# Developmental Evaluation Report Summary

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

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| **Name of provider:** | IDEA Services |
| **Number of locations visited by region** | 1 |
| **Date visit/s completed:** | 4-6 April 2017 |
| **Name of Developmental Evaluation Agency:** | SAMS |

## General Overview

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| Five women live in a six-bedroom home at X XXXXXX Street in XXXX. The home is located on a typical suburban street surrounded by many other houses and has a park and church nearby. The XXXX township is a two-minute drive away meaning that the women have easy access to shops, services and community activities. The home is owned by Accessible Properties Ltd and will be having some interior painting and decorating done as some of the wall coverings and paintwork need a refresh. The local branch committee recently purchased and installed an Archgola at the back of the house which provides shade and shelter for the women when sitting outside.  The women receive 24/7 support from IDEA Services and have a day programme run from their home given their age and stage in life. The women are assisted to participate in as many community activities as they can and wish to do.  The women maintain good contact with their families who are welcome to visit the women in their home at any time. The women are known to their neighbours and have friends who live nearby. The family members of the women spoken to thought that the communication between the staff and themselves was good and that they were kept fully informed about things that were happening for the women. The families have trust in and respect for the Service Manager.  The staff are very well supported by their management who adopt a ‘can do’ attitude to the support of the women and encourage all staff to try new things and give things a go. The staff have good connections with allied health and other community services. The local IHC Branch Committee is very supportive of IDEA Services in XXXX. |

## 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**  All the women have current personal plans and associated goals that are reviewed every three months and have comprehensive progress notes included. The goals reflect the age and stage of life of the women and were focused on activities like craft work, art and music. The Evaluation Team were advised that a new Outcomes Facilitator had recently been employed and that they will be reviewing the women’s personal plans soon. The family members of the women were invited to the annual personal planning meetings and participate or provide information if they chose to. The staff make daily recordings in the women’s diaries so that the families and others can see what they have been doing. The women are encouraged to do as much for themselves as they can by the staff who support and encourage them to do the things they enjoy and introduce new things from time to time that the women may enjoy.    The women have up-to-date NASC Outcome Plans that detail their personal support goals and associated requirements. The women have their own GPs, hairdressers and banks and are supported to access a wide range of allied health services as and when required.  The women have most of their personal possessions in their bedrooms with some photos and ornaments in the lounge and dining areas. Two of the women had outdated home agreements and the other women did not have an agreement. The Evaluation Team believes that having these agreements in place would protect the women and IDEA Services as well as ensuring that everyone is aware of their responsibilities and financial obligations.  Due to the age and stage of life of the five women, a day programme is provided for them at their home. The women have friendships with other people supported by IDEA Services in XXXX and will meet them at one of the day bases or at special occasions like the annual picnic. The women who have regular contact with family, some go to their family’s homes, are supported by family to maintain connections with family friends. The families felt that they were consulted and included in any major decisions made for their family members when they were unable to do this themselves. The family members knew who to contact if they had any concerns about their family member and would typically approach the Service Manager or the Level Four staff member at the home.  The staff afford the women respect and dignity through the language they use when talking to the women and making recordings about them. The staff know the women very well and understand that any new opportunities need to be introduced gradually.  **Autonomy**  The staff will always look for new opportunities that the women may enjoy and introduce these gradually so that the women are not overwhelmed by the situation. The women receive a regular update about what is happening in the community. This is produced by a person in one of the day bases and is sent out to all homes in XXXX. The women are supported by the staff with all their personal care needs which enables them to participate in activities around their home and in the community with confidence.  The women’s home is in good repair and meets the current needs of the women well. The carpet in the main thoroughfare areas is wearing thin and will need replacing soon to avoid becoming a hazard for the women and their staff. The home is due to have some interior painting and decorating done which will tidy up some walls, doors and ceilings.  The women’s personal records are held securely in a locked cupboard in the staff sleepover room. Medication files are kept in a locked cupboard in the dining room. The women’s private mail is delivered to the home and they are assisted to read and respond to their mail as necessary. All records by the staff about the women are current, complete and respectful with language that values and respects the women used at all times. Informed consent is the basis for all interactions with the women and family members have assisted with the completion of informed consent forms where necessary.  **Affiliation**  Due to the age and stage of life of the women, they base themselves from their home and enjoy a variety of activities in their home. The women are also supported to attend church, go to the library and assist with the local meals on wheels service. One women attended an advocacy and rights training workshop held a few years ago. The women are supported to have their own doctors, hairdressers and churches where they interact with others in the community. The staff network with a range of services including the local health centre, WINZ and the district nursing team. The women are known by some of their neighbours. A former neighbour used to invite one of the women into their home and play the piano for them. The women are encouraged to do as much as they can to contribute to the running of their home and assist each other occasionally.  **Safeguards**  The staff encourage and support the women to maintain contact with their families and friends. Families are invited to the home for special occasions such as birthdays and to attend the annual Christmas picnic in the park. Contact with families is noted in the women’s diaries and families and friends are welcome to visit the women in their home at any time.  The majority of the women have multiple medications and the staff manage this very well. Blister packs are always checked by the staff when they come from the pharmacy and all medication records sighted were up-to-date and accurately completed. Side effects of the women’s medication were recorded in their medication folders.  There is a very good on-call system and incident reporting is very thorough and has follow up actions to be taken where appropriate to minimise future occurrences. Emergency supplies including water, food and the women’s personal information is accessible in the event of a civil defence emergency. The staff are provided with comprehensive training including first aid and non-violent crisis intervention techniques. All staff have Level Two qualifications and some have Level Three and Four. Fire evacuation drills are practised every three months. The Evaluation Team were informed that a sprinkler system will be installed in the home in the near future.  **Rights**  Pictorial prompts are used to assist the women with their communication when necessary, eg, making choices about meals or activities. One of the women attended a disability advocacy and rights workshop several years ago and gained a certificate for this. The staff discuss each of the women at their fortnightly team meetings to ensure that everyone is aware of how they are and whether there are any matters that they need assistance with. The service has good connections with the IDEA Services advocate in Dunedin and would not hesitate to involve them if necessary.  The staff have a ‘can do’ attitude and look at any obstacles as challenges, not barriers. All recordings about the women are written in a respectful and valuing manner. The staff know the women well and would ask for a NASC reassessment at any time they thought this might be required if the needs of the women changed. Family members feel free to contact the staff at any time should they have any concerns.  **Health and Wellness**  IDEA Services in XXXX are particularly vigilant around ensuring that the women are supported to see their GPs whenever required, have regular medication reviews, attend annual health & dental checks, and attend the local foot clinic as required.  The women have comprehensive personal support plans that guide the staff on how to provide support. One of the woman requires a soft diet and the staff ensure that appropriate food is provided for her. All the staff have current first aid certificates and know how to access allied health services for the women. The women have their own doctors, dentists and pharmacists.  The women are assisted to manage their finances if they don’t have family to do this for them and the staff follow a robust set of policies and procedures to do so. Incident reporting is very well documented and includes suggested future actions that may mitigate the incident occurring again. Incident reports are always discussed at fortnightly team meetings.  Property inventories were current for the women including the items purchased and their cost. The women have a consistent team of staff who support them and know them well. The staff receive regular training in first aid and non-violent crisis intervention techniques. |

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

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| That individual home agreements are set up for the women and that these agreements are reviewed and signed off by the person or their authorised representative at least once every 12 months. |

## Recommendations

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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)