# Developmental Evaluation Report Summary

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

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| **Name of provider:** | IDEA |
| **Number of locations visited by region** | 1 |
| **Date visit/s completed:** | 19/09/17 |
| **Name of Developmental Evaluation Agency:** | SAMS |

## General Overview

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| The men have lived at this IDEA service for some time, with three of the men having shifted together from another home. The home is one of three, four-bedroom homes located on a corner section with a carpark and courtyard being shared amongst the three homes. A unique aspect of the service is that wake staff monitor the three services over-night. We were advised the degree to which the people living in the three services intermingle has decreased over the years.  The men are independent in many ways, although some benefit from verbal prompts. Of the three men who lived together previously, speaks of them as a ‘family unit’. The most recent addition to the group shifted in approximately two years ago. Two of the men walk to the nearby IDEA day base where they participate in a range of activities Monday – Friday and one man travels to an IDEA day base that ensures his art interests are easily pursued. One man accesses the community from his home and in the past has accessed activities with his peers; however, he prefers to stay at home occupying his time with his ‘work’. |

## 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  The Evaluation Team viewed two plans which had been developed in 2016 with reviews expected in June 2016 and May 2017. The plans contained goals which reflected the men’s interests and aspirations. The 6-monthly reviews highlight the goals that have been achieved or are being continually worked on.  The Evaluation Team gained the impression that while the staff were knowledgeable, intuitive and empathetic, consistency in carrying out their roles, would improve the service. The management is encouraged to explore how to implement team building strategies so the men and their families can experience a more cohesive team.  When the three men shifted from their previous home there was considerable discussion about how important features of the existing home would be met in their new home, ensuring the men’s needs and interests would be pursued. When the features failed to eventuate, the families became disillusioned about the willingness of the service to do what they said they would do. We were advised that the past attitude taken by the service has eroded the development of a trusting relationship with the families/men and the service. The Evaluation Team was encouraged to hear about the moves being undertaken by new management to rebuild the relationship between management and the families.  It appears that prior to the current management some processes were not consistently followed, eg, *Change of Living Situation Process*. This has led to a discrepancy between what families expected and what eventuated, leading to a mistrust of management’s motives. We are encouraged by the vigilance of the current management to ensure processes are followed. There are moves by management to rebuild the relationship with the families. It is anticipated more careful oversight will also increase the degree of compatibility between the people.  The three men who have known each other for some time appear to live comfortably together. However, finding a suitable flatmate to join the men has been difficult as acceptance of anyone else into the ‘family’ seems to threaten the ‘status quo’. Regardless of whether the conflict between the men is real or perceived, the friction is evident. The Evaluation Team believes disharmony in the home may be one reason one of the men chooses to stay at home as it enables him to distance himself from those he does not get on with.  The configuration of the staff roster provides the men with staff support awake hours with wake night staff based in the adjacent home. This staff member monitors activity in the home during the night.  The home is one of three on a corner section owned by IDEA. It is in close proximity to an IDEA day base and the town centre. The men who participate in different day programmes use an agency vehicle for access.  Two men attend the nearby day programme and a staff member walks with them ensuring they safely cross the busy street and railroad tracks. One person accesses a day programme which caters for his art interests. The fourth man is able to independently access the community from his home. Instead of attending a set programme or activity, the man has created for himself ‘meaningful work’ which entails copying text.  The organisation has specific channels of communication; however, the Evaluation Team agrees with the families interviewed that this is an area which requires significant improvement. There have been changes to the staff structure and while information about the changes may have been available, the clarity surrounding these changes requires further attention.  It is understood the desired level of contact preferred by each family can vary in frequency, method and content. This can cause confusion amongst staff, particularly if there are a number of different staff members. By discussing with each family their desired level of contact and following through on it will provide the families with the right amount of contact they desire. As this is likely to change depending on circumstances, revisiting the level with families is likely to ensure satisfaction. We believe this is a crucial element to rebuilding a trusting relationship between the families and the organisation.  The men have input into the service through discussions with staff and participation in flatmate meetings. Currently these are facilitated by hands-on staff. As the men are reasonably articulate and are clear about how they choose to live their life, finding a way for their meetings to be externally facilitated may provide them with additional opportunities to express any concerns they may have. We encourage the service to explore how the men’s flatmate meetings can be facilitated by a non-paid person.  The degree to which the men are enjoying a lifestyle of their choosing is debatable. They demonstrated a sense of ownership in their home and carried out some routines independently. They make decisions about whether they want to go to a day base or not, the clothes they wear, the household jobs they participate in and the foods they eat. The lack of compatibility amongst the flatmates was distressing to some. The service has listened to the issues of incompatibility in the past and shifted some flatmates in an effort to create a more harmonious group; however, the current arrangement seems to have been in place for approximately 18 months. The families recognise all of the men deserve a home and are uncertain about what they can do to improve their family member’s life.  In spite of the miscommunication experienced by some of the families, we were assured that the hands-on-staff were doing a good job of supporting the men. The staff treat the men with dignity and respect. The way in which the staff interacted with the men reinforced their attributes and gave consideration to constructive solutions to challenges.  2) AUTONOMY  Most of the men are able to express themselves using spoken language. Two of the men have hearing impairments which requires additional effort on the part of staff to ensure information is clearly conveyed. One of the men is diligent about wearing his hearing aids while the second man prefers not to wear his. While he is a confident speaker, it can take concerted effort to ensure he is understood, especially if he becomes excited or agitated. Another man uses a combination of speech and gestures to convey his thoughts.  The men make basic decisions about their life. The men told us about carrying out household tasks, going grocery shopping, and helping to prepare meals. The men decide what to wear, whether to go to the day base or stay at home, and what activities or interests they will pursue. Most of the men are semi-independent in carrying out these activities, although one man requires considerable prompts.  There are six staff who fill the roster with two filling the majority of the shifts. This enables the men to know who will be working with them. We were advised that because the home is single staffed, the staff often work in isolation and have limited opportunities to share with each other except through the Staff Communication Diary and by catching up at staff meetings. Some of the families said they would like better consistency as there have previously been significant changes to the roster. Most of the staff are known to the men, having worked in the home for some time and four staff members also work in the adjoining home.  The four-bedroom home provides the men each with their own bedroom for privacy. The reduced size of the home has resulted in the men experiencing significant changes. One man enjoys the solace of his bedroom to distance himself from those he does not get on with.  The life patterns of the men are similar to other community members in a number of ways – they attend day programmes, use public transport, visit libraries, go on holidays, patronise the Cossie Club and some of the men were talking about voting in the upcoming election.  3) AFFILIATION  The men enjoy a number of activities in the community. One man has held exhibitions of his art work and his personal plan indicates he hopes to pursue this again. The man who accesses the community independently during the day has the most contact with members of the wider community, although it is unclear whether additional networks have been formed as the result of this contact. While the men access integrated settings, the activities more often include their disabled peers. Most of the men have strong family networks so interact with the community during family visits.  The men have regular visits to their doctor and dentist and access to specialists such as cardiologists, audiologists, and podiatrists.  4) SAFEGUARDS  The men’s primary networks are their families. Assisting the men to develop additional networks in the community is yet to be the focus of staff practice. The men are known to their immediate neighbours as they are also supported by IDEA Services.  The three files viewed all contained an *Alert and Crisis* form which describes potential risks that staff need to understand. There are a number of risks related to supporting the men to manage anxiety which can lead to self-harm and/or aggressive behaviour towards others, health conditions such as maintenance of skin ailments and heart disease, mental wellness and awareness of dangers in the environment.  The staff training records provided indicate that the staff participate in numerous training opportunities which enable them to effectively support the men. The staff all participate in training about how to support people using positive strategies. Restraint Minimisation is a course all of the staff have completed.  5) RIGHTS  The men’s rights are recognised, and are reinforced through brochures and publications and the staff training records indicate staff have participated in relevant training. Some of the men are still learning the importance of respecting the personal space of others and the tolerance for this infringement can be a source of friction between some of the men.  While the families interviewed have had difficulty raising concerns in the past, the new management are keen to improve the relationship with families so they can feel confident any concerns will be addressed.  The staff know the personality of each man and are considerate about how they support them to manage challenges in their life. The interactions observed by the Evaluation Team reflected an enabling approach ensuring respect and dignity are upheld. There is indication that the use of proactive strategies has resulted in one man remaining without episodes of anxiety for some time. We gained the impression positive, constructive practices are well utilised.  The philosophy of ‘least restrictive option’ is clear in the way the staff support the men to stay safe, e.g one man has 1:1 support when he accesses the community.  6)HEALTH AND WELLNESS  The men are supported to maintain good health by eating healthy meals, exercising, and assistance with managing some medical conditions. |

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

**Requirement**

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| The Management discusses with each family their desired level of contact and ensures follow-through occurs. |

## Recommendations

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| The management implement team building strategies so the people and their families experience a cohesive team.  The management to ensure established processes are followed.  The service explores how the men’s flatmate meetings can be facilitated by a non-paid person. |

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)