# **Enabling Good Lives – Organisational Self Review**

#### Introduction, Instructions & Interview Guide

**Note:** this is document one, of two, associated with the EGL Organisational Self Review process. The second document is titled: “Organisational Summary Document”.

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### Overview of Enabling Good Lives (EGL)

‘Enabling Good Lives’ (EGL) is a fundamental shift to the cross-government disability support system to ensure disabled people experience greater choice and control over their supports.  
  
Central to EGL is the shifting of authority so disabled people and their families have the ‘say so’. This involves the strengthening of disabled persons and families networks and the creation of individualised funding for disabled people through a cross-government or joint funding models. This is linked with a move for services to develop a facilitation-based model that supports full citizenship.  
  
EGL is based on a set of principles that guide development. A basis of the EGL approach is that services and supports are tailored to reflect individual strength, preference and aspiration. In this way, EGL will take different forms – person by person, family by family and community by community.  
  
Disabled people, their families and service providers are partners in the process of designing, implementing and monitoring the EGL approach. An objective of the EGL approach is to have clear, principles based, reference points that ensure service providers are able to map their current strengths and ways to move towards a full EGL approach. This will take time. The intention is that “Self Review” tools and external evaluation and monitoring will become aligned across service ‘types’ and ministries. An objective of the EGL approach is for there to be one set of principles, one personal plan, one pool of funding and one review/evaluation process across services.

### Background to the EGL Organisational Self Review

The Enabling Good Lives (EGL) based Organisational Self Review process will enable services to identify areas of current strength and areas for development – according to the EGL principles. As a ‘self review’ process, it is intended to create insight, enable organisations to map a pathway forward, link organisations to relevant guidelines that will assist development and contribute to streamlining external evaluation.  
  
**The Enabling Good Lives (EGL) based Organisational Self Review is intended as one way for organisations to:**

* Enable disabled persons, families and support staff to contribute to service development
* Determine areas of current strength
* Gather the experiences and perspectives of individuals related to how they believe the service is contributing to them creating a good life for themselves
* Identify ‘next steps’ for development
* Be a framework for organisations to prioritise actions that are intended to assist them become more fully aligned with an EGL based approach
* Assist organisations to identify what “guidelines”/resources will be of most value
* Enable the measurement of “change over time”, according to an outcomes approach, directly related to the EGL approach



The areas in this review document, are drawn directly from material contained in the Ministerial Committee on Disability Minutes (11 September 2012) and EGL material.  
  
A continuums based approach has been chosen to make it easier for organisations to identify “next steps” without the need for external input. The continuums based approach also provides a way for progress to be identified i.e. when the review is completed multiple times then movement/change can be monitored.

### How the Organisational Self Review was Developed

**There were three initial frames of reference for this document:**

1. The Enabling Good Lives principles, components, elements and vision (outcomes) statements
2. The SAMS “Framework for Evaluation of Services – An Outcomes Focus (2011)” - Note: this framework was developed in partnership with disabled persons, families and service providers
3. “Progress for Providers: Checking your progress in delivering personalised support for people living at home (December 2012)” Published by HSA Press and sponsored by Mears Care Limited and UKHCA (United Kingdom Homecare Association)

**The primary contributors to this document were:**

* The EGL Waikato Leadership Group i.e. a group of Disabled Persons Organisations, Family and Service Provider representatives
* A Disabled Persons Forum in the Waikato facilitated by People First New Zealand
* A Family Members Forum in the Waikato associated with EGL
* Community Connections (Kapiti), Community Care (Dunedin), Enrich+ (Te Awamutu) and Interactionz (Hamilton) undertook a trial of the documents and process in November 2013. Feedback received from these providers assisted in compiling a final draft.
* Various experienced SAMS evaluators

### Before Using the Organisational Self Review Documents

**There are two documents associated with the Organisational Self Review:**

1. **The Introduction, Instructions and Interview Guide**.  
   This document introduces the Review process, provides the interview schedules and includes suggested “recording sheets” that can be copied for each person who participates. It primarily relates to Sections A and B of the review i.e. the sections that collect information on individual experiences.  
     
   Section A is directly drawn from the EGL principles and this document provides a general framework (and suggestions) for gathering information. Interviewers may need to adapt the actual questions and communication approach used to suit individuals.  
     
   Section B is directly based on the “vision” statements associated with EGL. The continuums present a range of options (potential outcomes) that will resemble the various experiences of individuals at this point in time.
2. **The Organisational Summary.**This document is used to record the collated information from individual discussions relating to Sections A and B. The Summary Document also provides a framework where the organisation can record their view of itself i.e. Section C. There is a visual summary of results and a suggested format for an action plan.

### An Overview of the Process

1. [Become familiar with the documents and their function](http://www.enablinggoodlives.co.nz/#clarity)
2. [Randomly select individuals](http://www.enablinggoodlives.co.nz/#random)
3. [Decide on the organisation’s approach to gathering information](http://www.enablinggoodlives.co.nz/#gathering)
4. [Conduct interviews/discussions](http://www.enablinggoodlives.co.nz/#conduct)
5. [Collate information from individual interviews and staff perspectives](http://www.enablinggoodlives.co.nz/#collating)
6. [Complete the visual overview](http://www.enablinggoodlives.co.nz/#complete)
7. [Select areas for development](http://www.enablinggoodlives.co.nz/#selecting)
8. [Develop action and monitoring plan](http://www.enablinggoodlives.co.nz/#developing)
9. [Obtain additional information (if required) e.g. “guidelines”](http://www.enablinggoodlives.co.nz/#obtaining)
10. [Action changes/developments](http://www.enablinggoodlives.co.nz/#action)
11. [Monitor – affirm (acknowledge positive change) or adapt (try another way) approach](http://www.enablinggoodlives.co.nz/#monitoring)
12. [Completing the next Organisational Review (begin the process again – two/three year cycle).](http://www.enablinggoodlives.co.nz/#completing)

#### 1. Clarity

Read through everything here so you have a good understanding before you begin the process.

#### 2. Random Selection

A random selection enables you to provide a balanced perspective of how well things are going for people. It removes the tendency to select people and situations that will give a distorted outcome to the review process.

For small services of under 50 people, random selection may best include a larger portion of people (say 20-25%) when compared with large organisations when 10% may yield a big enough sample.

One way to make a random selection is to provide a list of individuals and draw out a person’s name at a regular interval on the list. For example, every fifth person. In some cases the chosen person may not be available or may (for good reason) not wish to participate in the interview. In these cases new people can be selected from the list by starting the selection at the 3rd person and then choosing every fifth person until the requisite number of people are found.

* For a service of 50 people or less a selection should involve a minimum of five people and up to ten people (about 20%). If the service is very small (less than 12) then interviewing all the people available is a good option.
* For a service of 50-150 people a minimum of ten people and up to 15 people would be preferred to provide a good representation of the service.
* For a service of 150-250 people a good random selection should work on a sample of ten percent of the list.
* For a service of 250 people or more sampling in batches of ten percent in different locations, would be useful.

#### 3. Gathering Information

**Sections A and B** – The experiences of people using the service

Organisations may choose a variety of ways to collect information from individuals and staff. The method chosen by the organisation will vary depending on what best suits the communication preferences of individuals who use the service, and the organisation. The “Interview Guidelines” are intended to assist when information is gathered through discussion. Questions may need to be rephrased to suit individuals. If organisations want to encourage individuals to complete responses without direct support, they may need to develop additional resources to further explain this process.  
Interviews can be conducted in various ways e.g.

* Informal “semi-structured” discussion where the ‘interviewer’ guides conversation along the lines of the areas that will be commented on (and checks their understanding with the individual)
* Formal interviews i.e. where an “interviewer” works through the review document with an individual (and checks their understanding with the individual)
* The use of a range of visual aides (e.g. “talking mats”) to make it easier for individuals to express their opinions
* Organisations may choose to use ‘volunteers’ for this process, staff with specific communication skills or ask the individual whom they would like to complete the process with. Organisations may also choose to identify one or two staff with expertise who will conduct all interviews.

Alternatively, in some situations, an organisation may choose to provide individuals with an adapted version of this material and request they complete responses to questions themselves (or with support from friends). The “interviewer” can, if appropriate/requested by the individual, either simply gather their responses or have a conversation with the individual to ensure clarity.

*Note: some individuals may require other forms of additional communication aides to participate in this process and this is best determined by the organisation undertaking the Self Review.*

**Section C** – The view staff have of the service. This section is located in the Summary Document.

There are multiple ways organisations can complete this section. For example, organisations may choose to:

* Hold a series of specific ‘focus groups’ – with an external or internal facilitator
* Request staff teams complete sections during routine staff meetings
* Design a questionnaire that is posted on the internet/intranet for staff to complete and then collate the results of this

Ideally, Section C reflects the responses of a range of people employed in the organisation.

#### 4. Conduct Interviews

At this stage you will have selected the individuals to be interviewed and your preferred method, now conduct the interviews for people you support using Sections A and B. As individuals describe their experience, the interviewer can use the examples given to assist placing their experience in the associated continuum.  
For staff comment - use Section C.

#### 5. Collating Information

**Sections A and B**

After all discussions/interviews have been completed, individual results are then collated. This means the individual responses are “blended” together to find out what the main themes are in peoples experience. Because you have ‘randomly selected’ participants these themes should reflect what is happening for all of the people you interact with.

An easy way to complete the collation is to:

* Gather together all of the recording forms
* Have one blank recording form
* Count the number of the same responses people have had – going from topic/area to topic/area
* Write the total numbers into the blank form e.g.

| **Example Table** | | | | | |
| --- | --- | --- | --- | --- | --- |
| Self-determination: disabled people are in control of their lives | 1 | 3 | 17 | 20 | 2 |

* When you have completed this, you can then identify the most common responses (and the next most common etc) e.g.

| **Example Table** | | | | | |
| --- | --- | --- | --- | --- | --- |
| Self-determination: disabled people are in control of their lives | 1 | 3 | 17 **2nd most common** | 20 **most common** | 2 |

Now you can work out the percentage (%) of people with these responses. You can do this by dividing the number of people by the total number in that topic e.g. 20 people ÷ 43 = 46% (see above example)

* Enter the percentage (%) of people – topic by topic – into the “Summary Document” e.g.

Principle 1. Self-determination: disabled people are in control of their lives.

arrow

**“Others” Control   -   Self Determination**

| **Example table** | | | | | |
| --- | --- | --- | --- | --- | --- |
| place on the continuum % of individuals |  |  | 39% | 46% |  |

Or

**Person Directed Planning**

| **Example table** | | | | |
| --- | --- | --- | --- | --- |
| (insert %) 10% | 45% | 30% | 10% | 5% |

**Section C**

Organisations may want to follow a similar process used for Sections A and B. Alternatively,  
organisations may want to have discussions until a response is agreed.

##### 6. Complete the Visual Overview

To understand the results and work out areas of potential development, the next step is to enter results (from the earlier completed sections of the Summary Sheet) into the Graphic Summary Sheet e.g.

| **Example Table** | | | | | |
| --- | --- | --- | --- | --- | --- |
| Self-Determination: disabled people are in control of their lives |  |  |  |  |  |
| Beginning Early |  |  |  |  |  |
| Person-Centred |  |  |  |  |  |
| Ordinary Life Outcomes |  |  |  |  |  |
| Mainstream First |  |  |  |  |  |
| Mana Enhancing |  |  |  |  |  |

This will immediately reveal areas of strength and areas that require further development. The above example would suggest that service strengths are related to “mana enhancing”, “self-determination” and “ordinary life outcomes”. Areas, in this example, that require development relate to “Beginning Early” and “Mainstream First”.

Organisations can return to the **Introduction, Instructions and Interview Guide** to obtain more detailed information on specific continuums i.e. “what are the next steps we can take?” or where we need to be heading.

##### 7. Selecting Areas for Development

Organisations may want to refer to the diagram located in the “Provider Summary” (page 10) to determine whether highlighted areas are:

* an area where they have the direct ability to make a positive change
* an area where they could positively influence others
* an area where information should/could be passed to another party

##### 8. Developing an Action and Monitoring Plan

When the areas requiring development have been identified, the organisation can discuss with individuals and families how positive change can be made. It may be useful to look at the continuums and become clear on the outcomes you want to achieve.

Organisations may wish to convene a “working group,” comprised of disabled people, families and key staff, to set some objectives for what changes will be made, how this can happen and how this will be monitored.

There is a format suggested for developing an Action Plan included in the Summary Document.

##### 9. Obtaining Additional Information and Relevant Guidelines/Resources

After the Action Plan is completed, organisations can look at the “Guidelines” that have been developed to assist positive change. These guidelines have been based on current experience in New Zealand and have been shown to be effective in assisting organisations to develop.

Because development can be complex, involving many interlinked parts, there may be several “guidelines” that will need to be explored. Sometimes there is an obvious progression that needs to be followed e.g. people need access to appropriate communication and experiences before they can make choices.

**Linking the Outcomes of the Self Review with the EGL Guidelines**

Primary Links

|  |  |  |  |
| --- | --- | --- | --- |
| **The EGL Principles** | **Topics - EGL Guidelines** | | |
| Self-Determination | Who Has the ‘Say So’ | Personal and Support Planning - Deciding What I Want | Communication Strategies - Making it Easier for Individuals to Communicate |
| Beginning Early | Communication Strategies - Making it Easier for Individuals to Communicate | Building Trusting Relationships | Creating Partnerships |
| Person-Centred | Who Has the ‘Say So’ | Personal and Support Planning - Deciding What I Want | Having People Involved |
| Ordinary Life Outcomes | Experiencing New Things | Citizenship | What’s in My Community |
| Mainstream First | Citizenship | What’s in My Community | Facilitative Support |
| Mana Enhancing | Who Has the ‘Say So’ | Creating Partnerships | Communication |
| Easy to Use | Building Trusting Relationships | Facilitating Group Meetings | Using Our Resources |
| Relationship Building | Building Trusting Relationships | Working Creatively with Conflict | Communication |

|  |  |  |  |
| --- | --- | --- | --- |
| **Individual Outcomes** | **Topics - EGL Guidelines** | | |
| Valuing of Personal Networks | Building Trusting Relationships | Creating Partnerships | Facilitative Support |
| Control of Support | Who Has the ‘Say So’ | Personal and Support Planning - Deciding What I Want | Working Creatively with Conflict |
| Aligned Support | Using Our Resources Innovatively | Building Trusting Relationships | Facilitative Support |
| Control of Resource | Facilitative Support | Personal and Support Planning - Deciding What I Want | What’s in My Community |
| Contribution | Citizenship | Experiencing New Things | What’s in My Community |

|  |  |  |  |
| --- | --- | --- | --- |
| Supports and/or Services | Topics - EGL Guidelines | | |
| Personal Networks | Citizenship | Facilitative Support | Using Our Resources Innovatively |
| Control of Support | Personal and Support Planning - Deciding What I Want | Who Has the ‘Say So’ | Working Creatively with Conflict |
| Person Directed Planning | Making it Easier for Individuals to Communicate | Personal and Support Planning - Deciding What I Want | Who Has the ‘Say So’ |
| Aligned Support | Building Trusting Relationships | Creating Partnerships | Making use of the resources we have |
| Personal Relationships | Communication | Creating Partnerships | Working Creatively with Conflict |
| Increasing Expectations | What’s in My Community | Experiencing New Things | Citizenship |

##### 10. Action the Changes/Developments

The organisation now implements the Action Plan, using the additional resources, to strengthen the service’s ability to assist people live the life they choose.

##### 11. Monitoring Progress

It is strongly suggested organisations decide, in discussion with disabled persons and families, how they will keep track of progress. There can be multiple ways this can be achieved.

**Some of the ways this could be done is to:**

* Have a “working group” of disabled people, families and key staff who meet together once every three months to review developments
* Have facilitated focus groups from time to time e.g. what is working?, how are things going?, what could we do differently? And what achievements are we seeing?
* Provide disabled persons, families and staff with up-dates via a newsletter or website

##### 12. Completing the Next Organisational Review

Essentially, the same steps are completed. However, when the next review is completed there will be data that will show what change has occurred.  
Organisations will now have information that describes “change over time”.

### Interview Guide

Section A

Use the suggested questions to assist individuals to place themselves on the associated continuum.

Principle 1.

**Self-determination: disabled people are in control of their lives.**  
i.e. disabled people have the “say so” over what they do in the service

Continuum from: “Others” Control to: Self Determination

**“Others” Control   -   Self Determination**

**Indicators for “Others” Control**

* Minimal or no personal autonomy
* Choices are controlled by others
* Compliance to predetermined options
* Limited involvement in decision making

**Indicators for Self Determination**

* Individuals make informed choices (where they live, who they live with, involvement with employment and/or education), etc
* Supports and/or services are tailored to the expressed preferences and aspirations of the individual/families
* Resources and supports are allocated and designed on the basis of individual circumstance and aspiration
* Disabled persons and their families have a leadership role in service and or sector development

Suggested Question

Who makes the big decisions in your life, such as where you live?

**Clues:** comments that may indicate where the persons experience fits on the continuum – examples only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| “Other people make all the decisions” | “Occasionally I get to choose to do something ” | “Staff sometimes ask if I want to do a... or ...b...” | “Services ask me what I want to do” | “I choose what happens in my life” |
|  |  |  |  |  |

Principle 2.

**Beginning Early:** invest early in families and whānau to support them to be aspirational for their disabled relative, to build community and natural supports and to support disabled people to become independent, rather than waiting for a crisis before support is available.

**Note:** for some services, this relates to being “proactive” i.e. assisting people to build what they want and not waiting until a crisis before attention is paid to an individual or family

Continuum from: Reactive to: Pro-Active and Beginning Early

**Reactive - Pro-Active and Beginning Early**

**Indicators for Reactive**

* Minimal information available to make informed decisions about future supports
* Limited knowledge and skills to plan for, initiate or implement a personal plan
* Getting the support required can be complex, inflexible and difficult to co-ordinate
* Dependence is on paid staff rather than on the development of natural supports
* Dependence is on others to plan or make decisions about my future
* Minimal investment in community building and in developing informal support structures
* Communication is issue based

**Indicators for Pro-Active and Beginning Early**

* Families/whanau/disabled persons have the right information at the right time and support structure in place to plan for the future
* Families/whanau/disabled persons have the knowledge and skills to make informed decisions
* Families/whanau/disabled persons have access to natural and universally available supports
* There is a planned approach to services and supports which assists the individual to achieve the life they want and is regularly reviewed/ updated
* There is transition planning in place for significant life stages/changes in circumstance

Suggested Question

Does the service make contact with you and find out what you need/want such as working proactively?

**Clues:** comments that may indicate where the persons experience fits on the continuum – examples only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| “ I am still waiting to be asked what I need/want” | “Staff didn’t seem to listen and they are hard to get hold of when we need them” | “Staff took their time but some things are happening now.” “They seem to know what we want” | “Staff made plans with us and took time to get to know us and what we wanted. Though it all took a while to get started” | “Staff met with us as soon as we expressed an interest and followed through with the plans we made together” |
|  |  |  |  |  |

Principle 3.

**Person-Centred:** disabled people have supports that are tailored to their individual needs and goals, and that take a whole life approach rather than being split across programmes.

Continuum from: Group Based Supports to:  Personalised Supports

**Group Based Supports   -   Personalised Supports**

**Indicators for Group Based Reports**

* Supports are not customised to the individual
* Most activities are group based and there is minimal opportunity for individual activities or support
* The organisations internal structure and/or use of resource makes individual support difficult
* Personal aspirations may not be the basis of planned activities
* Activities may be based on a predetermined ‘programme’ rather than personal aspirations
* Internal policies (ie, staff ratios) impact the type of planned activities that take place

**Indicators for Personalised Supports**

* Supports and services are tailored to the individuals needs and goals
* Peoples’ lives are not compartmentalised into day, night, home, community, etc
* The individuals personal preferences and aspirations drive services and supports
* Supports are co-ordinated and assist the individual with achieving their aspirations
* Supports are customised to the individual

Suggested Question

Are your supports based around what you really want?

**Clues:** comments that may indicate where the persons experience fits on the continuum – examples only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| “They just tell me what they have to offer and how I can fit in” | “Support is decided by other people – what they want for me not what I want for myself.” | “They have tried listening to what I want”. | “Staff are learning to think outside the box” “Some things just seem too hard but others have been successful”. | “Together we decided on how we could do the things we wanted.” |
|  |  |  |  |  |

Principle 4.

**Ordinary Life Outcomes:** disabled people are supported to live an everyday life in everyday places; and are regarded as citizens with opportunities for learning, employment, having a home and family, and social participation - like others at similar stages of life.

Continuum from: Isolation/Exclusion to: Inclusion/Citizenship**Isolation/Exclusion - Inclusion/Citizenship**

**Indicators for Isolation/Exclusion**

* People are excluded from participating in the community
* People have limited social participation and connection with others
* Primary involvement is with “specialised” or “segregated” services
* Individuals have limited choice in the activities provided
* Individuals have limited opportunities to being exposed to a range of experiences/activities

**Indicators for Inclusion/Citizenship**

* Individuals contribute to the community through a range of activities (ie, educational, social, recreational, employment and/or personal activities)
* Individuals have a range of roles that are socially valued
* As citizens, disabled persons have the same rights and responsibility as other members of the community
* Supports assist people to be ‘part of’ their community through social participation and relationship building

Suggested Question

How are you supported to be involved in your community?

**Clues:** comments that may indicate where the persons experience fits on the continuum – examples only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| “I don’t get out much” “I lost touch with my family – no-one has tried to contact them.” | “I go out sometimes” | “My choice is limited to a few options”. “People sometimes recognise my skills and attributes, but often they see my disability first.” “I get out into the community when it can be arranged | ”My family comes to see me.” “I get out when I can get support.” “I like to go shopping and can get transport when I need it”.  . | “My family is as involved in my life as I want them to be.” “My skills are respected” “I have a say in my community”. “I feel I belong in my community and I am respected”. “People know me and I have friends.” |
|  |  |  |  |  |

Principle 5.

**Mainstream First:** disabled people are supported to access mainstream services before specialist disability services.

Continuum from: Segregated to: Mainstream**Segregated   -   Mainstream**

**Indicators for Segregated**

* Disabled people primarily access segregated services or specialist disability services

**Indicators for Mainstream**

* Disabled persons have access to mainstream services
* Disabled persons have information to make informed decisions about supports

Suggested Question

What sort of community services/groups have you been supported to make contact with?

**Note:** this may have been covered in the discussion of the previous principle

Clues: comments that may indicate where the persons experience fits on the continuum – examples only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| “I don’t belong to any community groups” “I don’t get out unless the staff organise it” | “I spend most of my time in services | “I go to the community sometimes – for specific things.” | “I get support to go to the places I want to go without staff” | “I feel I really belong in my home /school/ workplace. I get support when I want it” |
|  |  |  |  |  |

Principle 6.

**Mana Enhancing:** the abilities and contribution of disabled people and their families are recognised and respected.

Continuum from: Diminished Dignity to: Mana Enhancing

**Diminished Dignity   -   Mana Enhancing**

Indicators for **Diminished Dignity**

* Minimal or no contributions from disabled persons and their families are sought
* Contribution is tokenistic
* Contribution is sought but has limited authority
* Disabled persons and their families abilities are not recognised or valued
* Hierarchical approach to service provision

**Indicators for Mana Enhancing**

* Individuals abilities and contributions are valued
* Disabled persons and their families are given opportunities to contribute
* Individuals and families have a range of opportunities to influence policies and practice
* A partnership approach is central to how services are provided
* Individuals experience of supports is valuing

Suggested Question

How does the service recognise what you have to offer and respect your contribution?

**Clues:** comments that may indicate where the persons experience fits on the continuum – examples only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| “No one ever listens to me/us” “People always treat me/us differently” | “They want my opinion occasionally” | “I attend some forums where my opinion is respected” “I am invited onto some Boards or panels, but don’t always feel supported or listened to in those forums” | “I am encouraged to contribute” | “Our/my opinion is always considered.” “I feel I am respected as being in control of my life” |
|  |  |  |  |  |

Principle 7.

**Easy to Use:** disabled people have supports that are simple to use and flexible.

Continuum from: Supports are difficult to use to: Clear and flexible supports

**Supports are difficult to use   -   Clear and flexible supports**

**Indicators for Supports are difficult to use**

* Disabled persons and their families do not understand what supports are available to them or how to use them
* Supports are complex and lack transparency
* Supports are inflexible and cannot meet the changing needs of the disabled person and their families
* Disabled persons and families are “locked in” to services

**Indicators for Clear and flexible supports**

* Disabled persons and their families have a clear understanding of what supports are available and how to use them
* Accessing multiple supports is easy to co-ordinate and the process is transparent
* Supports can meet the changing needs of the disabled person and their families

Suggested Question

Is it easy for you to get what you want, and do things change if your needs/wants change?

**Clues:** comments that may indicate where the persons experience fits on the continuum – examples only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| “I get what they give me” “There is no choice” | “There is a limited range of options that are presented to me” | “I have some choice in support workers” | “They do ask what I would ideally want, but there is limited fit between what I say and what is offered” | “We begin with what I/we want and build a support package from there” “Support can change as my needs change” “I have complete choice in who supports me and how I am supported” |
|  |  |  |  |  |

Principle 8.

**Relationship Building:** supports build and strengthen relationships between disabled people, their whānau and community.

**Continuum from: Isolated to: Connected with mutual relationships**

**Isolated   -   Connected with mutual relationships**

**Indicators for Isolated**

* Disabled persons are isolated and have few relationships outside of paid staff
* Individuals have limited opportunities to build new or strengthen existing relationships
* The importance of family/whanau is not recognised
* The individual has minimal opportunity to explore their culture and identity
* Family/whanau have minimal involvement or input into supports

**Indicators for Connected with mutual relationships**

* Services are involved in developing relationships and actioning practices that result in increased opportunities for people with a disability in the community
* Services operate in a manner that develops, strengthens and maintains relationships
* The individual is encouraged to explore their culture and identity

Suggested Question

How does your support help you keep in contact with family/friends or extend your network of friends?

**Clues:** comments that may indicate where the persons experience fits on the continuum – examples only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| “I do not get out of here to meet anyone” “I have lost or have no contact with family/whanau” | “Family/friends have some contact but I feel I don’t see them often enough” | “I get out a few times a week” | “I belong to some groups and have met some people.” | “I have the level of contact I want with family/whanau” “I’m always able to meet with and socialise with friends” |
|  |  |  |  |  |

Section B  
Individual Outcomes

**Note:** interviewers may need to state the questions in different ways so they are understood. Sometimes multiple responses may be gathered best by having a general conversation about the topics.

9. Valuing of Personal Networks

**Key Question:** How does the service treat the important people in your life e.g. your family and friends?

**Continuum from: Limited and not recognised to: Diverse and highly valued**

**Limited and not recognised   -   Diverse and highly valued**

| **What column best fits the persons experience** | | | | |
| --- | --- | --- | --- | --- |
| My family, whanau and friends are not recognised as being important to my support. I have only paid staff. | My family, whanau and friends’ participation is restricted by my supports. | My family, whanau and friends are invited to participate in meetings, but have little involvement outside of these meetings. | My family, whanau and friends can initiate ideas for my support and are mostly welcomed at all activities and events about me. | My family, whānau, and friends are recognised and valued for their support. |
|  |  |  |  |  |

10. Control of Support

**Key Question:** Who has the “say so” with the support you get?

**Continuum from: No Choice to:  In Control**

**No Choice   -   In Control**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| I am not encouraged to make choices and have no control over my supports. | I have limited options to make informed choices, do not have easy access to appropriate support to make decisions and have restricted control over my supports. | I am able to make some choices and can usually obtain help if required. I have control over some aspects of my supports. | I am mostly able to make informed choices – with assistance if I want it. I have reasonable control of planning my supports. | I am in control of planning my support, and I have help to make informed choices if I need and want it. |
|  |  |  |  |  |

11. Aligned Support

**Key Question:** How well organised are your supports?

**Continuum from: No link between supports to  Co-ordinated and complimentary**

**No link between supports   -   Co-ordinated and complimentary**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| There is minimal or no co-ordination between the different supports. | There is a lack of transparent communication that enables effective co-ordinated support. | There is some communication and co-ordination between the different supports | Mostly my support is well co-ordinated, however communication could be further improved. | My support is co-ordinated and works well together. |
|  |  |  |  |  |

12. Control of Resource

**Key Question:** Who has the “say so” about how your funding is used?

**Continuum from: No Control  to:  I decide**

**No Control   -   I decide**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| I do not have choice or control over how resources are used to deliver a service for me. | I have limited choice and options around how resources are used to deliver a service for me | I am able to make some decisions around how resources are used to deliver a service for me. | I am mostly able to make decisions around how resources are used to deliver a service for me. | I decide how resources are used – whether I manage it, or an agency manages it under my guidance, or a provider is paid to deliver a service to me. |
|  |  |  |  |  |

13. Contribution

**Key Question:** Are you able to contribute to the community?

**Continuum from: Segregated  to:  Included as a contributor**

**Segregated   -   Included as a contributor**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **What column best fits the persons experience** | | | | |
| I am in a segregated environment and have no contact with my local community. | I am mainly involved in a segregated programme in which we access the community as a group | I have limited chances to contribute - a mix of segregated, group and some individualised activities. | I am supported to be involved in my local community and to develop relationships and activities. | I feel welcomed and able to contribute to my local community most of the time. |
|  |  |  |  |  |

# Recording Sheets

**Sections A and B (print a sheet for each individual)**

**Continuum from: Segregated to:  Included as a contributor**

**Segregated   -   Included as a contributor**

**Person 1**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Principle** | **Section A - Principles** |  |  |  |  |  |
| 1 | Self-Determination: disabled people are in control of their lives |  |  |  |  |  |
| 2 | Beginning Early |  |  |  |  |  |
| 3 | Person-Centred |  |  |  |  |  |
| 4 | Ordinary Life Outcomes |  |  |  |  |  |
| 5 | Mainstream First |  |  |  |  |  |
| 6 | Mana Enhancing |  |  |  |  |  |
| 7 | Easy to Use |  |  |  |  |  |
| 8 | Relationship Building |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Principle** | **Section B – Individual Outcomes** |  |  |  |  |  |
| 9 | Valuing of Personal Networks |  |  |  |  |  |
| 10 | Control of Support |  |  |  |  |  |
| 11 | Aligned Support |  |  |  |  |  |
| 12 | Control of Resource |  |  |  |  |  |
| 13 | Contribution |  |  |  |  |  |

**Person 2**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Principle** | **Section A - Principles** |  |  |  |  |  |
| 1 | Self-Determination: disabled people are in control of their lives |  |  |  |  |  |
| 2 | Beginning Early |  |  |  |  |  |
| 3 | Person-Centred |  |  |  |  |  |
| 4 | Ordinary Life Outcomes |  |  |  |  |  |
| 5 | Mainstream First |  |  |  |  |  |
| 6 | Mana Enhancing |  |  |  |  |  |
| 7 | Easy to Use |  |  |  |  |  |
| 8 | Relationship Building |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Principle** | **Section B – Individual Outcomes** |  |  |  |  |  |
| 9 | Valuing of Personal Networks |  |  |  |  |  |
| 10 | Control of Support |  |  |  |  |  |
| 11 | Aligned Support |  |  |  |  |  |
| 12 | Control of Resource |  |  |  |  |  |
| 13 | Contribution |  |  |  |  |  |

Part 2

Organisational Summary Document

**Note:**

1. Those employed in the organisation have opportunity to reflect on their practice.
2. The results of individual interviews are collated.
3. You obtain a clear picture of areas of strength and areas requiring development.
4. You select what you need or want to take action on.
5. Develop Action Plans.

Section A and B - Collated Results

Principle 1. Self-Determination

arrow

**“Others” Control   -   Self Determination**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Place on the continuum** | | | | | |
| % of individuals |  |  |  |  |  |

Principle 2. Beginning Early

arrow

**Reactive   -   Pro-Active and Beginning Early**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Place on the continuum** | | | | | |
| % of individuals |  |  |  |  |  |

Principle 3. Person-Centered

arrow

**Group Based Supports   -   Personalised Supports**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Place on the continuum** | | | | | |
| % of individuals |  |  |  |  |  |

Principle 4. Ordinary Life Outcomes

arrow

**Isolation/Exclusion   -   Inclusion/Citizenship**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Place on the continuum** | | | | | |
| % of individuals |  |  |  |  |  |

Principle 5. Mainstream First

arrow

**Segregated   -   Mainstream**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Place on the continuum** | | | | | |
| % of individuals |  |  |  |  |  |

Principle 6. Mana Enhancing

arrow

**Diminished Dignity   -   Mana Enhancing**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Place on the continuum** | | | | | |
| % of individuals |  |  |  |  |  |

Principle 7. Easy to Use

arrow

**Complex Supports   -   Clear and Flexible Supports**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Place on the continuum** | | | | | |
| % of individuals |  |  |  |  |  |

Principle 8. Relationship Building

arrow

**Isolated   -   Connected with Mutual Relationships**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Place on the continuum** | | | | | |
| % of individuals |  |  |  |  |  |

9: Valuing of Personal Networks

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Insert %** |  |  |  |  |  |

10: Control of Support

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Insert %** |  |  |  |  |  |

11: Aligned Support

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Insert %** |  |  |  |  |  |

12: Control of Resource

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Insert %** |  |  |  |  |  |

13: Contribution

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Insert %** |  |  |  |  |  |

Section C - Staff Perspectives

To be completed by staff (see Introduction, Instructions and Interview Guide for suggestions)

Supports and/or Services

14. Personal Networks

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | People work in isolation from one another.  Individuals and/or their families skills, strengths and personal networks are not recognised | Individuals and their networks are included - according to pre-set agendas.  Involvement is tokenistic. | Many decisions are made by individuals – with the involvement of their personal network if requested. | Individuals and their personal network are included in all decision making processes. | Partnership is the basis of all transactions that involve or affect individuals and/or their families. |
| Response |  |  |  |  |  |
|  | Families and natural support networks feel alienated from supports. | Occasional attempts are made to involve families and/or natural support networks. | Natural support networks are recognised and/or established. | Natural support networks regularly contribute to service design and review. | Practices ensure individuals and their personal networks are valued participants in their culture and community. |
| Response |  |  |  |  |  |

15. Control of Support

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Minimal or no personal autonomy | Choices are controlled within the parameters defined by others. | Individuals are encouraged to make decisions.  Effective communication is being developed to enable decision making. | Personal autonomy is supported, encouraged and informed. | Supports are responsive to individual preference and interactions are negotiated. |
| Response |  |  |  |  |  |
|  | Individuals are required to “fit” existing options. | Some individual options are supported outside the service structure.  Often outside options are group based and choices are minimal. | Supports attempt to respond to each individual’s aspirations in creative and innovated ways.  Resource issues are given as the main limiting factors. | Supports actively seek provide the resources required to support individual aspirations. The concept of using natural supports is acknowledged and understood. | All supports and resources are tailored to individual preference and aspiration. |
| Response |  |  |  |  |  |

16. Personal Directed Planning

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Information about the person is basic and often framed as deficits. | Primarily, information is related to care needs or involvement in set activities. | There is information about individual strengths, preferences and aspirations. | People are described in terms of abilities, achievements and strengths. | Supports interact in a respectful, positive and mutual ways. |
| Response |  |  |  |  |  |
|  | Personal plan based on assessed deficit or perceived need. | No plan. | Components of a personal plan evident. | Personal plan  (individual input, strengths based, preferences, aspirations, goals, timeframes and resources attached). | Plans are actioned and reviewed (achievements noted and adaptations made). |
| Response |  |  |  |  |  |

17. Aligned Support

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Conflicting priorities and practices are evident. | Supports attempt to define what they are doing and develop relationships with other supports. | Supports educate individuals, families and others regarding direction, priorities and practices. A “whole of life” approach is explored | Individuals, their personal network and services contribute to a shared frame of reference. | Supports and/or services work well together with one strengths-based plan as the basis |
| Response |  |  |  |  |  |
|  | The culture of supports are characterised by fear and suspicion. | Irregular, reactive damage control.  Clarification of service scope and responsibility | Supports educate others   regarding their preferred way of operating. | Individuals, families and supports share ideas and expectations. | Individuals, families and supports have trusting partnerships. |
| Response |  |  |  |  |  |
|  | The quality of supports are deteriorating. | Supports react to decreasing quality on an issue by issue basis. | Thoughtful planning and review processes are developed to increase quality. | Integrated processes continually monitor quality. | Supports pioneer best practice and review their effectiveness. |
| Response |  |  |  |  |  |

18. Personal Relationships

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Service practices contribute to individuals being isolated from their community, religion, culture and family/whanau.. | Supports provide minimal opportunity to develop new relationships. | Individuals are provided with a range of experiences which enable them to connect with the community in a variety of ways and to develop new relationships. | People have the opportunity to contribute in a range of activities and to strengthen/develop social connections and relationships. | Supports enable individuals to be valued contributors in their community, culture and family. |
| Response |  |  |  |  |  |

19. Increasing Expectations

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Service planning and practices are reactive and based on an assumption that not much can be achieved. | Services are beginning to think of new ways of doing things | Supports are based on an emerging optimism. | Services are increasingly confident that they are contributing to people creating good lives for themselves. | Supports are based on all people having an increased expectation of what is possible. |
| Response |  |  |  |  |  |

Graphic Summary Sheet

Example Only

|  |  |
| --- | --- |
|  | Most situations/people i.e. the highest % |
|  | The next most common response. i.e. the next highest % of people. |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **The Principles** | | | | | | |
| 1 | Self-Determination: disabled people are in control of their lives |  |  |  |  |  |
| 2 | Beginning Early |  |  |  |  |  |
| 3 | Person-Centred |  |  |  |  |  |
| 4 | Ordinary Life Outcomes |  |  |  |  |  |
| 5 | Mainstream First |  |  |  |  |  |
| 6 | Mana Enhancing |  |  |  |  |  |
| 7 | Easy to Use |  |  |  |  |  |
| 8 | Relationship Building |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Individual Outcomes** | | | | | | |
| 9 | Valuing of Personal Networks |  |  |  |  |  |
| 10 | Control of Support |  |  |  |  |  |
| 11 | Aligned Support |  |  |  |  |  |
| 12 | Control of Resource |  |  |  |  |  |
| 13 | Contribution |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Supports and/or Services** | | | | | | |
| 14 | Personal Networks |  |  |  |  |  |
| 15 | Control of Support |  |  |  |  |  |
| 16 | Person Directed Planning |  |  |  |  |  |
| 17 | Aligned Support |  |  |  |  |  |
| 18 | Personal Relationships |  |  |  |  |  |
| 19 | Increasing Expectations |  |  |  |  |  |

Graphic Summary Sheet

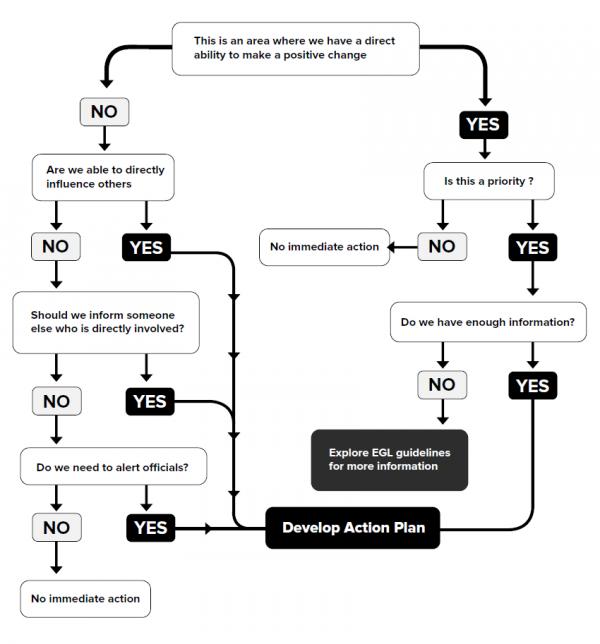
|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **The Principles** | | | | | | |
| 1 | Self-Determination: disabled people are in control of their lives |  |  |  |  |  |
| 2 | Beginning Early |  |  |  |  |  |
| 3 | Person-Centred |  |  |  |  |  |
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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Individual Outcomes** | | | | | | |
| 9 | Valuing of Personal Networks |  |  |  |  |  |
| 10 | Control of Support |  |  |  |  |  |
| 11 | Aligned Support |  |  |  |  |  |
| 12 | Control of Resource |  |  |  |  |  |
| 13 | Contribution |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Supports and/or Services** | | | | | | |
| 14 | Personal Networks |  |  |  |  |  |
| 15 | Control of Support |  |  |  |  |  |
| 16 | Person Directed Planning |  |  |  |  |  |
| 17 | Aligned Support |  |  |  |  |  |
| 18 | Personal Relationships |  |  |  |  |  |
| 19 | Increasing Expectations |  |  |  |  |  |

Selecting Areas for Development

Organisations may choose to follow the chart (below) to determine whether the area is “in scope” for action



Linking the Outcomes of the Self Review with the EGL Guidelines

|  |  |  |  |
| --- | --- | --- | --- |
| **The EGL Principals** | **Topics** | **Topics** | **Topics** |
| Self-Determination | Who Has the ‘Say So’ | Personal and Support Planning - Deciding What I Want | Communication Strategies - Making it Easier for Individuals to Communicate |
| Beginning Early | Communication Strategies - Making it Easier for Individuals to Communicate | Building Trusting Relationships | Creating Partnerships |
| Person-Centred | Who Has the ‘Say So’ | Personal and Support Planning - Deciding What I Want | Having People Involved |
| Ordinary Life Outcomes | Experiencing New Things | Citizenship | What’s in My Community |
| Mainstream First | Citizenship | What’s in My Community | Facilitative Support |
| Mana Enhancing | Who Has the ‘Say So’ | Creating Partnerships | Communication |
| Easy to Use | Building Trusting Relationships | Facilitating Group Meetings | Using Our Resources Innovatively |
| Relationship Building | Building Trusting Relationships | Working Creatively with Conflict | Communication |

| **Individual Outcomes** | **Topics** | **Topics** | **Topics** |
| --- | --- | --- | --- |
| Valuing of Personal Networks | Building Trusting Relationships | Creating Partnerships | Facilitative Support |
| Control of Support | Who Has the ‘Say So’ | Personal and Support Planning - Deciding What I Want | Working Creatively with Conflict |
| Aligned Support | Using Our Resources Innovatively’ | Building Trusting Relationships | Facilitative Support |
| Control of Resource | Who Has the ‘Say So’ | Personal and Support Planning - Deciding What I Want | What’s in My Community |
| Contribution | Citizenship | Experiencing New Things | What’s in My Community |

|  |  |  |  |
| --- | --- | --- | --- |
| **Supports and/or Services** | **Topics** | **Topics** | **Topics** |
| Personal Networks | Citizenship | Facilitative Support | Using Our Resources Innovatively |
| Control of Support | Personal and Support Planning - Deciding What I Want | Who Has the ‘Say So’ | Working Creatively with Conflict |
| Person Directed Planning | Making it Easier for Individuals to Communicate | Personal and Support Planning - Deciding What I Want | Who Has the ‘Say So’ |
| Aligned Support | Building Trusting Relationships | Creating Partnerships | Making use of the resources we have |
| Personal Relationships | Communication | Creating Partnerships | Working Creatively with Conflict |
| Increasing Expectations | What’s in My Community | Experiencing New Things | Citizenship |

Action Plan

|  |  |
| --- | --- |
| **Task** What we will do |  |
| **Strategies** How we will do it | A)  B)  C) |
| **Evaulation** How we will know if we are successful |  |
| **Review** Date \_\_ /\_\_ /\_\_ | Person/Role |

|  |  |
| --- | --- |
| **Task** What we will do |  |
| **Strategies** How we will do it | A)  B)  C) |
| **Evaulation** How we will know if we are successful |  |
| **Review** Date \_\_ /\_\_ /\_\_ | Person/Role |

|  |  |
| --- | --- |
| **Task** What we will do |  |
| **Strategies** How we will do it | A)  B)  C) |
| **Evaulation** How we will know if we are successful |  |
| **Review** Date \_\_ /\_\_ /\_\_ | Person/Role |

|  |  |
| --- | --- |
| **Task** What we will do |  |
| **Strategies** How we will do it | A)  B)  C) |
| **Evaulation** How we will know if we are successful |  |
| **Review** Date \_\_ /\_\_ /\_\_ | Person/Role |

|  |  |
| --- | --- |
| **Task** What we will do |  |
| **Strategies** How we will do it | A)  B)  C) |
| **Evaulation** How we will know if we are successful |  |
| **Review** Date \_\_ /\_\_ /\_\_ | Person/Role |

|  |  |
| --- | --- |
| **Task** What we will do |  |
| **Strategies** How we will do it | A)  B)  C) |
| **Evaulation** How we will know if we are successful |  |
| **Review** Date \_\_ /\_\_ /\_\_ | Person/Role |