

Interim Service Specifications

Bespoke Care

**Additional Requirements to the
Service Specifications and
Addendum for Shared Care**

1. Purpose

This specification sits alongside the 'Service Specifications and Addendum for Shared Care' and sets out the additional requirements and service features making up bespoke care.

<https://www.orangatamariki.govt.nz/assets/Uploads/Service-Specifications/Shared-care.pdf>

2. Service Definition

Bespoke care is one of the care responses delivered under Shared Care.

Bespoke care is planned, individualised and intensive staffed care services; often two to one (2:1) staffing ratios are in place at the beginning of care and a range of professionals are involved to ensure the identified outcomes for Children and Young People are achieved. Key to the delivery of bespoke care is the oversight and delivery of specialist programmes and interventions to meet the individualised needs of Children and Young People.

The service will provide 24-hour intensive and active support. The service will be flexible in the provision of night-time support i.e. whether awake or sleepover staff are needed will depend on the needs of the Child or Young Person as defined in their All About Me Plan.

Services will generally be time limited and have a focus on transitioning the Child or Young Person back to their whānau, to less-intensive care responses or independence and transition to adulthood.

3. Who are the people involved in bespoke care?

Providers of bespoke care are organisations that can meet the requirements of this service specification and who meet the following criteria:

- approved under section 396 of the Oranga Tamariki Act 1989 and demonstrate good organisational capability and expertise in the provision of specialist care for Children and Young People
- experience in managing complex support needs in Children and Young People
- demonstrated ability to manage and develop a bespoke care service or an ability to provide bespoke care
- strong relationships with the wider sector supporting Children and Young People.

4. Client Group

The primary client group for bespoke care placements are for Children and Young People with complex support needs who are in the custody or guardianship the Oranga Tamariki Chief Executive (under section 362 of the Oranga Tamariki Act 1989) and in need of Care and Protection. Other Children or Young People may be included from time-to-time by exception with agreement between the provider and the Purchasing Agency.

5. Referrals

Referrals for bespoke care placements will come from the Oranga Tamariki High Needs Services team or the Contract Advisor.

Referrals from any other source received by the Provider will be redirected to the High Needs Service or the Contract Advisor.

A needs assessment¹, identifying the Child or Young Person 's immediate and long-term needs, will be provided by the Purchasing Agency as part of the referral. Where there are difficulties considering a referral because of insufficient assessment information, compatibility or preparation requirements, the provider will work with the Purchasing Agency to find a solution.

The provider will make all decisions to accept or decline a referral. In the case of the provider declining a referral, it will communicate this back to the Purchasing Agency in a timely manner.

6. Service Proposals

Comprehensive service proposals will be developed by the provider detailing the type of specialist service that will be provided to Children and Young People.

Proposals will set out a detailed description of services to be delivered to Children and Young People, staff set up and training and all associated costs. Children and Young People, their support network and Oranga Tamariki Social Workers must be asked to provide input into the development of the service proposal.

The level and type of service set out in the proposal will reflect the support needs of the Child or Young Person and will be agreed with the Purchasing Agency.

7. Length of stay

The length of stay will be agreed between the Purchasing Agency and the provider. The service includes support to transition into and out of the care placement.

8. Child or Young Person and Social Worker input into the service

In addition to requirements under part 4 of the Shared Care Service Specification (Participation and Views of Children and Young People), Children and Young People, their support network and Oranga Tamariki Social Workers must be asked to provide input into the operations and development of the bespoke care. These may include, but is not limited to, input into:

- policies and procedures that relate to the running of the home
- service planning and development
- staff selection/appointment
- provider quality monitoring
- development of the Individual Care Plan
- decorating the home
- advisory boards, including representation on advisory type boards
- activities such as social and recreational activities
- culturally specific involvement in service planning and review processes.

¹ As set out in Part One of the National Care Standards and Related Matters Regulations (2018)

9. Occupancy of services

Bespoke care placements are purchased using a capacity-funded model. This means services are funded to remain open and fully functional for the duration of the agreed contracted period irrespective of whether the Child or Young Person is sleeping the night in the service.

If a young person is missing from the service, the provider will immediately notify the High Needs Service and or Contract Advisor and plans will be made to either return the Child or Young Person to the service, transition the service to another provider or care placement or exit the Child or Young Person from the service (refer to the Shared Care Service Specification for the process to use when a Child or Young Person is missing).

10. Linkages with others

It is critically important that the provider works together with other providers to ensure that Children and Young People have access to the full range of services.

The Provider will develop co-operative relationships to support the Child or Young Person, which will include but is not limited to:

- the multi-disciplinary team involved with the Child or Young Person
- the Child or Young Person's legal representative
- schools and learning support providers where appropriate
- day and/or recreational activities
- VOYCE Whakarongo Mai
- relevant ethnic and cultural groups
- Disabled Persons' Organisations
- advocacy services
- Disability Information Advisory Services (DIAS)
- transportation services to recreational and/or day activities etc
- Office of Children's Commissioner
- Independent Children's Monitor.

The provider will play a key role in managing any disputes that occur among and or with other providers concerning the course of treatment of any Child or Young Person and ensure they are resolved in a timely manner.

11. Transfer of services

Any transfer to an alternate provider or to other accommodation will be discussed and agreed with the multi-disciplinary team involved with the Child or Young Person and the High Needs Service or the purchasing agency's Contract Advisor prior to any move being made.

The Purchasing Agency requires that any transfer of services occur with a minimum level of disruption to the Child or Young Person and their plan.

The provider will establish protocols and procedures with the Oranga Tamariki to ensure continuity of services and a minimum level of disruption when the Child or Young Person moves into and out of services (such as changing residences, moving to a new provider or to a new funder). This includes ensuring that information transfer and handovers need to be timely and carried out to the highest standard.

12. Transition management

In addendum to the transition requirements set out in the Shared Care Specification, transition management in bespoke care can include the provider working with the Purchasing Agency to transition the Child and Young Person to their whānau, to a less-intensive care response, or to transition to adulthood.

To achieve this, the following will need to be completed by the provider:

- Work with the Purchasing Agency and others to determine at what stage the individual no longer requires a bespoke care service and is ready to transition to other types of care responses
- Develop, in conjunction with the Purchasing Agency and others, a comprehensive transition plan
- Convene or participate in transition meetings as required with the Child or Young Person and those involved in the development and/or implementation of the transition plan
- Ensure all aspects of the transition plan are co-ordinated and the roles and responsibilities of all parties are understood and carried out.

Where a Child or Young Person requires admission to a Mental Health setting, hospital setting, or other specialist service, the provider will work with the Purchasing Agency to facilitate this and to ensure an appropriate plan to return to the service is established upon discharge.

13. Exit from services

When a named young person exits the Provider's service in an unplanned way prior to the expiry date of service set out in the Outcome Agreement, the Purchasing Agency and the Provider will agree the costs to be funded for a period of time from that date to allow reasonable time to close the service. During that period, the Provider will accept new referral(s) to the service at the same site if required by the High Needs Service.

The Provider is responsible for ensuring relevant information about the bespoke service is communicated to the Oranga Tamariki Social Worker upon completion of the bespoke care placement.

14. Housing (leased by the provider)

This section applies if the provider has entered an arrangement to lease a property from which the Service will primarily be provided.

Any house leased by the Provider to provide a service to a Child or Young Person will be treated as the Child or Young Person's home and will function accordingly. Staff will provide services into the Child or Young Person's home as set out in the support plan.

Homes will be safe and comfortable and may be shared with other Children and Young People with the agreement of the purchasing agency.

Each Child or Young Person will have their own bedroom, except for young couples who choose to share. There will be no identifying features (signage) on the house or vehicles to denote the house (or associated vehicle) as different from others.

Furnishings will reflect age and appropriate living environments. Where possible and appropriate, Children and Young People will be encouraged to have personal belongings; where this is not appropriate it will be stated in the Plan.

Provide evidence that the house complies with the Healthy Home Standards, asbestos testing, fire safety report that says the home is compliant.

In addition to the Provider's responsibilities as set out in the [Shared Care] Service Specification:

The provider will work with the holder of the property's lease to:

- respond to any faults as promptly as reasonably possible
- meet all its responsibilities under the Building Act 2004
- maintain and repair the home as necessary and appropriately, including fixtures and fittings.
- ensure the holder remains responsible for all general building works and modifications (e.g. picture hanging, painting internally and externally, fence building, and renovations to dwelling).

The provider is responsible for:

- ensuring each home is fitted with a fire alarm system
- ensuring each home is set-up to minimise the risk of inappropriate behaviour and absconding
- supplying and replacing furniture and equipment, including white ware, a lounge suite and dining suite.

The provider is responsible for meeting the running costs of the home, including:

- alarm monitoring
- insurance
- rates
- power
- water rates
- lawn mowing
- glazing.

The purchasing agency will:

- pay for environmental modifications to the to ensure physically safe internal and external environments that meet the assessed mobility and safety requirements of the Child or Young Person
- undertake and pay for any repairs required as a result of uninsurable damage caused by Children or Young People while they are appropriately supervised and who are in the custody or guardianship of the Chief Executive.

Notwithstanding the "Insurance cover" section of the Shared Care Service Specifications, the Purchasing Agency is responsible for insurance arrangements in relation to the property to the extent set out in the lease.

The section on Insurance in the Shared Care Service Specifications (see pg 16/61) refers, where applicable, to both contents and house insurance.

15. Staffing

The Provider is responsible for ensuring competent staff that meet the Vulnerable Children's Act (2013) requirements are employed to deliver bespoke care services.

Staff composition and competencies will reflect the needs of the Child or Young Person. The provider will have staff with significant competency in understanding and addressing the needs of Children and Young People with complex support needs and ensuring that the skills base is readily available to influence planning and delivery. This will include staff who have undertaken relevant training from a range of professional disciplines e.g. health, behavioural and social sciences.

Where the Provider does not have specialist staff to address specific needs, it will be expected to develop service linkages to facilitate access to that expertise.

The service may be provided by a mix of professionally qualified staff (eg Social Workers, psychologists, nurses, occupational therapists), managers with relevant expertise and support workers.

The Provider will have enough experienced staff to provide a safe level of service relative to the assessed needs of Children and Young People, which may include but is not limited to:

- supporting Children and Young People
- communication requirements
- behaviour support
- risk management
- disability-specific needs
- personal cares and social functioning.

The provider must ensure appropriate staff rosters are in place at the home and back up for staff is available when staff are on leave or unavailable.

The Provider will be responsible for ensuring that staff training relating to the Child or Young Person includes the following:

- delivering developmentally and age appropriate activities/outings, interactions and supports
- understanding the impact trauma has on the neurobiology and developmental needs of children with disabilities
- recognising risks to the safety of the Child or Young Person or instances of possible abuse and the organisation's prevention of abuse and neglect policy in relation to Children and Young People
- competency in child protection and agency procedures and protocols for dealing with situations where abuse is either observed or suspected
- competencies to ensure the All About Me Plan of the Child or Young Person are fully implemented and monitored, and all support needs met
- ensure staff are aware of legal obligations relating to the voice of the Child or Young Person and participation in their care and planning and have mechanisms to effectively capture the voice of the Child or Young Person appropriate to their specific developmental and social capabilities
- restraint and enablers.

The Provider is responsible for developing and implementing a training plan for all staff. The training plan will ensure staff are trained to deliver effective supports and services. This training may include but is not limited to:

- the effects of trauma on a Child's or Young Person's behaviour and development
- behaviour support, including interactions that will enhance the Child or Young Person's self-esteem and independence
- disability and mental health awareness
- legal definitions and policies relating to Children and Young People in custodial and guardianship arrangements under Oranga Tamariki Act 1989
- how to recognise and manage risks to Children and Young People's safety or possible abuse
- explaining the Providers policy for implementing care plans (including preventing and managing safety and abuse)

- physical care e.g. using equipment such as hoists and communication devices etc
- adopting effective communication strategies when dealing with the Child or Young Person and their whānau
- Medication management.

The Provider will respond to the cultural needs of Children and Young People using their Service by actively recruiting, encouraging, promoting and developing Māori, Pacific and other ethnically diverse staff to be employed at all levels of the Service, reflecting the ethnicities of Children and Young People using the Service.

16. In-home Supports

The Provider will ensure a physically safe internal and external environment that meet the particular requirements of the Child or Young Person and complies with their plan. Staffing levels, behavioural management techniques and alternative activities are considered primary means for providing for the physical safety of children or a young person.

The Provider will ensure the home environment is supportive and affirming of the Child or Young Person and provides appropriate opportunities for rich and positive peer and social interactions, as well as activities and outings.

The Provider is responsible for:

- providing a positive and affirming environment for the Child or Young Person, with developmentally and age appropriate activities/outings, and peer interactions
- providing a 'home-like' environment where the Child or Young Person will be encouraged to bring personal belongings that enable them to adapt and feel comfortable
- ensuring secure, physically safe internal and external environments that meet the mobility and safety requirements of the Child or Young Person
- ensuring the Child or Young Person has an identified key worker who will take overall responsibility for their welfare
- keeping daily reports on progress/interventions/incidents and activities of the Child or Young Person, including administration of any medication
- providing domestic supports like those that are provided in home, such as meals, laundry, and personal care
- providing each Child or Young Person with their own bedroom, unless it is their clear choice and preference not to have their own bedroom.

17. Alternate education setting

When a Child or Young Person is not able to attend school, the provider will work with the Purchasing Agency to ensure other education options or alternate activities are provided.

These services will provide a flexible and varied programme of activities, determined largely by the individual needs of each Child or Young Person, and will provide a safe environment of mutual support and information exchange.

The style of the services will be such that:

- there is an emphasis on supporting and building the strengths of each Child or Young Person
- there is an emphasis on meaningful and valued skill development
- the needs of Māori and Pacific Island people are met by the provision of culturally derived and appropriate skills programmes

- options and activities are age and gender appropriate.

18. Interface with Specialist Services – ie Mental Health and Disability Support Services

It is expected that many Children and Young People assessed to need bespoke care may require the involvement of specialist services, such as Mental Health services and/or Disability Support Services.

The Purchasing Agency expects that in all such instances, Providers will work together with Community Mental Health services and Needs Assessment and Service Coordination (NASC) agencies to ensure the best outcomes are achieved for the Child or Young Person, where they are involved.

Roles and responsibilities of specialist services involved with the Child or Young Person will be documented and reflected in individual plans.

19. Implementation of specialist service programmes and plans (specific treatment, habilitation and rehabilitation programmes)

Specialist services will be implemented to address goals in the Child or Young Person 's plan.

The provider shall ensure appropriate activities and programmes are provided and monitored by persons appropriately skilled to administer them.

The provider will work with the Purchasing Agency to ensure access to additional services as appropriate e.g. alcohol and drug treatment, harmful sexual abuse treatment, counselling, educational support, behaviour support services etc.

It is expected that providers will meet best practice standards and meet practice guidelines that exist on relevant issues eg:

- Administration of any Medication
- Restraint Minimisation if agreed and part of the plan.

20. Trauma Informed Care

The Provider will:

- Ensure that support is addressed in the Child or Young Person 's plan
- Support the development and implementation of programmes by other relevant specialist services
- Ensure that staff are trained and able to contribute to and implement support programmes.

21. Equipment

The provider will ensure access to standard (non-customised) equipment necessary to meet the needs of the Child or Young Person (such as communication devices) including equipment for general use (such as hoists and adjustable beds).

22. Risk Management

In addition to the requirements in the Shared Care Service Specification, the Provider shall address the following:

- staff recruitment and supervision that emphasises the safety of the Child or Young Person
- staff rosters ensuring adequate supervision, particularly when staff are carrying out personal care of the Child or Young Person
- the compatibility of the Child or Young Person with others who will be resident at the same time in the home
- the safety of people and staff when working with Children and Young People with challenging behaviours
- dealing with challenging behaviours – when and how to access specialist support services and when to access reassessment and/or review.
- management of relationships with the immediate neighbouring community.

23. Other requirements

The provider will be required, under the terms of contract to abide by all relevant New Zealand legislation including but not limited to:

- Mental Health (Compulsory Assessment and Treatment) Act (1992)
- Criminal Procedure (Mentally Impaired Persons) Act (2003)
- Victim Rights Crimes Act (2002)
- Intellectual Disability (Compulsory Care & Rehabilitation) Act (2003).

24. Agreed costs

Costs relating to the service will be agreed on a case-by-case basis using the purchasing agency's Fair Funding Framework.

Any cost over and above what has been agreed in the Provider's budget must be agreed with the Purchasing Agency before purchase. The Purchasing Agency is not liable for any amount not agreed. The agreed budget is as follows:

Name of Provider
Costing
Premise set-up: Specialist Training: Care Staff: Service Manager or team Leader (2 nd tier support): On-costs (Superannuation, ACC, unplanned leave): Rent: Power/gas: Landline, mobile phone, internet: General operation costs: Lawn mowing, minor repairs etc: Food: Incentives, quality of life incidental costs: Birthday / Christmas: Clothing: Pocket money: Health: Transport: Overheads:
Total Expenses
Providers Margin
Total Price per annum

25. Review of agreed budget and service

The Purchasing Agency and the Provider agree to undertake a review of the Agreement Price (budget cost versus the actual cost incurred) by [enter date].

Each review will specifically consider the:

- assessed needs of the Child or Young Person and whether the level of staffing is still needed
- Staffing ratios and costs
- Review of day activity, ie access to school.

26. Reporting Requirements

To be determined. Reporting requirements set out in the Shared Care specification apply in the interim.

27. Service proposal

Attach here