# Developmental Evaluation Report Summary

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

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| **Name of provider:** | Allenvale Residential Trust |
| **Number of locations visited by region** | 1  |
| **Date visit/s completed:** | 13th – 14th August 2015 |
| **Name of Developmental Evaluation Agency:** | SAMS (Standards and Monitoring Services) |

## General Overview

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| Six people live in this house. Three have lived there since it was established in 1992.The Trust owns and runs only one house. This is a well presented house in suburban Christchurch. The house was renovated and expanded in 2002 to accommodate six people and their dog (three have lived there since it was established in 1992). The Trust has two part-time contracted administrative positions, an Agency Director and Quality Control Coordinator. The fulltime Manager and four other staff make up the cohesive support team. Some of these staff have worked at the trust for many years so the people and their families are well known by the support team.A comprehensive quality plan is in place, all policies and procedures are reviewed bi-annually and the Trust is in a sound financial position.The people said they enjoyed living there and were able to do things they enjoyed. The three family members spoken to confirm they are very satisfied with the service their family member receives. |

## 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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| 1 – Identity: All six people are able to choose their own goals and make decisions for themselves. They are able to talk about their lives, achievements, and ambitions. Care plans are in place for each person, and these are reviewed six monthly. Families have the opportunity to be involved with these. Living Life diaries have been introduced. By collecting and correlating information (in visible formats) people recognize their own interests, activities and achievements and can base future plans on these experiences and aspirations.2 – Autonomy: The Care Plans for all people identified their personal support required and it was evident that independence was encouraged. The residents contribute to the running of their home in a variety of ways. Allenvale Trust endeavours to ensure that people’s everyday life is as close as possible to norms and patterns valued by the general community.3 – Affiliation: Allenvale Trust has information regarding social and recreational activities available in the community. This is gathered from the local papers, flyers, affiliations with community groups and word of mouth. Interest and activities of choice are encouraged. Residents go to the library and other community facilities, participate in friendship groups and are involved in local sports groups. Each resident has access to their General Practitioner, and other health and personal services.4 – Safeguards: Risk Analysis and Management systems with behaviours noted are in place for all residents. Fire drills are practiced regularly. Accidents and incidents are recorded. Each person is discussed at each two monthly staff meeting where incidents, concerns and achievements are discussed and supports planned.5 – Rights: The residents have information available in relation to the Code of Health and Disability Services Consumer’s (HDC) Rights. Residents participate in regular flatmate meetings and have a say in the running of the house.6 – Health and Wellness: All changes and challenges with individual residents are met with flexibility. Families interviewed indicated they were informed of any changes or challenges. Residents interviewed indicated they enjoyed living in their home, they were encouraged to keep fit, healthy and active. |

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

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| **Findings** – 1.3.12.6 “Gaps were noted on two of ten medication signing sheets reviewed.**Action** – Ensure that medications are signed for at time of administration immediately.**Progress** – MetThe medications Policy has since been revised and is reviewed bi-annually. Policy states “All support workers will be trained in medication procedures and competency assessed. Competency will be reassessed annually or earlier in the event of medication error”.Two staff administer a controlled drug and sign the signing sheet entry in the controlled drugs register.**Requirements** There were no requirements linked to this report.**Recommendations** were made for improvements in providing self-advocacy and leadership opportunities for the people, enhancing existing personal recording systems as planning tools, plan for the changing health and support needs of some residents, seek network and training opportunities with other organisations. |

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)