A Developmental Evaluation Report for Flexible Disability Supports (FDS) and Community Residential Services

**Contracts:**

Provider name:

An Enabling Good Lives (EGL), principles based, and outcomes focussed framework for Developmental Evaluation

## Report structure

1. General information
2. Executive summary
3. Summary of feedback from disabled people and families
4. Outcomes for disabled people
	1. My identity
	2. My authority
	3. My connections
	4. My wellbeing
	5. My contribution
	6. My support
	7. My resources
5. Organisational health
6. Value for money
7. Equity
8. Enabling Good Lives
9. Response to the draft report from the provider
10. Appendix 1: Information about the report.

## General Information

* **Date evaluation completed:** Click here to enter a date.
* **Date evaluation report sent to the provider:** Click here to enter a date.
* **Date evaluation report signed off:** Click here to enter a date.
* **Names of evaluators/report writers:** Click here to enter text.

For guidance on the evaluation process and rating scale please see appendix One.

About the provider

* **Provider number:** Click here to enter text.
* **Provider address:** Click here to enter text.
* **Evaluation venue:** Click here to enter text.
* **Provider contract person:** Click here to enter text.
* **Brief description of service:** Click here to enter text.
* **Number of disabled people:** Click here to enter text.
* **Brief description of the disabled people (demographics):** Click here to enter text.

# **Executive summary**

*Instruction for evaluators:* Please provide **a summary of findings** **including all the sections** of the report.

**Strengths**

* …
* …

**Areas of Development**

* …
* …

|  |
| --- |
| **Agreed actions*** …
* …
 |

**Requirements**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Outcome Area number | Risk rating | Requirement | Required evidence for verification of compliance | Due date |
|  | Choose an item. |  |  |  |
|  | Choose an item. |  |  |  |
|  | Choose an item. |  |  |  |

**Recommendations**

1. ….
2. ….
3. …

# **Feedback from disabled people and families**

Summary: Click here to enter text.

Number of people interviewed (in addition to surveys)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | People | Families | Staff | Management |
| No |  |  |  |  |

## Survey results *(Please ensure results do not identify individuals)*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Number of people surveyed | Total number of people using the service | Percentage of the total number of people using the service who were surveyed |
| Disabled people |  |  |  |
| Family, whānau, guardian (as proxy for disabled person) |  |  |  |
| Family, whānau, guardian (for themselves) |  |  |  |
| Total |  |  |  |

Disabled people survey: Summary findings

|  |  |
| --- | --- |
|  | Total number of responses in each category |
| Question | Not answered | Yes / totally | Mostly | Okay / so so | Not really | No / never |
| 1 I feel supported to try new things |  |  |  |  |  |  |
| 2 I feel supported to enjoy and explore my culture in a way that I choose |  |  |  |  |  |  |
| 3 I choose what happens in my day |  |  |  |  |  |  |
| 4 I can get help, information or support if I need it |  |  |  |  |  |  |
| 5 Paid support workers are reliable and consistent. |  |  |  |  |  |  |
| 6 I have a network of people who support me  |  |  |  |  |  |  |
| 7 I feel safe and secure |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |

Disabled people survey: My wellbeing summary results (Cantril ladder)

|  |  |
| --- | --- |
| Response | Number of people who responded with this score |
| 0.Represents the **worst possible life for you** |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5.  |  |
| 6. |  |
| 7. |  |
| 8. |  |
| 9. |  |
| 10. Represents the **best possible life you can have**  |  |

Family and Whānau survey: Summary findings

|  |  |
| --- | --- |
|  | Total number of responses in each category |
| Question | Not answered | Yes / totally | Mostly | Okay / so so | Not really | No / never |
| 1 I feel my feedback and views are valued  |  |  |  |  |  |  |
| 2 I feel my family member is supported to explore and enjoy their culture in a way that they choose |  |  |  |  |  |  |
| 3 I can access all the information I need about support services for my family member. |  |  |  |  |  |  |
| 4 In general, I believe my family member / friend / partner/ spouse is safe. |  |  |  |  |  |  |
| 5 Paid support workers are reliable and consistent. |  |  |  |  |  |  |
| 6 Overall supports for my family member work well. |  |  |  |  |  |  |
| 7 My family member is supported to have dreams and plans to build the life they want. |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |

Family and Whānau survey: My wellbeing summary results (Cantril ladder)

|  |  |
| --- | --- |
| Response | Number of people who responded with this score |
| 0.Represents the **worst possible life for you** |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5.  |  |
| 6. |  |
| 7. |  |
| 8. |  |
| 9. |  |
| 10. Represents the **best possible life you can have**  |  |

# **Outcomes for disabled people**

1. **My identity / Tuakiri**

High level outcome: My contribution is valued, promotion of equity

|  |  |
| --- | --- |
| **Overall rating for outcome area[[1]](#footnote-1)**  | Good practice evident |
| **1.1** | **My culture, beliefs and preferences are supported** |
|  | *Evaluation team comment and recommendation for development* |
| **1.2** | **My family and whānau are valued** |
|  | *Evaluation team comment and recommendation for development* |
| **1.3** | **I am understood** |
|  | *Evaluation team comment and recommendation for development* |
| **1.4** | **My mana is acknowledged, upheld and enhanced**  |
|  | *Evaluation team comment and recommendation for development* |

1. **My authority / Te Rangatiratanga**

High level outcome: I can exercise choice and control

|  |  |
| --- | --- |
| **Overall rating for outcome area**  | Good practice evident |
| **2.1** | **I make choices about my life** |
|  | *Evaluation team comment and recommendation for development* |
| **2.2** | **I choose and realise personal goals** |
|  | *Evaluation team comment and recommendation for development* |
| **2.3** | **I make decisions about my daily life and funding.** |
|  | *Evaluation team comment and recommendation for development* |

1. **My Connections / Te Ao Hurihuri**

High level outcome: I have positive relationships

|  |  |
| --- | --- |
| **Overall rating for outcome area**  | Good practice evident |
| **3.1** | **I associate with people and networks of my choosing** |
|  | *Evaluation team comment and recommendation for development* |
| **3.2** | **I am part of the community** |
|  | *Evaluation team comment and recommendation for development* |

1. **My Wellbeing** **/ Hauora**

High level outcome: I am happy and healthy; I have rights and protection

|  |  |
| --- | --- |
| **Overall rating for outcome area**  | Good practice evident |
| **4.1** | **I am safe** |
|  | *Evaluation team comment and recommendation for development* |
| **4.2** | **I have the best possible health and wellbeing** |
|  | *Evaluation team comment and recommendation for development* |

1. **My Contribution** **/ Tāpaetanga**

High level outcome: I belong, contribute and am valued

|  |  |
| --- | --- |
| **Overall rating for outcome area**  | Good practice evident |
| **5.1** | **I contribute to my community and society** |
|  | *Evaluation team comment and recommendation for development* |
| **5.2** | **I am involved in service development** |
|  | *Evaluation team comment and recommendation for development* |

1. **My Support** **/ Taupua**

High level outcome: I have what I need

|  |  |
| --- | --- |
| **Overall rating for outcome area**  | Good practice evident |
| **6.1** | **I am able to choose my support, who supports me and how I am supported** |
|  | Evaluation team comment and recommendation for development |
| **6.2** | **I can express my views and will have them listened to** |
|  | *Evaluation team comment and recommendation for development* |
| **6.3** | **I monitor and evaluate the support provided** |
|  | *Evaluation team comment and recommendation for development* |

1. **My Resources** **/ Nga Tūhonohono**

High level outcome: I am developing and achieving

|  |  |
| --- | --- |
| **Overall rating for outcome area**  | Good practice evident |
| **7.1** | **I am involved with my funding** |
|  | *Evaluation team comment and recommendation for development* |
| **7.2** | **I have choices about how my funding is managed** |
|  | *Evaluation team comment and recommendation for development* |

# **Organisational Health**

See [Social Sector Accreditation Standards](https://xn--tekhuikhu-7bbe.govt.nz/accreditation/standards.html).[[2]](#footnote-2)

|  |  |
| --- | --- |
| **Overall rating for organisational health area**  | Good practice evident |
| **8.1** | **Staffing** |
|  | *Evaluation team comment and recommendation for development* |
| **8.2** | **Health and Safety** |
|  | *Evaluation team comment and recommendation for development* |
| **8.3** | **Governance and Management Structure and Systems**  |
|  | *Evaluation team comment and recommendation for development* |
| **8.4** | **Financial Management and Systems** |
|  | *Evaluation team comment and recommendation for development* |
| **8.5** | **Resolution of complaints related to service provision** |
|  | *Evaluation team comment and recommendation for development* |

# **Value for money**

Value for Money considers how well funding is targeted to achieving outcomes for disabled people and families.

|  |  |
| --- | --- |
| **Overall rating for value for money area**  | Good practice evident |
| **9.1** | **Supports are targeted to improve outcomes for disabled people** |
|  | *Evaluation team comment and recommendation for development* |
| **9.2** | **Supports are targeted to improve outcomes for Māori** |
|  | *Evaluation team comment and recommendation for development* |
| **9.3** | **Supports are responsive to changing needs and intervening early** |
|  | *Evaluation team comment and recommendation for development* |
| **9.4** | **Disabled people are supported to make decisions about changes to their support plan** |
|  | *Evaluation team comment and recommendation for development* |

# **Equity**

Considering all previous domains:

|  |  |
| --- | --- |
| **Overall rating for outcome area**  | Good practice evident |
| **10.1** | **Supports are equitable for disabled people** |
|  | *Evaluation team comment and recommendation for development* |
| **10.2** | **Supports are equitable for Māori** |
|  | *Evaluation team comment and recommendation for development* |
| **10.3** | **Supports are highly tailored to my needs** |
|  | *Evaluation team comment and recommendation for development* |
| **10.4** | **Entry is Easy** |
|  | *Evaluation team comment and recommendation for development* |
|  |  |

# **Enabling Good Lives**

Considering all previous domains:

|  |  |
| --- | --- |
| **Overall rating for outcome area**  | Good practice evident |
| **11.1** | **Self-determination** |
|  | *Evaluation team comment and recommendation for development* |
| **11.2** | **Begin early** |
|  | *Evaluation team comment and recommendation for development* |
| **11.3** | **Person-centred** |
|  | *Evaluation team comment and recommendation for development* |
| **11.4** | **Ordinary life outcomes** |
|  | *Evaluation team comment and recommendation for development* |
| **11.5** | **Mainstream first** |
|  | *Evaluation team comment and recommendation for development* |
| **11.6** | **Mana enhancing** |
|  | *Evaluation team comment and recommendation for development* |
| **11.7** | **Easy to use** |
|  | *Evaluation team comment and recommendation for development* |
| **11.8** | **Relationship building** |
|  | *Evaluation team comment and recommendation for development* |

# **Response to the draft report from the provider**

Click here to enter text.

# **Appendix 1: Information about this report**

## Purpose

The developmental evaluation aims to provide information about service practices and the quality of life of people using services. It identifies positive and innovative approaches occurring within the service. It also promotes ongoing learning and continuous improvement. This evaluative approach will include the perspectives of a range of stakeholders, with the outcomes for disabled people being central, and take into account wider influences within the community and the health and disability sector.

## Methodology

The following standards, agreement and principles are utilised in developmental evaluation:

* The Ministry of Social Development Evaluation Tool based on the Enabling Good Lives principles
* The 2018 non- residential DSS Provider Quality and Service Specifications
* Whāia Te Ao Mārama 2018 to 2022: The Māori Disability Action Plan.

The methodology is consistent with:

* The Enabling Good Lives principles
* Partnership
* Participatory citizenship
* Equity.

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

Evaluations are conducted by teams and normally each team includes at least one disabled person or family member as a Team Leader or Team Member.

Team Leaders and Team Members receive comprehensive training in Developmental Evaluation approaches, current expectations in the disability community and contractual requirements.

Information is gathered through:

* observation,
* individual and group interviews
* review of documents.

**Evaluator recommendation for development scale**

A central objective of the Developmental Evaluation process is to assist disabled people, whānau and support systems to work together to enhance peoples current experience.

To make this easier, evaluators will provide a visual representation of their findings, so all stakeholders can quickly gather an impression of strengths and areas of development. Evaluators base these findings on observations, the review of documentation and confidential interviews to be held with disabled people, whānau, service facilitators/connectors, other staff and organisational management. The disability survey tool will be used to interview and gain feedback from people using services. Sampling methodology and rationale should be included in the report.

**Scale**

|  |  |  |
| --- | --- | --- |
| Best practice evident | - | Best practice examples evident |
|  |  |  |
| Good practice evident | - | Many examples of good practice evident / refining approach desirable |
|  |  |  |
| Development desirable | - | Some examples of good practice evident / further development desirable |
|  |  |  |
| Development recommended | - | Further development is recommended |
|  |  |  |
| Action required | - | Immediate and significant action required |

Before departing a service, initial feedback is presented to those involved in the evaluation process.

A draft report is prepared based on evaluation team consensus and circulated. This draft is then negotiated with the provider to determine a final document, including recommendations for development, which is then returned to the service and the funder.

## Definitions

**Whānau** may mean: family, whānau, spouse/partner, close friends, welfare guardian and advocates. Whānau should be defined by the person and who they consider them to be.

**Disabled people** refers topeople with a physical, intellectual or sensory impairment

## Recommendation

Recommendations are made where there is no immediate concern about the quality of the service, or where developments are already under way towards meeting the requirements in the existing contract.

## Requirement

Requirements are made where there is a concern(s) about the quality of the service that pose risk to people. Each requirement has a risk rating and an attainment rating:

|  |  |
| --- | --- |
| **Risk rating** | **Attainment rating** |
| Risk to people | Timeline for action | Attainment | Achievement of standard or criteria |
| **Low** | Minimal  | As soon as possible within one year | **CI** | Continued improvement | Achievement beyond the full attainment |
| **Moderate** | Moderate  | As soon as possible within six months | **FA** | Fully attained | Full attainment and meets the requirements |
| **High** | Significant  | As soon as possible within six weeks | **PA** | Partial attainment | Partial attainment and improvement required |
| **Critical** | Extreme  | As soon as possible within 24 hours | **UA** | Unattained | Not met |
|  | **NA** | Not applicable | Standard or criterion not audited as it does not apply |

1. Change colour code to reflect your judgement of rating for each outcome area. See appendix 1 for a description of the colour code definitions

|  |  |
| --- | --- |
| Best practice evident | Best practice examples evident |
| Good practice evident | Many examples of good practice evident / refining approach desirable |
| Development desirable | Some examples of good practice evident / further development desirable |
| Development recommended | Further development is recommended |
| Action required | Immediate and significant action required |

 [↑](#footnote-ref-1)
2. *Note if another auditor/accreditor has recently completed an audit against these organisational health standards then you do not need to repeat here. Seek a copy of their findings for your report.* [↑](#footnote-ref-2)