Tamariki to respond to 199 measures, of which it could provide data for 113 (57 percent) (see 'Data and information from Agencies' section). Oranga Tamariki manually analysed casefiles to provide data for 63 percent of the measures. The terms of reference for the Oranga Tamariki review of its casefiles are included in Appendix 7.

Responses mapped against the Outcomes Framework

We mapped the NCS Regulations against the outcomes (see Appendix 4) and the measures we asked the agencies to respond to. This enables us to use agencies' data to measure, monitor and demonstrate whether the quality of care and experiences of tamariki and rangatahi in care are improving to the extent we expect them to be improving for all tamariki in Aotearoa.

In this report, we present each agency's responses to these measures separately; we have not aggregated their responses.

Protection of data from agencies

We take care to minimise how much data we store that can be personally identified. Our role is to monitor the NCS Regulations rather than the care of individual tamariki and rangatahi, so we don't need to identify individuals. Therefore, we have asked agencies not to provide

information such as names, addresses and birth dates that would make it easy to identify individuals.

Monitoring visits to communities

Between 8 March and 30 May 2021, we met 731 people who receive or provide services. Depending on people's preferences, we met some one-to-one and others in groups.

People who receive services include tamariki and rangatahi, and whānau and caregivers of tamariki in care. Most of the tamariki and rangatahi we spoke with are Māori, male, over 10 years old and in the care of one of the four agencies. Some of the people we interviewed are siblings of tamariki in care.

People who provide services include staff of the four agencies, New Zealand Police, healthcare and education providers, and NGOs.

We analysed data from 612 of those who we met across 226 engagements (see

Figure 8).35



59 tamariki and rangatahi



100 representatives from health and education services and New Zealand Police



14 whānau



129 representatives from NGOs (57 Māori providers and 72 non-Māori providers)



78 caregivers



19 others (this includes lawyers and psychologists who provide services to tamariki)



213 staff of monitored agencies

Figure 8 - Number and types of service providers and recipients we met

We visited a mix of urban and rural locations and areas with different population sizes (see Figure 9).

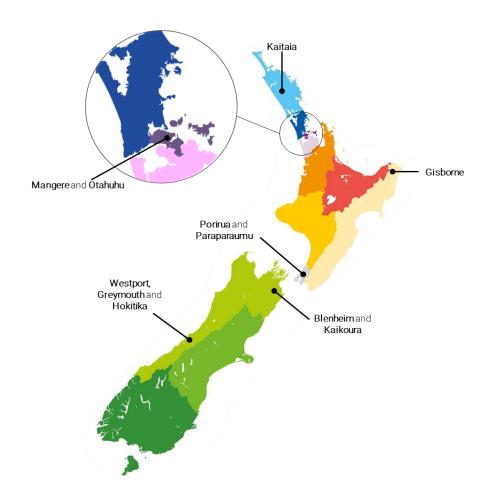


Figure 9 - Locations in Aotearoa where we met service providers and recipients

We tailored our conversations to suit the groups we spoke with. Each person we spoke with was supported through the conversation using our Assessment Matrix, which includes prompts that guide the conversation (see Appendix 8). This approach gives us a consistent way to gather information about people's personal experiences of receiving or giving care, and helps us understand which needs are, and are not, being met.

Analysis of data from our community visits

We use the software NVivo to record, organise and analyse the qualitative data we collect at interviews.

To analyse the data, we used a robust and consistent set of codes and coding structure that we developed and tested in 2020. Our methods are based on best practices for analysing social science and qualitative data. They include to a Māori practices.

We used a quality assurance process to ensure we analysed the data from different locations and participants consistently. For more details, see Appendix 9.

Feedback to communities

For each visit, we collated the themes that emerged and presented these back to the people we met with. This feedback is anonymised, so no individuals can be identified. Sharing our findings with people we spoke with gave them an opportunity to make local changes that will improve outcomes for their tamariki and rangatahi in care.

Protection of data from communities

Before our visits, we gave people information sheets about who the Monitor is, what the Monitor does, and what they can expect when we visit. We tailored these information sheets to the audience (these information sheets are available on our website).³⁶ Each participant also completed a consent form indicating their voluntary agreement to talk with the Monitor.

We take care to minimise collecting personal details of the people we meet. We did not record their names, and we have taken steps to remove other identifying information from the records we keep. This means the views of individuals, shared with us during the interviews, are stored securely in our systems and cannot to be traced to individuals.

Report review

Before publishing this report, we gave each of the four agencies the opportunity to review the report, so they could:

- check we accurately presented facts about their agency
- respond to any potential adverse comments we have made.

Oranga Tamariki has contracting relationships with Barnardos, Dingwall Trust and Open Home Foundation. Due to the nature of these relationships, we agreed to share potential adverse comments related to those agencies with Oranga Tamariki before publishing the report, so it had notice to consider its response. As there were no adverse comments, we did not need to provide any information of this kind.

Data and information from agencies

Open Home Foundation

As Open Home Foundation has not developed its own measures for the NCS Regulations, we sent a formal request for data and information. This request contained 192 measures, including sub-measures (see Appendices 2a, 2b and 6). We sent the same request to Oranga Tamariki, with an additional seven measures asked of Oranga Tamariki that do not apply to Open Home Foundation.

We asked Open Home Foundation 13 questions about demographics and care stability, and one question about how it defines disability.

Open Home Foundation provided data for 43 percent of the measures (82 measures) and was unable to provide information for 57 percent of the measures (110 measures). It used several methods to provide data:

- Database (provided data for 79 percent or 65 responses)
- Database and supplementary survey questions (provided data for 16 percent or 13 responses
- Better off survey (provided data for five percent or 4 responses (see Figure 10 and Table 4).

For 95 percent of its responses, it gave information about all tamariki in its custody. This provides a greater view of the quality of care and how well tamariki and rangatahi in its custody are doing.

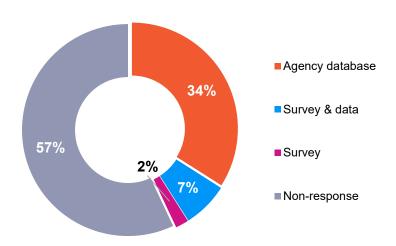


Figure 10 - Source of Open Home Foundation's responses to the Monitor's measures about its self-monitoring data

Table 4 - Sources of data Open Home Foundation used to answer measures related to the Outcomes Framework

| | Database | Database + survey | Survey | No response | Total |
|----------------|----------|----------------------|--------|-------------|-------|
| Total | 65 | 13 | 4 | 110 | 192 |
| Manaakitanga | 13 | 2 | 0 | 16 | 31 |
| Whanaungatanga | 5 | 4 | 0 | 17 | 26 |
| Rangatiratanga | 6 | 4 | 4 | 30 | 44 |
| Aroha | 19 | 1 | 0 | 12 | 32 |
| Kaitiakitanga | 14 | 1 | 0 | 12 | 27 |
| Mātauranga | 8 | 1 | 0 | 23 | 32 |

Oranga Tamariki

As Oranga Tamariki has not developed its own measures for the NCS Regulations, a formal request for data and information. was sent to Oranga Tamariki. This request contained 199 measures, including sub-measures (Appendices 3a, 3b and 6).

We also asked Oranga Tamariki 18 questions about demographics and care stability, and one question about how it defines disability.

Oranga Tamariki provided data for 57 percent of the measures (113 measures) and was unable to provide information for 43 percent of the measures (86 measures). It used several methods to provide data:

- Manual analysis of casefiles (provided data for 63 percent or 71 responses)
- Thematic reviews using quality practice tools (QPT) (provided data for 24 percent or 27 responses)
- Database (provided data for nine percent or 10 responses)

Caregiver surveys and Te Matataki surveys (provided data for four percent or five responses) (see Figure 11 and Table 5).

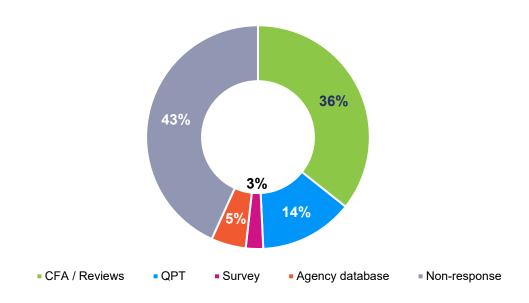


Figure 11 - Source of Oranga Tamariki responses to the Monitor's measures about its self-monitoring data

As Oranga Tamariki can provide data for only five percent of the 199 measures using its database, it is mainly relied on reviewing and analysing samples of casefiles and QPT for its self-monitoring.

While the reliance on casefile analysis is not a weakness in demonstrating compliance, it is limited due to the diverse and complex differences in the care population and their care circumstances, the complexity of need, of childhood experience, and the extent of interactions

with the care system. However, when using casefile analysis to review professional judgements and the quality of decision-making, it is useful.

Table 5 - Sources of data Oranga Tamariki used to answer measures related to the Outcomes Framework

| | Case files | QPT | Survey | Database | No response | Total |
|----------------|------------|-----|--------|----------|-------------|-------|
| Total | 71 | 27 | 5 | 10 | 86 | 199 |
| Manaakitanga | 14 | 1 | 3 | 1 | 13 | 32 |
| Whanaungatanga | 9 | 2 | 1 | 1 | 13 | 26 |
| Rangatiratanga | 9 | 10 | 1 | 0 | 24 | 44 |
| Aroha | 16 | 2 | 0 | 0 | 14 | 32 |
| Kaitiakitanga | 14 | 3 | 0 | 3 | 11 | 31 |
| Mātauranga | 9 | 9 | 0 | 5 | 11 | 34 |



Outcomes for tamariki and rangatahi

This section is based on the data and information the agencies provided in response to the Monitor's formal request (see Appendices 2a, 2b, 3a, 3b and 6); the information we gathered during six community visits; and analysis of the data and information.

The community visits gave us information about the experiences of tamariki and rangatahi in care and their whānau, and the experiences of people who work with them. In some instances, this information validated information we received from the agencies.

We present our analysis separately for each of the six outcomes in the Outcomes Framework. Having mapped the NCS Regulations to the six outcomes and reflected this mapping in our questions in the Assessment Matrix, we can see each agency's compliance with NCS Regulations that apply to a particular outcome.

For each outcome, we start by defining the outcome and listing the indicators. The indicators show what we would expect to see when tamariki and rangatahi experience the outcome. We then present the information we gathered from agencies and community visits, and our analysis of emerging themes. Not every measure is represented in each graph, for this detail see Appendices 2a, 2b, 3a and 3b. Appendix 10 also provides more detail on particular measures.

Notes about data analysis and presentation

- Bar charts show "yes" or "no" responses and where relevant, "partially achieved" is also included.
- Bar charts do not include responses that are "not applicable" or "not known." The reasons for these responses include: no need identified in an assessment, so the measure does not apply; or cases excluded, as the tamariki did not have a current assessment or plan.
- Bars in bar charts have varying lengths. This reflects the number of cases reviewed by the agency and the number of cases that were excluded, because they were "not applicable" or "not known."
- Oranga Tamariki charts show the number of responses out of the number of cases that were reviewed (Oranga Tamariki reviewed a maximum of 700 cases for each measure).
- Open Home Foundation the numbers in the charts relate to all tamariki and rangatahi in its custody and all foster parents.

Links between the outcomes: rangatahi rangatiratanga and supportive social work practice

The outcomes and their enablers are inextricably linked and interdependent. Together, they represent what's essential for the wellbeing of tamariki and rangatahi in care.

During a hui with an NGO care partner, we heard about a rangatahi who had been in care since they were two years old. The rangatahi was 15 years old when they instigated a whānau hui and told their caregivers that they wanted to be with their mum. The rangatahi has since left care and returned to mum and is thriving.

The experience illustrates the links between the outcomes and the many ways that the social worker was able to support the rangatiratanga of a rangatahi in care and show manaakitanga. Through the process outlined below, the rangatahi was supported to use their voice, influence decision-making about care, and improve their experience of whanaungatanga and aroha.

The case study has been drawn from two separate korero with NGO leadership and a social worker. It illustrates supportive practice and the importance of providing tamariki and rangatahi with an enabling environment in which they can exercise their rangatiratanga.

The social worker we spoke with told us that while they had begun working with the rangatahi for only a couple of years prior to the rangatahi leaving care and returning home, the rangatahi had already been in care for over 10 years.

On taking up the role as social worker for this rangatahi, the social worker told us that the first steps were to ensure that all information was up to date. During this process, the social worker learned that the mother of this rangatahi had ceased drinking over nine years prior and therefore could potentially be able to provide a safe, stable, and loving home for her teenager.

The social worker talked about the situation with the rangatahi and the NGO. When the rangatahi expressed a desire to live with their mother and called a whānau hui, the social worker worked closely alongside the rangatahi throughout the process until they returned home. The social worker said:

"The family hui was their own idea. They had had issues in [the] past with not being heard. [We] empowered them to be able to get everyone together and rebuild the family."

The social worker stood with the rangatahi and the whanau to enable their voices to be heard.

"The first thing was to talk to [them] regularly, texting when that was easier, [and] going on walks."

During our korero, the social worker told us that they really wanted the rangatahi to understand, "I was there for them", and not for the benefit of the foster parents; "they had their own support."

"I pride myself to be client focused, to me it's very clear why I am here. I was consistent with engaging with [rangatahi] even when they threw doubt about [my] commitment to them."

The social worker told us that the rangatahi thanked the caregivers for the manaakitanga they had shown. "[Rangatahi] is completing tertiary study now."

As this case study shows, articulating and exercising rangatiratanga set off a chain of actions for the rangatahi. The social worker stepped up, providing manaakitanga in the form of information, advocacy, and support. With the social workers' support, this rangatahi defined what whanaungatanga and aroha meant for them and determined their own positive outcome.



Manaakitanga

Manaakitanga is an expression of how communities care for, and engage with, one another; it is about nurturing others and caring about their wellbeing. A person's or group's ability to care for their own and others' physical, mental and cultural wellbeing reflects the extent to which manaakitanga is present.

To experience manaakitanga, tamariki, rangatahi and whānau should feel empowered and safe to ask for what they need and know where to find support. This support needs to be genuine and mana enhancing, to ensure each person's dignity and worth is respected. When interactions hold manaakitanga, there is less risk that relationships between government organisations, service providers and communities will lack trust or be damaging.³⁷

"Old social worker was my favourite social worker. She was so cool. She was funny and kind. She listened to me a lot. We got emails from her" – Tamariki

The outcome:

Tamariki and rangatahi have positive reciprocal relationships based on genuine care, generosity and respect. Parents, caregivers and whānau have what they need to meet the needs of tamariki.

The indicators

When people have developed a sense of manaakitanga, we would expect to see evidence that indicates:

- tamariki and rangatahi, and their whānau, are empowered and confident to ask for support when they need it
- tamariki and rangatahi have access to people or services that are inclusive and support diversity
- parents, caregivers and whānau have what they need to meet the needs of tamariki and rangatahi
- people working with tamariki and rangatahi understand their needs and address them
- tamariki and rangatahi experience and engage in safe, bully- and discrimination-free environments and surroundings
- tamariki and rangatahi have warm, stable, healthy and secure relationships among themselves and with others.

Oranga Tamariki

Manaakitanga focuses on agencies' obligations to assess whether quality care is being delivered and experienced.

We asked Oranga Tamariki to provide data for 32 measures for manaakitanga. The request for information about manaakitanga included general measures about needs assessment and planning that relate to all outcomes, and specific measures about care and relationships.

Oranga Tamariki provided data for 15 measures by analysing casefiles and for four measures by reviewing answers to a caregiver survey and using its QPT (see Appendix 3a). It did not have the information to answer the other 13 measures (see Appendix 3b).

Some of the data provided by Oranga Tamariki is displayed in Figure 12. For information on all the responses see Appendices 3a and 3b.

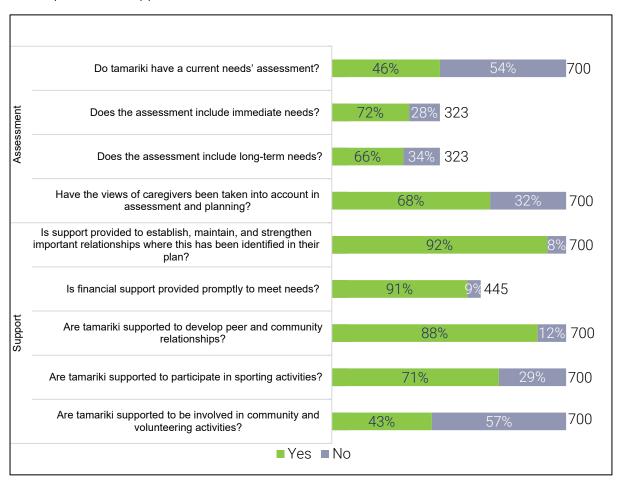


Figure 12 - Oranga Tamariki responses to measures about manaakitanga

Note: When there are fewer than 700 responses for a measure, this reflects data for some tamariki being excluded. This may occur if the assessments for some tamariki were not current or the measure did not apply to some tamariki.

Maintaining good relationships between tamariki and social workers

Social workers are critical people in the lives of tamariki and rangatahi in care. When tamariki and rangatahi experience trusting, stable and nurturing relationships with their social worker, it helps them feel secure, develop self-confidence, and are more likely to reach out to their social worker when they need support.

When the relationship with their social worker is strong, tamariki and rangatahi told us that it feels responsive, supports them to get the things they need, and is available for them when they need help. Tamariki and rangatahi said it helps to have a consistent social worker in their lives who they trust and is easy to talk with. Overall, they are happier when they have a positive relationship with their social worker. One rangatahi told us that sometimes their social worker "...annoys me when she asks too many deep questions, but I like how she is always here to help us." Another rangatahi told us having the same social worker for a long time means: "You get to build a relationship and can ask questions."

Oranga Tamariki staff spoke most about the importance of partnership and collaboration to enable them to establish relationships with tamariki, rangatahi and whānau. When partnerships are formed, it allows them to build reciprocal relationships built on mutual respect. To a lesser extent, staff also spoke about the importance of having supportive leaders and good relationships with colleagues who they can seek support from and who help them to do their job well. When these relationships are not working well staff say it can affect coordination and communication within Oranga Tamariki. This has an impact on them doing their work well.

Some Oranga Tamariki staff also spoke about high staff turnover which leads to institutional knowledge being lost, and inconsistent practice. This can have an impact on tamariki and their whānau. This is reflected in the recent report of the Oranga Tamariki Ministerial Advisory Board, which details the level of experience of care and protection social workers. They conclude that although the number of social workers has increased by 30 percent since 2017, the overall social worker workforce is less experienced, with the number of senior practitioners dropping from 36 percent to 26 percent.

Tamariki and rangatahi told us that when their relationship with their social worker isn't working well it has an impact on them getting the things they need. In some cases, it has a negative impact on their emotional wellbeing. They say the cause of poor relationships is often a social worker not visiting or communicating with them; a social worker letting them down numerous times; or having multiple social workers who they don't know and therefore, don't trust. Some tamariki say they don't know what a social worker is, or that their social worker does not ask them questions, or they "lose every bit of information and never listen." One rangatahi said their social worker's poor communication has made them feel "pathetic" and "down in the dumps."

Maintaining up-to-date assessments and plans

The NCS Regulations outline the entitlement of tamariki and rangatahi in care to have a holistic needs assessment and support plan that reflects the level of care they ought to experience. This includes supporting their wider relationships.

Knowing that tamariki are receiving the care they are entitled to, and their care needs are being met, can create more positive care experiences that in turn contributes to improved Manaakitanga.

Oranga Tamariki uses Tuituia to assess information about the needs of tamariki and rangatahi. Tuituia covers the holistic wellbeing of tamariki and rangatahi; capacity of their caregivers to nurture their wellbeing; and whānau, social, cultural, and environmental influences on them and their caregivers. All tamariki and rangatahi must have a written assessment guided by the Tuituia framework and domains:³⁸

Oranga Tamariki data shows that 46 percent (323 out of 700) of its Tuituia assessments are current,³⁹ and 18 tamariki have no Tuituia.

The Oranga Tamariki definition of current does not align with the NCS Regulations. Oranga Tamariki policy outlines several situations when a Tuituia is required and states that one situation is when "reviewing a plan and not less than once every six months." The policy is unclear on whether every assessment must be reviewed as per the NCS Regulations, which states that they must be reviewed every six months. 40 The casefile reviewers noted: "While Tuituia was not being consistently used, there was evidence of assessment taking place in other parts of the written record, most notably within the social work review reports provided to the Family Court."

After the Tuituia assessment, the next step in the Oranga Tamariki process is developing a plan. Tamariki and rangatahi in care often have several plans. The All About Me plan is the primary plan that supports the needs and objectives for tamariki and rangatahi. Other plans, such as a family group conference (FGC) plan or court plan must be referenced in the All About Me plan.

Oranga Tamariki data shows that half of the casefiles sampled have a current All About Me plan⁴¹, and 23 tamariki do not have an All About Me plan. The casefile sample shows however that 92 percent (645) of tamariki have a current plan of some kind⁴², which could be a family group conference plan or a Family Court plan. Five tamariki and rangatahi have none of the three plans.

Although data shows that Oranga Tamariki work well to put plans in place, it is unclear whether plans are kept up to date with recent assessments of needs. Although we did not ask Oranga Tamariki for this information, in future we will seek information on how recent assessments were completed for those outside of the regulatory timeframe.

Supporting tamariki to develop relationships

From its sample of 700 casefiles, Oranga Tamariki data shows that 88 percent of tamariki were supported to develop relationships with their peers and people in the community; 92 percent were supported to establish, maintain and strengthen important relationships; and 43 percent were supported to get involved in community and volunteering activities. The data also shows that 91 percent of tamariki received prompt financial support for resources to develop relationships when they needed them.

Tamariki Māori and non-Māori

For three of the NCS Regulations we compared the data for tamariki Māori and non-Māori to see if there are any differences between how they are supported. Oranga Tamariki data shows that:

- tamariki were supported to access peer and community relationships (little difference found based on 700 cases)
- tamariki were supported to participate in sporting and cultural activities (little difference found based on 700 cases)
- caregivers have a plan tailored to the child's needs (difference found based on 178 cases: 35 percent Māori, 42 percent non-Māori).

Tamariki with disabilities

For the same three NCS Regulations we compared the data for tamariki with disabilities and tamariki without disabilities to see if there are any differences between how tamariki are supported. Oranga Tamariki data shows that:

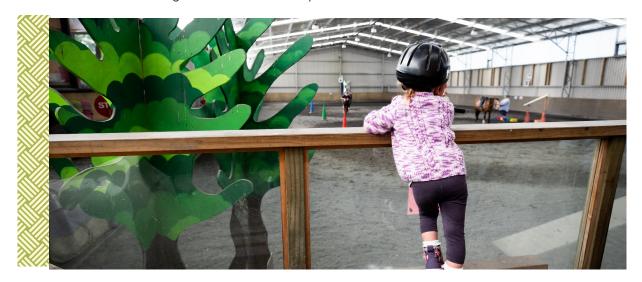
- tamariki were supported to access peer and community relationships (no difference found based on 700 cases)
- tamariki were supported to participate in sporting and cultural activities (difference found based on 700 cases: 67 percent of those with tamariki with disabilities, 72 percent of tamariki without disabilities)
- caregivers have a plan tailored to the child's needs (difference found based on 178 cases: 32 percent of tamariki with disabilities, 40 percent of tamariki without disabilities).

While we did find modest differences in support for tamariki Māori and tamariki with disabilities, these findings are based on small numbers and were not tested for significance.

Maintaining good relationships with whānau

During their korero with us, whanau shared examples of experiencing manaakitanga when they engaged with Oranga Tamariki and other agencies. Most experiences of manaakitanga had come from engaging with, and being supported by, the staff of shared care providers (care partners).

Whānau tell us that factors that contribute to manaakitanga include social workers checking in regularly with them, acting kindly and transparently, and giving them practical and relevant support. Whānau say that manaakitanga occurs when social workers and other staff act in ways that leave whānau feeling understood and respected.



Conversely, whānau told us that manaakitanga is inhibited when they feel animosity from social workers. Whānau know if a social worker has a negative view of them. They told us about situations when they had felt their mana was diminished by social workers' negativity. For example, one whānau member said: "They never highlight what we have done to improve, better ourselves or make positive changes. It's all negative." Another whānau member spoke about feeling vulnerable, because of an imbalanced power dynamic. They recalled that their Oranga Tamariki social worker had said: "I am going to make damn sure you never get your kids back."

For many whānau, it seems that having a positive or negative experience of manaakitanga depends on whether they have a good relationship with their assigned social worker.

Supporting caregivers

Prospective caregivers

NCS Regulation 44 outlines the information that prospective caregivers must be given, so they and their household understand the caregiver's role and what is expected of them. NCS Regulation 44 (2d) outlines what information caregivers must be given about support, training and resources (resources include financial support and respite care) that are available to help them care for tamariki.

Oranga Tamariki explained that prospective caregivers are given the Prepare to Care learning modules to complete once they have completed their application and been assessed. Oranga Tamariki provided us with its six Prepare to Care learning modules, which caregivers are required to complete⁴³ (see Appendix 10).

Oranga Tamariki does not have data to measure whether prospective caregivers have completed the Prepare to Care training and provided information about its processes to assess and approve caregivers, and how to make complaints. Oranga Tamariki told us:

We have recently commenced collecting information on new caregivers who complete the Prepare to Care learning. Following the new recording system being introduced in April 2021, further refinements were required to ensure robust information was collected. These refinements were introduced in June 2021 to commence recording from 1 July 2021.

All prospective caregivers are directed to information on our website, which provides information on what it means to be a caregiver, how to become a caregiver, financial help and the support and learning available to caregivers. All prospective caregivers can access the Caregiver Kete which provides information and guidance.

When a child is placed with caregivers, NCS Regulation 57(1) requires Oranga Tamariki to provide further information to support their care. Oranga Tamariki cannot assure us it is doing this, although a new recording system will collect information on caregivers who complete the Prepare to Care learning from 1 July 2021. Oranga Tamariki does not have a record of whether approved caregivers were provided with information about:

- roles and responsibilities of caregivers before a placement
- current plans for tamariki
- · reason why tamariki came into care
- general and immediate needs of tamariki
- support available when providing care.

Supporting caregivers to care for tamariki and rangatahi will help provide a safe and stable home. When Oranga Tamariki tell us that the biggest barrier to placing tamariki in stable and loving homes is the availability of caregiver and placement options, it underlines the importance of supporting existing caregivers.

Approved caregivers

Oranga Tamariki shared this information it collected in a recent survey of 235 current caregivers (see Appendix 3a):

- 56 percent of caregivers felt underprepared when they first became a caregiver
- 31 percent of caregivers asked for support but received none or not enough
- 73 percent of caregivers said they received enough, or just enough, money to provide care.

When tamariki or rangatahi are placed with caregivers, a caregiver support plan is needed. NCS Regulation 60 specifies what the plan should contain, which includes how often caregivers are visited, what training and support they will be given, and how often they will be reviewed.

By analysing a sample of casefiles, Oranga Tamariki reported that 58 percent of caregivers (178) have a current support plan. ⁴⁴ Figure 13 shows the percentages of those support plans that cover different types of needs.

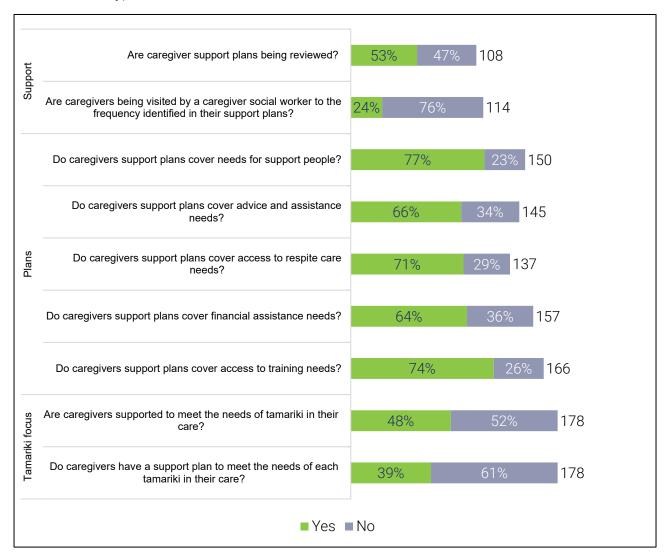


Figure 13 - Oranga Tamariki responses to measures about support for caregivers

These findings are supported by our discussions with caregivers. Caregivers spoke frequently about not having good reciprocal relationships with agency staff, especially with the child's social worker. Very often caregivers mentioned that Oranga Tamariki social workers do not get in touch or visit tamariki regularly.

One caregiver describing their experience of the care system as alike to 'swimming in shark infested waters all alone'. Another told us "Some [Social Workers] will ask is there anything you need; doesn't mean you'll get it though" and another telling us "[there is] no support from the OT Social Worker. Our voices weren't being heard by the Social Worker. I asked for a support plan to help girls settle when they come to us, and when I return to work, I was just told it would be ok" with another telling us "When I ask for help OT tell me to ring the 0800 number. The only support we get is from our whānau."

Caregivers frequently told us that they are not provided information about their role, their tamariki or that the information provided to them was incorrect. One caregiver told us "I had to go through files physically to find information I needed. I wasn't given the right referral, right information" with another telling us "the OT information that came through with rangatahi with Open Home wasn't right...."

However, where engagement is good, one caregiver told us they experienced manaakitanga, because they: "know" they are able to "pick up the phone anytime," and call their social worker if they are having problems.

Oranga Tamariki data shows that 77 percent of caregivers have access to a support person and 74 percent have access to training.

Establishing the trust of community service providers and government agencies

Trust is an essential element of manaakitanga. Oranga Tamariki staff frequently told us about inefficient communication and a mutual lack of trust between Oranga Tamariki, community service providers and other government agencies. They say this is caused by other agencies holding negative views about them or having expectations of them that they cannot meet. These issues affect their ability to establish positive relationships. They recognise that, to build mutual trust, they need to work together with community service providers and other government agencies.

One social worker said, "There is this impression of Oranga Tamariki that goes against us. OT social workers try to prioritise tamariki voice, but other agencies feel we are using power and not taking into account family views. So, they advocate harder or pit themselves against us and that makes it difficult to build a relationship with whānau."

Community service providers, including iwi and Māori providers, say they have the skills and aroha to work effectively with whānau. They talked about providing whānau with tools that empower them and advocating for them when necessary. They also described the effort they make to help whānau engage with Oranga Tamariki. They say that whānau can fear Oranga Tamariki, which creates a power imbalance. If Oranga Tamariki is willing, community service providers could, and are willing to, bridge the gap between Oranga Tamariki and whānau, to improve relationships. For example, one provider said it: "...spent a lot of time trying to sell Oranga Tamariki to whānau, trying to "de-scary-ise" them, to build the connection between the whānau and Oranga Tamariki, but it doesn't work."

Another talked about the lack of trust between the provider and Oranga Tamariki: "We do not trust OT at all. We want all communication with OT in writing. They agree to us voice recording them, then don't, then lie that things were said and done in hui, and don't follow through on a plan that was created from a hui."

Community service providers, including iwi and Māori providers talked about the positive and trusting relationships they have with tamariki and rangatahi. They say they can spend quality time with tamariki and rangatahi, so they feel cared for. They say they are effective in their roles because they apply a Māori lens to their practice, which enables them to engage positively with tamariki and whānau. Their Māori staff can relate to tamariki, rangatahi and whānau, and help them learn about and connect with their culture. One staff member said: "Māori talking to Māori will get more information than Pākehā talking to Māori. This is a by-Māori, for-Māori approach."



Barnardos

Barnardos reports that the rangatahi in its care feel a sense of belonging. They have been in long-term placements with their caregivers and continue to report they feel settled. Barnardos staff encourage them to form friendships through extracurricular activities.

Maintaining up-to-date assessments and plans

Barnardos assures us that the rangatahi in its care have consistent and thorough needs assessments that are regularly reviewed and used to inform their plans. The plans identify what financial and other support is needed. The plans are reviewed every six months and shared with all relevant parties, including whānau, caregivers and other professionals.

Barnardos has a quality-assurance process that monitors whether plans are being regularly reviewed and updated.

Supporting caregivers

Barnardos integrates its caregiver-support plans into its rangatahi plans. The plans identify caregivers' needs, and actions that will ensure caregivers are supported to meet the needs of rangatahi.

All Barnardos caregivers have completed its required approval processes. They attend training to help them develop and maintain positive connections with rangatahi.

Dingwall Trust

Dingwall Trust reports that it has achieved all the relevant manaakitanga measures. It supports strong relationships and engagements with those identified as important to the rangatahi, and regularly monitor them.

Open Home Foundation

We asked Open Home Foundation to provide data for 31 measures about manaakitanga. Using its administrative data and a sample of responses from its Better Off survey, ⁴⁵ Open Home Foundation provided data for 15 measures for each of the 93 tamariki in its custody (see Appendix 2a for the complete lists of measures for this outcome). Open Home Foundation did not have data to respond to 16 measures (see Appendix 2b).

Maintaining up-to-date assessments and plans

Open Home Foundation uses a Child and Adolescent Needs and Strengths (CANS) assessment to assess tamariki and develop plans to meet their needs. ⁴⁶ Figure 14 shows Open Home Foundation's data for six measures related to assessments, plans, visits and support for tamariki, which contribute to manaakitanga. ⁴⁷



Figure 14 - Open Home Foundation responses to measures about assessments and plans

Note: When there are fewer than 93 response for a measure this reflects data for some tamariki being excluded where their CANS assessment is not current.

Open Home Foundation's data tells us that 58 percent of tamariki have a current CANS assessment. ⁴⁸ Open Home Foundation uses the standard in the NCS Regulation to determine if its needs assessments are current. For the assessments and plans that are current, Open Home Foundation's data shows that they are almost fully compliant with the NCS Regulations.

Open Home Foundation says that for those tamariki without a CANS assessment, there may be a previous CANS assessment that identified their needs (and in other areas of practice). This is not evident, however from the current CANS data provided.

Open Home Foundation's data shows that 100 percent of foster parents⁴⁹ promptly received the financial support they needed to meet tamariki needs⁵⁰ Its survey data reveals a similar result — 80 percent of foster parents agreed or strongly agreed with the statement: "OHF has provided me with the financial and practical resources I need to be able to provide successful care."

Open Home Foundation used its survey data to provide data for the measure about whether the views of foster parents are considered in assessment and planning. Four out of five parents of tamariki that are in Open Home Foundation's custody agree or strongly agree with the statement: "I am consulted about significant decisions in my child/children's lives." Open Home Foundation acknowledges that, to provide using self-monitoring data for this measure, it would need to conduct more in-depth case analysis.

During our visits, some foster parents described positive experiences of manaakitanga between tamariki in their care and Open Home Foundation. They said that when staffing is consistent and social workers are responsive, it enables manaakitanga. One foster parent said, "I have had the same OHF social worker throughout the care journey of young person" and another said "[Open Home Foundation social worker] rings once a week, and if I needed anything... she's one of those ones where if you need something, she'll do it, she'll get it done."

Foster parents told us how they appreciated the support and responsiveness of the Open Home Foundation. They observed that poor communication and coordination between Open Home Foundation and Oranga Tamariki created barriers for social workers to establish meaningful

relationships with tamariki. One said "OHF spend most of their time trying to get hold of OT when they could be dealing with the kids. I'm grateful to be with OHF, I don't have to do chase up, if I was a carer for OT, I would always have to chase them up."

Supporting tamariki to develop relationships

During our community visits staff said that having time to carry out their work and spend meaningful time connecting with tamariki was critical to ensuring wellbeing. One staff member said "I feel like I have the time to do the job properly. Management enables social workers to have the time to best serve the needs of those she works with."

Another said:

"Tamariki are visited at least twice per month... These are 'one on one' interactions with perhaps an outing as a treat. Try to undertake different engagements. We'll ask 'What's going on? Do you have any worries?'."

Staff credited having sufficient time to develop and build relationships with tamariki in care and their whānau, and caregivers as a major contributor to manaakitanga. One staff member said:

"It's important that families feel welcome around us, we take them under our wing to work with them, they need to know we are doing our best for them and their children."

Another said:

"Our statutory tamariki have been in our care for quite a few years, the social worker has built relationships with them. When they are putting together a plan, this relies a lot on the relationship. We try not to have clinical relationships... Our statutory kids know the office and the people that work here, so when they come here it is a comfortable and familiar place for them"

Tamariki with disabilities

We intended to examine Open Home Foundation's data about three NCS Regulations, to see if there are any differences between how tamariki with disabilities and tamariki without disabilities are supported:

- Support for tamariki relationships with peers and people in the community
- Support for tamariki to take part in sport and cultural activities
- Plans for foster parents that are tailored to tamariki needs.

As Open Home Foundation did not provide data on these measures, we could not monitor any differences between groups of tamariki.

Assessing life skills

Open Home Foundation's data does not show if it assesses skills for safe and positive relationships, for rangatahi transitioning to adulthood.

Open Home Foundation is reviewing all its policies on care transitions and transition to adulthood, to ensure they align with the NCS Regulations. Training on transitions will be available for all social workers in late 2021.

Supporting foster parents

Figure 15 shows Open Home Foundation's data for eight measures related to the support and information it provides foster parents, so they can meet their obligations under the NCS Regulations. 52

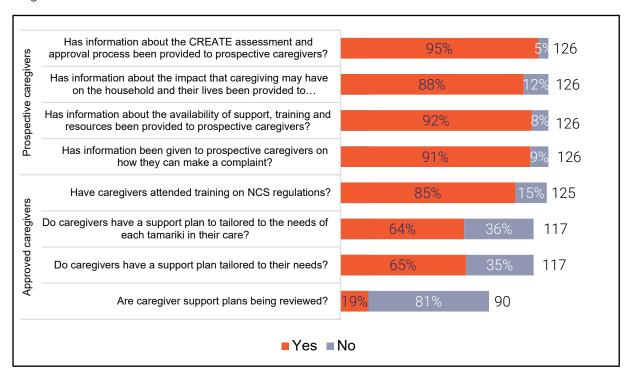


Figure 15 - Open Home Foundation responses to measures about support for foster parents

Note: This data comes from Open Home Foundation's administrative database, which contains data for each of its 126 foster parents. When there are fewer than 126 responses for a measure this reflects data for some foster parents being excluded. This may occur where the support plan is not yet required to be reviewed, or where the placement was a one off and brief in length.

Open Home Foundation's data shows it is giving prospective foster parents information to prepare them for their caregiving role, and 85 percent of foster parents have been trained on the NCS regulations.

In relation to foster parent support plans, Open Home Foundation's policy states:

A new Foster Parent Support Plan is to be developed within two weeks in response to each new plan for the child/tamaiti or young person/rangatahi. This is to ensure that the foster parents are able to meet the needs of the child/tamaiti or young person/rangatahi; and to identify any additional support or training that is required by the foster parent. The plan must be reviewed when the foster parents have experienced significant change in their circumstances, OR if there is an allegation that a child or young person in the Foster Parents care has suffered abuse or neglect.

The Open Home Foundation policy may signal that foster parent support plans only need to be reviewed in specific circumstances although NCS Regulation 61(1)(a) requires agencies to review them regularly.

Staff told us, "Foster parents are the foundation of our services. We need to look after them to enable them to look after our tamariki."

Open Home Foundation does not record whether approved foster parents have information on their roles and responsibilities to meet the needs of tamariki; information about why tamariki have come into care; the current plans for tamariki; information about general and immediate needs of tamariki; and information about support available to them related to caring for tamariki and meeting their needs. Although it does not record in its system whether these things have been done, it provided us with an extract from its policy:

A Foster Parent Support Plan is to be developed in response to each plan for the child/tamaiti or young person/rangatahi placed in their care. The purpose of a Foster Parent Support Plan is to:

- (a) ensure that the placement with the foster parent meets the needs of the tamaiti or rangatahi in the foster parents' care
- (b) identify any additional support or training that is required by the foster parent.

Whanaungatanga

Whānau connection is considered vital to overall Māori wellbeing. Relationships with whakapapa and whānau help establish collective identities; they also encourage people to take responsibility for maintaining the wellbeing of that collective group. ⁵³ Research shows that ongoing positive whānau and family connections help protect against various health-risk behaviours. Although the nature of relationships is changing, having the continuity of whānau connections and a secure emotional base is crucial for all tamariki and rangatahi, regardless of ethnicity to develop. ⁵⁴



"I am really strong about my culture and really love my culture. Because it's our culture and clothing and language and love kapa haka. I can't speak but can understand."

- Rangatahi

The outcome

Tamariki and rangatahi have strong, healthy and positive relationships and connections with their whānau, hapū, iwi and people around them.

The indicators

When people have developed a sense of whanaungatanga, we would expect to see evidence that indicates:

- tamariki and rangatahi feel they are a valuable part of a whānau or group
- tamariki and rangatahi have meaningful relationships and friendships and feel connected to supportive social networks
- tamariki and rangatahi are connected to, and strong in, their culture, language, beliefs and identity, including whakapapa and tūrangawaewae
- whānau, hapū, iwi, caregivers and parents have the skills and knowledge, and access to resources, to provide quality care for tamariki and rangatahi
- whānau are actively making plans to transition their tamariki and rangatahi back to stable homes where their basic needs will be provided

Oranga Tamariki

We asked Oranga Tamariki to provide data for 26 measures about whanaungatanga.⁵⁵ These measures focus on assessing tamariki and rangatahi needs for connection, identity and culture; planning to meet those needs; and providing support to meet these needs (see Figure 16). For more information on all the measures see Appendix 3a.

Oranga Tamariki provided data for 13 measures by analysing case files and five measures by reviewing answers to a caregiver survey and using its quality-practice tool. It did not have the information to answer the other 13 measures (see Appendix 3b).

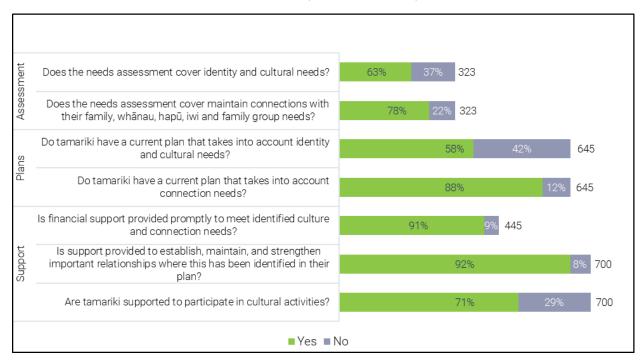


Figure 16 - Oranga Tamariki responses to measures about whanaungatanga

Note: When there are fewer than 700 responses for a measure, this reflects data for some tamariki being excluded. This may occur if the assessments for some tamariki were not current or the measure did not apply to some tamariki.

Meeting the cultural needs of tamariki

Many tamariki and rangatahi we spoke with talked about feeling proud of their culture. Others told us that they learn about their culture and language through their whānau, caregivers and others around them. Some tamariki and rangatahi know their whakapapa and because they live with whānau, they can connect with their iwi and marae. One rangatahi told us: "I am learning my connections to Māori culture — Aunty helping with this."

Another spoke about feeling "proud of my culture." One rangatahi told us they have a stronger experience of whanaungatanga, because they are living with a whānau caregiver: "They help me to stay connected with my iwi."

When culture and identity are overlooked, it can have negative consequences for tamariki and damage their connections with their whānau and culture. ⁵⁶ Oranga Tamariki data shows that 37 percent of current assessments and 42 percent of plans do not cover the identity and cultural needs of tamariki and rangatahi.

Individual tamariki and rangatahi talked to us about their experiences of disengagement from their culture. A theme emerged that having access to cultural connections and knowledge does not necessarily equate to tamariki and rangatahi actively accessing that knowledge and connection. One tamariki told us "I don't want to know [about my culture] anymore. I used to when I was younger" with another telling us that when their whānau offers opportunities to connect with their culture 'I don't go'.

From its analysis of tamariki Māori casefiles (see Figure 17) Oranga Tamariki told us that connections with, and contact arrangements for important members of whānau have been identified for 299 out of 350 tamariki Māori (85 percent). Steps have been identified in plans to meet their needs to establish, maintain or strengthen connection with whānau, hapū and iwi for 256 out of 317 tamariki Māori (81 percent). Also, from the analysis of the tamariki Māori casefiles (Figure 17), Oranga Tamariki told us 132 out of 350 tamariki Māori (38 percent) have *not* had their identity, cultural, connection and belonging needs assessed. Connections with, and contact arrangements for important members of hapū and iwi have not been identified for 197 out of 323 tamariki Māori (61 percent).

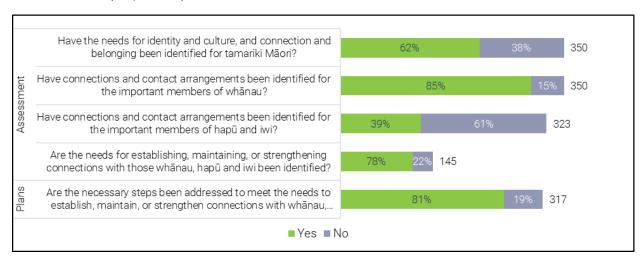


Figure 17 - Oranga Tamariki responses to measures about whanaungatanga for tamariki Māori

Note: Oranga Tamariki provided this data from its analysis of 352 casefiles of tamariki Māori. When there are less than 352 responses for a measure, this reflects data being excluded (for example, measures related to assessments are not answered if the assessment was not current) or that the measure did not apply to some tamariki, or data was not provided.

The importance of maintaining whānau connections was evident when we met with communities. Oranga Tamariki staff told us that when tamariki and rangatahi have positive relationships with whānau, the whānau can provide whanaungatanga. One staff member spoke about their approach: "For me, its building the relationship with the whānau first. One of my girls is starting to do this. We work with her mother's side first and then we will work with the dad's side. The benefit is that you learn so much information."

Most tamariki and rangatahi told us that they don't regularly get to spend time with their parents, siblings and whānau, including their grandparents, aunties, uncles and cousins. The main reasons they gave are that their social worker does not follow through with arranged or supervised visits, or whānau are still dealing with trauma that prevents them from visiting their tamariki. Some tamariki and rangatahi want more time with their whānau. Others feel completely disconnected from their parents and whānau. One rangatahi said: "They never gave me visits with my parents. [Oranga Tamariki] said they would. This has impacted my relationship with my parents now."

Some tamariki and rangatahi who do get to spend regular time with their whānau, told us these connections are enabled, because they are placed with whānau or in a home with their siblings. Some tamariki and rangatahi say they see their parents and whānau during planned visits arranged by their social worker.

Knowing the whakapapa whānau of tamariki Māori

During the reporting period, 68 percent of tamariki and rangatahi in Oranga Tamariki custody identify as Māori. Oranga Tamariki provided this data on whakapapa whānau for tamariki Māori.

- 4260 tamariki Māori (88 percent) have at least one iwi affiliation recorded
- 570 tamariki Māori (12 percent) have no iwi affiliation recorded.

Having opportunities to learn about culture and identity from whanau, hapu and iwi

In 2019/2020, Oranga Tamariki conducted a survey called Te Mātātaki.⁵⁷ In the survey it asked tamariki: "Do you get the chance to learn about your culture?" It found that:

- 75 percent of tamariki indicate they have opportunities to learn about their culture
- 40 percent of tamariki say they "definitely" have opportunities to learn about their culture
- 20 percent of tamariki indicated they do not have opportunities to learn about their culture
- 79 percent of tamariki Māori say they have the chance to learn about their culture, compared with 69 percent of tamariki non-Māori. 58

Oranga Tamariki staff talked with us about barriers that can get in the way of them supporting tamariki to learn about their culture and identify from whānau, hapū and iwi.⁵⁹ These barriers include not enough staff with specialist cultural knowledge and not enough time spent working with iwi to make connections.

Another barrier Oranga Tamariki staff spoke about is having plans for tamariki and rangatahi that are not led by tamariki or whānau. They mentioned the importance of staff being culturally competent and leaders valuing connection with whānau, to overcome this barrier. For example, one social worker said:

"The site manager's core focus is to have connectedness with the whānau. The child may not be placed with whānau, but the child must be connected. We have weekly meetings and discussions about whānau connectedness. For Māori tamariki, the child was born with a whakapapa, we ask the team, 'Where is it? Go find it.' At a minimum we expect a pathway."

We also talked with service providers about what enables them to support tamariki and rangatahi to maintain cultural connections and knowledge. One staff member said: "You cannot have mana tamariki if you cannot have mana whānau. We provide services to help whānau." Another spoke about the value of community connections. They said, "The nannies that have been steeped in

connection; they'll bring the waiata to their tamariki's ears. It makes them feel connected, safe. It makes them feel loved." One described a lack of whānau connection as "overwhelming", and another told us often there is: "...mixed messaging. The parent is really yearning to see their child. They're referring to the FGC plan and then the parent is talking to us and saying 'Oranga Tamariki are saying they're not available for a visit but the plan is there."

Many caregivers spoke about how important it is for them to encourage tamariki to connect with their whānau and culture, and to help make those connections. In practice, this includes caregivers establishing or maintaining regular contact with whānau; involving whānau by sharing photos and updates; and connecting tamariki to their marae. One caregiver said:

"They have contact with their biological parents monthly. I support them and supervise the visits. It has been the best thing for the kids. Their older half-sister is also connected to the children, and we have regular contact. I also have established contact with their paternal grandparents, and they have visits."

Another caregiver told us about how they maintain connections with whānau: "I keep the parents and paternal grandparents involved in the tamariki's upbringing, send them photos and updates."

Not all tamariki in care know about their whānau or have whakapapa connections. One caregiver told us:

"I had a child and I asked him who his mother was. He said, 'Which one? I have had lots of mothers.' OT gave me some names, and I was on my computer, and I was looking, looking, looking. He was 13 and, even with disabilities, if you don't know who you are, that's not ok."

Some caregivers said that when they don't have consistent communication or support from their social worker, or they are not empowered to help plan for the tamariki they care for, it gets in the way of them supporting tamariki in their care.

Whānau told us that they can have positive experiences of whanaungatanga when they are supported to have regular and meaningful engagement with their tamariki, and when they know their tamariki are connected with others in their whānau. When they feel the wellbeing of tamariki in their care is compromised, it creates a barrier to experiencing whanaungatanga. They refer to this as "uplift trauma and "split up" trauma.

Using transition assessments and plans to help rangatahi Māori maintain and strengthen their cultural identity and connections with whānau

Using its Transition to Adulthood QPT, Oranga Tamariki tells us that 87 out of 115 transition plans (76 percent) contain information about how rangatahi would be supported to continue developing their sense of identity, including their cultural identity. Older rangatahi are more likely to have a life-skills assessment and transition plan than younger rangatahi, which is understandable, as the plans relate to rangatahi transitioning to adulthood.

Oranga Tamariki also tells us that 51 out of 73 transition plans (70 percent) for rangatahi Māori include actions and support to help them establish, maintain or strengthen their cultural identity and connections to whānau, hapū and iwi. Tamariki and rangatahi who identify as Māori/Pacific peoples are less likely to have a transition plan: 41 percent have a plan compared with 50 percent of other rangatahi. 60

Supporting tamariki with disabilities

For three of the NCS Regulations, we compared the data for tamariki with disabilities and tamariki without disabilities to see if there are any differences between how they are supported. Oranga Tamariki data shows that:

- the needs assessment covered maintaining connections (little difference found based on 323 cases)
- the plan addressed connections (little difference found based on 645 cases)
- support was provided to establish, maintain, or strengthen important relationships (little difference found based on 700 cases).

While we found little difference in support for tamariki with and without disabilities, these findings are treated with care as they were based on small numbers and were not tested for significance.

Barnardos

Barnardos assesses all rangatahi in its custody. The assessment covers needs related to their identity, culture and connections with whānau, hapū, iwi and family groups. This assessment is developed with rangatahi, and it is revisited.

Plans for rangatahi have a mandatory part on how rangatahi will stay connected with their whānau, hapū, iwi and family groups; culture; and identity. Rangatahi lead conversations with their social worker about how they want to maintain these connections.

Barnardos supports caregivers to learn te reo Māori through online modules. Barnardos also supports them to form relationships with the whānau of rangatahi they care for, by visiting each other's homes, and helping with communication and logistics. When contact with whānau is limited, social workers work with caregivers and other agencies to help access and collate and information about whakapapa. Social workers also help caregivers and rangatahi understand this knowledge and the importance of connections.

When rangatahi are transitioning to independence, Barnardos informs them of their options to connect with kaupapa Māori organisations that can support them with their transition.

Dingwall Trust

Dingwall Trust reports that most of the measures about whanaungatanga do not apply to the rangatahi in their care. The measures that are relevant are those related to caregivers receiving information about whānau and contactla arrangements. Dingwall Trust routinely provides caregivers with information about the need for tamariki to have connections with their whānau, and about the rights of legal guardians. It does not provide caregivers with information about whānau and plans for ongoing contact with whānau. Dingwall Trust identified the need to improve its caregiver support plans and is currently working on these improvements.

Open Home Foundation

We asked Open Home Foundation to provide data for 26 measures about whanaungatanga. Using its administrative data and a sample of responses from its Better Off survey, Open Home

Foundation provided data for nine measures for each of the 93 tamariki in its custody (see Appendix 2a). Open Home Foundation did not have data to respond to the other 17 measures (see Appendix 2b).

Open Home Foundation data shows that 54 out of the 93 tamariki in its custody have a current CANS assessment and 100 percent of those assessments cover identity and cultural needs. Figure 18 shows Open Home Foundation's responses to four measures related to assessments, plans and support for tamariki,⁶¹ which contribute to whanaungatanga.

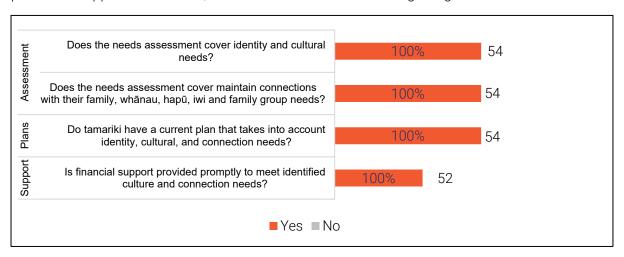


Figure 18 - Open Home Foundation responses to measures about whanaungatanga

Note: This data relates to 54 tamariki that have a current CANS assessment. When there are fewer than 54 responses for a measure, this reflects that there was no financial support required.

Open Home Foundation told us that it has provided information to 116 out of 126 prospective foster parents (92 percent) about the need for tamariki to connect with their whānau, hapū, iwi and family group; how to facilitate these connections; the rights of legal guardians; and how to preserve these legal rights.

Being connected with whānau is important for the rangatahi we met with. They told us that mostly, Open Home Foundation social workers have supported them in connecting with whānau. One said "Open Home helps me stay connected to Nana. I can see her whenever I want to see her, but she has bad health, so I take that into consideration."

Our korero with rangatahi highlighted the role that whanau have to enable connections. It also revealed the importance of having the support of both the Open Home Foundation and Oranga Tamariki to achieve these connections and strengthen their identity as rangatahi Māori. One rangatahi told us:

"I am learning my connections to Māori culture, Aunty [is] helping with this."

Another said:

"[My] littlest brother remained in [another town] with Grandmother. It's been a few months but if I want to see him, I tell Aunty and she talks to OT."

Meeting the cultural needs of tamariki Māori

Open Home Foundation has 38 tamariki Māori in its custody (this constitutes 41 percent of the tamariki in its custody). Open Home Foundation provided data for three of the 16 measures that are specific to tamariki Māori. ⁶² From Open Home Foundation's data, we learn that:

- 22 out of 38 tamariki Māori (58 percent) have a current CANS assessment
- all tamariki Māori have had their identity, culture, connection and contact needs identified and steps are in place to address them.

Eleven of the rangatahi that responded to Open Home Foundation's 2021 Better Off survey identify as Māori. The survey results found:

- 7 out of 11 rangatahi Māori agree or strongly agree with the statement: "I feel connected to my culture"
- 7 out of 11 rangatahi Māori agree or strongly agree with the statement: "I know my whakapapa"
- 8 out of 11 rangatahi Māori agree or strongly agree with the statement: "I have someone I can ask about my whānau, hapū and iwi"
- 10 out of 11 rangatahi Māori agree or strongly agree with the statement: "OHF helps me to have positive contact with my whānau."

These findings are based on small numbers and were not tested for significance. Nevertheless, they show Open Home Foundation has the opportunity to build on what it is doing to improve experiences for all tamariki and rangatahi Māori in its custody.

Staff shared examples where tamariki and rangatahi were supported to connect with whānau and strengthen their cultural identity.

"We have people going to whānau and asking them if they are getting the services that they need."

"[Tamariki] has been supported to maintain cultural connections. We have supported grandfather, who is Pākehā, to maintain connections to her Māori culture – teaching reo, understands hapu, iwi, knows her marae. We started early so she always knows it's who she is."

Staff acknowledged the importance of whanaungatanga. They said more training in cultural competence was needed, so they could better understand whakapapa and engage more meaningfully with iwi – one person told us "No work being done on engaging with local iwi."

Another staff member said "Re whakapapa for Māori tamariki – unsure. [There is a] lack of bicultural/cultural competence training in Open Home Foundation. Used to be but stopped. Maybe some in Open Home Foundation's induction, [but it's] not good enough." We also heard from one person:

"Staff are predominantly Pākehā. Would like to have a greater proportion of Māori staff but hard to recruit. No Māori or Pasifika staff in Wellington region."

Supporting tamariki and rangatahi with disabilities

For three of the NCS Regulations, we compared the data for tamariki with disabilities and tamariki without disabilities to see if there are any differences between how they are supported. Open Home Foundation data found that:

- the needs assessment covered maintaining connections (little difference found, based on 54 cases)
- the plan addressed connections (little difference found, based on 54 cases)
- support was provided to establish, maintain, or strengthen important relationship (little difference found, based on 54 cases).

While we found little difference in support for tamariki with and without disabilities, these findings are based on small numbers and were not tested for significance.

Rangatiratanga

Tamariki need to have self-determination and be empowered to be kia māia and feel capable to make decisions about their lives. According to the Human Rights
Commission, "Self-determination is not only effective in achieving success for Māori, as shown by te kōhanga reo, it is a human right affirmed in the United Nations Declaration on The Rights of Indigenous Peoples." The Human Rights Commission goes on to say, "The right to self-determination reinforces the guarantee of tino rangatiratanga under te Tiriti." 63 64 65

Research suggests that environments that support tamariki to develop autonomy are associated with tamariki having greater internalisation, motivation and self-regulation and better psychological health and wellbeing. These types of environments are considered vital for preventing ill-being and promoting wellbeing. ⁶⁶

"I think I have a say in things in my life. Aunty listens to me and what I want." - Rangatahi

The outcome

Tamariki and rangatahi, alongside their whānau, are involved, empowered and supported to become self-determining and leaders of their own lives.

The indicators

When people have developed a sense of rangatiratanga, we would expect to see evidence that indicates:

- tamariki and rangatahi are willing participants and contribute positively in different environments
- tamariki and rangatahi, and their whānau, are engaged and feel their voices, opinions and perspectives help to shape their plans, aspirations and pathways to success
- tamariki and rangatahi are engaged in, and able to share, their culture and cultural activities with others
- tamariki and rangatahi show strength and courage and are positively building on their potential
- tamariki and rangatahi are open to others' support, to help them empower themselves.

Oranga Tamariki

We asked Oranga Tamariki to provide data for 44 measures about rangatiratanga,⁶⁷ including two measures specific to tamariki Māori and one specific to tamariki with disabilities. These measures included whether tamariki and rangatahi are given plans they understand, receive pocket money, if they are explained their rights (including the complaints process) and whether important whānau members are regularly informed about the progress tamariki are making.

Oranga Tamariki provided data for 20 measures by analysing casefiles and reviewing structured data⁶⁸ and its QPT (see Appendix 3a). Oranga Tamariki responses are shown in Figure 19.

Oranga Tamariki did not have data to respond to 24 measures (see Appendix 3b).

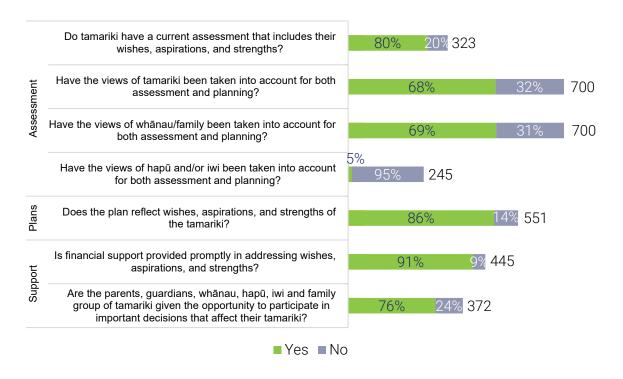


Figure 19 - Oranga Tamariki responses to measures about rangatiratanga

Note: When there are fewer than 700 response for a measure, this reflects data for some tamariki being excluded. This may occur if the assessments for some tamariki were not current, or the measure did not apply to some tamariki.

Informing tamariki and rangatahi about their rights

Tamariki and rangatahi in care, and their whānau, need to know what their rights are and how to express themselves. To experience rangatiratanga, they need to know they are listened to. The NCS Regulations highlight that tamariki and rangatahi have a voice in decisions that affect them. They must be informed of their rights and supported to be self-determining.

NCS Regulation 66(e) requires agencies to provide and explain information about advocacy services — including Māori, iwi or kaupapa Māori services — and how to access them, to tamariki who enter care. The agencies must do this in ways that are appropriate to their age, development, language and disabilities.

Oranga Tamariki utilises VOYCE Whakarongo Mai (VOYCE)⁶⁹ to inform tamariki and rangatahi in care about advocacy services that can support them. VOYCE exists to: "...amplify the voices of these children and ensure that they are heard – so as to positively influence their individual care and to collectively affect change in the wider care system." The Oranga Tamariki Te Mātātaki survey shows that 46 percent of 1545 tamariki and rangatahi who were surveyed know about VOYCE, and 29 percent know how to contact the service. The oranga Tamariki and rangatahi who were surveyed know about VOYCE, and 29 percent know how to contact the service.

When we spoke with tamariki and rangatahi some knew about, and could exercise, their rights. Most talked about ways their rights are not upheld, for example, when they are not involved in their care planning; do not get things they are entitled to; have their privacy broken; or feel forced to do things they have the right to say no to. One rangatahi told us that they feel isolated in their placement as they are "mocked" by their caregivers for holding different religious beliefs. Another said, "No one is listening to me. Who is giving rights to kids?" Overall, we heard tamariki and rangatahi say they feel powerless to change their circumstances.

Involving tamariki in planning and decision making

Oranga Tamariki data does not show whether tamariki are informed of why they have been brought into care; or if someone has explained how their whānau, hapū or iwi will be involved in decisions about their care.

When speaking with Oranga Tamariki staff about involving rangatahi in planning and decision making, and how tamariki and rangatahi voices are heard at family group conferences, and during assessments and care planning, some told us that it can be hard to engage rangatahi. One staff member said. "All About Me plans are hard to do for a teenager, they're not interested. They're not meaningful for them." A social worker said: "Some rangatahi don't want to have a voice in court or FGC. They clam up, they panic. It is the whole fear of making a mistake. The judge will ask, 'Who came into court with you?' They are quiet."

Oranga Tamariki casefile review shows that the wishes, aspirations, and strengths of tamariki were recorded in 80 percent of assessments and 86 percent of plans. The views of whānau, and hapū or iwi, were considered in tamariki assessments *and* plans in 69 percent and five percent of cases respectively. In 91 percent of cases, financial support was provided promptly to address wishes, aspirations, and strengths.

Oranga Tamariki compliance with these measures does not consistently match the varied experiences of tamariki and rangatahi we spoke with. Some feel they can have a say in *day-to-day decisions*, such as being able to attend camp, while others say they have a say in *big decisions*, such as where they will live and what is in their care plan. One rangatahi said their social worker "lets me make my own decisions." Others spoke about the support they get from their caregivers, or how they have a say in moving placements.

Most tamariki and rangatahi say they often do not know about changes happening in their lives, including where they will be living. This is usually because their social workers do not keep them informed. One rangatahi said, "I have no idea when they move me around," and another said, "I don't know about my plan. I didn't get to choose who I lived with."

Tamariki and rangatahi spoke to us about how it feels when they aren't listened to. One rangatahi said, "I feel like I don't get a voice, because they don't listen and do anything. Sometimes I feel heard, sometimes not. We are not heard on the really serious things." When describing their experiences, and those of others around them, another rangatahi said, "This system is ruining this generation of kids. This mental abuse is causing depression. Anger issues. It's really affecting us a lot. ...we can make that system better. And they need our voices. The longer we wait, the worse it's going to get."

Data from Oranga Tamariki's case file review shows that in 69 percent of cases of those with current plans, whānau views have been considered in assessments and plans and, in 76 percent of cases, parents, guardians, whānau, hapū and family groups have had the opportunity to participate in important decisions that affect their tamariki.

To prepare this report, we spoke with a small number of whānau members. As we speak with more whānau, we will be interested to hear about the quality of these engagements and to validate Oranga Tamariki data. Whānau members we did speak with told us that they feel their rangatiratanga is not upheld or acknowledged when they are left out of decisions about their tamariki. They describe barriers to experiencing rangatiratanga as feeling judged, disregarded, untrusted and uninformed by staff. One whānau member says they "... want to know about haircuts, clothes, schools and the town they live in" and what religion their tamariki is exposed to.

Another spoke about feeling judged:

"I feel like in the past they were taking the kids side without searching to see if the kids were telling the truth, instead of bringing us together to figure out a plan. I feel like I was being judged and [they] didn't give me a chance. I just wanted to know what I did wrong... But what hurt me is that I felt like I was being judged. Like I was not good enough."

Three factors enable whānau to experience rangatiratanga: being included, being informed and feeling listened to. Whānau talk about being able to go to meetings at school, and how it is a "blessing" to have a cultural advisor and social worker there to help and listen.

Involving tamariki in planning transitions to new care placements

Of the 700 casefiles that Oranga Tamariki reviewed, 128 tamariki (18 percent) had a planned care transition. When changes to tamariki placements are planned, tamariki, whānau and other important people can get involved in the planning and decision making. Transitions can be disruptive and risky, so helping tamariki understand the reason for moving placements is an important part of reducing their vulnerability. This is especially true when the placement changes are unplanned.

Oranga Tamariki data shows:

- in 79 percent of cases, the views of whānau are included in decisions
- in 16 percent of cases, the views of hapū, iwi and extended family are included in decisions
- in 45 percent of cases, tamariki know why planned transitions are happening
- in 45 percent of cases, tamariki are encouraged or helped to get involved in planning transitions.

Oranga Tamariki could not provide data on whether tamariki know why unplanned transitions are happening, although it could give us its relevant policies and practice guidance. Further details are available in Appendix 10.

Assessing life skills and providing support to transition to adulthood

During the developmental stage between adolescence and emerging adulthood, rangatahi need to learn new life skills to gain self-efficacy and self-determination. Of the 732 rangatahi, aged 16 and 17 years old, who were eligible for transition services, Oranga Tamariki reviewed a sample of 268 cases. Half of this sample (136) had not had a life skills assessment; 9 percent of the sample (23) had a complete assessment. Oranga Tamariki data does not capture whether the life-skills assessment includes sexual or gender identity.

The Oranga Tamariki Practice Centre states that, to assist rangatahi to prepare for leaving care, "We must ensure that any assessment is youth-centred, comprehensive, holistic, strength-based, culturally responsive and trauma-informed." NCS Regulation 76 states that agencies must help rangatahi to obtain documents that will help them navigate adulthood. By using its QPT, Oranga Tamariki reports that 51 percent of the rangatahi it reviewed received some support with:

- obtaining official documents (such as a birth certificate) to get a passport or driver license
- getting an IRD number or bank account
- setting up online government verification, to access government services after they leave care.

Research suggests that rangatahi in Aotearoa want to learn about civic duties and have a say in what happens in society. ⁷³ NCS Regulation 76(d) specifies that rangatahi must be given information so that they know how to enrol and take part in the electoral process. By reviewing 268 cases using its QPT, Oranga Tamariki reports that 2 percent of rangatahi are enrolled to vote. ⁷⁴ Oranga Tamariki says it was particularly hard to find evidence of this information in its administrative database.

Supporting Māori and non-Māori tamariki and rangatahi

For four of the NCS Regulations, we compared the data for tamariki Māori and non-Māori to see if there are any differences between how they are supported. Oranga Tamariki data shows that:

- tamariki have a current assessment that includes their wishes, aspirations, and strengths (little difference based on 323 cases)
- the views of tamariki are considered for both assessment and planning (difference found based on 700 cases: 64 percent Māori, 72 percent non-Māori)
- the views of family and whānau are considered for both assessment and planning (difference found based on 700 cases: 64 percent Māori, 74 percent non-Māori)
- parents, guardians, whānau, hapū, iwi and family groups are given an opportunity to participate in important decisions that affect their tamariki (no difference found based on 372 cases).

The Oranga Tamariki data does not show whether tamariki Māori know about their rights to participate in their culture, language and religion, or whether caregivers understand the identity and culture preferences of tamariki.

Supporting tamariki and rangatahi with disabilities

For the same four NCS Regulations, we compared the data for tamariki with disabilities and tamariki without disabilities, to see if there are any differences between how they are supported. Oranga Tamariki data shows:

- tamariki have a current assessment that includes their wishes, aspirations, and strengths (little difference based on 323 cases)
- the views of tamariki are considered for both assessment and planning (difference found based on 700 cases: 82 percent tamariki and rangatahi with disabilities, 65 percent tamariki and rangatahi without disabilities)
- the views of family and whānau are considered for both assessment and planning (difference found based on 700 cases: 80 percent tamariki and rangatahi with disabilities, 66 percent tamariki and rangatahi without disabilities)
- parents, guardians, whānau, hapū, iwi and family group are given an opportunity to participate in important decisions that affect their tamariki (difference found based on 372 cases: 68 percent tamariki and rangatahi with disabilities, 78 percent tamariki and rangatahi without disabilities).

Oranga Tamariki data does not show whether tamariki with disabilities are informed of their rights for support with their disability.

While we did find differences in support for tamariki Māori and tamariki with disabilities, these findings are based on small numbers and were not tested for significance.

Barnardos

Barnardos reports that rangatahi are actively involved in their assessments, plans and reviews. Barnardos records tamariki views separate to its assessments. It tells us that this ensures that tamariki views are heard more clearly and included in their plans and as part of a feedback cycle. Where possible, Barnardos involves whānau in planning, and in implementing and reviewing plans. It involves all relevant parties (this includes whānau, caregivers, and other professionals) in creating the initial plan and reviewing it, at least every six months. This is done through plan review meetings, which are sometimes chaired by tamariki themselves.⁷⁵

Barnardos reports that rangatahi assertively express their feelings to caregivers and Barnardos staff about contact with whānau; exploring their identity; and expressing what they like and don't like. Rangatahi know who their 'lawyer for child'⁷⁶ is, how to contact them, and how and when to meet them.

Dingwall Trust

Dingwall Trust reports that it focuses strongly on the rights, views and wishes of rangatahi and has achieved all the rangatiratanga measures. It:

- conducts assessments that include the wishes, strengths and aspirations of rangatahi
- includes views of rangatahi in assessments, and explains them in ways that rangatahi understand
- provides rangatahi with pocket money
- provides rangatahi with information about their rights and how to access advocacy services such as VOYCE
- maintains records about rangatahi
- assesses rangatahi life skills, so it can support them to transition to independence.

Measures about tamariki Māori having opportunities to participate in their culture, language and identity, and tamariki with disabilities receiving information about resources and support, do not apply to Dingwall Trust.

Open Home Foundation

We asked Open Home Foundation to provide data for 44 measures about rangatiratanga: 41 general measures; two measures specific to tamariki Māori; and one measure specific to tamariki with disabilities. Open Home Foundation used its administrative database, OSCAR and the 2021 Better Off Survey to provide data for 14 measures for each of the 93 tamariki in its custody. It did not have the data for the other 30 measures, (see Appendices 2a and 2b for more details).

Informing tamariki and rangatahi about their rights

Figure 20 shows Open Home Foundation's data for measures about informing prospective and approved foster parent about the rights of tamariki and rangatahi.



Figure 20 - Open Home Foundation responses to measures about informing foster parents of the rights of tamariki and rangatahi

Note: This data comes from Open Home Foundation's administrative database, which contains data for each of its 126 foster parents.

The results of the Open Home Foundation's 2021 Better Off survey show 17 out of a total of 19 rangatahi respondents agree or strongly agree with the statements: "My Open Home Foundation Social Worker explains things in a way I can understand" and "My Open Home Foundation social worker listens to what I have to say;" and 13 out of a total of 19 rangatahi respondents agree or strongly agree with the statement: "I am able to have a say in decisions and plans about my life."

Involving tamariki in planning and decision making

Figure 21 shows Open Home Foundation's data for measures related to assessment, planning and decision making.

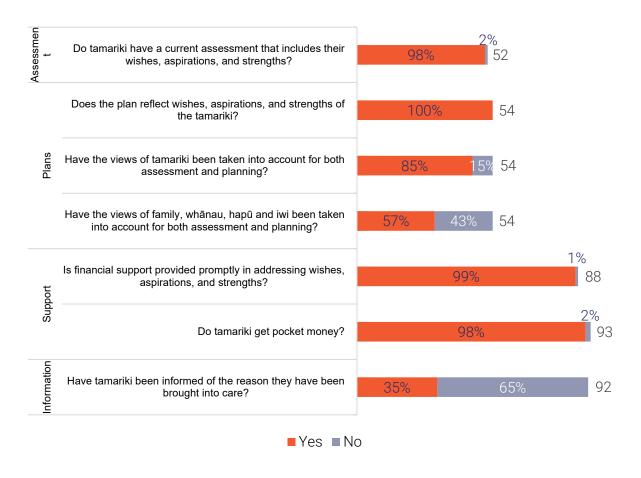


Figure 21 - Open Home Foundation responses to measures about involving tamariki in planning and decision making

Note: Where totals do not add up to 93 it may be due to either where the information is not known due to being excluded (for example assessment that are not current, if tamariki are non-verbal) or not appliable (for example where a need is not identified).

The data shows that the wishes, aspirations and strengths of 51 tamariki (98 percent) are reflected in a current assessment, and for 54 tamariki (100 percent) are reflected in their plan.

The results of Open Home Foundation's 2021 Better Off survey show 13 out of a total of 19 rangatahi respondents agree or strongly agree with the statement: "I am able to have a say in decisions and plans about my life."

We heard this sentiment during our visits. For example, we were told, "Whānau had a say in the move to [town]. I felt I had a say in moving to [town] too "and "I think I have a say in things in my life. Aunty listens to me and what I want."

Open Home Foundation tells us that it encourages practitioners to use practice tools like three houses⁷⁸ or bear cards⁷⁹ during CANS assessments and when making plans. These tools help tamariki understand and take part in assessments and planning, and ensure their wishes, aspirations and strengths are captured.

Open Home Foundation data shows that the views of family, whānau, hapū and iwi were not taken into account in assessments *and* plans of 23 out of 54 tamariki (43 percent). The results of its 2021 Better Off survey show four out of five parents of tamariki in Open Home Foundation's custody who responded to the survey agree or strongly agree with the statements: "I am consulted about significant decisions in my child/children's lives e.g. changes of school, major medical events" and "I am kept well informed when things change in my child/children's lives."

Open Home Foundation policy included using words and pictures to explain to tamariki why they have been brought into care. The policy states: "Words and pictures can be a lengthy process that requires cooperation from the parents, although in some cases exceptions to policy are sought due to parents not being able to engage." While Open Home Foundation data shows 65 percent of tamariki were not informed of the reason they were brought into care, in the 2021 Better Off survey 17 out of 19 rangatahi respondents agree or strongly agree with the statement: "I understand why Open Home Foundation is working with me."

Staff shared examples of the opportunities they provided to include and amplify tamariki and whānau voices, ensuring their input is included in key decisions about their care. One staff member said "Get him to attend the multidisciplinary team meeting, let him know he needs to be involved in the meetings so he can share in the decision making about his life. He is getting better at putting his voice out there and getting his needs addressed." Another told us:

"We work hard to build relationships where there is trust and open communication. We are privy to things that the OT social worker may not be. I check whether [rangatahi] are happy for me to share what they want with OT. With [tamariki], I build the relationships and learn their cues and levels of comfortability with different people. I keep in touch with... wider whānau to also make sure things are tracking ok."

Open Home Foundation data also tells us that:

- 87 out of 88 tamariki (99 percent) receive prompt financial support to address their wishes, aspirations and strengths
- 91 out of 93 tamariki (98 percent) receive pocket money directly or via their foster parent.

Supporting Māori and non-Māori tamariki and rangatahi

For three of the NCS Regulations, we compared the data for tamariki Māori and non-Māori to see if there are any differences between how they supported. Open Home Foundation data shows that:

- tamariki have a current assessment that includes their wishes, aspirations, and strengths (little difference based on 52 cases)
- the views of tamariki are taken into account for both assessment and planning (difference found based on 54 cases: 82 percent Māori, 88 percent non-Māori)
- the views of family, whānau, hapū and iwi are taken into account for both assessment and planning (little difference based on 54 cases).

Supporting tamariki and rangatahi with disabilities

For the same three NCS Regulations we compared the data for tamariki with disabilities and tamariki without disabilities to see if there are any differences between how they are supported. Open Home Foundation data shows that:

- tamariki have a current assessment that includes their wishes, aspirations, and strengths (little difference based on 52 cases)
- the views of tamariki are taken into account for both assessment and planning (difference found based on 54 cases: 95 percent tamariki and rangatahi with disabilities, 78 percent tamariki and rangatahi without disabilities)
- the views of family, whānau, hapū and iwi are taken into account for both assessment and planning (difference found based on 54 cases: 64 percent tamariki and rangatahi with disabilities, 53 percent tamariki and rangatahi without disabilities).

While we did find differences, these findings are based on small numbers and were not tested for significance.

Handling complaints and grievances

The agencies are required to provide people with an effective process they can use to raise concerns. An effective complaints process is one that is safe, responsive and accessible for tamariki and rangatahi in care, their whānau and others who want to raise concerns.

Residences are secure facilities designed to care for tamariki and rangatahi whose behaviour is a serious risk to themselves or others. Tamariki and rangatahi in residences must also have access to a complaints process that is safe. This is called a grievance procedure.

We have assessed the number and types of complaints and grievances people made between 1 July 2020 and 30 June 2021. We have also reviewed the quality of the agencies' complaints processes and grievances procedures, to understand how safe and easy they are for people, particularly tamariki and rangatahi, to use.

Oranga Tamariki

For Oranga Tamariki there was a total of 2952 issues identified from 1400 complaints and 72 compliments about 100 areas.

Tamariki and rangatahi made few complaints

When tamariki and rangatahi experience rangatiratanga, they are engaged and feel their voices, opinions and perspectives help shape their plans, aspirations and pathways to success.

The NCS Regulations require the agencies to make sure tamariki and rangatahi are supported to make complaints, provide feedback or raise concerns.

During the reporting period, 7056 tamariki and rangatahi were in Oranga Tamariki care. During the same period 14 complaints and one compliment were recorded from tamariki and rangatahi.

Tamariki and rangatahi in care made up one percent of the people who made complaints and 1.4 percent of those who gave compliments.

Oranga Tamariki gave us details of how it is improving its complaints process, to make it easier for tamariki and rangatahi to use. It expects to implement these improvements next financial year. If successful, we would expect to see an increase in the number of complaints and compliments recorded from tamariki and rangatahi. We will monitor the rate of engagement that tamariki and rangatahi have with the complaints process.

Whānau of tamariki and rangatahi made the most complaints to Oranga Tamariki

Whānau⁸¹ raised 79 percent (2332 out of 2952) of the issues received by Oranga Tamariki during the reporting period, (parents accounted for 66 percent). Of the 110 compliments Oranga Tamariki received, 32 percent were made by whānau (parents made 15 percent of compliments).

Whānau concerns covered access to their tamariki, care placements, standards of care, communication and fairness of treatment.

Most issues from whānau were about fair treatment.82 Of these 482 were made by parents; 127 by grandparents; 81 by other whānau; and 44 by caregivers. The largest proportion of the issues about fair treatment fall into the "concerns not addressed" (28 percent) and "lack of support" (27 percent) sub-categories.

Of the 1530 issues from parents, 26 percent were about communication.⁸³ Similarly high proportions from grandparents, whānau caregivers and other whānau members concerned communication.

Non-whānau caregivers raised the same concerns to Oranga Tamariki as whānau, tamariki and rangatahi. Most of their issues (32 percent) were about fair treatment, with the largest proportion of these focused on "lack of support." Concerns about communication were also the subject of many issues (28 percent); almost half of these focused on "no or delayed response."

Professionals also made complaints

Oranga Tamariki defines professionals as education or health professionals, lawyers and other professionals involved in the lives of tamariki and rangatahi. Professionals complained mostly about communication and fair treatment.

Oranga Tamariki recorded 114 contacts with professionals; 87 percent were making a complaint and 27 were giving a compliment. Forty five percent (39) making a complaint were recorded as "other professional." The Oranga Tamariki complaints system does not breakdown "other professionals." Oranga Tamariki has told us it is changing this reporting category, so it is more accurate. Education professionals made the next highest proportion of complaints (43 percent).

Grievances

There are four youth justice and five care and protection residences across Aotearoa. Residences are secure facilities. Oranga Tamariki operates eight residences and Barnardos manages one care and protection residence.

Between 1 July 2020 and 31 March 2021, of the 290 grievances 63 percent were made by rangatahi at youth justice residences and 37 percent were made by tamariki and rangatahi at care and protection residences. Over half of all grievances came from one care and protection residence and one youth justice residence.

Of the 11 grievance categories, 45 percent of grievances from youth justice residences and 50 percent of grievances from care and protection residences were classified as "staff other." A further 19 percent of grievances from youth justice residences were classified as "general other."

Oranga Tamariki does not break down these categories, so the grievances do not help us understand what would improve experiences for tamariki and rangatahi in residences.

After investigating the grievances, Oranga Tamariki recorded 38 percent as justified and 62 percent as unjustified.

Oranga Tamariki says the grievance procedure needs to be safer

Under current arrangements, tamariki and rangatahi are required to ask staff members for a form to make a grievance. These are the same staff that manage the day to day living of tamariki and rangatahi, including them being able to leave residences, have visitors and make phone calls. Staff also manage the grievance procedure. Although staff who may be the subject of a grievance are not involved in the investigation, Oranga Tamariki accepts that its current grievance procedure does not allow tamariki and rangatahi in residences to make complaints independent of staff.

An issue also raised is that rangatahi have spoken to Oranga Tamariki staff about not wanting to be "narks", which may prevent them from making a grievance. Oranga Tamariki has advised that they are developing a project to make the grievance procedure youth-friendly, timely and safe to use. This includes how it records the types of grievances that are made, so it can gain insights about the nature of the complaints.

Oranga Tamariki anticipates that improving the grievance procedure for residences will begin in 2021/2022. This will be an area of future focus for the Monitor.

Barnardos

Barnardos reported that it had received one complaint during the reporting period. This was made by a caregiver; however, the complaint did not relate to Barnardos.

Barnardos told us that tamariki, whānau, and caregivers are all given a brochure that explains the process to make a complaint. Barnardos also encourages them to give general feedback, either directly to their key contact person or to a general email address.

Barnardos is developing a register for complaints and compliments to ensure a consistent approach is used by all Barnardos Care Services. Currently, complains and compliments are either kept in an electronic register managed by service managers or team leaders or they are filed in the relevant tamariki or rangatahi casefile.

We were unable to determine if Barnardos provides a child-friendly complaints process that tamariki in care can access.

Dingwall Trust

Dingwall Trust reported that they did not receive any formal compliments or complaints in relation to the rangatahi in their care during this reporting period.

Dingwall Trust provided the Monitor with their complaints and compliments policy which outlines the steps staff take to resolve complaints. Dingwall trust reported that their operational policies and procedures are in the process of being realigned and the complaints and compliments policy has been identified as a priority to review. It is intended that this approach will ensure tamariki, rangatahi and whānau participants are aware of their rights, including the right to give feedback and make complaints with the complaints process being aligned to this approach. To further enhance this, there will be ongoing mechanisms in place to ensure there are multiple opportunities and avenues to provide feedback.

Open Home Foundation

Open Home Foundation received two complaints during this reporting period. Both complaints were made by parents of tamariki who are in Open Home Foundation's care. The complaints related to fair treatment and poor communication.

Open Home Foundation's complaints policy and procedure describes the steps that staff take to ensure complaints are dealt with effectively, fairly and promptly.

The policy requires that staff provide tamariki, rangatahi and whānau with a brochure about how to make a complaint when they first become involved with Open Home Foundation.

The complaints process requires complaints to be resolved respectfully and without delay. Open Home Foundation's response must address every aspect of the complaint to ensure it is completely resolved for the complainant.

We were unable to determine if Open Home Foundation provides a child-friendly complaints process that tamariki in care can access.

Aroha

Everyone needs love and safety to thrive. Aroha is vital for rangatahi to develop emotionally. They need the adults around them to show aroha and demonstrate they are committed to their wellbeing. To minimise the risk of adversity, it is crucial that caregivers, whether whānau or non-whānau, can access the resources they need to provide a safe, nurturing and stable environment for tamariki and rangatahi. Without aroha, tamariki risk experiencing poverty and poor health in the future. 84

Many parts of the NCS Regulations reflect aroha, including supporting tamariki to live in safe and stable homes. All tamariki and rangatahi need consistent, nurturing relationships — they rely on adults around them to do the right things to keep them safe. Tamariki and rangatahi in care are particularly vulnerable when they transition from one placement to another, or when they return home. To make sure caregivers have what they need to provide the best care possible, they also need the right supports.

While the NCS Regulations do not require agencies to measure the stability of care, being compliant with the NCS Regulations contributes to stability of placements. For example, when caregivers are well-informed and supported, and tamariki needs are assessed and being met, placements are more likely to be stable.

In this section, we look at what we've learnt about how tamariki and rangatahi in care experience aroha. The agencies tell us that their genuine care for tamariki and rangatahi in care is the main way they help them experience aroha.

As one social worker says, "Some of our young people aren't getting love and if they can get that from us, why not? The more love we share with young people, the better off they will be."

The outcome

Tamariki and rangatahi feel loved, supported, safe and cared for; they can receive love and give love to others (reciprocity).

The indicators

When people have developed a sense of aroha, we would expect to see evidence that indicates:

- tamariki and rangatahi are socially, emotionally, spiritually and physically safe from harm
- tamariki and rangatahi have everything they need to demonstrate reciprocity
- tamariki and rangatahi can share their views of what it means to be, or feel, loved
- whānau are well connected, supportive and involved in the wellbeing of their tamariki and their transition out of care
- whānau can provide stable and harmfree home environments.

"[My caregiver] tells me, It's OK, you're not unsafe. You are safe here. I feel safe. Maybe my brain is starting to believe it" – Rangatahi

Oranga Tamariki

We asked Oranga Tamariki to provide data for 32 measures for aroha. Oranga Tamariki provided data for 18 measures by analysing casefiles and reviewing structured data and using its QPT (see Appendix 3a). It did not have the information to answer the other 14 measures (see Appendix 3b). Oranga Tamariki responses are shown in Figure 22.

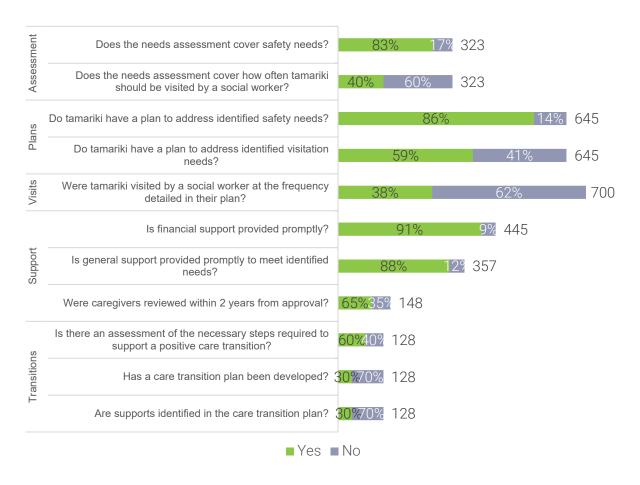


Figure 22 - Oranga Tamariki responses to measures about aroha

Note: When there are fewer than 700 responses for a measure, this reflects data for some tamariki being excluded. This may occur if the assessments or plans for some tamariki were not current, where a need is not identified for some tamariki or where caregivers have not been approved for two years so do not require a review.

Oranga Tamariki data shows it is assessing and planning for the safety needs of tamariki and providing prompt financial and general support. The data also showed the following:

- 60 percent of assessments (195 out of 323) do not cover how often tamariki should be visited by a social worker
- 62 percent of tamariki (434 out of 700) were not visited by a social worker at the frequency detailed in their plan; of those, 54 percent were visited on average every eight weeks
- 70 percent of tamariki who had a planned care transition (89 out of 128) did not have a transition plan

Providing stable loving homes

Tamariki and rangatahi thrive in stable and nurturing environments where they have a routine and know what to expect.⁸⁵ Oranga Tamariki reports that the average number of caregivers tamariki are placed with is four; the most common is one; and the highest is 36. The number of caregivers is a proxy indicator of the number of placements tamariki experience.

Oranga Tamariki staff tell us that the biggest barrier to placing tamariki in stable and loving homes is the availability of caregivers and placements. This is partly because the processes to approve caregivers are lengthy, and because there are too few caregivers, especially caregivers who are trained to care for tamariki and rangatahi with high and complex needs, and people willing to care for rangatahi. One staff member reports there are too few housing and placement options. They say they feel as though they, "can't change anything if young people don't have a whare."

Community service providers and government agencies express concern about the lack of stable placements, as it results in tamariki changing schools, or living in unstable homes or placement situations. One school principal talked about the impact a sudden placement had on one rangatahi who was seeing a counsellor to help with suicidal thoughts. They said, "There is no notice, and the kids are made to move again. The social workers gave them and us no notice. They were in tears. They were finally happy and settled but had to leave again with no notice."

Some tamariki and rangatahi talked about how having multiple placements, or living in a temporary placement, makes them feel unsettled and unhappy. One rangatahi said that they don't want to move from their placement because they are happy where they are. They said, "I'm moving. I don't want to but there's a court order hanging above my head...they will have to forcibly move me."

In the past year, from the 700 case files that Oranga Tamariki reviewed, 139 tamariki and rangatahi changed caregivers. Of these changes, 82 were planned and 57 were unplanned. Nearly half (47 percent) of those who had an unplanned care transition received a visit within the first week, compared with a guarter (24 percent) of those who had a planned transition.

Oranga Tamariki data does not show whether tamariki receive information about their prospective caregivers and placement or are given an opportunity to meet before they are placed.

Understanding the needs of tamariki and their caregivers

It is important for tamariki and rangatahi to be regularly visited, to make sure their care plans are meaningful and up to date, and to check that their environment is right for them. Knowing what tamariki, and their caregivers and whānau need is a critical part of supporting any placement to succeed, as is supporting them to access help and resources to meet those needs.

We spoke to tamariki and rangatahi in care about how it feels when their social workers get to know them. One rangatahi says they feel as though their social worker "tries their best to do what is best for me — they look out for me."

Based on the Oranga Tamariki sample of casefiles, in almost two-thirds of cases, social workers do not visit tamariki as often as required. When tamariki are not visited, they lose the opportunity to establish relationships. This reduces the chances for them to disclose allegations of abuse, talk about their worries or concerns, or let their social workers know how and when they would

like to engage. One group of rangatahi told us they feel embarrassed when their social workers visit them at their schools. They wish their visiting preferences were listened to.

To explain why visits don't happen as frequently as they should, Oranga Tamariki social workers often said it is hard to focus beyond the immediate imperative of keeping tamariki safe and supporting them when they first come to their attention. Other barriers include:

- high staff turnover and insufficient staff, which means social workers need to spend time familiarising themselves with new cases
- a drawn-out process to request and receive finance, which is partly due to there being no 'pool of funding' that is immediately available
- Insufficient resources, which can result in four people having to share a mobile phone or social workers not having access to vehicles to conduct visits.

All these barriers have an impact on social workers' consistently and effectively engaging with caregivers, rangatahi and tamariki.

Providing tamariki with access to their personal belongings

Tamariki and rangatahi have a sense of stability and safety when they have their own belongings around them, and their belongings are valued.

Oranga Tamariki does not have data on whether tamariki have their personal belongings with them in care.

Assessing and supporting caregivers

Oranga Tamariki is required to assess caregivers prior to tamariki and rangatahi living with them. They are also required to provide caregivers with the right resources to care for tamariki and rangatahi.

Oranga Tamariki does not have the data for three measures about the information it provides to prospective caregivers. These measures concern information about the level of care expected and what may happen if it is not provided; appropriate ways to manage behaviour; and the rights of tamariki to keep their personal belongings.

Data from a review of 206 casefiles shows Oranga Tamariki assessed the suitability and risk of 97 percent of caregivers and conducted police vetting in 100 percent of cases. The caregiver assessment includes checking caregivers' identities, residential addresses, immigration status and medical reports; conducting police vetting and assessing the risks of police-vetting information; carrying out referee checks; searching system files; and interviewing prospective caregivers. Further details are available in Appendix 10.

The Oranga Tamariki QPT shows that in 57 percent of placements caregivers were assessed before the tamariki were placed. Of those caregivers not assessed before placement, just over half (55 percent) of caregivers were provisionally assessed.

Oranga Tamariki data also does not show if approved caregivers are told about how often tamariki will be visited by a social worker; the wishes, strengths, preferences and behaviour of tamariki; and how to keep themselves, their household members and tamariki safe.

Caregivers tell us that poor communication and support can get in the way of them providing safe and loving homes for tamariki. They say that, when social workers don't listen to them or

provide them with adequate information, it can mean tamariki don't get the resources they need. At worst, it can lead to tamariki being removed from their care. One caregiver said:

"I feel inadequate because it feels like I am growling them all the time. The girls are constantly screaming, crying and demanding behaviour. One minute they are cranky ... and next they are all huggies and loving. I've told the social worker I need someone to vent to, because you are telling me to provide a safe haven for them, but what about me? What support do I get?"

Supporting rangatahi as they leave care

Emerging into adulthood is an important time for rangatahi and brings its own challenges. As rangatahi transition out of care, social services are phased out, which means rangatahi need to rely on their own resources more and operate in a less structured environment. Oranga Tamariki recognises these challenges. They want to help rangatahi transitioning out of care have the same opportunities as anyone else.

Of 271 casefiles it reviewed, 117 (43 percent) have a transition plan, ⁸⁶ and 115 of the transition plans show that rangatahi, whānau, caregivers and significant others had been involved in the planning process to some extent. These individuals and groups were engaged to a large extent or more:

- Rangatahi, in 65 percent of cases
- Whānau, in 43 percent of cases
- Caregivers, in 57 percent of cases
- Significant others, in 48 percent of cases.

Supporting whānau

Oranga Tamariki acknowledges that: "The needs of children and young people are best met when they are settled in a safe home environment with people they know who love them and care for them." It also acknowledges that, when they return home, tamariki and rangatahi and their whānau need to have everything they need to transition well.

As we speak with more whānau, we will get a better understanding of how well they are supported. The experiences of whānau we have met so far are mixed. They tell us they love their tamariki and want what's best for them. Some say the agencies and community service providers supported them to get their tamariki back; others say they are currently receiving support so their tamariki can transition home. Some whānau acknowledge that placing their tamariki in care means their tamariki can get the support they need.

Some whānau talk about being poorly treated by Oranga Tamariki. For example, one person says their daughter: "...clings to me when time to leave. She will run to me at the start of the visit. I'm allowed to be on own with kids. Got to have them overnight once. ... The last social worker ripped daughter out of my arms and daughter was crying."

Whānau also told us that, when practice is good, the experience of transition can be more positive for whānau. Some whānau tell us that, until the transition home occurs, day and overnight visits are well planned.

Supporting tamariki and rangatahi Māori

For five of the NCS Regulations, we compared the data for tamariki Māori and non-Māori to see if there are any differences between how they are supported. Oranga Tamariki data shows that:

- the needs assessment covered safety needs (little difference found based on 323 cases)
- the needs assessment covered visitation (difference found based on 323 cases: 35 percent Māori, 44 percent non-Māori)
- tamariki are visited to the frequency in their plan (difference found based on 323 cases: 42 percent Māori, 53 percent non-Māori)
- tamariki receive general support to meet needs (little difference found based on 357 cases)
- a care transition plan has been developed (difference found based on 128 cases: 22 percent Māori, 40 percent non-Māori).

The experiences of tamariki and rangatahi Māori were similar to those of non-Māori. Both groups emphasised more positive than negative experiences of aroha. Most tamariki Māori told us that they felt genuinely loved and cared for, with one tamariki telling us "I am the happiest I have been in my life [since] I moved in with (Caregiver X)." Another told us "I feel loved by my family. The past years have been hard, but they always love me."

Tamariki Māori repeatedly told us they felt secure and were supported to feel, and be, safe. One tamariki Māori told us "[their caregiver] tells me, It's OK, you're not unsafe. You are safe here. I feel safe. Maybe my brain is starting to believe it" and another described their feelings of being safe when they are out in public and when they are with family.

Supporting tamariki and rangatahi with disabilities

Four the same five NCS Regulations, we compared the data for tamariki with disabilities and tamariki without disabilities to see if there are any differences between how they are supported. Oranga Tamariki data shows that:

- the needs assessment covered safety needs (little difference found based on 323 cases)
- the needs assessment covered visitation (difference found based on 323 cases: 35 percent for tamariki and rangatahi with disabilities, 41 percent tamariki and rangatahi without disabilities)
- tamariki are visited to the frequency in their plan (little difference found based on 323 cases)
- tamariki receive general support to meet needs (little difference found based on 357 cases)
- a care transition plan has been developed (difference found based on 128 cases: 44 percent for those tamariki and rangatahi with disabilities, 28 percent tamariki and rangatahi without disabilities).

While we did find some differences in support for tamariki Māori and tamariki with disabilities, these findings are based on small numbers and were not tested for significance.

Allegations of abuse and neglect

NCS Regulation 69 outlines the chief executive's duties when an allegation of abuse or neglect is made about tamariki and rangatahi in care.

NCS Regulation 69 is mapped to the aroha outcome in the Outcomes Framework, as the way that allegations of abuse are handled relates to tamariki and rangatahi feeling loved, supported and safe. Compliance with NCS Regulation 69 was the subject of our previous three reports, and therefore we can compare our previous findings with those from this reporting period.

Initial decisions and actions by the National Contact Centre

When the Oranga Tamariki National Contact Centre (NCC) receives an allegation of abuse or neglect of a child in care, its policy is to send the 'report of concern' to the relevant site to determine the appropriate course of action — this may be no further action (NFA). The role of the NCC is to record the allegation as a new report of concern, unless it relates to an open case. If it relates to an open case, NCC staff must determine if the allegation constitutes a new report of concern or if it can be documented in the case notes of the open case.

Between 1 September 2020 and 30 June 2021 Oranga Tamariki received 1481 'reports of concern' about allegations of abuse against tamariki in care⁸⁸ (Oranga Tamariki has not provided us with the number of allegations made between 1 July and 31 August 2020, as the data was not previously collected in a consistent format and is unreliable.

For 144 of the 1481 reports of concern, Oranga Tamariki sites made an NFA decision. Oranga Tamariki reviews all NFA decisions as part of its quality assurance checks and found that 31 of the 144 NFA decisions (22 percent) were incorrect. Oranga Tamariki advised us that, for each incorrect decision, it has engaged with the sites and advised staff to review the decisions and report the allegations, so that they are assessed or investigated.

While data collected before 1 September 2020, Oranga Tamariki data was less reliable, Oranga Tamariki has reported on a random sample of NFA decisions made between 1 April and 30 June 2020. It examined a sample of 69 NFA decisions related to 51 different incidents (these incidents include 14 allegations of abuse or neglect of tamariki in care) and found nine NFA decisions were incorrect.

Different data collection methods and reporting periods mean we cannot directly compare this data with that of previous years to see if decision making is improving. Now that Oranga Tamariki has established a consistent approach, in our next report we will be able to determine if the response to allegations of abuse and neglect of tamariki in care has improved.

Assurance processes at the National Contact Centre

In our last report we commented that initial decisions about allegations of abuse and neglect of tamariki in care made by Oranga Tamariki sites and the NCC lack visibility.

We reported that the NCC decision-making process stipulated that it is optional for NCC staff to consult with others to determine whether to record an allegation as a new report of concern or as a case note in an open case. We stated that this does not provide consistent assurance checks.

Since the last report, Oranga Tamariki has strengthened its assurance processes. As noted above, it now reviews all NFA decisions, rather than a sample as it did previously.

Oranga Tamariki gave us a diagram of the NCC updated assurance process (see Figure 23). It is now essential that staff consult with others to determine whether a report of concern is required. This process also includes quarterly assurance by the Practice Support team who are based at the NCC. This team focuses on developing social worker practice and supervising Supervisors.

When we visited the NCC, the social workers we met had not received the process map. We were told that practice leaders would be socialising it with staff in the following weeks.

NCC Assurance process map

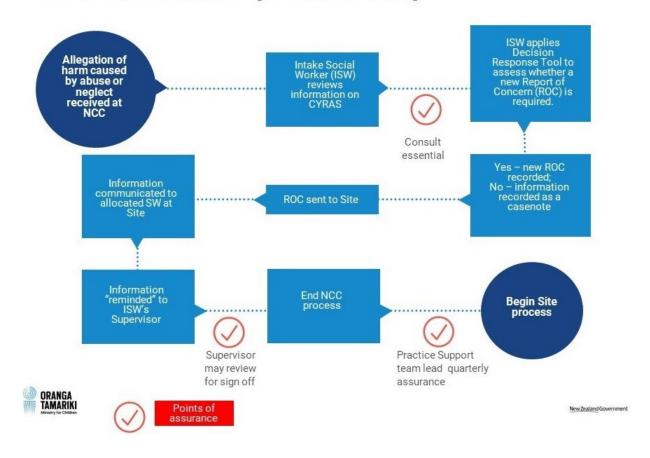


Figure 23 - Oranga Tamariki process for making decisions about allegations of harm caused by abuse or neglect

Meeting staff at the National Contact Centre

In September 2021, we interviewed 31 staff at the NCC.⁸⁹ We wanted to understand how the NCC's improvements to assurance activities and practices which it made since our last report have affected decision making relating to NFA decisions.

The NCC staff told us they have a good understanding of the process to record allegations of harm caused by abuse or neglect of tamariki in care.

We heard that sometimes it is left to an individual's discretion to decide how to record reports of concern. Staff also spoke of situations when new information had been received about existing reports of concern that has been recorded as a case note rather than a new report of concern.

The interviews revealed that NCC staff feel unsupported, due to fewer staff working after hours and at weekends than during the daytime shifts. Staff who work the after-hours shifts spoke about less management support being available and feeling isolated. Staff also highlight that they cannot consult with local sites after 5pm on allegations of harm relating to tamariki in care.

Creating new positions at the National Contact Centre

In response to our last report, Oranga Tamariki advised us that the NCC was reviewing its operational processes and systems to improve and support social-work decisions. Oranga Tamariki intended the new operational structure be effective on 1 July 2021.

When we interviewed staff at the National NCC they said that some new positions had been introduced and others were being recruited for. The new positions include a manager of practice support, ⁹⁰ a senior advisor Māori, ⁹¹ a senior advisor for business improvement (quality) ⁹² and a third practice leader.

Introducing a third practice leader is intended to provide cover across all shifts, focusing on afterhours, particularly weekends and nights. This role will support staff with practical social work decision making, training and help maintain a clear focus on tamariki already in care as well as responding appropriately when allegations of abuse of neglect are made.

Staff told us they are optimistic that the new operational structure would provide better support of practice. They said the new manager of practice support position, and having three practice leaders, will provide more practice support to frontline staff, which will enable them to ensure better outcomes for tamariki in care.

Investigation and assessment of allegations

Between 1 July 2020 and 30 June 2021, the Oranga Tamariki Safety of Children in Care Unit (SoCiC Unit) reviewed the outcomes of 1156 assessments and investigations. For the 1008 cases (87 percent) the SoCiC Unit considers, the initial response at the site office was prompt and within the expected timeframe for completing an initial safety screen.

Following an initial safety screen, the site completes an assessment or investigation within 20 working days.93 The SoCiC Unit found that 359 of the 1156 cases it reviewed (31 percent) met this standard.

This year, Oranga Tamariki reported that 33 percent of the time tamariki and rangatahi were informed, where appropriate, of the outcome of assessments or investigations, (see Figure 24). This is slightly higher than during the last reporting period. In previous reports, we highlighted the importance of informing tamariki and rangatahi of outcomes, so they feel they have been heard and their concerns have been taken seriously. The importance of doing this is reflected in the words of a rangatahi. They talked about a previous placement that was a damaging experience for them after they were not informed about an allegation. They said their mechanism to deal with it is to: "...just forget about it. It took me over a year and a half to escape their [caregivers] grasp."

Figure 24 shows Oranga Tamariki compliance with regulation 69; comparing the current reporting period (2021) with what was reported to the Monitor previously (2020).

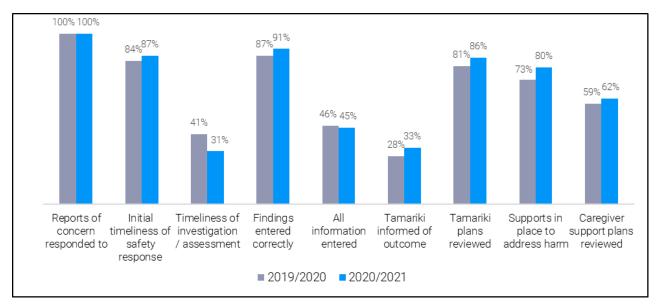


Figure 24 - Oranga Tamariki compliance with regulation 69

Oranga Tamariki practice requirements

In our last report, we reported that Oranga Tamariki has set 12 "practice requirements" that, if followed, would assure it is compliant with NCS Regulation 69. Further details of the practice requirements are available in Appendix 10. The practice requirements are beyond what is required by NCS Regulation 69.

Oranga Tamariki compliance with all 12 practice requirements has improved, from one percent in 2019/2020 to two percent in 2020/2021. While Oranga Tamariki notes this area needs vast improvement, it says that its compliance with six or more practice measures increased from 59 percent in 2019/2020 to 73 percent in 2020/2021.

As we previously reported, Oranga Tamariki considers that these three practice requirements are "potentially...of greatest importance for tamariki."

- Tamariki care plans are reviewed if allegations of abuse or neglect are made
- Support mechanisms are in place to address the impact of harm
- Tamariki at the centre of allegations are told the outcome of investigations.

For this reporting period, Oranga Tamariki met all three of those practice requirements for 46 percent of tamariki in care, compared with 29 percent of tamariki in 2019.

Barnardos

Providing stable loving homes

Barnardos reports that the tamariki and rangatahi in its care have been in their current homes for significant lengths of time and report feeling settled. All its caregivers are approved. Barnardos conducts regular safety checks.

Understanding the needs of tamariki and their caregivers

Barnardos' assessments of tamariki and rangatahi cover how often their social workers will visit them.

Providing tamariki with access to their belongings

Tamariki and rangatahi have access to their belongings and taonga. Barnardos records their special milestones and achievements, and stores photos of them.

Caring for rangatahi as they leave care

When rangatahi in Barnardos' care reach the age to transition to adulthood, Barnardos has a plan to prepare them for this transition. It completes an assessment of their life skills and refers them to a transition support service. Barnardos now works with the Oranga Tamariki Transition to Adulthood service to ensure continuity of service.

Handling allegations of neglect and abuse

During this reporting period, Barnardos received no reports of abuse or neglect of tamariki and rangatahi in its care.

Dingwall Trust

Dingwall Trust reports it has achieved most aroha measures. These include assessing tamariki and rangatahi safety needs; organising regular visits by social workers; providing rangatahi with access to their belongings; recording rangatahi special milestones and achievements; and storing photos of them; and supporting rangatahi as they transition to adulthood.

Dingwall Trust did not provide the data for measures about tamariki wishes, strengths, preferences, and behaviour, or what caregivers and household members need to know to keep themselves and tamariki safe.

Handling allegations of neglect and abuse

During this reporting period, Dingwall Trust did not receive or make any reports of abuse or neglect of rangatahi in its care.

Open Home Foundation

We asked Open Home Foundation to provide data for the same 32 measures for aroha as Oranga Tamariki. Open Home Foundation used data from OSCAR for 20 measures for each of the 93 tamariki in its custody (see Appendix 2a). It does not have the data for 12 measures (see Appendix 2b).

Figure 25 shows Open Home Foundation's responses to measures about assessments, plans, visits and support. Open Home Foundation is doing well across most measures.

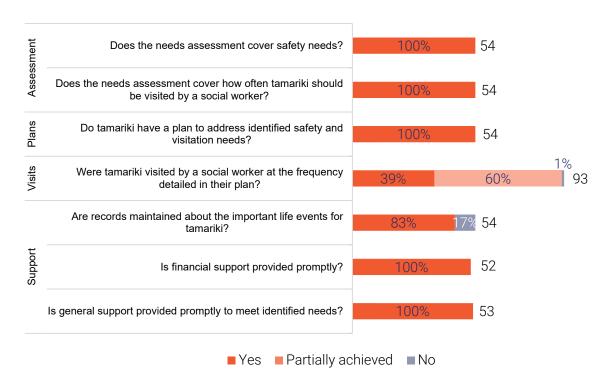


Figure 25 - Open Home Foundation responses to measures about aroha

Providing stable loving homes

Open Home Foundation's data shows that 58 percent of tamariki (54 out of 93) have a current CANS assessment.

Open Home Foundation requires its assessments and plans to be updated and reviewed every six months, which aligns with the NCS Regulations.

Open Home Foundation did not provide data for measures about transitioning between care placements. These measures cover whether assessments of support needed for positive care transitions are completed; whether care-transition plans are developed; whether support identified in the care-transition plans is in place; and whether the care transitions are monitored and supported.

Understanding the needs of tamariki and their caregivers

Open Home Foundation's policy states that, before tamariki and rangatahi are introduced to foster parents, social workers should provide tamariki and rangatahi with a Te Whānau Nei Pack,

work through appropriate parts with them, and ensure they understand and have the chance to ask questions. In genuine emergency placements, this practice should be followed as soon as possible. 94

Open Home Foundation's data shows that it gives 92 percent of prospective foster parents' information about the level of care tamariki need and the rights of tamariki to keep their personal belongings.

Fifty six percent of tamariki received information about their prospective foster parents before they were placed. There is no data available on whether tamariki have the opportunity to meet their foster parents before their placement. Further details are available in Appendix 10

The foster parents we spoke to demonstrated a high level of understanding about what it means to ensure tamariki experience aroha. They described various ways that aroha is expressed and received by tamariki in their care. This is demonstrated in the data, with 72 percent of tamariki having a memory box that contains precious items and records of events for the tamariki.

One foster parent said "I needed to go back to basics, he needs love and nurturing, so that's what I've been doing. He's changed so much."

Another foster parent said:

"When things aren't good, one of his mechanisms is to have his cap on, his hood up. When he came from his visit with his mum, I gave him a hug, I asked him how it was, and he said, 'It was really emotional.' And then he was next to me and wouldn't leave my side. And then the cap came off, the hood came down. He is not afraid to ask for what he needs."

Foster parents explained how they are supported by Open Home Foundation to provide loving, safe and stable homes. One person said "OHF do the paperwork side of it. They do everything, you kinda just sit back and focus on the kids. They match kids with foster parents really well."

Another said:

"We have been given training about it. It's not about what the caregiver has done but what has been done in the past, so we know how to react and respond without getting hurt."

Handling allegations of neglect and abuse

Open Home Foundation reported 11 cases of abuse and neglect over the past 12 months, which is similar to the 12 it reported last year. In eight of the 11 cases, Open Home Foundation let the tamariki know what would happen after they made their allegations.

Oranga Tamariki is responsible for investigating and assessing allegations of abuse and neglect. Open Home Foundation's responsibility is to report the allegation to Oranga Tamariki and to support the child or rangatahi in their custody through the process. Further details are available in Appendix 10.

Supporting tamariki and rangatahi Māori

For four of the NCS Regulations we compared the data for tamariki Māori and non-Māori to see if there are any differences between how they are supported. Open Home Foundation data shows:

- the needs assessment covered safety needs (no difference based on 54 cases)
- the needs assessment covered visitation (no difference based on 54 cases)

- tamariki were visited to the frequency in their plan (difference found based on 93 cases: 42 percent Māori, 36 percent non-Māori)
- tamariki received general support to meet needs (little difference, based on 54 cases).

Supporting tamariki and rangatahi with disabilities

For the same four NCS Regulations, we compared the data for tamariki with disabilities and tamariki without disabilities to see if there are any differences between how they are supported. Open Home Foundation dat shows:

- the needs assessment covered safety needs (no difference, based on 54 cases)
- the needs assessment covered visitation (no difference, based on 54 cases)
- tamariki are visited to the frequency in their plan (difference found based on 93 cases: 45 percent for tamariki and rangatahi with disabilities, 35 percent for tamariki and rangatahi without disabilities)
- tamariki received general support to meet needs (little difference, based on 54 cases). While we did find some differences in support for tamariki Māori and tamariki with disabilities, these findings are based on small numbers and were not tested for significance.



Kaitiakitanga

Kaitiakitanga is about wellbeing. When tamariki and rangatahi, and their whānau, are deprived of kaitiakitanga and the ability to be the kaitiaki of their own wellbeing, they are disadvantaged and at risk of becoming disempowered and marginalised.

To uphold kaitiakitanga, equitable access to resources is needed. This is reinforced in Article 24 of the United Nations Convention on the Rights of the Child, which says that all children and young people have the right to the best health care available. ⁹⁵

Kaitiakitanga includes having a healthy mind, body and spirit. While NCS Regulation 10 does not include spiritual needs in the matters that must be identified in a needs assessment, NCS Regulation 12(1) does specify that tamariki Māori need access to Māori models of health and health practitioners who know and are experienced in their cultural values and practices.

The kaitiakitanga outcome focuses on agencies' obligations to assess whether they are supporting the physical and psychological health and wellbeing of tamariki. When tamariki and rangatahi are healthy, they are more likely to have a positive experience in care.

The outcome

Tamariki and rangatahi feel protected, and are kept safe, by having all aspects of their wellbeing acknowledged, nurtured and supported.

The indicators

When people have developed a sense of kaitiakitanga, we would expect to see evidence that indicates:

- tamariki and rangatahi, and their whānau, have their health needs supported and maintained so they can have healthy minds, bodies and spirits
- tamariki and rangatahi, and their whānau, have access to people and services to help them build self-esteem and resilience and sustain their emotional wellbeing
- tamariki and rangatahi, and their whānau, have access to the best possible healthcare for ongoing hauora
- whānau can regularly provide tamariki and rangatahi with nutritious food and warm, dry homes.

"When there is stuff going on at home, she [councillor] will ask me about it and tells me ways to help when I am angry and tells me ways I can help it. Like she told me to tell my siblings to listen because she knows how I feel when there is a lot of noise." – Rangatahi

Oranga Tamariki

We asked Oranga Tamariki to provide data for 31 measures about kaitiakitanga: 96 24 general measures; two measures specific to tamariki Māori; and five measures specific to tamariki with disabilities. Oranga Tamariki provided data for 20 measures by analysing casefiles, reviewing administrative data and using its QPT (see Appendix 3a). Oranga Tamariki responses are shown in Figure 26.

Oranga Tamariki did not have data for 11 measures (see Appendix 3b).

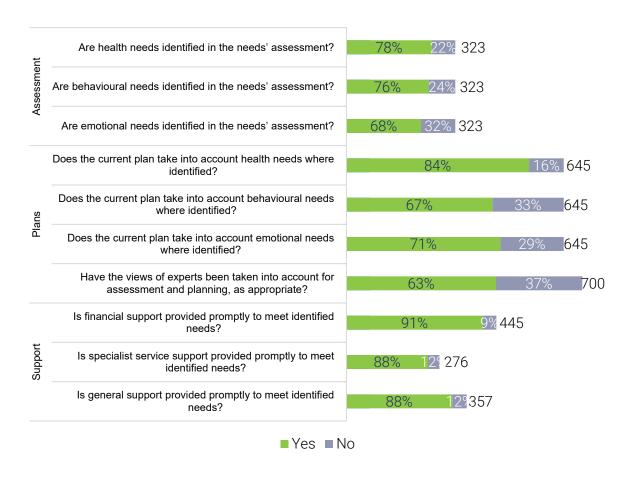


Figure 26 - Oranga Tamariki responses to measures about kaitiakitanga

Note: When there are fewer than 700 responses for a measure, this reflects data for some tamariki being excluded. This may occur if the assessments and plans for some tamariki were not current, or the measure did not apply to some tamariki as a need was not identified.

Assessing and meeting health needs

Tamariki and rangatahi in care may experience things most tamariki and rangatahi do not. Even if they are resilient, they need people around them who care, understand what they have been through, and can give them the support they need to make sure they are healthy. Oranga Tamariki is responsible for making sure that all rangatahi in its care are assessed, to identify their needs, and making sure they get support and care to address those needs, by collaborating with health providers.

Oranga Tamariki data shows most tamariki and rangatahi have their health needs assessed, have a plan that identifies their needs, and receive general health services.

Caregivers frequently told us they were given limited information about the health needs of tamariki they care for and have difficulty accessing services, particularly where they were away from the main centres. One caregiver said, "...child came to us with a really bad skin condition" and had not been to the dentist in two years and their health needs had not been updated since they were placed with the caregiver more than one year ago. Another talked about support and services being unavailable after the rangatahi they care for was sexually assaulted. They said "Oranga Tamariki has never guided rangatahi or caregivers to assist with this trauma...rangatahi has high and complex needs. The CAT [Crisis and Assessment team] team has been unhelpful."

NCS Regulation 35 specifies that agencies must ensure that tamariki and rangatahi receive support for their health needs. This includes taking reasonable steps to enrol tamariki with primary health organisations. General practitioners provide an important set of health eyes for tamariki in care. Oranga Tamariki data shows 4230 out of 7056 of tamariki and rangatahi in Oranga Tamariki care (60 percent) are registered with a GP or medical practice. Of those not enrolled, 261 out of 2826 (9 percent) have a recorded disability. Oranga Tamariki data does not show whether tamariki were have annual health and dental checks and have access to general and cultural health services, such as kaupapa Māori support services.

Oranga Tamariki staff frequently tell us that it can be difficult to get tamariki and rangatahi the support they need. This can be due to poor communication between agencies, resources being unavailable in the areas where rangatahi live, or services being overwhelmed or understaffed. One staff member said, "If it is so hard for us to access these needed supports for our rangatahi, imagine how hard it is for our whānau."

Social workers are also concerned about how the housing crisis is affecting the stability of tamariki lives, increasing transience, and their living conditions.

Assessing and meeting mental health needs

Aotearoa has one of the highest youth-suicide rates in the OECD. The rate of self-harm by younger tamariki is rising ⁹⁷ and, on average, 10 tamariki aged 10–14 years die by suicide each year. Age, loneliness, hopelessness, and childhood and family adversity can all increase the risk of suicide. ⁹⁸ Otago University researchers, who are trying to learn more about how to prevent suicide, say that a lack of good-quality data can lead to a lack of intervention. ⁹⁹ Netsafe NZ research shows that, of 2061 tamariki and rangatahi, 20 percent are accessing self-harm material; 17 percent are consuming 'how-to-suicide guides'; and 15 percent have searched for information on ways to be very thin. ¹⁰⁰

It is important that every opportunity is taken to address psychological distress, self-harming and suicide risk for tamariki who have experienced adverse childhoods. NCS Regulations 13 (2b) and (2c) consider the psychological health of tamariki in care, and what help they need to recover from the effects of trauma, and any alcohol or drug misuse. Oranga Tamariki use SKS screens, to evaluate whether tamariki and rangatahi are dealing with substance abuse, suffering psychological distress or are at risk of death by suicide. Compared with the number of concerns raised about the psychological health of tamariki, the number screened appears low even when we take in to account that some tamariki may not be screened, because they are already being seen by a mental-health service. Further details are available in Appendix 10.

Oranga Tamariki uses SKS screens to assess the emotional health of tamariki aged 12 years and over. Of the 700 tamariki and rangatahi whose casefiles were reviewed, 333 are 12 years and over. Oranga Tamariki data shows that not all rangatahi that needed to be assessed received the screening they needed.

- 71 percent (30 out of 42) did not have the Substance and Choices Scale
- 65 percent (40 out of 62) did not have the Kessler Psychological Distress and mental health screen
- 55 percent (24 out of 44) did not have the Suicide ideation screen
- Six out of 15 rangatahi placed in residences did not have SKS screening completed within 24 hours of being admitted
- 59 percent (16 out of 27) did not have a suicide-risk tool applied when a high score on the Kessler Psychological Distress and mental health screen and a "yes" response on the Suicide Ideation screen indicated it was needed 102

The two rangatahi detained in police cells had the SKS screening completed within 24 hours.

By monitoring how it uses SKS screens, Oranga Tamariki can assure itself that it is taking every step to prevent or mitigate the effects of psychological distress or harmful behaviours.

We spoke with some tamariki and rangatahi who talked about the benefits of getting help with their mental health. They said counselling had helped them when they didn't feel good. Others talked about how taking part in activities helped their emotional wellbeing. One rangatahi said they: "...had counselling, helped open up, I want to go again." Another said, "There is stuff going on at home, she [counsellor] will ask me about it and tells me ways to help when I am angry." When rangatahi take part in activities where they feel safe, it can create an environment that builds their self-esteem and resilience and sustains their emotional wellbeing. For example, a rangatahi spoke about going to camp. They described it as: "...like a form of therapy, and mostly all of the kids are from OT. I met a girl who has the same social worker as me."

Most tamariki and rangatahi said, even if they know they need support, they are unsure where or how to find help, or are unsure if therapy can help them. This was especially so for rangatahi Māori we spoke with. One rangatahi Māori told us, "I don't talk to anyone about it. Only talk to someone sometimes when I feel I can trust them. I don't talk to SWiS [Social Workers in Schools] worker at school." Another said: "I have had therapy. I feel alone. Every day I try and be this happy girl but inside I am depressed."

Caregivers spoke about needing training on mental health. They said they need enough information about what tamariki need to support them effectively. They also said their tamariki need access to therapy. One caregiver told us "I think there is a sense of complacency, even though the kids have suffered and been exposed to trauma. Counselling should be mandatory because caregiver can't do it at home themselves." Another told us:

"Sometimes she (rangatahi) never opens up. Never says what she wants, how she feels. Expression. She will just sit there. The only response sometimes is that she will cry. They needed therapy."

Caregivers also mentioned how they have felt unsupported by Oranga Tamariki, and that the support they do receive is not trauma informed or timely. One caregiver told us "OT need to get

the plans sorted on a child timeline not an adult's timeline. Three years to an adult is nothing, but on a child it's a really really long time. My little boy went through trauma he didn't have to."

Managing trauma

Many tamariki and rangatahi in care are struggling with trauma. The care experience itself can be traumatic, as children are removed from their whānau. Traumatic stress can manifest as long-term health problems, which is relevant to kaitiakitanga. The NCS Regulations include obligations to help tamariki and rangatahi recover from trauma.

Some tamariki and rangatahi in care expressed they struggle with trauma and experience low self-esteem. Although some we spoke with reported they have received support with trauma, they also said it has not been helpful. One rangatahi told us: "I hate counselling. It's boring and a waste of money. I didn't want to talk about things. I have got older and I don't need it."

While trauma can affect everyone, Māori experience trauma in ways that are linked to their experience of colonisation, racism and discrimination, poverty and ill health. As indigenous people, they can experience personal trauma and collective trauma. The NCS Regulations require agencies to provide tamariki and rangatahi with access to culturally specific interventions that are trauma-informed and tikanga-informed.

Supporting tamariki and rangatahi Māori and non-Māori

For seven of the NCS Regulations, we compared data for tamariki Māori and non-Māori see if there are any differences between how they are supported. Oranga Tamariki data shows

- health needs were identified in the needs' assessment (little difference based on 323 cases)
- behavioural needs were identified in the needs' assessment (little difference based on 323 cases)
- emotional were identified in the needs' assessment (little difference based on 323 cases)
- financial support was provided promptly (difference found based on 445 cases: 94 percent tamariki Māori, 88 percent tamariki non-Māori)
- specialist support was provided promptly (difference found based on 276 cases: 84 percent tamariki Māori, 91 percent tamariki non-Māori)
- general support was provided promptly (little difference based on 357 cases)
- tamariki are enrolled with a primary health provider (little difference based on 357 cases).

Supporting tamariki and rangatahi with disabilities

Oranga Tamariki has not yet defined disability. It reported:

"Work is underway to come up with a working definition of disability, informed by the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) definition. Article 1 of the UNCRPD refers to disabled people as "those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others."

Oranga Tamariki reported that it has 847 tamariki with a disability in its care. Without a definition of disability, we need to treat this figure with care.

Of the 700 cases that Oranga Tamariki reviewed, 129 (18 percent) were tamariki who have disabilities. Of those tamariki with disabilities, 64 percent had disability needs identified during the needs assessment, and 40 percent were assisted to access the support they need.

Some Oranga Tamariki staff talked about their understanding of tamariki with disabilities. One said, "I think there is a gap in disability knowledge. That area is not our forte and I think that is to the detriment of our tamariki." A caregiver told us about their experience of caring for a rangatahi with a disability: "[It took] three weeks for any information about my rangatahi who had a disability and how to support his behaviours. He was going off and I didn't know what the hell had hit me."

When communication between agencies is poor, it undermines partnership and collaboration and can have an impact on how tamariki and rangatahi experience kaitiakitanga. An Oranga Tamariki staff member spoke to us about this problem: "How do children with disabilities have their needs met? They will see a paediatrician. Funding is very complex. The caregiver can employ someone to mentor the child and then claim money. It is difficult to ensure agencies providing funding on different contracts are working together."

Barnardos

Barnardos reports that it complies fully with the NCS Regulations. It told us that the rangatahi in its custody have comprehensive needs assessments that are regularly reviewed. The needs assessments take health, behavioural and emotional needs into account. Barnardos develops assessments with rangatahi, caregivers, whānau and, where applicable, specialist health services.

The plans for rangatahi include general, specialist and financial support. They include referrals for psychological assessments and relevant specialist treatments, including from therapists. Any actions taken are recorded in the needs assessment and plan.

Dingwall Trust

Dingwall Trust reports that it has achieved all but one of the kaitiakitanga measures. It told us that:

- rangatahi have current health assessments and plans
- rangatahi have annual health checks
- caregivers are given information about the health and wellbeing needs of the rangatahi they care for.

Dingwall Trust data does not show whether it provides caregivers with information about how to access assistance.

The measures about rangatahi access to health practitioners with knowledge of cultural values and practices do not apply to Dingwall Trust.

Open Home Foundation

We asked Open Home Foundation to provide data for 27 measures about kaitiakitanga, ¹⁰⁵ 20 general measures; two measures specific to tamariki Māori; and five measures specific to tamariki with disabilities. Open Home Foundation provided data for 15 measures for each of the

93 tamariki in its custody (see Appendix 2a). Open Home Foundation's responses are shown in Figure 27.

Open Home did not have the data to answer 12 measures, including the two measures specific to tamariki Māori (see Appendix 2b).

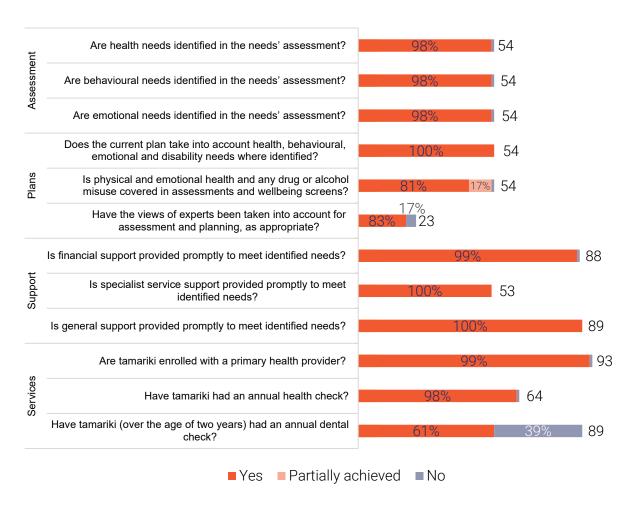


Figure 27 - Open Home Foundation responses to measures about kaitiakitanga

Note: When there are fewer than 93 responses for a measure, this reflects data for some tamariki being excluded (such as where the CANS assessments and plans were not current, where views of experts were not required, or a need was not identified. Those tamariki who had not been in care for 12 months were not included in the annual health check requirement).

Assessing and meeting health needs

Open Home Foundation's data tells us that:

- 98 percent of tamariki had their health, emotional and behavioural needs identified in a CANS assessment
- nearly 100 percent of tamariki received prompt financial, specialist and general support when it was needed 106
- 99 percent of tamariki were enrolled with a primary health provider and 98 percent received an annual health check¹⁰⁷

- 61 percent of tamariki had an annual dental check¹⁰⁸
- 58 percent of tamariki had an up-to-date assessment and plan.

One Open Home Foundation staff member gave us an example of how tamariki receive prompt financial, specialist and general support. They said: "Every application I have submitted to OHF for resources for any sensory needs have been accepted — not one has been declined."

As Open Home Foundation was almost fully compliant with the NCS Requirements about assessments, we did not compare the assessment data for tamariki Māori and tamariki non-Māori. We did review the non-current assessments and plans and found no differences between those of tamariki Māori and tamariki non-Māori.

Open Home Foundation data does not show whether tamariki Māori have access to health practitioners with knowledge of cultural values and practices, and whether someone had explained to them what kaupapa Māori or iwi social services are available and how they can access them.

Open Home Foundation's data also does not show if tamariki receive information about relevant health matters, or if reasonable steps are taken to access publicly or privately funded health services. It also does not show if caregivers are given information on how to access general health services.

Open Home Foundation's data does not show if the life skills of rangatahi transitioning to adulthood are assessed, whether any assessments cover personal care, and sexual and reproductive healthcare and whether young adults have information about how to access health services once they leave care.

Assessing mental health needs and trauma

In 2020, Open Home Foundation updated its information for prospective foster parents, so that it aligns with NCS Regulations. It provided 80 percent of prospective foster parents with information about the effects of trauma on tamariki behaviour and development, and the mental-health services that are available. 109

All current foster parents have been given the updated information. The COVID-19 pandemic has delayed some of the information being released. Foster parents told us that these difficulties were not limited to their engagement with Open Home Foundation; they also noted challenges to kaitiakitanga related to Oranga Tamariki, and regional CAT teams.

Supporting tamariki and rangatahi with disabilities

This is Open Home Foundation's definition of disability:

"Disability is identified through a formal diagnosis of a developmental or acquired disorder or impairment by a health professional. Needs are identified by various means, using NASC [Needs Assessment and Service Coordination] assessments, assessments by relevant health professionals e.g., psychologist or occupational therapy assessments, and CANS screening to identify both the severity of the impact of any impairment and the type of support required. Open Home Foundation distinguishes between disability and impairments according to the social model of disability."

Open Home Foundation's data shows that one third (33 percent) of tamariki in its custody have a disability. Of the assessments carried out for tamariki with disabilities, 23 out of 29 (79 percent) identified their disability needs and 6 out of 29 (21 percent) did not. Some Open Home Foundation staff spoke to us about their access to specialist disability knowledge and how this positively enhances their practice.

Open Home Foundation data does not show if tamariki with disabilities are helped to access the support they need or if foster parents are given any information or resources about tamariki with disabilities. For tamariki transitioning between placements, the data does not show if care transition plans identify and address the disability or developmental needs of tamariki.

Open Home Foundation did not refer the Monitor to any policies, practice guidance or tools, to demonstrate that these measures were being addressed.



Mātauranga

Education is important for all tamariki and rangatahi. Research shows that students who have been in care find it much harder to engage in school and education pathways. Engaging in education, and other educational and cultural activities, can change the trajectory of these students' lives and lead them to participate more in further education, training and employment. 111

Recreation and play are vital to developing skills. Article 31 of the United Nations Convention on the Rights of the Child upholds the right of children to play. 112 The New Zealand Ministry of Health physical activity guidelines 113 recognise the importance of play; play ensures rangatahi are active and helps them develop socially, emotionally and cognitively. 114

- potential in literacy and numeracy
- tamariki and rangatahi, and their whānau, have equitable access to learning and development opportunities
- tamariki and rangatahi have high expectations of themselves and others
- tamariki and rangatahi have the social and emotional skills to communicate; and navigate in, and transition to, different stages of their lives
- tamariki and rangatahi can navigate two cultures, so they can become more successful in both worlds
- tamariki and rangatahi are open to, and can navigate, different cultures.

I am going to be a professional rugby star and I'm going to be a farmer. My big mama [caregiver] is going to help me to do it. And [youth worker] will help me." – Rangatahi

The outcome

Tamariki and rangatahi are learning; developing skills; and building knowledge about themselves, their potential and future, their culture, and their role and place in the world

The indicators

When people have developed a sense of mātauranga, we would expect to see evidence that indicates:

- tamariki and rangatahi are engaged in learning and meaningful daily activities
- tamariki and rangatahi are learning life skills that will give them self-control and self-confidence
- tamariki and rangatahi, and their whānau, are positively engaged in activities that support their holistic health and wellbeing
- tamariki and rangatahi, achieve their potential in literacy and numeracy
- tamariki and rangatahi, and their whānau, have equitable access to learning and development opportunities
- tamariki and rangatahi have high expectations of themselves and others
- tamariki and rangatahi have the social and emotional skills to communicate; and navigate in, and transition to, different stages of their lives
- tamariki and rangatahi can navigate two cultures, so they can become more successful in both worlds
- tamariki and rangatahi are open to, and can navigate, different cultures.

Oranga Tamariki

Education helps tamariki and rangatahi develop their full potential and makes a big contribution to their future success. The NCS Regulations focus on assessing tamariki learning, development and experience needs; and planning, and providing the necessary support, to meet these needs. Social workers are responsible for making sure tamariki and rangatahi in care have resources to learn and play; support to realise their hopes and dreams; and what they need to flourish.

We asked Oranga Tamariki to provide data for 34 measures about Mātauranga and one measure specific to tamariki and rangatahi with disabilities. Oranga Tamariki provided data for 23 measures by analysing casefiles, reviewing structured data and using its quality-practice tool (see Appendix 3a). Oranga Tamariki responses are shown in Figure 28.

Oranga Tamariki did not have data for 11 measures (see Appendix 3b).

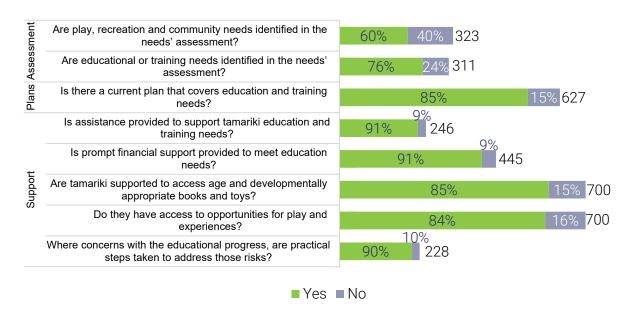


Figure 28 - Oranga Tamariki responses to measures about Mātauranga

Note: When there are fewer than 700 responses for a measure, this reflects data for some tamariki being excluded. This may occur if the assessments and plans for some tamariki were not current, or the measure did not apply to some tamariki.

Assessing education and training needs

In several areas addressed by the measures, Oranga Tamariki reports it is fulfilling the requirement in at least 85 percent of cases (see Figure 28). While it did not identify the play, recreation and community needs of 40 percent of (129 out of 323) tamariki, Oranga Tamariki says, "84 percent of children had opportunities for play and recreation supported, so there is evidence that this need is being recognised and supported; however, the data indicates this is not consistently included and recorded as part of their assessment."

Oranga Tamariki data shows the educational or training needs of 85 percent of tamariki are addressed in plans, and the needs of 76 percent of tamariki are identified.

Accessing education, training and employment

Tamariki under six years

Tamariki under six years make up 24 percent of all tamariki and rangatahi in care of Oranga Tamariki. NCS Regulations 36 and 37 state that tamariki in this age band must be enrolled in education, providing it is in their best interests.

The biggest group of tamariki in Oranga Tamariki custody (36 percent) are enrolled in centre-based early childhood education; eight percent are enrolled in kindergarten; and eight percent are enrolled in Kohanga Reo. Tamariki can start school or kura between five and six years old and must be enrolled by their sixth birthday. 115

Oranga Tamariki data shows that 32 percent of tamariki have no enrolment record. This may include the youngest age group (109 tamariki are less than one year old and are included in this analysis as some are enrolled in early childhood education), for whom being enrolled in formal education is not in their best interests at this age. Further details are available in Appendix 10.

Tamariki and rangatahi aged 6 to 15 years

Tamariki and rangatahi aged 6 to 15 years make up 56 percent of all tamariki and rangatahi in care of Oranga Tamariki. NCS Regulation 38 states that tamariki in this age band must be enrolled at a registered school. If there is a dispute about enrolment in school, which is not resolved, it can result in legal proceedings. ¹¹⁶ Oranga Tamariki reports that 92 percent of tamariki and rangatahi in this age group are enrolled in school or home schooled; and four percent (155 out of 3972 tamariki and rangatahi) are not enrolled, excluded or their status is not recorded. Further details are available in Appendix 10.

Rangatahi aged over 15 years

Rangatahi aged over 15 years make up 20 percent of all tamariki and rangatahi in care of Oranga Tamariki. NCS Regulation 39 states that rangatahi in this age band must be helped to enrol at a registered school or in tertiary education, or to seek employment. Oranga Tamariki reports that 71 percent are enrolled in school, alternative education, or correspondence or home schooling; 12 percent are enrolled in tertiary education or training, undertaking an apprenticeship or employed; and 5 percent are not enrolled. Further details are available in Appendix 10.

Assessing life skills

NCS Regulation 75 covers assessing the needs of rangatahi transitioning from care to adulthood. Oranga Tamariki used its QPT to answer the measures about assessing life skills.

Oranga Tamariki reviewed 268 of the 732 rangatahi aged 16 to 17 years who were eligible for transition services, to assess how well their life-skills assessments had been completed. Half of the sample (136 rangatahi) had not had their life skills assessed, while the assessments for 9 percent (23 rangatahi) were fully complete.

Regulation 75(3) states that the life-skills assessment must include assessing rangatahi knowledge and experience in areas that support independence (sch as budgeting, driving, cooking, and culture and identity). Oranga Tamariki data tells us whether a life-skills assessment has been conducted, but not what it covers.

Most tamariki and rangatahi spoke to us about positive experiences of learning and developing skills for the future. They told us that they had aspirations for their future, and that those aspirations were supported and encouraged by those around them, including whānau, caregivers, teachers or their lawyer for child.

Despite this, some rangatahi we spoke to feel they had to overcome obstacles to achieve their aspirations. These obstacles include not doing well at school (this hinders them pursuing further education), not having enough money or other support, or doubting whether a positive future is even possible. One rangatahi told us they wanted to get a driver's license, but Oranga Tamariki had 'lost' their birth certificate. A community service provider has been helping them to reach this goal, but they said, "It has been hard."

Coordinating with education providers

Teachers and other school staff spend a lot of time with tamariki and rangatahi. They help rangatahi see their potential and help plant seeds that inspire them to realise their dreams. Research finds that positive interactions with teachers have a positive influence on children's concurrent and long-term social, emotional and academic development.¹¹⁷

Oranga Tamariki interaction with education providers is key to monitoring tamariki school attendance and achievement. Oranga Tamariki data does not show if education providers receive enough appropriate information about tamariki; whether it is contacting education providers to discuss the progress that tamariki are making; or whether it is receiving regular written updates from education providers. One whānau member told us their social worker helps them to enrol tamariki at school, but this was the only assistance they had received.

Some education staff say one of the main barriers to helping tamariki and rangatahi in care experience mātauranga, is poor communication and collaboration with [Oranga Tamariki] and poor understanding of its policies and practice. One staff member told us they had tried connecting with other agencies every fortnight and that Oranga Tamariki often "doesn't bother turning up." They talked about the difficulty working with tamariki and rangatahi when they have little or no information about them:

Children are placed with whānau carers or carers. At times [they are] dumped, not placed with caregivers. We are trying to work with a child that comes with no reports or no records. ... When the same child is moved to another placement we are often not told. If our staff knew, they would write a plan. Not just needs, but what they can achieve.

Oranga Tamariki recognises this barrier. Some of its staff told us that "more communication and collaboration" could help agencies who tend to work in 'silos'. Working together may emphasise agencies' joint responsibility to deliver matauranga to tamariki and rangatahi in care.

Monitoring attendance and achievement at school

Oranga Tamariki interaction with education providers is important for monitoring tamariki attendance and achievement in school, and ensuring they are visible in the education system.

Currently, the NCS Regulations focus on enrolment. To understand mātauranga, it is important to look at attendance and achievement of tamariki.

Moving schools can significantly disrupt mātauranga for tamariki and rangatahi. This can happen when tamariki are placed in care, change their placements, move out of their areas or have to change schools. Oranga Tamariki data does not show if education providers receive enough appropriate information about tamariki; whether it contacts education providers to discuss progress tamariki are making in school; or whether it receives regular written updates from education providers.

Oranga Tamariki does not have data on whether it has taken action to support tamariki attending school. These actions include obtaining attendance updates from the education provider or caregiver; arranging ways to address concerns about attendance; helping to make alternative educational arrangements if tamariki are excluded from school; and representing tamariki at any hearings about them being suspended or excluded from school.

Some Oranga Tamariki staff spoke to us about transience. They say that poor communication and collaboration between agencies can have a negative impact on how tamariki and rangatahi experience mātauranga. One staff member told us: "They [Ministry of Education] never come to the table. They kick our kids out of school all the time then do nothing. We have to rely on a separate social service to help build up plans." Other staff explain that some rangatahi: "...move around and get lost in the gaps and then don't go to school, because it's hard for them to catch up in mainstream and it affects their confidence. Teachers are overloaded. There is not enough funding in schools to accommodate the high needs of our rangatahi."

We heard similar stories from education staff. They often find it hard to access, or don't know where to access, resources for rangatahi with high and complex needs. Many staff talk about a critical lack of funding for teacher aides and educational psychologists who support rangatahi in schools. Other staff members recognise there are not enough staff with the skills and experience to help rangatahi who have suffered trauma. One Ministry of Education staff member told us: "Those kids are in dark places and do staff know what they need?"

Supporting hopes and dreams for the future

It is vital that tamariki and rangatahi have hope and aspirations for their futures. Hope provides optimism and supports tamariki and rangatahi to stay motivated and push through when things are hard. For tamariki and rangatahi in care, hope and aspirations can enable them to achieve things that can sometimes feel unachievable.

Some told us they want to go to university, to study law, film or the arts. Others aspire to be fashion designers, actors, rugby stars, farmers, psychologists or detectives. Regardless of their specific aspirations, tamariki and rangatahi consistently told us that their hope and aspirations come from being inspired by others around them, from other people believing in them, and from other people supporting them to pursue their goals.

Tamariki and rangatahi in care told us about various informal learning opportunities they have experienced and enjoyed. These include attending camp, learning how to play an instrument, playing sport and learning about their culture. Through these experiences, they had connected with friends, felt safe and included, and explored their identity and interests. One rangatahi said: "It is fun to talk about [future opportunities]" with teachers. Another said their caregiver, lawyer and social worker have introduced them to the idea of attending university. Another talked about

how their social worker and caregivers are together organising for a tutor to help them with their schoolwork. Although we had fewer interviews with whānau, most we did spoke to told us that rangatahi experience mātauranga when they are supported to learn, build positive relationships and develop a sense of identity.

Oranga Tamariki does not have data to measure whether tamariki are informed of their rights to try new and fun things, or what support is available to them to develop their knowledge and skills as they transition to independence.

Support for Māori and non-Māori tamariki and rangatahi

For five of the NCS Regulations, we compared the data for tamariki Māori and non-Maori to see if there are any differences between how they are supported. Oranga Tamariki data shows:

- education or training needs were identified in the needs assessment (little difference based on 311 cases)
- the current plan covers education or training needs (little difference based on 627 cases)
- prompt financial support was provided to meet education needs (difference found based on 445 cases: 94 percent tamariki Māori, 88 percent tamariki non-Māori)
- assistance is provided to support tamariki with education or training needs (little difference based on 246 cases)
- where there are education progress concerns, practical steps are taken to address risk (difference found based on 228 cases: 88 percent tamariki Māori, 92 percent tamariki non-Māori).

Support for tamariki and rangatahi with disabilities

For the same five NCS Regulations, we compared the data for tamariki with disabilities with tamariki without disabilities to see if there are any differences between how they are supported. Oranga Tamariki data shows:

- education or training needs were identified in the needs' assessment (difference found based on 311 cases: 80 percent for tamariki with disabilities, 75 percent tamariki without disabilities)
- the current plan covers education or training needs (difference found based on 627 cases: 90 percent for tamariki with disabilities, 84 percent tamariki without disabilities)
- prompt financial support was provided to meet education needs (no difference based on 445 cases)
- assistance is provided to support tamariki with education or training needs (little difference based on 246 cases)
- where there are education progress concerns, practical steps are taken to address risk (little difference based on 228 cases). 118

Oranga Tamariki data does not show whether it makes extra educational support available to tamariki with disabilities.

While we did find differences in support for tamariki Māori and tamariki with disabilities, these findings are based on small numbers and were not tested for significance.

Barnardos

Barnardos tells us that rangatahi in its custody are enrolled in various forms of education. It supports them to access learning and take part in extracurricular activities and works with caregivers to support rangatahi in their education.

Barnardos says that rangatahi in its custody are performing well in their education and employment. When concerns arise about education, Barnardos works hard to develop plans to address these concerns.

Barnardos receives regular reports and updates from caregivers and education providers about the progress rangatahi are making with their education. It stores education reports and assessments, and these are readily accessible.

When rangatahi are transitioning to independence, Barnardos completes a life-skills assessment and refers rangatahi to a service that supports them with their transition.

Dingwall Trust

Dingwall Trust reports it has achieved all mātauranga measures.

The measure about providing extra support with education to tamariki with disabilities does not apply to Dingwall Trust.

Open Home Foundation

We asked Open Home Foundation to provide data for 32 general measures about mātauranga. 119 Using its administrative database, Open Home Foundation provided data for 9 measures for each of the 93 tamariki in its custody (see Appendix 2a). Open Home Foundation's responses are shown in Figure 29.

Open Home Foundation did not have data for the other 23 measures (see Appendix 2b).



Figure 29 - Open Home Foundation responses to measures about mātauranga

Note: The data provided related to the 54 tamariki in Open Home Foundation care that have a current CANS assessment and plan. When there are fewer than 54 responses for a measure, this reflects where tamariki are not in a specific age-band, or where financial or education-related supports were not required.

Assessing education and training needs

Open Home Foundation has a current CANS assessment and plan in place for 58 percent of the tamariki in its custody. The remaining 42 percent of tamariki include those that have had a CANS assessment completed previously and those that have never had one.

Open Home Foundation tells us that a completed CANS assessment and plan includes all types of needs. From Open Home Foundation's data, we see that when tamariki have a current CANS assessment, 100 percent of those assessments cover every measure of education and learning needs and support.

Open Home Foundation does not have data to measure whether tamariki have support to access suitable books and toys, play opportunities and other experiences. It also does not have data to measure if tamariki are informed of their rights to try new and fun things. 120

Accessing education, training and employment

Seven out of eight tamariki aged under six years are enrolled in some form of education that is assessed as being in their best interests. Open Home Foundation says that when tamariki are not enrolled it records the reason. Open Home Foundation data also states that 100 percent of tamariki and rangatahi aged between 6 and 15 years of age are enrolled with a registered education provider.

Open Home Foundation data does not show if rangatahi in its custody over the age of 15 years have been helped to enrol in education or training, or to access employment.

Assessing life skills

Of the 23 measures that Open Home Foundation does not have data for, 9 relate to transitioning to adulthood.

Open Home Foundation does not have data on whether it has assessed the life skills of rangatahi transitioning to adulthood; whether it has assessed what support rangatahi need to become independent 121 and remain independent when they are no longer in care; whether it has helped rangatahi develop life skills; whether it has given rangatahi help to access education and employment services when they leave care; and what support is available to them to develop their knowledge and skills, as they transition to independence.

Coordinating with education providers

Open Home Foundation does not have the data to measure whether it provides education providers with enough appropriate information about tamariki; whether it has contact with education providers to discuss the progress of tamariki at school; or whether it receives regular written updates from education providers.

Without knowing if it receives updates on the progress tamariki are making at school, Open Home Foundation does not know if there are any concerns about their progress or if any practical steps are being taken to address education risks.

Foster parents told us that positive and accepting attitudes from schools and advocacy, have a positive impact on mātauranga for the tamariki in their care. One foster parent said: "School professionals have improved and [are] more willing to assist. They were willing to get her Te Kura and move her to half days."

Another foster parent said:

"The high school never told the trade support about his learning disabilities. So I spoke to the school, and now one of the teacher aides goes to the farm. He was getting into trouble and they told me, 'We didn't even know he had a learning disability!'. But now he's really open, he can tell people he can't read and write. He knows now he can just say. I've taught him that if you don't know how to spell a word, just ask."

One foster parent told us:

"All schools in our valley rejected her, took MOE to force them to take them. In 2019, they said, 'You're forcing our hand. But now she's on our school roll, we'll do our duty'. She has completely flourished. They said she wouldn't stay in school full days and not pass NCEA and she has completely abolished that."

Another foster parent also said:

"OHF has pushed the school really hard for the extra teacher aide hours."

Monitoring attendance and achievement at school

NCS Regulation 40 outlines the Oranga Tamariki chief executive's obligations to support tamariki to attend the education facility they are enrolled at.

In its foster parent handbook, Open Home Foundation advises its foster parents that their role includes ensuing they and their tamariki keep appointments — this includes attending school. Foster parents must inform the social worker if they cannot safely do this. If attending school is a problem for tamariki, this is included in their plans. Open Home Foundation has not provided us with information about any policies or practice guidance on this area.

When tamariki need support for education equipment, materials, and costs, it may be funded through the Open Home Foundation national office or, in some cases, by donations received by local service centres.

Open Home Foundation does not have data to measure if it takes action to support tamariki attending school. These actions include obtaining attendance updates from the education provider or foster parent; arranging ways to address concerns about attendance; helping to make alternative educational arrangements, if tamariki are excluded from school; and representing tamariki at any hearings about them being suspended or excluded from school.

Support for Māori and non-Māori tamariki and rangatahi

For five of the NCS Regulations we compared data for tamariki Māori and non-Māori to see if there are any differences between how they are supported. Open Home Foundation data shows little or no differences in whether:

- education and training needs are identified in the needs assessment
- education and training needs are included in the current plan
- financial support, to meet education needs, is provided promptly
- help with education or training needs is provided
- practical steps to address risks with education progress are taken.

While we did find differences in support for tamariki Māori, these findings are based on small numbers and were not tested for significance.

Support for tamariki and rangatahi with disabilities

Open Home Foundation does not have data to measure whether extra support with education is available for tamariki with disabilities.



Improving practice

Practice improvements

This part of the report relates to NCS Regulations 86 and 87, which ask the agencies to monitor, and report on, their compliance with the NCS Regulations.

We asked the agencies:

- which practices, related to the NCS Regulations, need to improve, especially for tamariki
 Māori and tamariki with disabilities
- what they will do to improve these practices
- how and when they will measure improvements
- when this will be done.

Barnardos

During the reporting period, Barnardos did not have any tamariki with a disability diagnosis in its care. It reports that it is strengthening connections with local iwi. In October 2021, it plans to introduce a quality-assurance framework, which it developed with Oranga Tamariki and other NGOs. Barnardos says the framework will help it: "do more to understand child wellbeing outcomes and the quality of practice within Oranga Tamariki and across care partners."

Dingwall Trust

During the next reporting period (July 2021 to June 2022), Dingwall Trust intends to review all its policies and procedures to check they align with the "Dingwall Model." The Dingwall Trust developed this model to align with the NCS Regulations and to measure compliance with them. It has reviewed its operations and will now develop and implement an improvement plan. Dingwall Trust reports it has reviewed its case-management system and plans to phase in improvements that will result in more meaningful data collection.

Open Home Foundation

Open Home Foundation recognises it does not have a consistent approach to ensuring tamariki and rangatahi Māori have their cultural needs met, and its cultural approach remains undeveloped. It reports that it is making more connections with Māori organisations. It also plans to roll out a new communication tool, before the end of 2021, that aims to give tamariki and rangatahi an extra way to express their views and contribute to their own care experience.

Oranga Tamariki

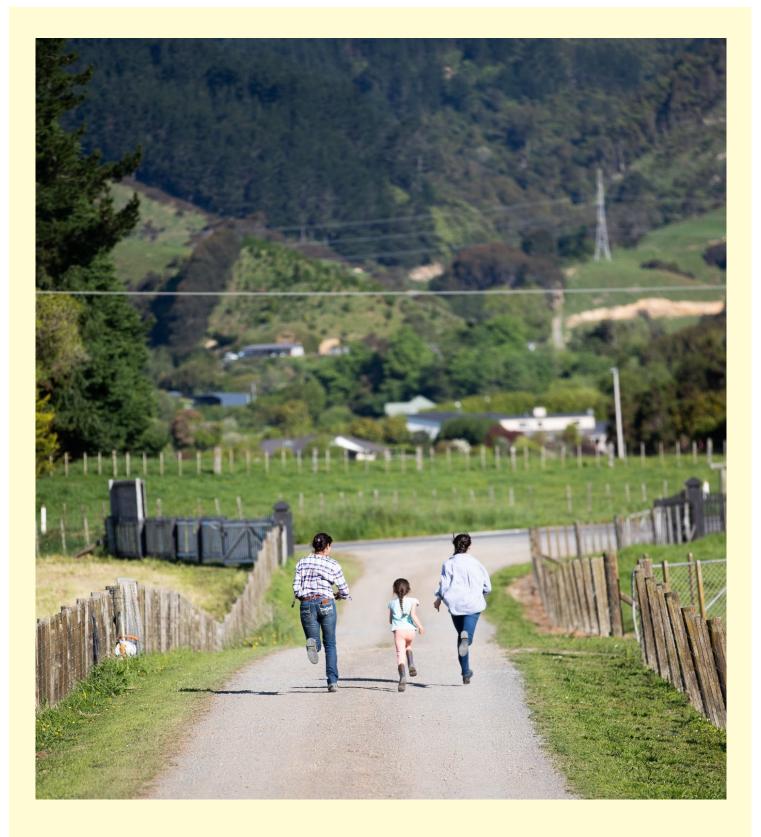
Oranga Tamariki says that, in most cases, its assessment, planning, communication and engagement practices are inconsistent and do not meet the expectations it has set out in its

practice standards, which provide the organisation's benchmark for staff practice. Oranga Tamariki reports it "would expect improvement to be slow and steady."

During the next reporting period, Oranga Tamariki will be training frontline staff, updating practice guidance and strengthening its professional supervision of social workers. It will measure improved performance by its delivery of these initiatives, and their results.

Oranga Tamariki provided the following as areas of focus for practice improvement:

- Over the coming year, we expect to invest further in training for frontline staff, with a focus
 on social work practice in support of the rollout of the new Practice Shift and will
 incorporate what we have learned to date about the most effective methods of building NCS
 capability.
- The "Practice Shift" programme itself provides an opportunity to reiterate what is expected
 of practitioners, particularly regarding working in partnership with whānau, hapū and iwi, and
 supporting cultural connection. The Regional Practice Change Networks will support sites
 and regions in making this shift through providing forums to discuss progress and identify
 areas for additional learning activities.
- The Leaders in Practice Programme has been developed and is currently being rolled out to strengthen supervision.
- In 2021 and 2022 we will develop and deliver a programme of work that aims to improve tamariki and rangatahi understanding about their rights and entitlements. This could include resources, practice guidance, or training.



Te Mana Whakamaru Tamariki Motuhake

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