

Child / Young Person’s Name:

Date of Birth:	Legal status of the child or young person:
Name of practitioner who gained consent:	Agency:

Who we are

The High and Complex Needs Unit (HCN Unit) is a cross government strategy that is jointly supported by the Ministry of Health, the Ministry of Education, and Oranga Tamariki—Ministry for Children.

What we do

The HCN Unit works collaboratively with multiple government and non-government agencies, and private providers to create High and Complex Needs (HCN) plans that work towards finding positive solutions and supports for children/young people who have high and complex needs.

We coordinate intensive services around these children and their families in a way that is intended to bring new hope, stability, new skills and a positive future. Close collaboration is at the heart of what the HCN Unit does. We know that we get better results for children and young people when agencies work closely together to focus on the needs and outcomes of children with high and complex needs.

Privacy statement

All information collected and/or generated in relation to the HCN process is confidential to the child/young person concerned, their family/whānau/guardians, and the relevant staff and practitioners who will work with you and your child/young person during the HCN process. Relevant staff and practitioners include staff from:

- Oranga Tamariki—Ministry for Children
- Ministry of Education
- Ministry of Health
- HCN Unit
- Private providers who have been agreed as part of the HCN Plan
- NGOs who have been agreed as part of the HCN Plan

The information collected and/or generated can only be used for the purpose for which it was collected and/or generated and it cannot be shared with any agency or individual not represented through the HCN process (as listed above), without the consent of the child/young person’s parent(s) and/or legal guardians or unless its use or release is in accordance with the Privacy Act 1993.

The information collected may be used for statistical or research purposes. When used in this way the information will not identify individual children or their whānau.

The information collected and/or generated during the HCN process will be held by the HCN Unit, located within Oranga Tamariki—Ministry for Children. Your records will be kept securely.

The child/young person and their family/whānau guardians have the right to see the information held about them and to ask for any errors to be corrected in accordance with the Privacy Act 1993.

Consent

Consent should be given by the child/young person’s legal guardian. All guardians have a duty to consult, where practicable, with the other guardians.

By signing this consent, you are consenting to information about you, your child/young person and their family/whānau being shared with the relevant staff and practitioners who will work with you and your child/young person during the HCN process. Relevant staff and practitioners include staff from:

- Oranga Tamariki—Ministry for Children
- Ministry of Education
- Ministry of Health
- HCN Unit
- Private providers who have been agreed as part of the HCN Plan
- NGOs who have been agreed as part of the HCN Plan

I understand and agree that:

- I have read the privacy statement and I understand how my personal information and information about my child/young person and my family/whānau may be used.
- I have been told and/or read about the HCN process and I understand and agree to my child/young person being involved in the HCN process.
- I have read the HCN referral information about me, my child/young person and their family/whānau and I consent to the referral being submitted for consideration.
- By signing this consent form, I agree to share information about myself, the child/young person and their family/whānau with private providers and NGOs; who will provide interventions during the HCN process.
- I understand that I have the right to request any information collected and/or generated during the HCN process about me or my child/young person and to ask to have any errors corrected.
- By signing this consent form, I agree to the Ministry of Health, the Ministry of Education, and Oranga Tamariki—Ministry for Children being collectively involved with my child/young person and my family/whānau throughout the HCN process.
- I understand that the above named agencies will follow their privacy policies and comply with applicable provisions of the Privacy Act 1993 if they use or share any information collected and/or generated in relation to the HCN process.
- The referring agencies have explained their complaints processes to me and I understand that if I make a complaint the above agencies will follow their relevant complaint processes.

Name of legal guardian giving consent:	Relationship to the child:
Signature:	Date:

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Signature:	Date: