Developmental Evaluation Report Summary – Marralomeda Charitable Trust

At midpoint of certification cycle for community residential services – sensory, intellectual and physical disability

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| Name of Provider: | Marralomeda Charitable Trust |
| No of houses visited # and location | # 3 Christchurch  |
| Date visit/s completed: | 09 April 2021 |
| Name of Developmental Evaluation Agency: | SAMS (Standards and Monitoring Services) |

**Methodology**

Individual service (house) reports were completed by a range of SAMS Evaluators using a standardised developmental evaluation process and evaluation framework.

The SAMS Developmental Evaluation Approach primarily uses qualitative methods and a partnership model.

The methodology is consistent with:

* individualised focus
* partnership
* inclusion
* equity.

The approach enables both a process and outcome focus allowing the Evaluation Team to equitably represent the different views of the defined groups and compare the outcomes for the differing groups.

Evaluations are conducted by teams and normally each team includes at least one consumer or family member. Evaluation Team leaders and team members receive comprehensive training.

Information can be gathered through:

* observation
* individual and group face-to-face interviews
* telephone interviews
* review of protocols and procedures.

Before departing a service, initial feedback is presented to those involved in the evaluation process. A draft report is prepared on the basis of evaluation team consensus and circulated. This draft is then negotiated with the provider to determine a final document, including recommendations for development.

Individual service (house) reports were then collated to identify themes. The primary method of analysis involved a senior SAMS Evaluator reading all of the reports, summarising the key areas against the checklist specifications and providing a count of broad categories for each recommendation. The themes, drawn from the finalised individual service (house) reports, are the basis for this report.

Once summarised, the overview report was read by an independent person for clarity and balance.

General Overview:

Three residential services were the subject of this mid-point review of Marralomeda Charitable Trust and involved 10 people aged between xxx and xxx years living in the xxx area. The Evaluation Reports describe the positive experiences the people and their families are having and the quality of the committed, caring staff.

The people, and the majority of the xxx families interviewed, spoke encouragingly about the support they were receiving and indicated satisfaction with the services being provided. The people have opportunities to become involved in activities through the external day programmes as well as through the in-house Pike Centre. Several of the people described what they liked about the things they were involved in.

Areas for development were varied and in two instances were ‘person’ specific. Updating Home Agreements was identified in all of the reports, as was following through on minor repairs and maintenance issues.

**Areas of Service Strength**

* Relaxed, hospitable environments in which the people took pride and welcomed others, whether family, friends or new comers to the service.
* The service delivery is person-driven where the people’s choices are respected and their potential is recognised.
* The services are shaped to reflect the changing needs of the people with consultation at the forefront of decision-making.

**Areas of Suggested Development**

* Ensuring Home Agreements are updated.
* Follow through on repairs and maintenance issues.
* Address two ‘person specific’ recommendations as highlighted in the reports.

**1 – My Identity / Tuakiri:**

The reports noted the way in which the people wanted their spiritual needs to be supported was highlighted through their support plans.

For the most part most of the people have strong connections to their families and the majority of the families interviewed are satisfied with the way their family member is being supported. Conversations with the people associated with the service indicate they experience fulfilling, positive lifestyles which are respected and supported by their peers, assistants, allied organisations and management and board representatives.

The service supports valued family connections and has demonstrated its willingness to work alongside families to minimise any difficulty. Some of the people have siblings who have taken on the role of supporting them. For some people, visiting the grave sites of their departed loved ones is a comforting activity.

The reports noted that most of the people expressed themselves verbally with one person relying on sign language. Several of the people use hearing aids to assist their communication. It was encouraging to learn that assistants have undertaken learning sign language so they more easily communicate with the person who uses this mode of communication.

Acknowledgement of individual rights is reinforced in the way in which community members are encouraged to live their lives. The *Code of Health and Disability Services Consumers’ Rights* information reinforces in the individual’s rights and are reinforced in the Home Agreement.

The reports noted that several of the people are familiar with their rights and were encouraged to share their views. The people were confident in speaking up for themselves and their peers. The service intentionally sought out the people’s perspectives, emphasising their importance. House meetings provided excellent opportunities for the people to exercise their rights. One person interviewed is a member of the Transformation Care Team and has been involved in staff selection.

The camaraderie amongst the people for the most part demonstrated their respect for one another. One person was comforted by a flatmate when experiencing an emotional time. Should there be the occasional tense moment between the people the staff gently interacts to ensure everyone’s mana is upheld.

Information about the people is recorded in ways which are respectful and upholds the mana of each community member, acknowledge their years of experience. Being part of the service has become for many their extended family, especially as some have reduced contact with immediate family members.

**2 – My Authority / Te Rangatiratanga**

The people make many day-to-day decisions for themselves, most of which influence their lifestyles. They engage in activities through the Pike Centre, choose external vocational providers, visit family and friends, and choose how to spend their leisure time.

Should the people require help to make some decisions, their families or staff who know them well are available to provide guidance. We understand that changes can be made when things no longer suit the people’s needs. The service has demonstrated its commitment to providing the people with a quality lifestyle and their flexibility by respecting individual preferences.

The reports noted that each person has a personal plan which often included more immediate goals which were being worked towards, as well as goals that have been achieved. We gained the impression that the goals represented in the plans provided a holistic approach to supporting the people to have well-rounded lifestyles. A few goals were about staying connected with family, maintaining friendships and visiting places of interest, most of which are similar to other citizens in the wider community. In two reports, the goals being pursued were related to skill development. In all reports the achievement of past goals was noted.

**Area of Service Strength / Improvement Noted**

The majority of the people represented in the reports live together compatibly with some friendships having been established over the years. Newcomers into the organisation are welcomed and in two reports a well-planed transition occurred prior to someone shifting into the home. In all situations consultation is at the forefront of service delivery. It was noted individual preferences have been respected, even when alternative options may appear more suitable.

The reports noted that two of the homes were designed in an open-plan way which more easily promoted interactions between the people and support staff. One home (a rental) depicted an older style design with separate rooms and could benefit from an extractor fan in the kitchen and a dishwasher as a way to maximise hygiene. In two of the reports minor repair and maintenance issues required attention and these were noted as recommendations in the reports. One report suggested an occupational therapist be consulted in an effort to maximise the space available to the people.

**Area of Service Strength / Improvement Noted**

Despite the need for maintenance the homes are warm and comfortable and generally suit the needs of all people. The people have decorated their bedrooms to depict their interests and numerous artworks which have been created by them are displayed throughout the house. One of the reports notes a budgie is a favoured pet with another home having a resident cat.

The people take responsibility for a carrying out a number of household tasks. In one report it notes despite the people being retired, they continue to take part in some routines. The people vary in the amount of support they require for maintaining their personal health.

**Area of Service Strength / Improvement Noted**

The reports noted Home Agreement, along with an Appendix ‘Payment for Services’ is in some files although some of these appeared to need to be updated. This concern was reported as recommendations in all three reports.

The people chose who they live with and where they live, a number of people have lived together for some time with newer people transitioning into the service following appropriate introductions. In three reports positive comments were made regarding transitioning from one living environment to another. Comments made by a family member in one report stated “X adjusted very well”. One report highlighted the need to ensure moves between the homes were done with full consultation. Overall compatibility is achieved and some people are supported by staff to manage behaviour that may impinge on the lifestyles of others.

**Area of Service Strength / Improvement Noted**

**3 – My Connections / Te Ao Hurihuri**

The people are very much part of the Marralomeda community and often socialise with others linked to the Trust. They visit their neighbours when they choose. The people link with others through the on-site day service, although some have experiences through external programmes. The people engage in activities in the wider community and use a number of local venues, eg, libraries, cafés, parks and gardens, etc. The service has transport should this be required to access any activities of interest, although some people use public transport when possible.

The people access doctors, dentists, optometrist and podiatrists. Through the DHB specialist departments consultants are also accessed. The reports spoke of the people having treatment for cataracts and glaucoma and one person was successfully supported to undergo treatment for cancer. Conditions such as diabetes, hyperthyroidism and loss of hearing are also managed well.

In many cases it is their peers and family members who make up the people’s personal connections. Their association with various day programmes, volunteer work and church affiliations provide additional network opportunities. The spiritual community which is closely linked with the service provides the people with additional meaningful connections.

**4 – My Wellbeing / Hauora**

The reports note that the people keep good health whether through diet, exercise or learning how to live alongside each other. Risk Assessments are developed in an effort to minimise any potential risk.

Because a number of the people are experiencing age related conditions, a Health Coordinator complements the staffing team so people’s health is well monitored. The staff participate in a range of training courses many of which relate to relevant medical conditions. The reports commended the service for its forward planning and anticipating the needs of some of their retiring community members.

Medical files are kept in locked cupboards and medication reviews occur regularly. Each person’s medication file includes their photo, sign-off sheets and blister-packed medication, including PRN information.

The reports noted that the people are supported by dedicated staff team who know them well. The configuration of the staff roster means that the people experience consistency, greater continuity and the creation of solid relationships.

An incident/accident register details situations that require intervention by the staff. Relevant information is collated which assists with determining the action to be taken.

Several of the reports talked about the people explaining what to do in the event of an emergency. The service is exploring further how to ensure people with limited hearing have sufficient information during an emergency. Fire alarms and a sprinkler system are in place in the homes.

An overall hazard register details hazards the people may encounter. A range of site-specific formats are used in the homes visited and at the time of the review a more unified house-specific registers were being developed.

**5 – My Contribution / Tāpaetanga**

Holding valued roles is one way in which the people’s contributions and mana is recognised and valued. The roles mentioned in the reports were extensive.

The reports mentioned that volunteer work and links to the external day programmes enables the people to form new friendships and maintain existing ones.

The quarterly newsletter provides information, events and activities as well as a range of photos for those who prefer visuals over written words.

All reports noted house meetings being held so the people can discuss areas which are important to them. In one of the newsletters a resident has been included on the Systems Transformation Team.

The service is supportive of the Enabling Good Lives (EGL) Principles and in July/August 2019 the EGL Provider Assessment was completed. The results were shared with the Board, Staff Education Day and in the following Newsletter. A second exercise was carried out in January 2021 and included ideas for further development. The service has participated in a series of System Transformation Workshops. As stated in the Summer 2021 Newsletter, their desire to ‘respond to Community Member’s specific hopes and dreams for their lives and that we are supporting people in a way that is consistent with the EGL Principles…’

**6 – My Support / Taupua**

The reports noted a friendly rapport between the people, their support staff and their peers. In two of the three reports people and their families were highly satisfied with the support being provided, with one report indicating additional work may be required. On the few occasions when tensions arose, the staff modelled and encouraged respectful interactions.

We heard that in some parts of the organisation a community member has been involved in the selection of staff.

The *Home Agreement* supports the right to make a complaint and encouraged issues to be raised in line with set processes. Should independent advocacy be required by any community member, the service has established links.

Recording information well ensures communication is effective, in addition to set hand-over times, progress notes are kept. The service has introduced a cloud-based system for storing records which is proving to make it easier for everyone to access the information they need

Each person has their support needs reviewed by the local Needs Assessment and Service Coordination (NASC) agency and any changes are explored.

**7 – My Resources /Nga Tūhonohona**

Each person has their support options assessed by the local NASC and the support contract (service agreement) is provided to the service.

As per the current system of service agreements, the amount of funding allocated to the service is unavailable to the families.

**8- Organisational Health**

The service has single staffing each weekday with additional support for specific activities being available on an individualised basis. During the weekends support is available from 7am – 9pm. Sleepover staff are utilised each evening.

The service has health and safety processes which ensure health and safety concerns are identified. Individual Risk Assessments are also in place.

The Charitable Trust is supported by a board which includes a diverse range of individuals.

A letter dated 2 December 2020 from the service’s accountants for the year ending 31 March 2020 stated that Financial Statements were completed and fairly reflect the organisation’s activities.

**9 – Value for Money**

The people included in the reports are supported within an ID residential contract, with the exception of one person who is supported through an Aged Care Residential Contract. Service agreements are held by the provider. For this person the service has established a Memorandum of Understanding between themselves and a nearby retirement home acknowledging the support provided to the person aged 89 years.

**Progress on Meeting Corrective Actions**

All Corrective Actions (except one) have been confirmed as meeting the requirements by the DAA. Information supplied to the DAA and verified by the Evaluation Team indicate that the remaining Corrective Action related to a Memorandum of Understanding regarding contract care was returned to the DAA 11 January 2021 and is yet to confirmed as completed. The Evaluation Team sighted supporting documentation, including regular reviews.

**Outline of requirements and recommendations:**

**Number of Requirements made 0:**

**Number of Recommendations identified in Evaluation Reports:** 10

Review Home/Service Agreements (x 3), Repairs and Maintenance (x 4), support communication (person specific), external buddy/advocate (person specific) and support compatibility.