# Developmental Evaluation Report Summary

## For residential services – sensory, learning and physical disability

|  |  |
| --- | --- |
| **Name of provider:** | Hawksbury Trust |
| **Number of locations visited by region** | 2 |
| **Date visit/s completed:** | 3 April 2017 |
| **Name of Developmental Evaluation Agency:** | Standards and Monitoring Services |

## General Overview

|  |
| --- |
| The four men living in this home have lived together for some time and appear to get on well together. The men are being assisted to do as much for themselves as possible and each of them enjoy a number of activities outside of the home.  Three of the men utilise an independent vocational programme at least two days a week each. This programme is a solely community based initiative that provides a variety of activities. Many of these activities are quite physical such as mowing lawns and gardening for the elderly. The men also variably use two other vocational services in the area.  The service has computerised all documentation and reporting systems. The staff can diary what is happening for each person on a daily basis and these notes are required to be read by each successive shift (handover). The staff communication diary is the only non-electronic media used in the home as this provides appointment notes and letters for each shift.  Personal plans appear to reflect the interests and aspirations of the people. One or two of the men are somewhat reluctant to talk about “dreams and aspirations” but this may be a function of how goal planning is approached. Augmenting the more traditional approach may be aided by the electronic forms provided for personal planning goals. These feature a page for each goal and are designed in such a way that new goals can be added as desired, rather than waiting for the ‘planning meeting’ held annually. This style of planning makes it more realistic for individuals as it mimics what all of us do when we consider trying out new things or pursuing an interest or ambition..  Individual support plans (daily support needs, risk assessments, abilities, likes, dislikes etc) are easy to access and are required reading for all staff (especially new and relieving staff). The Evaluation Team discussed the reliance on electronic records with the service during the feedback meeting, especially with regards to civil emergencies etc.  The home is a modernised older home that is comfortable and well-appointed.  Overall the Evaluation Team were impressed with the quality of the service provided to the people in this home.  *We spoke with one family member and some of the men living in the home, and all were very satisfied with the service at the present time. Vocational services associated with the people in this home were also very satisfied with their association with the staff and managers of this home.* |

## Quality of Life Domains – evaluative comment on how well the service is contributing to people achieving the quality of life they seek

|  |
| --- |
| **IDENTITY**  The service has a completely computerised system for personal records. Support plans include all relevant sections concerned with the daily support requirements for each person, risks (in red), behaviour support needs (and plans as needed), health information, communication, likes and dislikes.  The approach to personal planning in this service is shaped somewhat by the style of the online recording sheets used to record ‘dreams and aspirations’. The system provides one recording sheet per aspiration that also includes space to break an aspiration down into achievable sub-goals or even steps. The sheet is authored by the keyworker and this person is responsible for overseeing goal completion. The only aspect the online sheets lack is an expected timeline for various stages of exploring each aspiration. The system holds great promise as individuals and their key workers (or other staff) may ‘discover’ new interests or aspirations quite naturally and can then consider (quite informally) whether these discoveries can be included as new aspirations..  The recording of personal planning and support plan goals is noted under distinct headings in daily diary notes. These headings make it easy to track progress on specific goals simply by selecting a particular heading. The same type of headings are used for health appointments or events, incidents, behaviour support and so on. Keyworkers review progress at regular intervals and provide brief notes in the same diary record to inform other staff, especially if a goal has not been pursued for some time. Planning goals are also discussed in staff meeting minutes, either as a brief summary or as more in-depth discussions (carried out for each person in turn at specific intervals).  The men in this home have lived together for some time and they appear to get on well together. The Evaluation Team were welcomed in the home and the men proudly showed us around. The atmosphere was relaxed and companionable.  The home is very close to downtown and the men can walk to public transport as needed. A vehicle is also available and the men are provided with transport assistance to attend vocational services as required. Each person has his own bedroom that is decorated to their personal taste.  Three of the men utilise the relatively new vocational service run locally. This programme is community focused and only uses a ‘base’ (there is more than one) as a launching pad to get people organised for their activities each day. Some of the men participate in a community outreach programme that assists people with lawn mowing and gardening. As well as this service the men can attend two other vocational services run in the area.  The vocational providers are very satisfied with the quality of communication from the service which is aided by the residential staff dropping off or picking up the people each day.  There appear to be clear lines of communication that are utilised and understood by both staff and families. Information about the service is located on their website. A newsletter is produced each season and is largely pictorial and provides a review of what both the staff and people in the service have been doing.  The policies and procedures documents at Hawksbury are available in printed form and are currently in the process of being updated. Some documents would be of interest to both the families and the people using the service if produced in accessible formats.  There was evidence that the staff treat the people with dignity and respect. The men were having a relaxed and jovial time with the staff member when the Evaluation Team visited and appear to have a good relationship. This was reinforced through staff interviews, conversations with the men and one family member, and through investigation of the style of records maintained for each person.  The men in this home are encouraged to express their choices as much as possible. For example, the situation where one man decided to keep his work clothes on for a while after work, while another had taken himself off for a shower and change was a good example of these men feeling able to make their own decisions in these areas.  **AUTONONMY**  The men in this home are encouraged to take an active role in domestic tasks. One person, in particular, assists with activities such as putting out the wheelie bin each week and hanging out washing. The men are generally encouraged to assist with keeping their room tidy, vacuuming, helping with dishes etc. Meals are prepared mainly by a staff member but the people can help with vegetables, setting the table etc.  Individuals are assisted in areas such as personal hygiene if this is required (some of the men are relatively independent in this regard). The type and degree of support is in line with each person’s support plan.  Menus are provided by a dietitian and take into account individual preferences, food allergies and special diets. The staff in the home report some degree of flexibility in the menu dependent on what is happening on a given day. This is one area where the service may wish to consider increased choice by these particular men since they are more independent. The meals, however, are well balanced and are enjoyed by the men in this home.  Each member of the staff team has completed or is in the process of completing the Certificate in Health, Disability and Aged Care to at least level two and in some cases level three. Most of the staff team has also completed an eight to ten session course in Hospice Care. Some have completed a mixed variety of in-service training courses such as epilepsy, communication and autism.  The home has a dining and semi-separate living area, there is also a good outdoor space with a table and chairs. Along with private bedrooms, there is space for privacy and receiving visitors. The staff appear to be respectful of private spaces and allow for private use of the telephone.  The home is not barrier free although one of the two bathrooms has a wet area shower. The home is appropriate for this group of men  All staff are able to access any individual’s file and records regardless of where they live within the service through the electronic filing system. The system files can be accessed remotely (eg, from an individual staff member’s home) and this increases the risk of access by other, unknown parties (for example, if a staff member is still logged on and has left a terminal for any reason). The service reports there is an exit process that will remove staff access from the system on the day a person ends their employment with the service. The Evaluation Team discussed issues concerning document security at the Feedback meeting with managers and provided a recommendation in another residential report completed at the same time.  The home appears as a typical home in a suburban street and is well maintained, both inside and outside. Internal furnishings are comfortable and the men each have a television in their own room.  Individuals are actively encouraged to access their community as much as possible and there are clear indications that the service/staff strive to make meaningful integration successful. Daily diaries indicate the men have quite active weekends and evenings    **AFFILIATION**  This group of men are very much ‘part of their community’. They can readily access the town centre and enjoy the occasional meal out, movie, or concert. The main vocational service used by the men is very community orientated although the other vocational centres include many in-house or non-integrated activities. Special Olympics is highly valued, although appears to be run in a segregated environment. One of the men enjoys going to the dairy for the paper and belongs to a Country and Western Club. Two of the men are regular church goers.  **SAFEGUARDS**  Most family members do not live nearby but the service (and families) have made efforts to maintain contact as much as possible.  Individual files are managed in the electronic system and provides details for next of kin, risk management and health needs, daily support needs (support plans), behaviour support (as needed), and so forth. Some documents are loaded directly onto the system and some are in pdf or jpg formats.  There are no hard copies of files available in the houses or the area office. The Evaluation Team discussed with the service the type of information that would be required in a civil emergency when the availability of regular staff may be compromised and the system may be down. In a worst case scenario whole household evacuations at short notice without essential support information may be a concern.  The staff are trained in behaviour support during their Certificate training but few have been involved in in-service or stand-alone courses in behaviour support. The service uses ABC recording sheets when an individual is in crisis and this is important in attempting to ascertain the function (cause or desired consequence) of a behaviour.  Each staff member has either a current first aid certificate (the majority) or is just coming due for refresher training. In the latter case refresher training is currently scheduled.  All of the staff have undertaken medication training and completed annual reviews. Medications are securely stored and procedures are followed.  Incident and accident reports are filed with each person associated with an incident. These forms provide space for manager’s responses and all incidents are discussed at staff meetings.  Hazard reporting is a standard agenda item in staff meetings. Staff are required to attend at least 75% of staff meetings annually.  The home is equipped with fire safety equipment. The fire equipment is checked at regular intervals by *Chubb*. Fire drills are recorded in the *electronic* system although the Evaluation Team only cited one example. The service reports fire drills are conducted either monthly or every two months. There are notes in staff records that indicate when each staff member has been involved in a fire drill.  **RIGHTS**  The policies and procedures documents provide a complaints process. The service stated that an entry confirmation letter asks families to contact the Team Leader if they require a copy of the complaints policy, complaints form or open disclosure policy. It may be useful for the service to develop an entry pack for families / guardians that outlines the complaints (or compliments) procedures and provides a statement of consumer rights and advocacy services and other relevant information. The one family member contacted by the Team indicated they could make a complaint if needed.  The staff to appear to understand the principle of ‘least restrictive alternatives’ and ‘non-aversive treatments’ with regards to behaviour support. These statements are made in policies and procedures documents, although not in one place.  The service provides access to and holds information about independent advocacy and informed the Evaluation Team that the people in the homes are visited by an independent advocate once a year  **HEALTH AND WELLNESS**  Each individual has regular check-ups with their own doctor that include health screens. The people have access to other health professionals such as podiatry, opticians, physiotherapy and speech therapy. The service closely monitors individuals for specific aliments.  The staff have training in infection control procedures, safe lifting/handling, and health and safety.  The service has an abuse and neglect policy in draft form. This policy includes definitions of most potential forms of abuse that can be experienced by people in supported accommodation situations (physical abuse, sexual abuse, neglect). Adding a statement on financial abuse or exploitation would be advisable. Creating a system for all staff to indicate (sign) they have read and understood the abuse and neglect policy would naturally be part of the finalising process.  The service has policies and procedures concerning restraints and use of enablers. These include definitions of environmental, physical and chemical restraints, but currently do not provide a definition for restraints used in emergency situations. Including this definition in future reviews would be useful.  None of the people in this home have documentation relating to restraints; indicating that restraint is not used. |

## Outline of requirement (not including those relevant to support for specific individuals)[[1]](#footnote-1)

|  |
| --- |
| Nil |

## Recommendations

|  |
| --- |
| Nil |

1. Please see the [evaluation tool](http://www.health.govt.nz/our-work/disability-services/contracting-disability-support-services/developmental-evaluation-disability-support-services) for reference [↑](#footnote-ref-1)