A Developmental Evaluation Report for Home and Community Support Services

Provider name:

**Contents**

[General information 3](#_Toc192859508)

[About the provider 3](#_Toc192859509)

[Findings 3](#_Toc192859510)

[Information about this report 4](#_Toc192859511)

[Purpose 4](#_Toc192859512)

[Methodology 4](#_Toc192859513)

[Definitions 4](#_Toc192859514)

[*1.* *Requirements* 4](#_Toc192859515)

[*2.* *Recommendations* 5](#_Toc192859516)

[Executive summary 6](#_Toc192859517)

[Business Viability Standards 7](#_Toc192859518)

[Findings relative to general standards 12](#_Toc192859519)

[1. Access and entry 12](#_Toc192859520)

[2. Service delivery and coordination 12](#_Toc192859521)

[3. Person-centric 12](#_Toc192859522)

[4. Organisation and staff 13](#_Toc192859523)

[5. Areas of opportunity / development & recommendations 14](#_Toc192859524)

# General information

* **Date evaluation completed:**
* **Date evaluation report sent to the provider:**
* **Date evaluation report signed off:**
* **Names of evaluator/report writer:**

## About the provider

* **Provider number:**
* **Provider address: Head office:**
* **Evaluation venue:**
* **Provider contact person:**
* **Brief description of service:**
* **Number of clients:**
* **Brief description of clients:**

## Findings

* **Total number of requirements:**
* **Total number of recommendations:**

# 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 and take into account wider influences within the community and the health and disability sector.

## Methodology

The following standards, agreements and principles are utilised in Developmental Evaluation:

* the NZ Government Business Viability Standards
* the Ministry of Social Development Evaluation Tool based on the Provider’s National Contract
* the general Provider Quality and Service Specifications
* the Disability Support Services principles
* the New Zealand Health & Disability Sector Standards.

## Definitions

## *Requirements*

Requirements are made where there is a concern(s) about the quality of the service that poses a 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 |

## *Recommendations*

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

# Executive summary

*(A general overview of the service, which includes a summary of the findings, and any areas the evaluation team identifies as high risk or of concern.)*

# Business Viability Standards

**CORE STANDARD: FINANCIAL MANAGEMENT AND SYSTEMS**

The organisation is financially viable and manages its finances competently.

1. The organisation is solvent.
2. The organisation has financial management systems appropriate to its size and complexity.
3. The organisation has adequate insurance cover for its size and complexity.
4. The organisation has an appropriate accounting system that produces accurate and timely financial statements.
5. The organisation has arrangements for the regular independent audit, or in some cases review, of financial accounts.
6. The organisation undertakes forward financial planning (forecasting) to show that it will remain financially viable.

Evidence

Field notes

Exceptions

**CORE STANDARD: RESOLUTION OF COMPLAINTS RELATED TO SERVICE PROVISION**

The organisation uses an effective process to resolve complaints about service provision.

1. The organisation has a formal process for receiving, considering and resolving complaints. This process is soundly based in law, is consistent with the principles of natural justice, and ensures the support and safety of the complainant throughout the process.
2. The organisation ensures its clients and staff are aware of the formal complaints process.
3. The organisation maintains records of all complaints, the formal application of the complaints process and improvements that arise.

Evidence

Field notes

Exceptions

**CORE STANDARD:** **STAFFING**

1. The organisation has the staffing capability and capacity to deliver services safely.
2. The organisation has sufficient qualified and competent staff to deliver its services.
3. The organisation’s staffing and staff relations policy and procedures comply with the relevant legislation.
4. The organisation includes in its definition of staff anyone the organisation relies on to deliver its services. This includes caregivers, volunteers, contractors, and paid staff members.
5. The organisation uses a clear, transparent and open process for recruiting and vetting suitable staff, including members of the organisation’s governance body. The process leads to an appropriate decision in response to all vetting. Vetting of staff includes, but is not limited to, a Police vet.
6. The organisation does not employ any Person in a paid or voluntary capacity, including members of the organisation’s governance body, who has a conviction for sexual crimes or for any offence involving the harm or exploitation of children.
7. All staff have a written agreement of service.
8. The organisation provides adequate induction, training, professional development and support for all staff.
9. The organisation uses an effective performance management system for all staff.

Evidence

Field notes

Exceptions

**CORE STANDARD:** **HEALTH & SAFETY**

The organisation ensures that clients, staff and visitors are protected from risk.

1. The organisation ensures that its premises and any premises it uses or relies on for service delivery comply with all legal and regulatory requirements.
2. The organisation provides and maintains a safe physical and emotional environment for all who enter its premises and any other premises that it uses for service delivery.
3. If applicable, the organisation ensures the safety of any children being supervised on the premises while their parents or caregivers receive services.
4. The organisation ensures the safety of any client being supervised.
5. The organisation has Safety and Emergency Plans for the evacuation of its premises and any other premises it uses for service delivery.
6. The organisation maintains a register of accidents, and incidents, and occasions of serious harm to staff, visitors and others in the workplace.
7. The organisation notifies the Ministry of Business Innovation and Employment, WorkSafe, as soon as possible of any incident which falls within the definition of serious harm, as defined in the Health and Safety at Work Act 2015. It also provides written confirmation of the incident within seven days.
8. The organisation ensures that where an intervention is required, staff use appropriate methods that protect .

Evidence

Field notes

Exceptions

**CORE STANDARD: GOVERNANCE AND MANAGEMENT STRUCTURE AND SYSTEMS**

The organisation has a clearly defined and effective governance and management structure and systems.

1. The organisation has a defined and current legal status.
2. The organisation is governed and managed by People with appropriate skills, qualifications and personal attributes.
3. The organisation has an appropriate and clearly defined governance and management structure, the written record of which shows authorities, delegations, responsibilities and accountabilities.
4. The organisation has a process for identifying and managing perceived, actual or potential conflicts of interest, including between governance and management roles.
5. The organisation’s management systems, policies and procedures are consistent with:
   1. its legal status, constitution, rules, charter or Act of Parliament
   2. the aims, philosophy and scope of its activities
   3. its management structure
   4. relevant legislation
   5. contractual obligations.
6. The organisation has a Business Continuity and Disaster Recovery Plan in place.

Evidence

Field notes

Exceptions

# Findings relative to general standards

## 1. Access and entry

**Referral process**

**Integrated and coordinated services**

## 2. Service delivery and coordination

**Service Plan**

**Service delivery**

**Linkages**

## 3. Person-centric

**Person-centred**

**Personal planning**

**Respected and valued as a Person**

## 4. Organisation and staff

**Contingency planning and management**

**Staffing**

**Staff capability / training**

**Recruitment**

**Equipment**

# 5. Areas of opportunity / development & recommendations