# Developmental Evaluation Report Summary

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

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| **Name of provider:** | Shore Trust |
| **Number of locations visited by region** | 1 |
| **Date visit/s completed:** | 9-11 January 2018 |
| **Name of Developmental Evaluation Agency:** | SAMS |

## General Overview

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| Xxxxx women who share this home appear to get on well with each other. Although the home is relatively compact, there is more than enough space for the women to enjoy private and communal areas within the home and outdoor surrounds. The xxxxx bedrooms are spacious, and the downstairs lounge and kitchen/dining areas afford the women sufficient space to assist with meal preparation, having meals, watching television or pursuing their hobbies. There is a covered outdoor area off the lounge with outdoor furniture and a BBQ for the women and their visitors to enjoy as well as a decked area, small garden and lawn.  The Shore Trust’s other home is a 10-minute drive away. People from both homes enjoy social occasions together from time to time such as birthday celebrations and BBQs. The majority of support staff are able to work in both homes as required. One vehicle is provided for the women at this home and is used to assist them to attend appointments, go shopping and participate in community activities. The Driving Miss Daisy service is also contracted by the trust to take two of the women to their day activities during the week. Shore Trust runs a community participation programme and assists all the people to participate in a range of activities. |

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

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| **Identity**  The xxxxx women have personalised lifestyle plans that detail their aspirational goals. Goals are recorded in the S.M.A.R.T format and include a breakdown of the steps required to achieve each goal as well as the expected outcomes. The women also have a comprehensive care plan that identifies their needs and the personalised interventions that are used when assisting them.  Goal related activities are recorded each week and the documentation reviewed stated that all progress will be reviewed in picture form to assist the people to realise their goals. The women have a key worker who assumes responsibility for ensuring that they have everything they need including clothing and toiletries as well as maintaining contact with family and friends. Key workers contribute to the daily progress notes. The manager is able to contact the NASC at any time should any of the women experience a change in need or circumstance. Support staff encourage the women to do as much for themselves as possible including contributing to the running of the home by assisting with meal preparation, laundry and grocery shopping.  Shore Trust is a comparatively small organisation compared to other residential providers in the Auckland region. The family members interviewed liked the fact that the trust is small and unique. The layout of the home ensures that the women have their own bedrooms and a number of other private indoor and outdoor spaces available to them.  A vehicle is available for staff to use to assist the women get to nearby shops, community services and opportunities. The women have personalised daily activity schedules which include community participation activities and activities participated in at home. The home has one vehicle that is used to transport the women to activities and opportunities of their choice in the community. The women are supported to develop friendships with other people attending the same day activities or community events that they do. Family and friends are welcome to visit the women in their home at any time. The women spoken to said that they like their home and the staff who support them. The women are supported to get out and about including attending church, going to vocational programmes and joining in with various community groups. The staff appeared to know the people well and were observed to use very respectful support techniques and language when assisting them. The women are encouraged to do as much as they can for themselves.  **Autonomy**  The women all had their own daily routines and are assisted to follow these. During the week, xxx of the women attend day services for four days a week and the other woman has an individualised activity programme. Recordings by the staff in the home communication book were very respectful of the women and this respect was mirrored by the way the staff treated the women while the Evaluation Team was in the home.  Staffing levels and qualifications are appropriate to enable the delivery of safe and appropriate services to the people at all times. The manager has good relationships with the women’s doctors, the NASC and allied health professionals that can be called upon at any time.  Although the home is comparatively small, the layout of the home ensures that the women have plenty of opportunity for privacy in a number of indoor and outdoor settings. The women’s medical information and medications are secured in a locked cupboard. The Evaluation Team sighted completed consent forms for all the women. Consent forms are signed by the women and/or their representatives every year at their lifestyle planning meeting.  **Affiliation**  The women are supported to be involved in their community as much as possible according to the extent they desire. Two of the women are quite young and enjoy being active and meeting other people. These women attend day services during the week where they participate in a range of activities.  The women are also assisted through a community participation programme run from the home and the staff are aware of events and activities in the community that the women may wish to participate in. The women have access to their own doctors, hairdressers and banks.  **Safeguards**  The women are actively encouraged by the staff to maintain relationships with their family and friends wherever possible. The women have up-to-date needs assessments completed by the NASC with any specific support needs around behaviour identified. Additional risk management and behaviour support plans have been developed for the women who may require assistance in these aspects of their life.    The staff receive training and refreshers in non-violent crisis intervention techniques in order to be able to support the people in the most appropriate, non-aversive way. Medication for the women is blister packed and checked when brought into the home. The trust has a comprehensive medication policy and staff receive ongoing training and competency testing on medication administration.  Staff new to the trust receive a thorough orientation which includes being buddied up with more experienced staff before they support the people on their own. New staff typically begin their orientation at xxxxxxx xxxxxxx before working at xxxxxx xxxxx. Orientation includes two buddied sleepover shifts. Fire evacuations are practised every six months. They are timed, and the people spoken to were aware of what they have to do in the event of an evacuation.  **Rights**  The women and families were supplied with the Code of Health and Disability Services Consumers’ Rights information when they moved into the home. The contact details of the local independent advocate are known to the service, and the Evaluation Team were told that this person is being invited to a residents’ meeting in the near future. The family members spoken to were aware of the complaints process and would have no hesitation in making their feelings known. They thought that their issues were dealt with promptly and that they always received a response.  The staff in the home are very respectful of the women, using very supportive and respectful support practices and language in all recordings. The language used is respectful and non-judgemental. The difficulties and challenges experienced by the women are acknowledged and understood well and they are supported in a manner that enables them to do as much as they can for themselves.  **Health and Wellness**  The women’s health is monitored closely by the staff who contact GPs and allied health professionals should they become concerned about their health or someone expresses concern about their own health. The women access their own dentists or the dental services through the local hospital should they require specialised assistance.  The home has appropriate civil defence emergency supplies in addition to specific supplies that the people may need in the event of an emergency, eg, medication.  The trust has a policy on neglect and abuse aimed at ensuring that the people are not subjected to any form of neglect and abuse within the trust and that staff are able to recognise if such actions are happening elsewhere. The women are provided with a safe and secure environment to live in. |

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

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| That an agenda be developed for the residents’ meetings that encourages and enables the people to express their opinions on the support being provided, eg, menu choices, activities, staff performance, and that this feedback is conveyed to the manager as appropriate.  That the people be assisted to attend some advocacy forums, such as those held by People First, to encourage them to articulate their feelings, thoughts and opinions in a safe and positive manner. |

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)