

Quality Management Framework

Quality Evaluation

One2One
Accommodation Support Services
Darlington WA

Final Report
25 January 2013

This report was prepared by an Independent Evaluator from the Panel Contract of Independent Evaluators. The Panel Contract is managed by the Disability Services Commission.

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1. The evaluation visit

This report describes the findings of the Independent Evaluator who visited One2One and completed an assessment of the service point's progress towards meeting Outcomes under the Quality Management Framework (QMF) and compliance with the Disability Services Standards. The preliminary meeting was held on 7 December 2012 and the Independent Evaluator visited the organisation on 19 December 2012. A post evaluation discussion was held over the phone on 25 January 2013.

The Independent Evaluator operates under the Guidelines for Independent Evaluation. The Independent Evaluator was:

- *Beth Marchbank*

The organisation uses the term '*individual*' to refer to the people with disability that they support.

NB Under the Carer's Recognition Act 2004, a carer refers to a person who provides care or assistance to another person who is frail, has a disability, a chronic illness or a mental illness, without payment apart from a pension, benefit or allowance.

2. Acknowledgements

The Independent Evaluator would like to extend thanks to individuals, family members and support workers for giving their time to be interviewed during the evaluation visit.

The Independent Evaluator acknowledges the commitment of the staff in providing services. This was evident from the evaluator's observations and discussions with individuals and family members, observations of staff interactions and discussions with staff; and from the positive comments about staff, the evaluator received from individuals and families. Findings documented in this report have been selected to support the outcomes of this evaluation and highlight background evidence for good practices, required actions and key priorities for service improvement.

3. Service point profile

The profile provides a brief overview of the service point evaluated.

Disability sector organisation:	One2One
Service point name:	Accommodation Support
Outlet name(s):	17 Hillsden Road, Darlington, WA 6070
Chief Executive Officer:	Mr Glen Ottley

Brief description of the service point

One2One commenced a Service Agreement with the Commission on 6 February 2012. The service was designed to “provide a shared management model of accommodation support to individuals and families seeking self-direction and maximum involvement in the decision making around the use of their individualised funding and the supports they procured”. Individuals receive support services designed and based on their fluctuating personal requirements according to a plan they have self-directed, and by staff they have chosen for themselves. Some consumers also choose to receive dedicated service coordination as part of their shared management agreement.

One2One focuses on “developing strong relationships with individuals and families and their support staff to enable the organisation to maintain a personal approach to service delivery as well as to monitor continued commitment to best possible outcomes for its consumers, including optimal service standards and values”.

Resources (eg building/s, staffing, IT systems, vehicle/s, budget)

Key Support Workers: Two positions - both 0.6 Full Time Equivalent (FTE)

Support Workers: Twelve positions - various part-time positions under 0.8 FTE

Homesharers/Co-residents: One full-time and one part-time (one weekend per month)

Directors/Managers/Coordinators: Two full-time positions

Staff are supervised directly by individuals and families under the shared management model, with the Directors keeping in close contact with all parties. The Commission funding is \$600,000 per annum (recurrent individualised funding).

Brief description of people using services

Thirteen individuals are using support services, nine men aged 13 to 59, and four women aged 21 to 51. These individuals have a range of support needs for meal and budget planning, personal care and daily living supports, home maintenance, meal preparation, shopping and banking, maintaining a social life and community involvement, communication skills, mobility, and emotional support. Individuals have a range of support levels ranging from a few hours per week to 24 hour per day. All supports are provided from (or in) the individual's home; two individuals are supported using home share arrangements, full or part time.

Consultations

During the evaluation, the Independent Evaluator spoke with two individuals supported by the service, five family members, four support worker/home sharers, and the two Directors of the service. One individual (who has support), one family member, and one support worker attended the preliminary meeting. As there were no contentious issues, feedback or questions from individuals, families or staff about the report, and in light of the small number of consumers, the post evaluation meeting was conducted over the phone with one of the Directors.

4. Executive summary

A. Good practices

This section reports the Independent Evaluator's findings of the service point's strengths in relation to addressing Outcomes through good practice.

The Independent Evaluator was particularly impressed by:

- The way the Directors keep close contact with individuals, families and support workers to help ensure everyone feels supported, and the service is responsive to individuals. Two support workers said, "The support I get from the Directors is amazing. I can contact them any time and they are there to assist". Family members and support workers said, "They respond straight away".
- The sound values base underpinning the model of service, including principles of Optimal Individualised Service Design (Kendrick 2008), inclusion, empowerment through information provision, human rights, freedom of choice and lifestyle, and appropriate safeguarding. One family member said, "I chose One2One because of the attitude of the Directors; they educate me about the system and have saved me a lot of time".
- The way the service helps individuals and families to get optimum supports with the funding they have.
- The small size of the service, to which the Directors are committed, to enable very personalised services for each individual and/or family.
- The way the service is embracing contemporary knowledge and values surrounding disability support services, focusing on "developing partnerships with individuals and families seeking self-directed support services, using a shared management model".
- The way the service provides individuals and families with information about finding and keeping good staff, "sharing knowledge of their 25 years of experience in what works, and what doesn't".
- The information packages the service has developed to provide to families and individuals on how home sharing (and shared management, and shared management with coordination) works, and the specific responsibilities of all parties.

B. Required actions

Disability sector organisations are required to meet all contractual obligations of their Service Agreement with the Commission. Required Actions (RAs) focus on the minimum satisfactory level of service and must be implemented by the specified date.

The rating scale used to assess the Disability Services Standards is met / not met.

Based on observations and corroborative evidence examined as part of this assessment, it is assessed that the service point meets Disability Services Standards 1 to 9.

The Independent Evaluator did not identify any Required Actions during the evaluation visit.

C. Key priorities for service improvement

Key Priorities for Service Improvement (KPSIs) identify actions to enhance practices in addressing Outcomes for people with disability and meeting Disability Services Standards.

They need to be carefully considered by service management as part of contractual obligations and normal organisational planning processes, and then implemented. They are required to be reported upon in the next Self Assessment as evidence of continuous service improvement.

The Independent Evaluator identified the following Key Priorities for Service Improvement:

Key Priority for Service Improvement #1

Program and Outcome: Well-Being

- For the Service Coordinators (Directors) to check that all staff understand their obligations in relation to duty of care, and freedom from abuse and neglect, and provide any necessary training.

Note: none of the individuals, families or support workers could think of anything about the service they wanted to improve.

D. Matters for further exploration

This section reports the Independent Evaluator's summary of other matters arising from the evaluation of the service point.

- This service is still in the stage of development. It is working on planning and implementing strategies for the strategic direction of the service, succession planning, sustainability, planning for individuals according to their preferences, and further website development.
- After eleven months of operation, the service is supporting thirteen individuals/families, and is in the early planning and development stages of service agreements with some other individuals/families.
- The Directors of the service are currently doing all service coordination work with individuals/families that have chosen that level of service, but are planning to employ Coordinators as the number of consumers grows.
- The service has organised to undertake strategic planning in February 2013.
- One2One offers services in partnership with individuals and families based on a number of factors:
 - Ability to be partners in a shared management model of support.
 - Commitment to safeguarding the interests of all parties.
 - Commitment to work in partnership using honest communication, mutual respect and sharing understandings.
 - Commitment to working together to facilitate optimal support arrangements.
 - Commitment to observing the service agreement, and fulfilling their mutual responsibilities.
- Reports from individuals, family members, staff and Directors showed that this service is working to provide relevant supports to enable individuals to take up opportunities

available to the wider community with maximum freedom, and to drive and pursue their chosen lifestyle.

- Staff reported that they felt well supported in their work, that the One2One directors were easily approachable if they had any questions or issues that they wanted to discuss, and that communication between them was frequent (at least fortnightly).
- The service has a strong focus on individualised supports and is a member of WAIS (WA Individualised Services), and ISA (Individualised Solutions of Australia).
- After staff have completed all relevant training for safety and health of individuals, the service focuses on inclusion training.
- The Directors/Coordinators go through the shared management agreement booklet and determine the specific responsibilities that will be taken on by the individual/family, either in partnership with One2One, or solely by One2One. There are 47 responsibilities covered, including home life, health and safety, service quality, respite and back-up, record keeping, finances, and tax and insurance for which One2One is responsible.
- Support Workers interviewed explained that they saw their role as supporting the individual in the life of their choosing, and encouraging and fostering their relationships, independence skills, community participation and sense of self-direction.
- Directors/Coordinators direct staff to relevant training depending on the individuals they are supporting, and choose training providers that they know and trust. Staff said they had been on a “fantastic” Person Centred Planning course, and training in first aid, manual handling, medication, and positive behaviour supports.
- Directors set (and support workers also said) appropriate boundaries for the service, which helped all parties feel clear about their roles and responsibilities, gain mutual respect, and feel more secure. They gave examples of activities within and outside the boundaries of support.
- After interviews with staff, the Evaluator did not feel fully confident that staff were fully aware of procedures if they observed (or suspected) abuse or neglect of an individual, or that staff were clear about when to submit an incident report. (See the KPSI on Page 4).

5. Meeting outcomes

This section reports the Independent Evaluator’s findings of the service point’s achievements in relation to addressing Outcomes.

Meeting outcomes - Accommodation Support

Wellbeing

Outcome: Maintenance and/or improvement of the social, mental, physical, emotional, spiritual, sexual and cultural aspects of the individual

Evidence noted (eg observations, feedback and documentation):

- All individuals, family members and staff said that people’s wellbeing was well addressed, and that individuals had a good level of wellbeing overall.
- Some individuals reported how they managed health issues independently (or with support) such as epilepsy, healthy food choices, exercise or their vision.

- Individuals and family members said the Directors of the service rang them every week or so, to see how they were going, and to ensure their supports were working for them.
- The Directors reported that contact with individuals and families was based on their preferences, and that they would only contact some every few months, especially if individuals/families were the employers and managers of their own support workers.
- Three family members and two support workers reported how they had seen improvements in individual's health, confidence levels, emotional status, and abilities in being independent since they had been with the service.
- Support workers reported taking individuals to their doctors for health checks, and helping individuals to understand medical issues or procedures. Individuals confirmed this.
- Support workers said that the supports provided (and encouraged by the Directors) are very personal. One said, "It's on a one to one basis, and individuals have a better life". Another referred to an individual they were supporting saying, "he knows it's giving him a better life, because he said 'I'm so glad to have you'".
- Three family members and three support workers used the words "helpful, thorough, willing, professional, caring, supportive and competent" to describe the support they received from the Directors.
- All family members said that the Directors listened to their preferences and followed up on their wishes; and that staff provided supports in ways they wanted.
- Support workers are required to submit fortnightly reports to the Directors/Coordinators outlining how the individual and support is going across different life area, and the progress towards their identified goals. This is a mechanism for monitoring the quality of support and the life outcomes for individuals and their families.

Relationships and Social Connection

Outcome: Relationships are diverse and contribute to the individual's life and social connections

Evidence noted (eg observations, feedback and documentation):
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- Family members and staff said the Directors made themselves readily available, and were very approachable if they wanted to talk out any support issues. They said that their relationships with the Directors was very open and positive.
- Individuals, family members and support workers reported how the service supported individuals in maintaining positive relationships they had with family members, sporting teammates, neighbours, friends and community members. Some individuals had limited numbers of positive relationships in their lives.
- Support workers said they had contact numbers for some of the family, community members or friends of individuals, and would be in contact with them at the individual's discretion.
- One support worker and one family member said, "he/she is very popular in her own community; everyone knows him/her at her local shops".
- Individuals, family members and support workers reported relationships that are important to individuals, including neighbours who support them, family members who visit; and people who take them out on a regular basis, such as to the basketball, peers who attend a day centre, rowing club co-members, and work mates.

- The Home Sharer Resource Manual states that the philosophy of home sharing involves the individual being “warmly welcomed and fully included in family life”. These relationships are monitored through regular reporting and discussions with all parties.

Lifestyle

Outcome: Participation in a lifestyle of the individual’s choice

Evidence noted (eg observations, feedback and documentation):
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| <ul style="list-style-type: none"> • Individuals were reportedly being supported to engage in a range of social and recreation activities of their choice including rowing, shopping, attending sporting games, visiting a local library, music lessons, and a day activity centre. • Two individuals said they were happy with the service arrangement because they were free to make their own choices about their activities, and had open relationships with their support workers and the Directors. • Support workers reported that one of the main advantages of this service design over others was the way it facilitated individuals being able to live their own lives, pursue their choices, and to have sufficient supports without being ‘smothered’ by the service or systems. One referred to an individual they support saying “he knows he’s the boss of his own life; it’s his choice”. • The evaluator was shown a range of planning tools that individuals and families are offered to help them plan for supports they need. For most of the individuals and families, this is work in progress. • The Directors reported that some individuals and families do not want a plan; and so plans are developed in partnership using support and safeguarding ideas and options suggested by the Directors, which family members reported they appreciated. • Two family members and three support workers said that individuals were a lot more independent in this service than they had been previously. • One family member, one support worker and the Directors reported that they are assisting some individuals to find a new home and/or work that suits them, or supporting them in their work/volunteer roles. • Three support workers reported how the lifestyle and well-being of individuals had markedly improved, even for some individuals with complex and high support needs. They attributed this to the improvement to the structures and safeguards that the Directors had facilitated being put in place. • One family member said, “My son’s really enjoying cooking for himself with the supervision of the support worker. She goes through the shopping list with him and takes him in the car to the supermarket”. • Two family members and three support workers said that this service was providing the best life outcomes for individuals that they had yet experienced. |
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Home

Outcome: The place where a person lives is safe, secure and comfortable, and where they can be themselves

Evidence noted (eg observations, feedback and documentation):
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| <ul style="list-style-type: none"> • Some individuals were living alone in rented or owned houses, others were living with family members or in a home-share arrangement, and one was working on being supported to move into his own home. |
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- Individuals and family members said that living independently gave them a sense of self-direction and driving their own lives.
- Individuals reported feeling safe in their homes, and that they had made their houses homely and to their own liking.
- Quotes from individuals about feeling happy about their home situation included “I’ve got somewhere to go (be) now”; “I feel safe here”.
- One support worker said, “We have photos of her house when she started in the service and now. The difference is amazing, she now takes more pride in her home, cleaning up and taking care of it and herself.”

6. Compliance check

Standard 8: Service management - *Running the service well*

Supporting Standards 8.1 and 8.2: The service provider conducts police clearances and provides a safe physical environment for its consumers - *Operating a safe service*

Observation	Yes	No	N/A	Info source
The service provider conducts National Police checks for Board members, staff, volunteers and contractors prior to commencement.	Y			2,3,4,5
National Police checks are regularly updated for Board members, staff, volunteers and contractors.	Y			2,5
The service knows what to do if an unsatisfactory National Police check is received from a Board member, staff, volunteer or contractor.	Y			2,5
The service has an emergency evacuation plan.			NA	
The service regularly practises its emergency evacuation plan.			NA	
The service keeps records of evacuation trials.			NA	
The service has policies and procedures on the administration of medication.	Y			2,3,4
The administration of medication occurs as detailed in the policies and procedures instructions.	Y			3,4
The buildings are maintained in a condition that does not pose a risk to service users.	Y			

Information source legend: 1 direct observation; 2 discussion with management staff; 3 discussion with direct care staff; 4 discussion with consumer/s; 5 documentation; 6 self assessment; 7 Commission staff; 8 not determined.

- The Directors/Coordinators have an ‘Annual Consumer Safety Discussion’, and also undertake a ‘Home Safety Investigation’ annually. Each of these has a checklist record to ensure that safety and emergency procedures are understood by individuals and families, and homes are safe for them and for support workers.
- All staff said they felt confident that they knew what to do in the case of emergency or serious incident in relation to the individuals they support.
- All staff had police clearances that were less than twelve months old; and the Directors said they would be renewed at the employers’ expense every five years, with an alert coming up on their database when clearances are due to expire within six months.
- Directors said that if a serious incident occurred in relation to an individual, family member or staff member, a record of the incident including discussions about future prevention and outcomes was kept on file.
- The Evaluator saw examples of Incident Report Forms that are contained in the resource file for each support worker and family.
- Staff reported having been to medication administration training if relevant; and some of the individuals/families managed this themselves.

- The Directors are in the process of upgrading the safety of walkways around their home based office, for the times that people meet at the office. Their home has been made wheelchair accessible.
- Newly employed staff are on a three-month probation period, and they undergo a Mid-Probation Review. Their performance is also reviewed and reported on at the end of the probation by the individual/family in conjunction with the Directors/Coordinators.
- All staff employed in options coordinated by the service on behalf of families are required to have medicals before the end of their probation period. Families managing their own services (full Shared Management) make their own choice about whether staff are required to have medicals.
- The service has developed a National Police Clearance Information sheet, which stipulates that a current Police Clearance is a condition of employment, and provides advice on what to do if a potential employee has prior convictions.

Standard 9: Protection of Human Rights and Freedom from Abuse and Neglect - *Being protected from harm*

Observation	Yes	No	N/A	Info source
Supporting Standard 9.6: The service provider has procedures in place to respond within seven days to allegations of abuse and neglect, including reporting mechanisms and strategies for protecting people with disabilities from abuse.	Y			2,3

Information source legend: 1 direct observation; 2 discussion with management staff; 3 discussion with direct care staff; 4 discussion with consumer/s; 5 documentation; 6 self assessment; 7 Commission staff; 8 not determined.

- All staff and individuals/families are provided with copies of the Disability Services Standards, and the Directors explain each standard and discuss them.
- Staff reported that they had had this discussion at the beginning of their employment.
- The Directors reported the following safeguards they have in place, to ensure that people are protected from harm:
 - Induction training which includes the Disability Services Standards including Standard 9, values underpinning the service, police clearances, recruitment procedures they support individuals and families with, and safeguarding and reporting requirements.
 - Bi-weekly reporting required from staff.
 - Close and regular contact with individuals, families and support workers using email, phone, skype and face to face.
 - Regular supervision of staff with triplicate reports, including discussion of a wide range of lifestyle, health and safety issues.
 - Informing families if necessary that One2One reserves the right to support applications to the State Administrative Tribunal for guardianship or administration if they believe a person has become vulnerable.
- The Evaluator viewed record sheets for staff supervision sessions, safety discussions, incident reports, and progress reports.
- The Directors require support workers to show document evidence of training and qualifications completed.
- Two of the support workers interviewed said they were not sure about the procedure if they observed a serious incident or were made aware of abuse or neglect of an individual, but would use “common sense” and contact the Directors immediately after ensuring the safety of the individual or by calling an ambulance. This needs follow-up.

7. Appendix

A. How the quality of your service is measured

Quality Evaluation

- Independent Evaluators contracted to the Disability Services Commission collect evidence from multiple sources to verify the quality of services and supports provided.
- People with disability, their families and carers are invited to comment through the evaluation process on the services and supports they use and how well they are being enabled to live a good life.
- Management and staff and other interested stakeholders are invited to comment on the services and supports provided and outcomes being achieved.
- Evidence is collected by evaluators and assessed in relation to both Quality Management Framework Outcomes and compliance with the Disability Services Standards¹. The evaluation also provides opportunities for suggested improvements to be made.

Outcomes

- Outcomes refer to the impacts, benefits or changes that people with disability, their families and carers experience as a result of using a service or support.
- Outcomes also identify what people with disability, their families and carers can expect from a service or support.
- The outcomes and performance indicators have been developed for each service type: accommodation support, advocacy, alternatives to employment, disability professional services, family support, local area coordination and recreation. Examples include wellbeing; independence; relationships and social connection; lifestyle of choice; and community inclusion and participation.

Performance Indicators

- Performance indicators describe what is looked at to decide how well the service is doing in supporting people with disability, their families and carers to achieve good outcomes.
- Satisfaction is defined, in the context of Quality Evaluation, as a comparison between what a person feels/expects service standards “should be” and their experiences of the “actual service”.
- The best disability sector organisations are those that progressively improve services and supports to enable people with disability, their families and carers to achieve beneficial outcomes. The Quality Evaluation supports this to happen.

¹ Quality Management Framework Outcomes and Disability Services Standards are under review for updating and consolidation.

Disability Services Standards

Standard 1 Service Access - *Getting disability services*

Each consumer seeking a service has access to a service on the basis of relative need and available resources.

Standard 2 Individual Needs - *Getting the right help*

Each person with a disability receives a service which is designed to meet, in the least restrictive way, his or her individual needs and personal goals.

Standard 3 Decision Making and Choice - *Having choices and making decisions*

Each person with a disability has the opportunity to participate as fully as possible in making decisions about the events and activities of his or her daily life in relation to the services he or she receives.

Standard 4 Privacy, Dignity and Confidentiality - *Keeping things private*

Each consumer's right to privacy, dignity and confidentiality in all aspects of his or her life is recognised and respected.

Standard 5 Participation and Integration - *Being part of the community*

Each person with a disability is supported and encouraged to participate and be involved in the life of the community.

Standard 6 Valued Status - *Valuing each person*

Each person with a disability has the opportunity to develop and maintain skills and to participate in activities that enable him or her to achieve valued roles in the community.

Standard 7 Complaints and Disputes - *Sorting out problems*

Each consumer is free to raise and have resolved any complaints or disputes he or she may have regarding the service provider or the service.

Standard 8 Service Management - *Running the service well*

Each service provider adopts sound management practices which maximise outcomes for consumers.

Standard 9 Protection of Human Rights and Freedom from Abuse and Neglect - *Being protected from harm*

The service provider acts to prevent abuse and neglect, and to uphold the legal and human rights of consumers.

C. Disclaimer

The evaluation assessment is necessarily limited by the following:

The methodology used for the evaluation has been designed to allow a reasonable degree of assessment in all the circumstances, particularly cost effectiveness of the evaluation process.

The standards against which assessment is made involve subjective terms and this entails an exercise of subjective judgement.

The assessment involves a reliance on multiple sources of evidence, including observations, feedback and some written records. The accuracy of written records cannot always be completely verified.

Where outcomes for individuals are of a high standard, and observation and other evidence indicates no apparent gaps in meeting the Disability Services Standards, the Standards are deemed to have been met.

The assessment will often involve a determination as to which of two or more versions of the same facts put to the evaluation team is correct under circumstances where this issue cannot be determined with absolute certainty.

The assessment will involve the Evaluation Team raising issues with a sample of individuals with a disability, their family members and carers. On some occasions information gathered from a sample will not reflect the circumstances applying over the whole group.

For these reasons the Evaluation Team cannot and do not accept responsibility for the veracity of any information on which they have based their reports and for a subsequent incorrect assessment that may have occurred based upon that information.