# Developmental Evaluation Report Summary

Disability Support Services (DSS) in the Ministry of Social Development (MSD) contracted disability support providers are independently evaluated to ensure they are meeting their contractual requirements to deliver quality supports and improve outcomes for disabled people.

This document summarises a report for a developmental evaluation of a DSS contracted provider. It provides information about the quality and effectiveness of the service, and its progress towards making its services more accessible and inclusive, and giving disabled people more choice and control.

Summary reports are published on the DSS website. Identifiable and personal information is removed to protect individuals’ privacy. If you require the full report, please email [OIA\_Request@msd.govt.nz](mailto:OIA_Request@msd.govt.nz) and request it under the Official Information Act (OIA).

## General information

|  |  |
| --- | --- |
| **Evaluation Information** | **Description** |
| Name of the service provider | Donaldson Residential Trust (DRT) |
| Date evaluation completed | 19-22 May 2025 |
| Type of evaluation | Midpoint |
| Service type | Community residential |
| Region or city | Christchurch |
| Brief description of the organisation providing the service being evaluated and their vision and approach to disability support | DRT was established in 1989 following the closure of Templeton Hospital and it initially provided support to People with intellectual disabilities.  Originally set up as a private enterprise with one house and four residents, it is now a well-established Charitable Trust providing support to 27 People across five homes.  The Trust aims to provide a home-like setting and to promote independence, dignity and inclusion, as well as ensure that each Person is happy and healthy. |
| Number of services/houses visited as part of this evaluation | One home |
| The evaluation was done by | SAMS – Standards and Monitoring Services |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Number of people interviewed** | | **10** | | |
| Disabled people | Families/Whānau | | Staff | Management |
| **4** | **1** | | **2** | **3** |

1. **Outcomes for disabled people**

This evaluation is based on the findings and information provided by disabled people, tāngata whaikaha Māori, their families/whānau, staff and management, review of documentation and through observations made by the Evaluation team. The outcomes evaluated below are based on the outcomes identified in the Outcome-Focused Evaluation Tool.

|  |  |
| --- | --- |
| **Outcomes for disabled people** | **Rating\*** |
| My identity / Tuakiri | Development desirable |
| My authority / Te Rangatiratanga | Development desirable |
| My connections / Te Ao Hurihuri | Development desirable |
| My wellbeing / Hauora | Action required |
| My contribution / Tāpaetanga | Development desirable |
| My support / Taupua | Development desirable |
| My resources / Nga Tūhonohono | Action required |
| Organisational health | Good practice evident |
| Value for money | Good practice evident |
| Equity (including service responsiveness to te ao Māori) | Good practice evident |
| Enabling Good Lives | Development desirable |
| **Overall rating** | Development desirable |

\* Rating guidance:

|  |  |
| --- | --- |
| Good practice evident | Many examples of good practice evident |
| Development desirable | Some examples of good practice evident / further development desirable |
| Action required | Immediate and significant action required for at least one component |

1. **Is this service certified under** [**Ngā Paerewa**](https://www.health.govt.nz/our-work/regulation-health-and-disability-system/certification-health-care-services/services-standard/resources-nga-paerewa-health-and-disability-services-standard) **(Health and Disability Services Standard NZS 8134:2021)?**

Yes, however the September 2023 certification audit completed by BSI Group New Zealand Ltd found DRT had zero corrective actions to complete.

1. **Recommendations and requirements**
   1. **Recommendations**

* We recommend that DRT review rostering so that staff have more time and availability to ensure that they are able to do activities ‘with’ People rather than ‘for’ them.
* We recommend that management work with supervisors and support staff to ensure that language is mana-enhancing and respectful (e.g. change the use of client/resident to Person/People).
* We recommend that the CCTV cameras present in the home are reviewed and alternative options are explored to ensure mana and privacy is upheld within the home.
  1. **Areas of development**
* While support staff demonstrated unconscious application of the Enabling Good Lives (EGL) principles, an opportunity exists for the Trust to provide EGL-specific training so that support staff are able to embed EGL into daily practice.
* Support staff work hard to provide a home-like environment for the People being supported. However, an opportunity exists for the Trust to upskill staff knowledge of supported decision-making techniques to ensure individual choice drives how support is provided and received.
* While support staff demonstrated a good understanding of People’s likes and dislikes, staffing levels result in supports being done ‘for’ People rather than ‘with’ them.
* While DRT has whānau representatives on their Board, an opportunity exists for DRT to have service user input into service delivery discussions and governance.
  1. **Agreed actions**
* DRT will organise external training to upskill support staff. Some areas discussed were EGL, Sexuality, Supported Decision-Making and Positive Behaviour Support.
* DRT will review all operational policies and ensure that Support Worker practice is consistent with DRT policy.
  1. **Requirements (contractually required)**

The requirements listed in the table below are actions that need to be done by the provider to ensure their services meet their obligations under their contract with DSS:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outcome area** | **Risk rating** (low, medium, high) | **Requirement** | **Evidence needed for verification of compliance with contract** | **Due date** |
| 4.1 | Moderate | DRT will review and update the organisation’s restraint register so that it is consistent with their restraint policy and Tier 2, Service Specification (SS) 6.9.1j. | DRT will provide SAMS with a copy of the restraint register once all restraints have been reviewed and approved by a qualified health professional. | 16 December 2025 |
| 7.1 | Moderate | DRT will update all Home Agreements to include the Residential Support Subsidy (RSS) portions relevant to each individual. Service in line with Tier 2, SS 6.9.1b&c. | DRT will provide a plan on how they will update the agreements, discuss the agreements with People and their whānau and have all agreements signed.  SAMS will request a random sample of agreements. | 29 July 2025  16 September 2025 |

1. **Evaluator reflection on the provider’s strengths**

* Support Workers demonstrate care and compassion for the People they are supporting.
* The People are supported to have personalised spaces within the home.
* Each Person has an activity schedule that ensures regular community engagement.
* DRT is updating and refreshing the homes with new technology and furniture.
* DRT’s Senior Leadership Team is willing to make changes to the organisational service delivery model so that services provide the best outcomes for disabled people.
* DRT has well-established links with other services, and it works with other services during goal-setting.
* DRT are promoting cultural events sometimes hosted at the homes where whānau are also involved.