



# **An Evaluation of Castle Lane Day Services**

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## Key Findings

1. Staff, service users and service user representatives are happy at/with Castle Lane Day Services. However, service users would like more choice in the activities they do and staff reported that not all activities are appropriate for each service user – going against the ethos of person centred planning. Additionally, staff also reported that service users are often not involved in the daily planning of activities.
2. Staff and service users were reported to have a very good relationship. Staff were credited with being good listeners, helpful and supportive. Staff also reported having a 'very good rapport with service users' and both staff and service users agreed that needs were well identified and met.
3. Service user representatives reported that information is provided to them when requested and that this information is adequate. Additionally, service user representatives views staff as '**excellent**' and always '**available to give you attention and talk to you**' and being very supportive of service users.
4. Whilst service users and service user representatives are happy with service user progress, staff reported that progress can reach a ceiling and at times may regress. Staff were also concerned about the mental health needs of service users and felt that the scheme itself is not adequately equipped to deal with this. In addition staff reported that no service users have yet moved on from the accommodation scheme to live independently within the community.
5. Staff reported staff shortages within the scheme whereby there were not enough staff to cater for service users' individual needs which often led to aggressive behaviour that was a danger to staff. Concerns were raised that this inappropriate number of staff was due to a misclassification of scheme type. Additional problems raised over staffing levels included the inability to have proper breaks during shifts and the raising of staff stress levels since all staff reported that their job was stressful and tiring.
6. Written communication was found to be a weakness for all five service users who took part in the evaluation.
7. Whilst most staff reported that they had enough training to perform their job role and that they were able to use their skills and abilities at work some felt that they lacked regular supervision and/or training. In particular, staff believed that there was a lack of communication from senior management and some dissonance within the staff team itself.
8. Staff found their job to be rewarding and enjoyed 'helping [service users] reach their goals', 'getting back a smile or a thank you'. Many staff reported that they 'love [their] job'.
9. Whilst training in writing and using support plans was provided to staff the practicalities were reported to be that there is '**very limited time for support staff to look at [these] during shift due to the demand of senior staff and service user challenging behaviour**'. Staff also reported that changes in support plans need to be better communicated and that it is difficult to '**get the proper input...[from service users] due to staff resources, time or ability of the service user**'.

10. One service user summed up the ethos of the Castle Lane scheme (including the accommodation and day service) well: **'It's just a wee stepping stone for me until I get myself sorted out and hopefully get a wee house in the community'**.

## Scheme Management's Response to the Report

Unfortunately during the period of the evaluation Castle Lane experienced a change in manager. Due to this the management team feel that some key areas relating to the evaluation were not provided to the research department. They would like to take this opportunity to address these issues as they relate to the findings of the report.

The first key finding - that staff and service users believed activities were not always appropriate to the service user or of interest seems to go against the grain of day care provision at Castle Lane. Annually all service users are asked about their: individual goals; needs; likes and dislikes; and aspirations for the coming year. The day care coordinator takes these onboard when planning appropriate activities, that suit individual needs and abilities and draws up a proposed timetable which is agreed by service users.

Additionally, service users are asked to provide feedback every four months or after a specific work programme. The feedback sought focuses on how service users believed sessions went, what they would like changed, what they would like to see happen differently and future ideas that can be put into practice. Staff are also asked to provide feedback in a weekly team meeting to promote reflective practice and to inform the content of the week ahead. Lastly, written reports are devised every four months that highlight day care programmes success and failures and annual reports are sought from external providers to gain feedback to inform future programmes.

The fifth key finding – that there are staff shortages at Castle Lane and that this can sometimes lead to aggressive behaviour seems to point to a lack of understanding that the evaluation was about the day care service and not the accommodation scheme. Few incidences of challenging behaviour have occurred at day care and staff numbers are appropriate given the number of service users, their needs and available budget.

Work towards improving literacy and numeracy skills is continually underway at Castle Lane via both the day care and accommodation services. This is available through courses at the local higher education facilities and also in-house. Therefore service users so currently have the choice of whether or not to undertake learning in this area and the recommendation is already being fulfilled.

It is the view of management that the staff who took part in the survey again failed to differentiate between the day care and accommodation services. This is evidenced in their references to evening activities (not part of the day care service) within the evaluation. In the same vein references to a lack of training may have been made with regard to the accommodation service since day care staff undergo training in various specialist areas such as BOCCIA leader training or reminiscence training, to name only two. It is felt that staff viewing the service as one, instead of two separate schemes, reflects the uniqueness of the day service provided, which has moved away from the traditional provision of day care services to an individualised, needs led service that utilises multiple facilities throughout the local community.

The management team recognise that communication within Castle Lane remains a problem area. Communications are provided to staff on a daily basis through the use of handovers, a communication book, team meetings, supervisions and through various other methods. Within their working day staff have time allocated to familiarise themselves with this information; the importance of taking this time is currently something the current manager places a great emphasis upon.

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## Main Summary

### *Demographics*

A total of five service users took part in the evaluation during the period of April 2010 to February 2011. Service users completed standardised measures at three time points and a semi-structured interview at one point in time.

Staff also completed a standardised measure at three time points; in addition some took part in an interview to complete a standardised measure that assessed service users' adaptive level. A total of 29 staff members and four volunteers also completed a survey asking about their views and opinions of Castle Lane Day Services.

In total five service user representatives (parents/carers) took part in an interview to complete a standardised measure that assessed service users' adaptive level. Additionally, service user representatives took part in a semi-structured interview that asked about their views and opinions of Castle Lane Day Services.



### *Activities at Castle Lane*

Castle Lane seeks to provide age and developmentally appropriate activities for a range of service users. These activities are facilitated by both staff and external agencies. Service users may also attend other separate Praxis Care day services such as the Secret Garden or Bocombra Cookie Company.

### *Adaptive Behaviour*

According to the Vineland Adaptive Behaviour Scale adaptive behaviour is a summary of a person's overall level of functioning i.e. their ability to effectively interact with others and care for oneself. On average service users at Castle Lane had a mild deficit in adaptive behaviour.

However, the average level does not adequately reflect the spread of adaptive behaviour of service users at Castle Lane: two had an adequate level of adaptive behaviour; one had a moderately low level of adaptive behaviour; one had mild deficits in adaptive behaviour; and one had severe deficits in adaptive behaviour.

In addition to providing levels for overall adaptive behaviour the Vineland measure provides the same information for three separate domains: communication; daily living skills; and socialization. In all three domains the level of adaptive behaviour ranged from severe deficit to adequate adaptive behaviour. The average adaptive level for communication was mild deficit whilst for both daily living skills and socialization it was moderately low.

### *Communication*

Within the communication domain, written communication was found to be the least developed and was identified as a weakness for all five service users. Both receptive and expressive communication were much more developed than written communication.

### *Daily Living Skills*

Daily living skills i.e. personal, domestic and community skills were fairly consistent across all service users. The average age equivalency was from 16-19 years old. When broken down further community skills were a weakness for three service users and domestic skills a strength for one.

### *Socialization*

Socialization included: interpersonal relationships, play and leisure time and coping skills. Coping skills were found to be the most developed of these skills with an average age equivalency of 16 years old. There was little difference between the three skill areas.

### *Problem Behaviours*

The Vineland also allows the opportunity to define the level of problem behaviour exhibited by service users. In Castle Lane two service users had problem behaviours that were at a clinically significant level, two at an elevated level and one had average problem behaviours.

When this was broken down further it was found that one service user displayed internalized problem behaviours, such as feeling sad, lacking energy or feeling anxious or nervous to a clinically significant level, three to an elevated level and one to an average level. One service user experienced externalized problem behaviours, such as being impulsive, telling lies or being aggressive to a clinical level and the remaining four to an elevated level.



### *Self-Esteem*

The self-esteem of service users did not change significantly during the period of the evaluation.



### *Life Experiences*

Service users in the evaluation reported greater life experiences than both the general population (in all but one area) and a comparable population (i.e. participants in a study with similar needs and opportunities).

Life experience scores did not change significantly over the period of the evaluation.



### *Health of the Nation Outcome Scale*

Any change in the level of problems experienced by service users was measured at each time point. In one area consistent improvements in problems associated with mood changes were made. Most areas of behaviour remained stable during the period of the evaluation (i.e. there was a ceiling effect); overall problem behaviours remained either no problem or mild.



### *Aim/Purpose of Castle Lane*

Service user representatives believed the aim of Castle Lane Day Services was to **'develop social skills'** so that service users may **'integrate... socially into the normal way of life'**. Staff at Castle Lane believed that the aim of the day services programme was to provide a **'safe, caring and uplifting environment'** where new skills are developed through the use of **'person centred plans and programmes facilitated within the community'**.



### *Castle Lane's Communication with Service User Representatives*

Most service user representatives believed that Castle Lane provided information when it was requested and that the information provided was adequate (one person disagreed with each notion).



### *Recommendation of Castle Lane*

All service user representatives reported that Castle Lane was progressive and forward thinking and that the quality of services was 'very good' or 'good'. In addition whilst four service user representatives indicated that they would recommend Castle Lane to others one was unsure.



### *Staff-Service User Relationship*

Most service users, service user representatives and staff believed that staff and service users had a 'good' or 'very good' relationship. Service users reported staff to be **'very good... and... always here for me if I need them'**. Service user representatives felt that staff **'have a good understanding of... [service users'] moods'** and that service users get **'on famously with them'**. Staff believed that they had a 'good' or 'very good' relationship with service users at Castle Lane as they felt they had **'built up a very good rapport with service users'** and **'treat them with the respect and dignity they deserve'**.

Additionally, most service users reported receiving feedback on their progress, that staff were willing to listen to them and that the help and support received was 'good' (although one service user thought staff willingness to listen and support received was 'poor').

Whilst two service users believed that staff knew about their needs one believed knowledge to be 'neither poor nor good'; another believed staff knowledge to be 'poor'. Responses to the question that asked about how staff responded to needs were evenly split between 'good' and 'neither good nor poor'. Service user representatives believed that staff knowledge and responsiveness to service users' needs was either 'good' or 'very good'.

Additionally, staff recognised that the length of time they have worked with a service user allows them to **'develop an in-depth knowledge of how to respond to each'** and that their own attitude can impact on their relationship whereby they must **'try to maintain an open and positive attitude in order... [to promote] trust'**.



### *Staff-Service User Representative Relationship*

Service user representatives believed that staff did value their views and opinions and were supportive and helpful. They also believed that staff communicated well with them, were professional and willing to listen.

Service user representatives reported that if they request any information it is provided over the phone and that staff are **'always available to give you attention and talk to you'**. It was also reported that staff **'are excellent'** and **'do everything'** for service users.

Additionally, service user representatives felt that whilst the staffing levels were 'good' and there **'seemed to be plenty of staff'** the scheme could probably **'do with plenty more'** as **'it always seems to fall on the same people'**.





### *Freedom to Choose Own Activities*

Only one service user agreed that they were able to choose their own activities at Castle Lane. Services users reported that although staff **'just tell us [what to do we]... don't mind'** and that **'you get a choice sometimes'**.



### *Service User Progress*

In the main service users and service user representatives were satisfied with service users' progress. However, over a third of staff believed progress to be either 'poor' or 'very poor' since whilst progress may be made it reaches a ceiling and **'some have regressed'**. In particular mental health needs were reported as **'taking a dip... which requires more help than what [Castle Lane] can provide'**.

Those staff members who agreed that service users had progressed at Castle Lane felt that Castle Lane **'has been [service users]... most successful placement to date'**. Service users reported that they had **'more confidence'** and are **'able to do more stuff'** for themselves; there was also a recognition amongst service users that they could **'do a little more'** to progress.

Most service user representatives reported that they did receive feedback on service user progress and believed that attending Castle Lane Day Services helped service users to become more **'socially'** adept and to **'communicate better'** as they **'can actually have a conversation, which you couldn't have done before'**. Additionally, emotional awareness was cited as having changed positively since beginning to use the Castle Lane Day Services, where service users were attributed with **'more empathy'**. Changes evidenced by the service user representatives were a **'pleasant and unexpected surprise'**.

Whilst service user responses did not provide any main themes as to what aided their progress at Castle Lane Day Services they did report that variety of activities and staff who **'give... a wee bit of confidence'** helped. Service user representatives also mirrored this and reported that there were **'a lot of activities'** and that staff **'have a great way with'** services users and **'are supportive'**. Staff attributed service user progress to the **'skills and commitment of the staff team'**, **'person centred planning'**, the provision of **'routine [and] consistency'** and a day care timetable that is **'excellent'**.

In consideration of what could hinder progress service users could not think of anything. Service user representatives believed that Castle Lane could benefit from further facilities to provide more activities during the day.

Staff felt that service users often **'get away without any consequences if they have broken rules'** and that **'as yet no... [service user] has moved to community living'**. Furthermore, staff felt that **'staff shortages'** and a **'high turnover of staff'** hindered one to one time with service users and meant **'support [needs]... cannot always be met'**. Dissatisfaction was expressed that service users are **'not involved... in decisions or daily planning'** and that the day care provided is **'not suitable for a lot of service users though [they are] expected to attend'**. Lastly, staff reported that **'Praxis as an organisation hinders our service users as they are unable to provide answers to staff or... [service users] when situations arise which cannot be dealt with at scheme level'**.

Lastly, whilst training in writing and using support plans was provided to staff the practicalities were reported to be that there is **'very limited time for support staff to look at [these] during shift due to the demand of senior staff and service user challenging behaviour'**.

Staff also reported that changes in support plans need to be better communicated and that it is difficult to **'get the proper input...[from service users] due to staff resources, time or ability of the service user'**.



#### *Activities at Castle Lane*

Most service users reported the range of activities to be either 'good' or 'very good' as they can take part in 'different activities... go on the computers, surf the net' etc. However, one service user rated the range of activities to be 'very poor' and that **'if you don't go to day care you have to do chores'**.

Most service user representatives believed the range of activities at Castle Lane to be 'good' or 'very good'. Additional activities they would like include more exercise and outings.

In the main staff also believed the range of activities offered to be 'good' or 'very good' as service users **'are involved in a wide spectrum of activities'** which are **'excellent opportunities... to engage'** and are provided on a person centred basis. Problems associated with day service provision were cited as **'motivating... [service users] to participate'**, **'limited resources'** and unsuitable activities for some service users – going against person centred planning. Some staff would like to see a greater choice of evening activities, integration with other Praxis schemes, greater inclusion in the community and more courses for skill development i.e. healthy eating for life skills.



#### *Castle Lane as a Place of Work*

Where staff did not choose to remain neutral in their opinions (i.e. did not choose to neither agree nor disagree) most enjoyed working at Castle Lane, had opportunities to use their skills and gained a personal sense of achievement from their job. Additionally, staff believed the scheme to be forward thinking and progressive and were not bored with their job. However, most staff members found work to be both stressful and tiring.

In the main staff liked and respected their co-workers and believed co-workers valued their opinions. A sense of co-operation between staff was reported by most staff members, although four believed there was not. Additionally, most staff believed they belonged to an effective team.

When considering staff in a senior position to them most staff neither agreed nor disagreed that their views and opinions were valued; 10 believed they were and four that they were not. In total eight staff believed that senior staff do not communicate well with them whilst 10 believed they did. In addition whilst most staff indicated that they did receive regular supervision or feedback five indicated they did not.

Three quarters of staff members reported that they had sufficient training to carry out their job role. Those who believed they did not would like to have training in **'team building skills..., person centred planning, cookery... [and] first aid at work'**. Also staff would like training related to **'specific learning disabilities and mental [health]'**.

Difficulties experienced by staff whilst working consisted of finding it difficult to **'grab a bite... within a shift'** and **'difficulties implementing specialised therapeutic programmes'**. These were attributed to staff shortages where **'the level of staff does not meet the requirements of the scheme'** and staff expressed concern that **'this can result in a lot of challenging and violent behaviour... [which] puts staff in danger'**. Staff therefore reported a **'stressful atmosphere'** where staff are **'getting stressed or even burned out'**. Additionally, staff indicated that there is a difficulty **'completing tasks... [as they are] constantly under**

**pressure to do other things for service users'** making it difficult to **'meet all the demands'**. In line with this staff believed that their working conditions could be improved upon by an increase in staff numbers, allocated breaks during shifts and an assessment of Castle Lane as a scheme with regard to the **'needs and support'** of service users.

Staff reported that the most rewarding aspects of their job were **'helping [service users] reach their goals'**, **'getting back a smile or a thank you'** and the disproving of **'preconceived thoughts of individuals' capabilities'**. Many staff reported that they were happy at Castle Lane and **'love [their] job'**.



*Additional Opportunities to Comment*

Staff took the opportunity to comment that they enjoyed their job but that it was **'hard to carry out due to work overload [and] lack of sleep'**, also staff pointed out that they believed Castle Lane could **'benefit from more structure'** and that they would be happier if issues raised were **'dealt with effectively and sensitively'**.

One service user took the opportunity to state what they believed the aim of the scheme was: **'It's just a wee stepping stone for me until I get myself sorted out and hopefully get a wee house in the community'**.

## Background

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Day Services at Castle Lane were initiated in 2008 in response to the Bamford Review's<sup>1</sup> vision that services should be person-centred, community based and informed by the views of service users and their carers. These principles were adopted as the aim of the Castle Lane day services programme along with the objective that service users with learning disabilities should be fully involved in mainstream social activity.

Day services at Castle Lane were developed for those who live at the Castle Lane Court scheme, all of whom have a diagnosed learning disability; many present with challenging behaviour and/or mental health needs. As such the day services programme recognised that there are at least three levels at which support was needed and that activities must be cognisant of this:

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Level of support	Types of activities
<b>100%</b>	Mainly in house activities with occasional community opportunities.
<b>60% (approx)</b>	Likely to go to occupational work placements or higher education, carry out work relating to independent living skills, as well as in house programmes, all of which aim at developing knowledge, skills and values required to live a fulfilled and more independent life within the local community.
<b>30% (approx)</b>	Have the potential for, or are already holding down employment within the community and/or have many of the skills and knowledge to obtain and maintain a job.

## Aims of Castle Lane Day Services

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The aims of Castle Lane Day Services follow the objectives of the Bamford Review<sup>1</sup> and are clearly set as aiming to:

- enable people with a learning disability to lead full and meaningful lives in their neighbourhoods, have access to a wide range of social, work and leisure opportunities and form and maintain friendships and relationships;
- enable each individual to have as much choice and control as possible over their lives through advocacy and a person-centred approach to planning the day opportunities they need;
- encourage, as appropriate, individuals to participate in all forms of employment and to make a valued contribution to the world of work;
- ensure that the day opportunities on offer promote both good outcomes and best value;
- ensure that staff working with each individual are appropriately skilled, trained and qualified;
- promote holistic services for each individual through effective partnership working between all relevant local agencies in the commissioning and delivery of services.

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<sup>1</sup> Promoting the Social Inclusion of People with a Mental Health Problem or a Learning Disability. *The Bamford Review of Mental Health and Learning Disability (Northern Ireland)*.

## The Castle Lane Model

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In order to fulfil its aims Castle Lane applies a holistic model of day services to ensure a person-centred approach to service provision by formulating and implementing individual activity plans based on the views of the Castle Lane Court service users themselves. Castle Lane also endeavours to identify barriers to participation in community based activities and to overcome these to ensure that they do not negatively impact upon service users.

In order to apply a holistic model of day service provision Castle Lane seeks to follow the five core values of the Equal Lives Report<sup>2</sup> (2005):

1. Citizenship – each service user is an individual first and foremost and has a right to be treated as an equal citizen
2. Social Inclusion – as a valued citizen each person must be enabled to use mainstream services and be fully included in the life of the community
3. Empowerment – each person must be enabled to actively participate in decisions affecting their lives
4. Working Together – there must be a culture where each service user, their family and organisations work well together in order to meet the needs and aspirations of people with a learning disability
5. Individual Support – each person will be supported in ways that take account of their individual needs and help them to be as independent as possible.

## Demographics

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### *Service users:*

In total five service users took part in the evaluation. Data collection began in May/June 2010 and ended in January/February 2011. Service users were asked to complete a number of standardised and researcher designed measures. The table below lists these along with the months in which they were completed.

	May/June 2010 (Baseline)	Sep/Oct 2010 (+3 months)	Jan/Feb 2011 (+6 months)
<b>Semi-structured interview (researcher designed)</b>	✓		
<b>Rosenberg Self-Esteem Scale</b>	✓	✓	✓
<b>Life Experiences Checklist</b>	✓	✓	✓

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<sup>2</sup> *Equal Lives: Review of Policy and Services for People with a Learning Disability in Northern Ireland* (2005). Accessed from <http://www.dhsspsni.gov.uk/equallivesreport.pdf> on 27/07/2011.

### Staff:

Staff members also took part in the evaluation at each stage in order to complete one standardised measure regarding service users. In addition 29 staff members completed a voluntary survey in June/July 2011 asking their views and opinions of Castle Lane Day Services. The standardised measures completed by staff at each relevant time point can be seen in the table below.

	May/June 2010 (Baseline)	Sep/Oct 2010 (+3 months)	Jan/Feb 2011 (+6 months)
<b>Health of the Nation Outcome Scale (HoNOS-LD)</b>	✓	✓	✓

In order to complete the Vineland Adaptive Behaviour Scale staff needed to know many aspects of a service user's life including skills, habits and preferences. A team leader from Castle Lane Court, the accommodation scheme, answered the questions on this measure for some service users.

## Activities at Castle Lane

### Options Available to Service Users

Activities at the Castle Lane Day Service are organised in terms (Spring – Jan: April; Summer – May: Aug and Winter – Sep: Dec) and are planned four months in advance.

**Armchair aerobics:** this activity takes place in Drumellan Family Learning Complex, Craigavon. The activity suits individuals with poor mobility to help improve mobility, strength, stability and confidence.

**Higher Education:** service users have the opportunity to take part in many higher education courses run at local higher education institutions such as South Regional College. Courses currently being undertaken by service users include ASDAN (Entry Level 1) and OCR Life and Living Skills (Levels 1-3).

**Monday group:** this activity is split into two groups according to individuals' preferences, ability and skill; each group designs their own activity schedule. Group one is named 'girl power' and is made up of females who plan activities such as relaxation, massage, manicures and pedicures. Group two's activities include activities such as table top activities (e.g. puzzles, jigsaws, games), library visits and walks in local park.

**Secret Garden:** service users may work in the garden or coffee shop. Here they take part in work based learning where they practice and develop life skills, skills necessary for the workplace and social skills through integration in the local community.

**Links (the Hub):** this is a rented space where service users can use facilities similar to that of a youth club i.e. internet, computer games, pool table and kitchen. It is a short walk from the Castle Lane accommodation and so requires no transportation.

Tullygally Youth Centre: used for many individual and group work activities such as: sports activities; essential skills training using computers; multi-media programmes and socialisation skills.

Thursday group: this group is made up of men only and the group designs their own activity schedules. Activities can include Turkish shaves, massages, library visits, cooking, 'It's all about me' Profiles, Family History Work, bowling and golfing.

Voluntary work: one service user has two voluntary community placements. On Wednesdays & Fridays he volunteers with the Heart, Chest & Stroke Foundation to undertake tasks such as bus escorts (to collect clients on trust bus), providing activities for them to take part in eg Boccia (this individual is fully trained as Boccia Leader) serving them their tea breaks and lunches. This is done with the support of other volunteers and leaders in the group. The second volunteer placement is in the Bluestone catering restaurant where he takes food orders, serves food, clears tables and other duties relating to service in a restaurant.

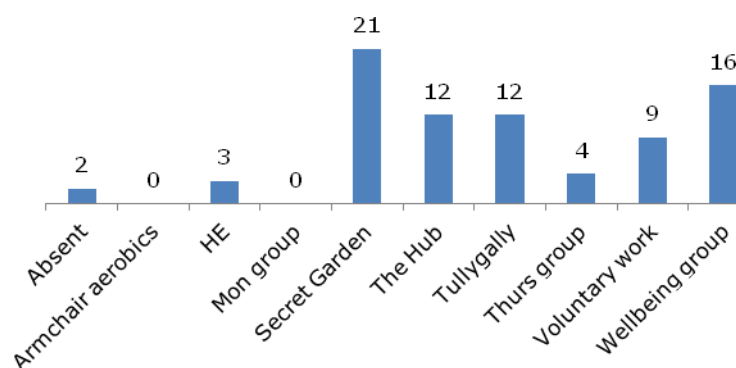
Wellbeing group: this group meets once a week and is dedicated to Healthy Wellbeing & Fitness. Opportunities exist for service users to take part in group activities such as: healthy food choices; weekly weigh ins; complementary therapies; and active activities such as: walking; gym; swimming; golf and Boccia.

Other: some service users prefer not to attend the structured day services provided. These service users are offered activities to do in the accommodation scheme or assisted with other activities within the community, for example, shopping or visiting the library.

### *Chosen Activities*

Since service users have a range of options to choose from when using Castle Lane day services. Staff keep a daily log where all activities are noted. Information was gathered using these logs for April 2011 and is presented here.

The activity log showed that 79 days were provided during the one month period (sum of number of expected days per service user), 77 of these days were used; two were not used due to service user choice. How the days were used is shown in the chart below.



The most popular activity was attending the Secret Garden day service where service users are employed a certain number of days per week. Following this the wellbeing group, Hub and Tullygally proved popular.

The table below shows this log in percentage form by service user (calculated using days possible and activity chosen), also included in the calculation and table is the absence rate.



Service User Activity	% Time spent at chosen activity				
	1	2	3	4	5
<b>Armchair aerobics</b>					
<b>Higher Education</b>	14				
<b>Monday Group</b>					
<b>Secret Garden</b>			62	38	
<b>The Hub</b>	19		19		33
<b>Tullygally Youth Centre</b>	19		19		33
<b>Thursday Group</b>	19				
<b>Voluntary Work</b>				43	
<b>Wellbeing Group</b>	19	100		19	33
<b>Absent/Did not take part</b>	10				

## Standardised Assessments

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Castle Lane aims to improve upon service users' self-esteem, confidence and general well being whilst providing opportunities to integrate into the community and learn new life skills. As such it was deemed important to the evaluation to gain a standardised measure of service users' ability/developmental functioning, self-esteem and life experiences. The standardised measures utilised are briefly described below.

### *Vineland Adaptive Behaviour Scale*

The Vineland Adaptive Behaviour Scale is a validated measure of the adaptive behaviour of people with intellectual disabilities from birth to 90 years old (Sparrow, Cicchetti and Balla, 2005<sup>3</sup>). For the Vineland Adaptive Behaviour Scale adaptive behavior is defined as the 'performance of daily activities required for personal and social sufficiency' (ibid.).

The questionnaire is administered to parents/caregivers and the scores returned provide a developmental age, which may be considered a measure of developmental functioning. This assessment was conducted once during the period of the evaluation.

The content of the Vineland Behaviour Scale is shown in the table below (adapted from Sparrow, Cicchetti and Balla, 2005<sup>3</sup>, p. 15).

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<b>Domains and Subdomains</b>	<b>Content</b>
<b>Communication Domain</b>	
<i>Receptive</i>	How the individual listens and pays attention, and what he or she understands
<i>Expressive</i>	What the individual says, how he or she uses words and sentences to gather and provide information
<i>Written</i>	What the individual understands about how letters make words, and what he or she reads and writes
<b>Daily Living Skills Domain</b>	
<i>Personal</i>	How the individual eats, dresses, and practices personal hygiene
<i>Domestic</i>	What household tasks the individual performs
<i>Community</i>	How the individual uses time, money, the telephone, the computer, and job skills
<b>Socialization Domain</b>	
<i>Interpersonal Relationships</i>	How the individual interacts with others
<i>Play and Leisure Time</i>	How the individual plays and uses leisure time
<i>Coping Skills</i>	How the individual demonstrates responsibility and sensitivity to others
<b>Adaptive Behaviour Composite</b>	A composite of the Communication, Daily Living Skills, Socialization

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<sup>3</sup> Sparrow, S.S., Cicchetti, D.V. and Balla, D.A. (2005). *Vineland II: Vineland Adaptive Behavior Scales* (2<sup>nd</sup> Ed). Survey Forms Manual. Pearson. Product Number 31011.

### *Rosenberg Self-esteem Scale<sup>4</sup>*

The Rosenberg Self-Esteem scale (RSE) is a widely used self-report instrument utilised to evaluate individual self-esteem (Gray – Little, Williams and Hancock, 1997)<sup>5</sup>.

Whilst the original RSE consisted of 10 items the version utilised in this evaluation contained six items. The six item version was developed for people with learning disabilities by Sandhu and Dagnan (1999)<sup>6</sup> and entails simplified wording and a visual five point scale. Therefore this scale is more appropriate for use with service users at Castle Lane. Service users completed the RSE a total of three times during the evaluation – at three month intervals.

According to Gray-Little, Williams and Hancock (1997) perceived benefits of the RSE scale are:

- Requirement of a low reading age (8-9 years old)
- Easily administered
- Item content is clearly related to self-esteem
- Time efficient

### *Life Experiences Checklist*

The Life Experiences Checklist (LEC) is a quality of life measure. It is 'concerned with gauging the range and extent of life experiences enjoyed by an individual' (Ager, 1998, p. 6)<sup>7</sup>. It is suitable for a wide range of abilities including people with learning disabilities. The LEC can be administered in various ways; in this evaluation administration was via subject interviews (*ibid.*). Service users completed the LEC a total of three times during the evaluation – at three month intervals.

### *Health of the Nation Outcome Scale*

The Health of the Nation Outcome Scale for people with Learning Disabilities (HoNOS-LD) was developed to measure outcomes in people with learning disabilities who are partaking in some type of intervention (in this case attending a day service). 'Its primary aim is to measure change in an individual over two or more points in time.... It measures change in the level of problems that a person has had' (Roy, Matthews, Clifford, Fowler and Martin, 2002<sup>8</sup>). Change measured can move in either a positive or negative direction or remain static.

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<sup>4</sup> Rosenberg, Morris. 1989. *Society and the Adolescent Self-Image*. Revised edition. Middletown, CT: Wesleyan University Press.

<sup>5</sup> Gray-Little, B., Williams, V. and Hancock, T. (1997). An Item Response Theory Analysis of the Rosenberg Self-Esteem Scale. *Personality and Social Psychology Bulletin*, 23(5), pp. 443-451.

<sup>6</sup> Dagnan, D. and Sandhu, S. (1999). Social comparison, self-esteem and depression in people with intellectual disability. *Journal of Intellectual Disability Research*, 43(5), pp. 372-379.

<sup>7</sup> Ager, A. (1998). *The BILD Life Experiences Checklist Manual*. Bild publications.

<sup>8</sup> Roy, A., Matthews, H., Clifford, P., Fowler, V., and Martin, D.M. (2002). Health of the Nation Outcome Scales for People with Learning Disabilities (HoNOS-LD). *British Journal of Psychiatry*, 180, pp.61-66.

### *Employment of Standardised Measures*

The table below shows when each of the standardized measures was employed in the evaluation.

<b>Measure</b>	<b>To assess</b>	<b>When undertaken</b>	<b>Total no. of times undertaken</b>
<b>Vineland Adaptive Behaviour Scale</b>	Performance of daily activities	At one time point	1
<b>Rosenberg Self-esteem Scale</b>	Individual self-esteem	Base, +3mth, +6mth	3
<b>Life Experiences Checklist</b>	Range and extent of life experiences	Base, +3mth, +6mth	3
<b>Health of the Nation Outcome Scale</b>	Change in the level of problems experienced	Base, +3mth, +6mth	3

## Results

### Vineland Adaptive Behaviour Scale

It must be noted that whilst the Vineland is intended to be used for reporting on individuals in this instance it is utilised to provide a scheme report.

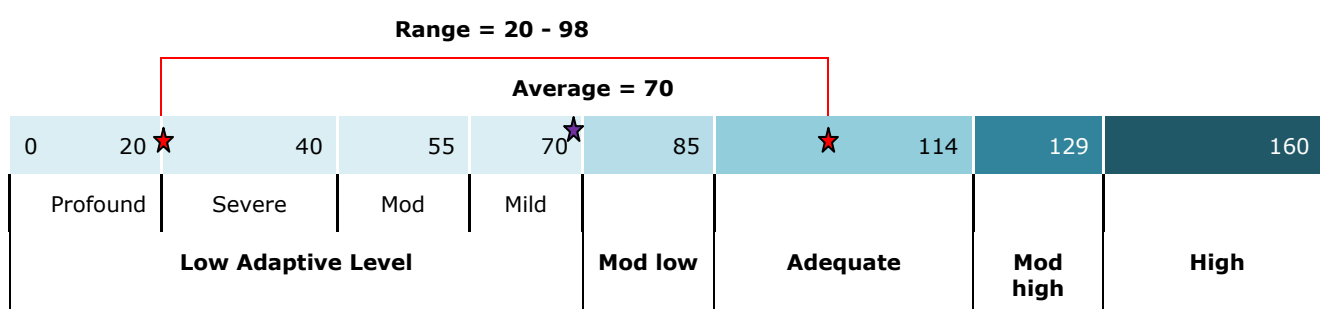
### Levels

Levels discussed in the sections below are calculated using either standard scores<sup>9</sup> or v-scale scores<sup>10</sup>. Each score translates to an adaptive level. These adaptive levels are outlined below, from high to low. Of note is that the low adaptive level can be further broken down into four classifications.

- High
- Moderately high
- Adequate
- Moderately low
- Low, which domain scores is broken down into:
  - Mild deficit
  - Moderate deficit
  - Severe deficit
  - Profound deficit

### Describe General Adaptive Functioning

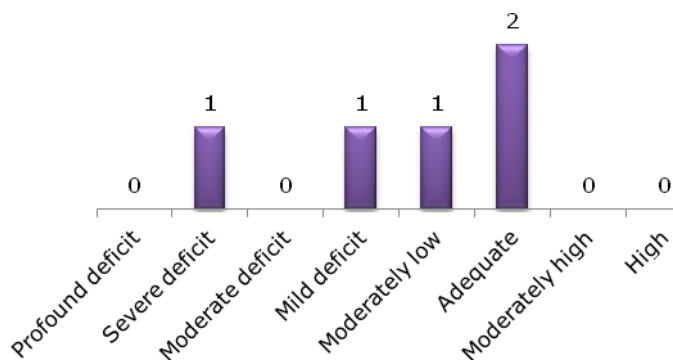
The adaptive behaviour composite score is a summary of a person's overall level of adaptive functioning i.e. their ability to effectively interact with others and care for one's self. Service users at the Castle Lane's adaptive behaviour composite standard scores ranged from 20 to 98. This means that the adaptive level of service users ranged from severe deficit to adequate. The average adaptive standard score for service users at Castle Lane was 70; which equates to a mild deficit.



<sup>9</sup> Standard score: the distance of an individual's actual score from the mean actual score, taking into account the distribution of the actual scores. It relates one person's performance to the performance of a reference group.

<sup>10</sup> V scale score: a type of standard score used to describe an individual's relative level of functioning on the subdomains compared with others of the same age.

The distribution of service users across each adaptive level can be seen in the chart below which shows that most service users fall between the adequate and mild deficit adaptive levels.



### *Performance in the adaptive behaviour domains*

There are three separate adaptive behaviour domains, that each contain three subdomains. These are outlined below along with their range and average adaptive level:

<b>Domain</b>	<b>Range</b>	<b>Level Range</b>	<b>Mean</b>	<b>Mean Level</b>
<b>Communication</b>	22-100	Severe deficit – Adequate	70	Mild deficit
<b>Daily Living Skills</b>	22-96	Severe deficit – Adequate	72	Mod low
<b>Socialization</b>	20-111	Severe deficit - Adequate	76	Mod low

The table shows that whilst the communication domain and average adaptive behaviour composite level are mild deficit the remaining two domains – daily living skills and socialization are moderately low deficit.

### *Chronological and Equivalent Ages*

The table below shows the chronological age range and mean of service users at Castle Lane compared to the age equivalent for each of the subdomains.

	<b>Range (years old)</b>	<b>Mean (years old)</b>
<b>Chronological</b>	<b>25-51</b>	<b>37.2</b>
<b>Communication Subdomain</b>		
• Receptive*	18	18
• Expressive	3.9-22+	15.4
• Written	4.2-17.8	10.2
<b>Daily Living Skills Subdomain</b>		
1. Personal	6.5-22+	16.1
2. Domestic	9.8-22+	17.1
3. Community*	18.3-20	19.6
<b>Socialization Subdomain</b>		
4. Interpersonal Relationships	4.6-22+	15.5
5. Play and Leisure Time	5.25-22+	14.5
6. Coping Skills**	15-17.8	16.8

\*One outlier (scores which differ significantly from the rest of the group) was found in the analysis of this data; the range and mean reported here exclude this.

\*\*Two outliers were found in the analysis of this data; the range and mean reported here excludes these.

The average age equivalent for the written subdomain is considerably lower than that of the other two subdomains indicating that service users at Castle Lane have a greater level of difficulty in using written rather than receptive or expressive communication.

Daily living skills were found to be fairly consistent with regard to the mean age equivalency across the three separate subdomains. Community skills were the most developed of these skills.

Whilst the highest mean of the Socialization subdomains was coping skills there were no notable differences between each subdomain.

### *Strengths and Weaknesses*

The scoring of the Vineland Adaptive Behaviour Scales affords the opportunity to discover which areas some service users may have either strengths or weaknesses in. The results of this for service users at Castle Lane are shown below.

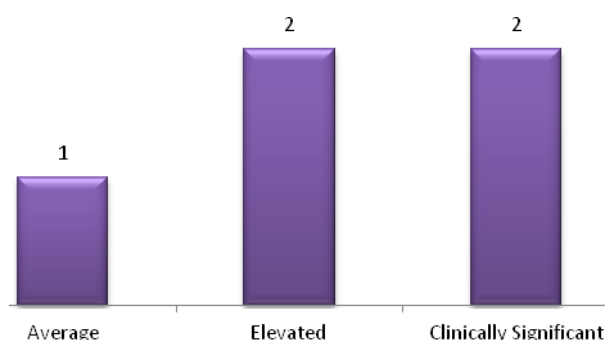
<b>Domain &amp; Subdomain</b>	<b>No. of service Users</b>	
	<b>Strength</b>	<b>Weakness</b>
<b>Communication</b>	-	-
• Receptive	1	-
• Expressive	-	-
• Written	-	5
<b>Daily Living Skills</b>	-	-
7. Personal	-	-
8. Domestic	1	-
9. Community	-	3
<b>Socialization</b>	-	-
10. Interpersonal Relationships	-	1
11. Play and Leisure Time	-	1
12. Coping Skills	1	1

None of the three domains was a strength or weakness for any service users. Each of the five service users had a weakness in the written skills subdomain and three had a weakness in the community skills subdomain.



### Maladaptive/Problem behaviour

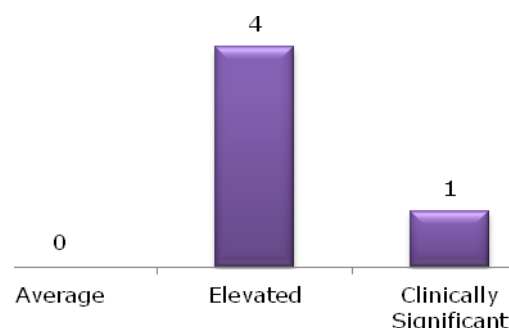
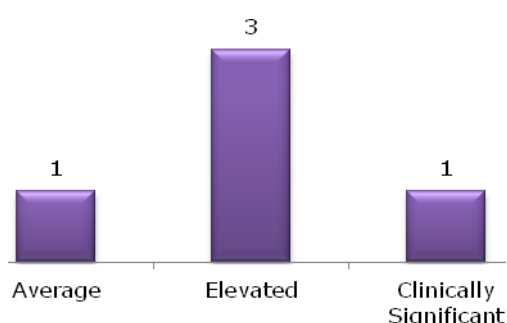
The chart below shows the number of service users who have an elevated level of problem behaviours. Two service users had behaviours that were clinically significant. Behaviours can be divided into two types: internalizing or externalizing behaviours.



### Internalizing and Externalizing

Internalizing behaviours are those such as feeling sad, lacking energy or feeling anxious or nervous. In total three service users were indicated to display such behaviours at an elevated level, one at a clinically significant level and another at an average level; shown in the chart below left.

Externalizing behaviours are those such as being impulsive, telling lies or being aggressive. In total four service users were indicated to display such behaviours at an elevated level. One service user displayed these behaviours to a clinically significant level; shown in the chart below right.



#### Summary:

- Service users ranged from having a severe deficit to adequate general adaptive functioning.
- The average general adaptive functioning level was that of mild deficit.
- Service users have a greater level of difficulty in using written (range 4.2-17.8 years, average 10.2 years) rather than receptive or expressive communication. In fact, each service user had a weakness in written communication.
- Personal and domestic skills were found to be lower than community skills.
- There was little difference between interpersonal relationships, play and leisure time and coping skills in the socialization subdomain.
- Two service users displayed problem behaviours that were of clinical significance and the

same number displayed elevated problem behaviours.

- ☐ One service user displayed clinically significant internalizing behaviours, such as feeling sad, lacking energy or feeling anxious or nervous behaviours. Most (N=3) displayed elevated internalizing behaviours.
- ☐ One service user displayed clinically significant externalizing behaviours, such as being impulsive, telling lies or being aggressive the remaining four displayed elevated externalizing behaviours.

## Self-esteem Scale

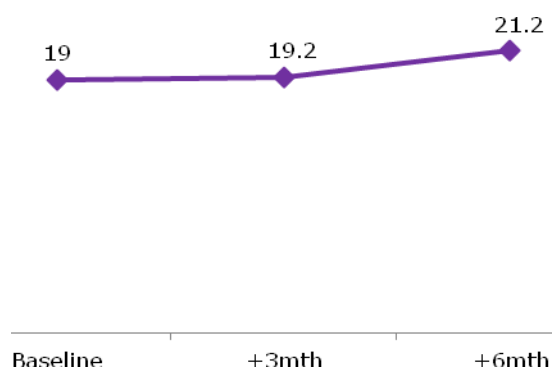
The table below shows the mean and standard deviations of the scores gained from the RSE. These are displayed at baseline and each of three and six months after baseline.

The lowest possible score for any individual across all items on the RSE is 0 – no self esteem and the highest was 24 – high self esteem. For example, if an individual believes that 'I feel I am a good person, as good as other people' is 'always true' they are assigned a score of 4. If they believe it to be 'never true' they are assigned a score of 0. Therefore consistent scoring of 0 across the six items returns a high score of 0, consistent scoring of 4 across the six items returns a high score of 24.

	Baseline		+ 3 months		+ 6 months	
	Mean	SD	Mean	SD	Mean	SD
<b>Total Score</b>	19.0	3.7	19.2	3.0	21.2	4.2

A study conducted by Dagnan and Sandhu (1999)<sup>11</sup> found the average self-esteem score of people with intellectual disability to be 23.44; higher than the average shown in the table above.

The information presented in the table can also be seen visually in the chart below, where a little improvement is made between baseline and three months later and a larger improvement between three and six months.



In order to test if the differences between the scores were significantly different it was necessary to perform a statistical analysis. Due to the small numbers of service users involved (N=5) in the evaluation it was not appropriate to perform a parametric statistical test. Therefore a non-parametric alternative was used – Friedman's analysis of variance (ANOVA). This test was used to test for differences in the self-esteem scores provided by the service users (as a total score, for negative items and for positive items). No statistically significant differences were found; self-esteem scores did not change significantly during the course of the evaluation.

### Summary:

- Whilst self-esteem rose at each time point during the evaluation this was a small change and it was not statistically significant.

<sup>11</sup> Dagnan, D. and Sandhu, S. (1999). Social comparison, self-esteem and depression in people with intellectual disability. *Journal of Intellectual Disability Research*, 43(5), pp. 372-379.

### Life Experiences Checklist

Each subsection of the life experiences checklist has a lowest possible score of 0 and a highest possible score of 10. Scores are computed by giving a score of one to answers of yes to statements that are presented such as 'I go to a café or restaurant for a meal at least once a month' and 0 to negative responses.

	Baseline		+ 3 months		+ 6 months	
	Mean	SD	Mean	SD	Mean	SD
<b>LEC Total</b>	38.8	4.0	38.6	2.4	40.0	2.3
<b>Home</b>	8.0	1.2	8.2	1.3	9.0	1.2
<b>Leisure</b>	6.4	1.9	5.2	0.8	6.2	1.8
<b>Relationships</b>	6.4	1.8	6.4	1.1	6.4	1.1
<b>Freedom</b>	9.4	0.5	9.8	0.4	9.2	0.8
<b>Opportunities</b>	8.6	1.1	9.0	0.7	9.2	0.4

A Friedman's ANOVA was also carried out on data from the LEC. This was also not significant; LEC scores did not change significantly during the course of the evaluation.

Since the service users who took part in the evaluation lived in Praxis Care accommodation schemes which included both group and individual accommodation it is relevant to compare LEC scores with those obtained in a study by McHugh (as cited in the LEC manual) as well as those of the general population. For this purpose the final set of mean scores collected were utilised since they are the most recent. This comparison is shown in the table below, where the highest score for each section is in red type; if a tie exists each will be coloured red.

	LEC Total	Home	Leisure	Relationships	Freedom	Opportunities
<b>Castle Lane</b>	40.0	9.0	6.2	6.4	9.2	9.2
<b>McHugh Scores</b>	33.6	7.9	5.3	4.7	8.1	7.6
<b>General Population</b>	34.8	8.0	4.6	6.6	8.0	7.5

The table shows that service users of Castle Lane achieved higher scores than those in the McHugh study across all sections. In the comparison with the general population Castle Lane service users scored higher in all but one section. In considering relationships with others service users at the Castle Lane were on par with the general population.

**Summary:**

- Whilst LEC scores did not change significantly over the course of the evaluation service users reported greater culturally relevant life experiences than both those participants in the Hughes study and than the general population; with the exception of being on par with the general population with regard to relationships.

## HoNOS-LD

The table below shows the mean scores for each of the 18 items. Those in green type represent ratings that are consistently less severe over the entire period of the evaluation. None were consistently more severe.

Item	Mean		
	Baseline	+ 3 months	+ 6 months
<b>1. Behavioural problems – directed to others</b>	0.2	0.2	0.2
<b>2. Behavioural problems – directed to self</b>	0	0	0
<b>3. Other mental and behavioural problems:</b>			
a) Behaviour destructive to property	0	0	0
b) Problems with personal behaviours	0.2	0	0.2
c) Rocking, stereotyped and ritualistic behaviour	0	0	0
d) Anxiety, phobias, obsessive, compulsive behaviours	0	0	0
e) Others	0	0	0
<b>4. Attention and concentration</b>	0.4	0.6	0.4
<b>5. Memory and orientation</b>	0.2	0.4	0.4
<b>6. Communication (problems in understanding)</b>	0	0	0
<b>7. Communication (problems in expression)</b>	0.2	0.6	0.2
<b>8. Problems associated with hallucinations and delusions</b>	0.6	0.2	0.2
<b>9. Problems associated with mood changes</b>	1.0	0.6	0.4
<b>10. Problems with sleeping</b>	0	0	0
<b>11. Problems with eating and drinking</b>	0.2	0	0.2
<b>12. Physical problems</b>	0.2	0	0
<b>13. Seizures</b>	0.4	0.2	0.6
<b>14. Activities of daily living at home</b>	0.2	0.8	0.2
<b>15. Activities of daily living outside the home</b>	0	0.6	0.2
<b>16. Level of self-care</b>	0.2	0.8	0.4
<b>17. Problems with relationships</b>	0.2	1.2	0.8
<b>18. Occupation and activities</b>	0	0.4	0

The scale used in the HoNOS-LD is numbered 0-4 where: 0 – No problem; 1 – Mild problem; 2 – Moderate problem; 3 – Severe problem; 4 – Very severe problem. No differences were statistically significant.

Improvement was made at each time point in one area: problems associated with mood changes.

Improvements in severity between the beginning and end of the evaluation (i.e. baseline and 6 months later) were made in five areas:

1. Problems associated with hallucinations and delusions
2. Problems associated with mood changes
3. Physical problems
4. Level of self-care
5. Problems with relationships
6. Occupation and activities

The table below shows the percentage of service users at Castle Lane whose problematic behaviours were less severe, more severe or stable at the end of the evaluation period (this was calculated by comparison to the ratings at the beginning of the evaluation).

\*Percentages may not sum to 100 due to rounding.

Item	Service Users ...		
	Less severe	More severe	Stable/No Change
<b>1. Behavioural problems – directed to others</b>	20%	20%	60%
<b>2. Behavioural problems – directed to self</b>	0%	0%	100%
<b>3. Other mental and behavioural problems:</b>			
<b>a)</b> Behaviour destructive to property	0%	0%	100%
<b>b)</b> Problems with personal behaviours	20%	20%	60%
<b>c)</b> Rocking, stereotyped and ritualistic behaviour	0%	0%	100%
<b>d)</b> Anxiety, phobias, obsessive, compulsive behaviours	0%	0%	100%
<b>e)</b> Others	0%	0%	100%
<b>4. Attention and concentration</b>	20%	20%	60%
<b>5. Memory and orientation</b>	0%	20%	80%
<b>6. Communication (problems in understanding)</b>	0%	0%	100%
<b>7. Communication (problems in expression)</b>	0%	0%	100%
<b>8. Problems associated with hallucinations and delusions</b>	20%	0%	80%
<b>9. Problems associated with mood changes</b>	40%	0%	60%
<b>10. Problems with sleeping</b>	0%	0%	100%
<b>11. Problems with eating and drinking</b>	0%	0%	100%
<b>12. Physical problems</b>	20%	0%	80%
<b>13. Seizures</b>	0%	20%	80%
<b>14. Activities of daily living at home</b>	20%	20%	60%
<b>15. Activities of daily living outside the home</b>	0%	20%	80%
<b>16. Level of self-care</b>	0%	20%	80%
<b>17. Problems with relationships</b>	0%	20%	80%
<b>18. Occupation and activities</b>	0%	0%	100%



**Summary:**

- ⦿ Improvements were made at all three time points in one area: problems associated with mood changes.
- ⦿ Half of the behaviours on the HoNOS-LD measure became slightly more severe for a small number of service users over the period of the evaluation.
- ⦿ Small improvements were made in numerous behaviours; the most notable was in problems associated with mood changes.
- ⦿ Most areas of behaviour remained stable during the period of the evaluation.
- ⦿ Overall problem behaviours remained either no problem or a mild problem.

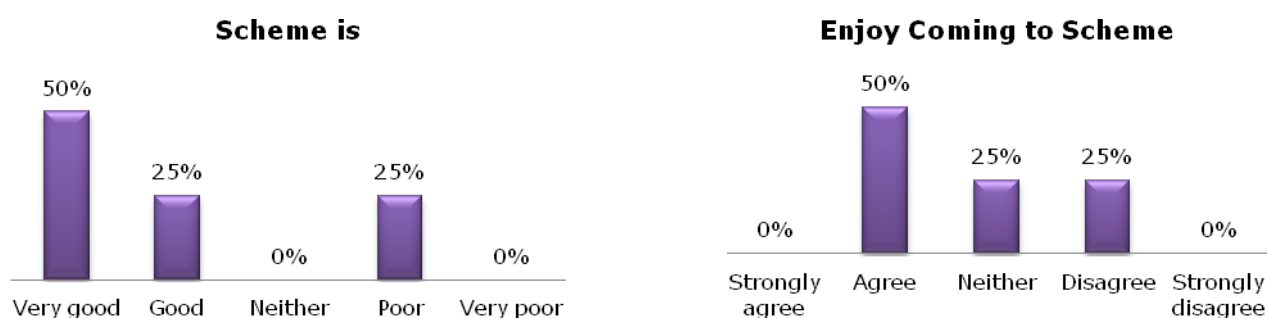
VIEWS OF  
CASTLE LANE  
DAY SERVICES  
SERVICE USERS

*Note to this report: The number of interviewees are lower than standardised data collected as those who attended both the Secret Garden and Castle Lane Day services were assigned to one or the other. The number decreased to only four at Castle Lane due to a number of reasons: not wanting to continue in the evaluation, not using the day service and death in one instance.*

In June 2010 four service users at Castle Lane took part in a semi-structured interview that asked about their views and opinions on the Castle Lane in the following areas:

- The service user – staff relationship, including service user support from staff and the freedom to make their own choices;
- Their progress, including what helps it or hinders it; and
- Their enjoyment of the scheme, including the number and range of activities available.

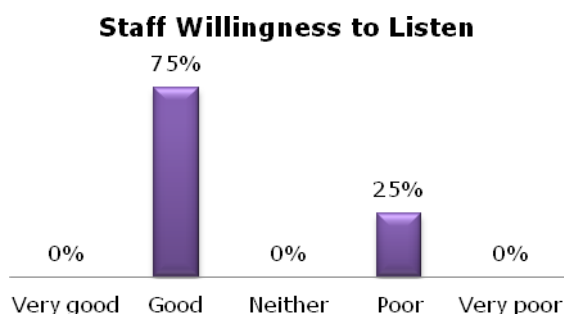
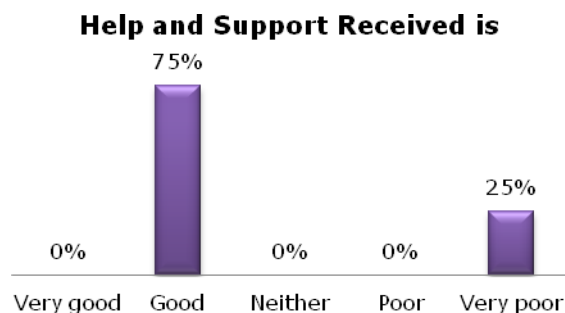
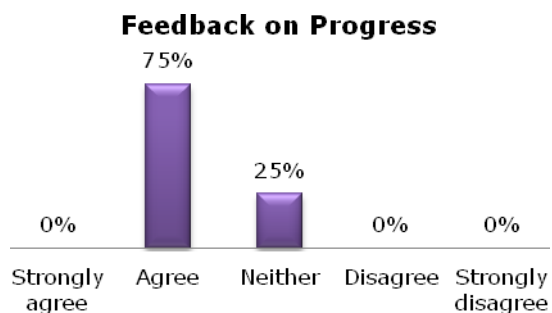
### Overall opinion of the scheme



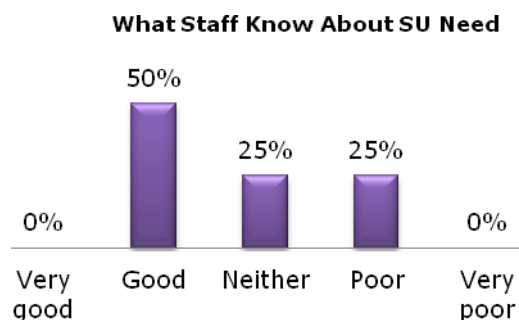
In the main service users opinions of Castle Lane ranged from 'very good' (N=2) to 'good' (N=1) whereby service users reported that 'staff are very good to' them and service users 'think everything is alright'. Additionally a comment praised Castle Lane as being 'good for me.... [since] I have my own flat... I have my own job and it's building up my confidence'. However one service user believed Castle Lane to be 'poor' where it was reported that 'sometimes I think I'm not wanted here' and 'there isn't enough staff'.

Half of those questioned 'agreed' (N=2) that they enjoyed going to Castle Lane; the remaining service users were equally 'disagreed' (N=1) or 'neither agreed nor disagreed' (N=1).

## Staff Support of Service Users

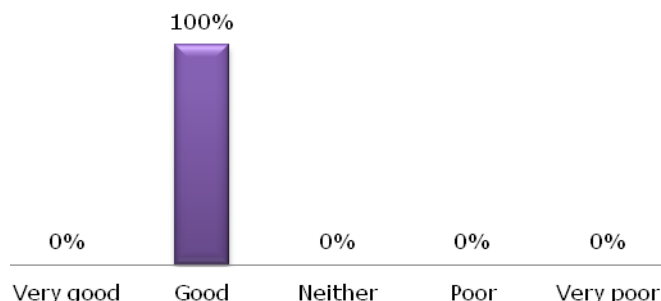


When asked if staff informed them of their progress at Castle Lane three quarters of service users 'agreed' (N=3) whilst the remaining (N=1), 'neither' agreed nor disagreed. In addition, all but one of the service users believed that the help and support they received from staff was 'good' (N=3); the remaining service user believed it was 'very poor'. Staff members willingness to listen was deemed 'good' by three quarters (N=3) of those questioned; one service user thought this was 'poor' (N=1).



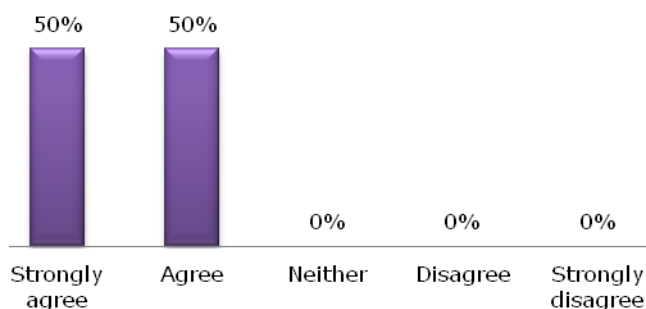
Half of the Service users believed that what staff know about their needs was 'good' (N=2), one service user thought it was 'neither poor nor good' and one that it was poor (N=1). Additionally, service users believed that staffs response to their needs was either 'good' (N=2) or 'neither good nor poor' (N=2).

### SU and Staff Relationship



All service users rated how they 'get along with staff' as 'good' (N=4). The reasons for this, were that staff appeared both approachable and capable. For example service users are 'able to talk to them' and 'joke about with them' and that 'Staff are very good to me and they are always here for me if I need them'.

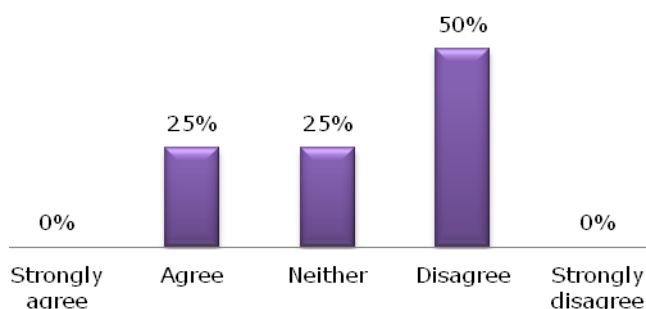
### Staff Like to Know What SU Thinks



The chart above shows how far service users agreed that staff like to know what they think about things at Castle Lane. Service users either 'strongly agreed' (N=2) or 'agreed' (N=2) that staff like to know what service users think.

One complaint was made to Castle Lane within the year of the evaluation. This complaint was deemed well dealt with as the service user reflected that 'It was okay then'.

### SU Choose Activities

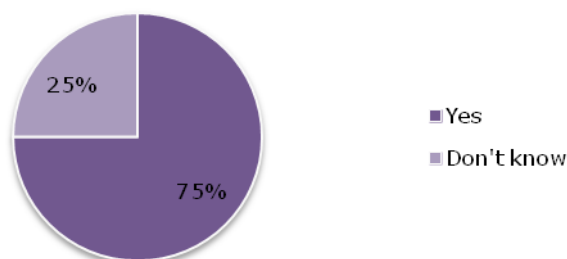


Half of those service users questioned 'disagreed' (N=2) with the statement that they were able to choose what they do at Castle Lane while the remaining half either, 'agreed' (N=1) or 'neither' agreed nor disagreed (N=1).

Whilst opinion was divided when service users were asked how far they agreed that they could choose their own activities explanations of activities proved somewhat positive. For example '[whilst] they just tell us [what to do]... but I don't mind' and 'I go to Portadown, tech and the link club; they are good'. Lastly it was reported that 'you get a choice sometimes'.

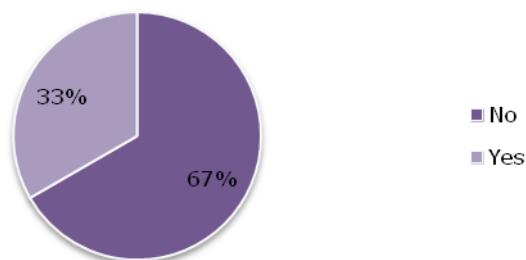
### *Knowledge of Needs Assessment and Planning*

#### **Have a support plan**



Three quarters (N=3) of service users indicated that they had a support plan (Needs Assessment), one did not know if they had a support plan.

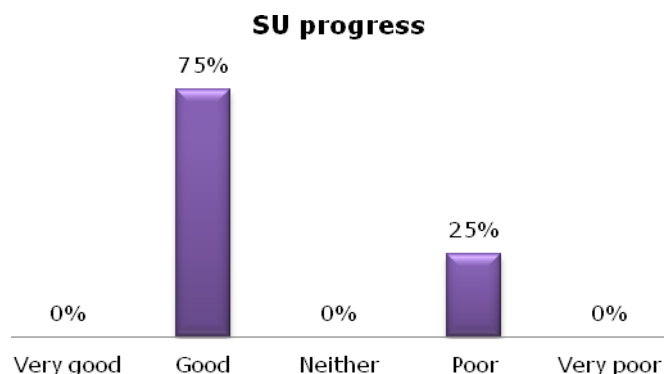
#### **Know What Support Plan Says**



Two thirds of service users knew what their support plan said (N=2) one did not.

The service user who did not know if they had a support plan would like to know if they do and what it says. Likewise the service user who reported not knowing what theirs said would like to know so.

## Progress at Castle Lane



Service users rated their progress at Castle Lane as either 'good' (N=3) or 'poor' (N=1). Personal progression was reflected upon where service users reported that they 'Probably got a bit more confidence in... [themselves] and [are] able to do more stuff for [themselves].'

However recognition that perhaps they 'could do a little more' to progress was also expressed. A genuine desire to not be in Castle Lane was also reported whereby one service user said; 'I don't like staying here. I want to move somewhere else'.

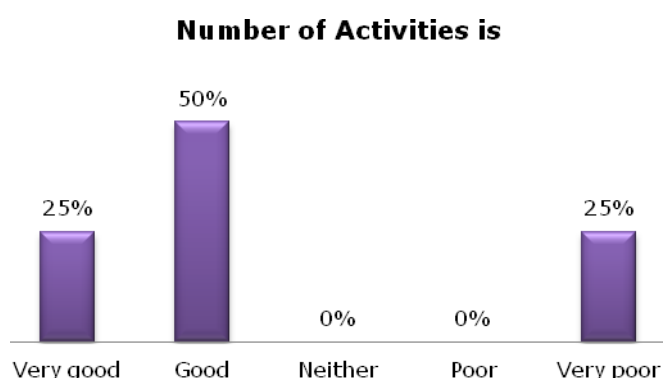
### What helps service users to progress

No themes were apparent as to what helped service users progress at Castle Lane, it was as one service user put it 'all different things'. Particular acknowledgement was also given to staff who, 'give... a wee bit of confidence'.

### What hinders service user progress

No hindrances to service user progress were reported.

## Activities provided at Castle Lane



The chart above shows service users rating of the number of available activities at Castle Lane. Most service users rated the number of activities as either 'good' (N=2) or 'very good' (N=1) and reported that they enjoyed 'the different activities... [as they can] go on the computers, surf the net... make stuff and just [take part in] different activities'.

One service user rated the number of activities as 'very poor' (N=1) and reported that there were repercussions for not taking part in daycare as 'if you don't go to daycare you have to do chores'.

One other activity a service user would like to be provided at the scheme is 'New puzzles... [instead of] doing the same ones'.

#### Additional Comments

Service users were asked if there was anything else they would like to say about Castle Lane. Most of the comments repeated those reported above. One comment in particular highlighted the goals of Castle Lane:

'It's just a wee stepping stone for me until I get myself sorted out and hopefully get a wee house in the community'.



VIEWS OF  
SERVICE USER  
REPRESENTATIVES AT  
CASTLE LANE

During September and October 2010 five representatives of service users at Castle Lane took part in a semi-structured interview that asked their views and opinions on the scheme. Of these five 80% (N=4) were the parent or caregiver and 20% (N=1) were siblings of the service user.

Please note that due to selectivity on the part of the respondents, and rounding, percentages in bar charts may not sum to 100%.

### *The aim/purpose of the scheme*

Castle Lane was viewed most commonly as a place to 'develop social skills' with the aim to 'integrate... [SUs] socially into the normal way of life', one representative 'can't believe the amount of things... [the service user] can do now'. Additionally, one service user representative reported that '[the service user] is happy and hasn't been as happy anywhere else' therefore providing evidence Castle Lane maintains a fun environment while 'trying to develop' service users.

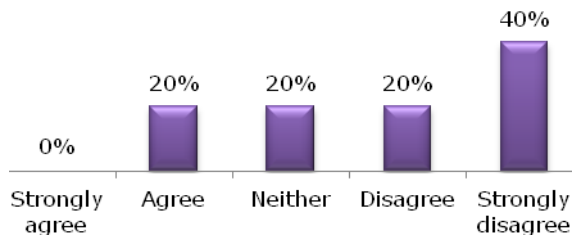
### *A caveat to reading this report*

In devising the survey that was sent to service user representatives an effort was made to present questions both positively and negatively. Questions shown in the table below originally alternated between positive and negative in the interview. However, in the report questions were discussed according to the theme which they belonged. For this reason parts of the report may seem artificially negative or positive.

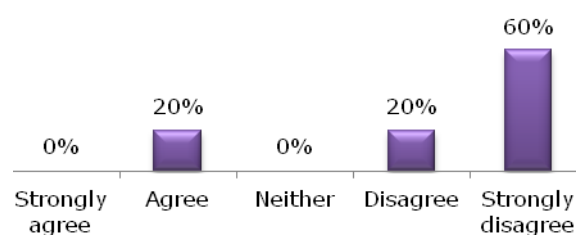
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
a. Staff at [scheme name] value my views and opinions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. [Scheme name] does not provide information when I request it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. [Scheme name] is progressive and forward thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I do not receive feedback from the scheme about [SUs name] progress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Information I receive is inadequate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I have a good knowledge of what happens at [Scheme name]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Overall Opinion of the Scheme*

**Information Not Provided When Requested**

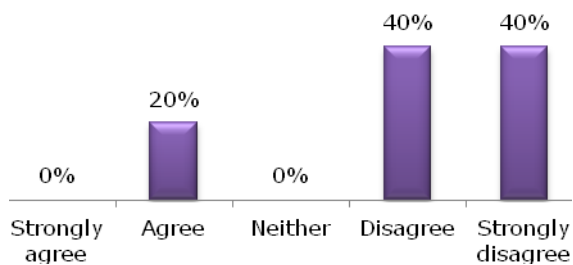


**Information Received is Inadequate**



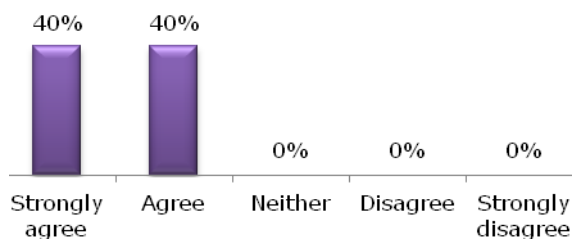
Most SU representatives believed that information was provided when requested (N=3) one neither agreed nor disagreed with this statement while the remaining agreed that information was not provided when requested (N=1). Similarly most SU representatives believed that information received is adequate (N=4). However, one person felt that information received is inadequate.

**No Feedback on SU Progress**

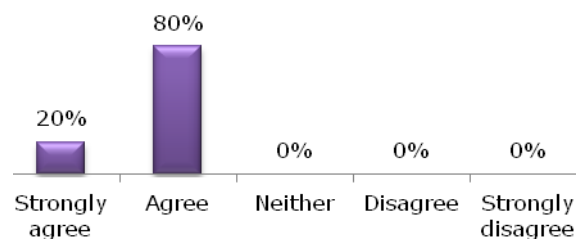


Whilst one SU representatives felt they did not receive feedback on service user progress the remaining four reported that they did.

**Good Knowledge of What Happens at Scheme**

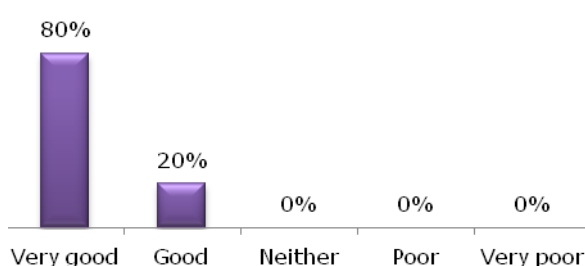


**Scheme is Progressive and Forward Thinking**

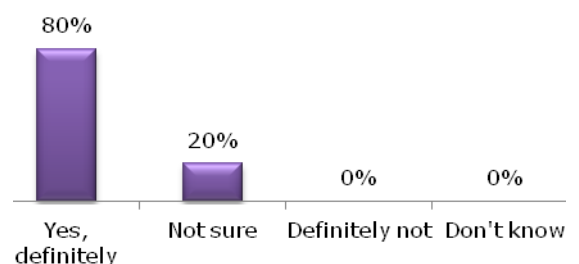


In the main SU representatives either 'agreed' (N=2) or 'strongly agreed' (N=2) that they have a good knowledge of what happens at Castle Lane. All SU representatives believed that Castle Lane is a progressive and forwarding thinking scheme.

**Quality of Services Provided**

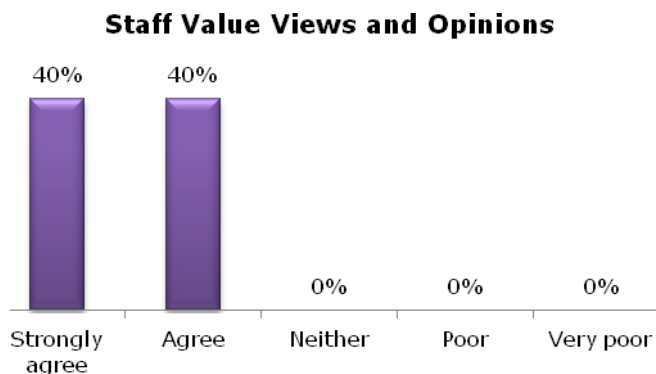


**Recommend Scheme to Others**



The quality of the service provided at Castle Lane was rated as 'very good' (N=4) or 'good' (N=1). This was also reflected in the response that all but one of the SU representatives would recommend Castle Lane to others who may need the same type of service; the other was 'not sure'. Additionally, if the government were to give the service user money to choose their own service, all would choose Castle Lane.

### Opinion of Staff at Castle Lane

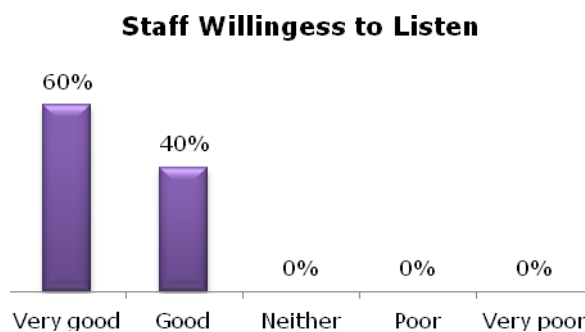


All SU representatives believed that staff do value their views and opinions.

SU representatives were also asked to rate the staff that they have contact with at the scheme with regard to four separate areas – discussed below.



Staff at Castle Lane were reported to be both helpful and supportive by all SU representatives. They were also considered to be 'very good' (N=3) or 'good' (N=2) communicators.



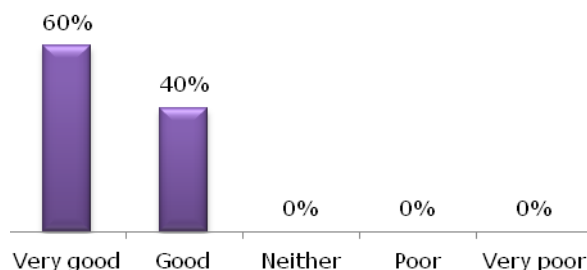
SU representatives felt the professionalism of staff to be 'very good' (N=3) and 'good' (N=2). This was mirrored exactly when SU representatives were asked about the willingness of staff to listen to them.

SU representatives were also asked to talk about their relationship and dealings with Castle Lane. Most people reported on the proficient communication and openness of staff as if service user representatives 'want... to know anything that's fine' just 'ring them up [and] they tell me how [they are]'. Others commented 'that staff are excellent' and 'they do absolutely everything for [the service users]'. One person reflected on an occasion when staff helped with 'organising' counselling further providing evidence of positive staff relations.

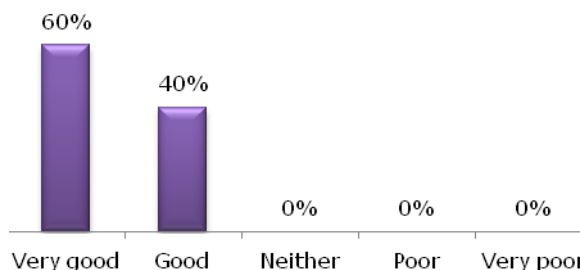
With regard to the staffing levels at Castle Lane SU representatives 'think it's good' and 'there seems to be plenty of staff'. There was a feeling that 'they could do with plenty more' as 'it always seems to fall on the same people'. However most service user representatives have 'no complaints' about the staffing levels as staff are 'always available to give you attention and talk to you'.

### Staff Support of Service Users

**Staff Knowledge of SU Needs**



**Staff Responsiveness to SU Needs**

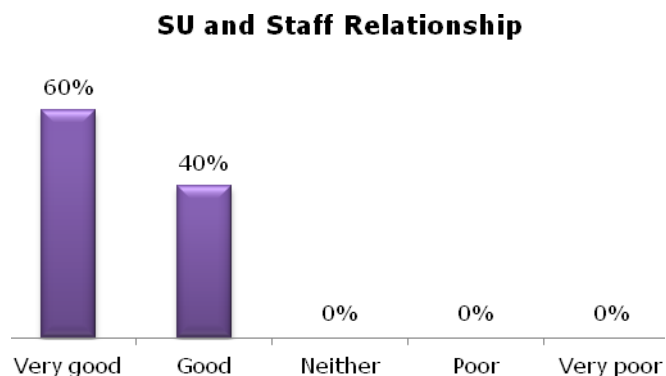


SU representatives believed Castle Lane staff knowledge of SU needs to be 'good' (N=2) or 'very good' (N=3). All SU representatives believed that the responsiveness of staff to service user needs was either 'good' (N=2) or 'very good' (N=3).

Only one SU representative had made a complaint to Castle Lane, which was deemed not to be satisfactorily dealt with.

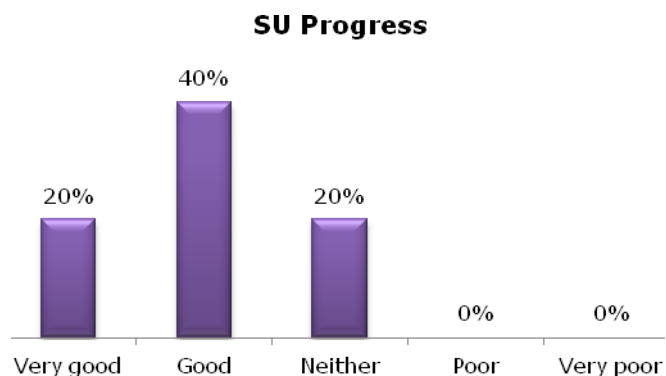
All SU representatives believed that staff at Castle Lane had sufficient training to work with service users. None took the opportunity to comment.

## Staff - Service User Relationship



All SU representatives believed that staff and service users at Castle Lane have a 'very good' (N=3) or 'good' (N=2) relationship as staff 'have a good understanding of... [A service users] moods' and 'they talk... like [they are]... one of the family' and '[service users get] on famously with them... [they have] a great relationship with them all. Additionally, if service users are 'not in good form' or have been 'erratic for a few days, they can gauge that and deal with it'.

## Service User Progress



Service user progress at Castle Lane was mainly rated as 'good' (N=2) while one representative rated it as 'very good' and the remaining one rated it as 'neither'. SU representatives believed attending Castle Lane has helped service users adapt 'socially'. One service user now 'cooks' and 'does his washing' due to their development at Castle Lane, another was described as 'able to communicate better' as Castle Lane taught 'that there are boundaries'. Furthermore on the area of communication another representative took great please that they 'can actually have a conversation, which you couldn't have done before... [they] went to Castle Lane'. However, one SU representative assumed '[a service user] mustn't be enjoying it at the minute that... [they] had to get to Armagh'.

When asked what changes SU representatives had noticed in service users many of the comments mirrored those discussed above. Service users' communication was again the main area of change as representatives 'can have a conversation' now, as service users 'interact better' since joining Castle Lane. Emotional awareness was thought to have improved with service users being accredited with having 'more empathy' through their development at Castle Lane.

All service user representatives that responded to this question 'were surprised' at the changes, one representative was surprised 'that... [the service user] settled so well [this] was unexpected' another

service user representative was unsuspecting of change due to 'what [they]... had observed over the years' therefore influence from Castle Lane is evident.

### What helps service users to progress

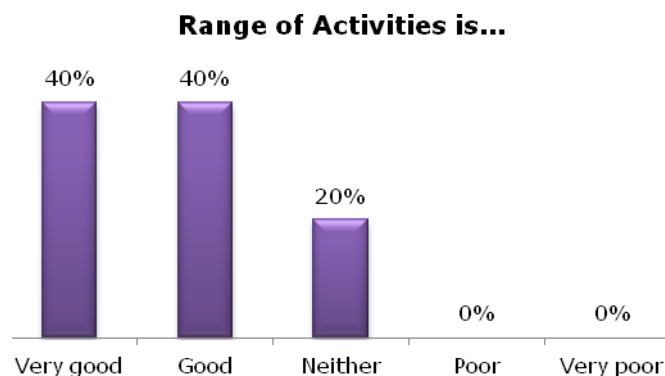
In considering what helped service users to progress at Castle Lane SU representatives believed 'staff' and 'activities' to be the most beneficial. One representative reflected on activities the service user enjoyed, they 'got a gold and silver medal in 10 pin bowling' and acknowledged Castle Lane provides 'a lot of activities'. SU representatives reported that staff 'have a great way with [service users]' 'they want [them]... to do things for [themselves]... and to have a better life' another representative gave similar credit to staff as they 'are supportive'.

### What hinders service user progress

In assessing what hindered service user progress at Castle Lane SU representatives suggested that both 'tenants' and lack of 'facilities' could present obstacles to progress. SU representative highlights as service user 'has put weight on... the tenants would call him "fatty"' and therefore hinder progress. Another representative suggested 'there should be more facilities for the residents [to give them more] to do during the day'.

Overall, Castle Lane was viewed as having a 'positive' impact on service users' quality of life. It has made service users 'more independent and they a lot more relaxed' also 'communication skills have much improved'.

### *Opinion of Activities Provided at Castle Lane*



The range of activities was mainly rated as either 'very good' (N=2) or 'good' (N=2), although one person rated them as 'neither poor nor good'. Castle Lanes 'range is excellent' according to one SU representative while another acknowledged the service user 'seems fair and happy'.

Additional activities that service user representatives would like provided at Castle Lane include 'exercise' and 'more outings'. The provision of additional exercise activities was suggested by one SU representative as the service user 'is very unfit'.

### *Additional Comments:*

Comments provided at the end of the semi structured interview that are not mentioned elsewhere in this report will now be discussed.

Whilst SU representatives feel that Castle Lane is 'a great service' and is 'a first class facility' another representative 'would like Castle Lane to tell [them]... what is going on about the taunting etc' as other service user are 'taunting' a service user. Another additional comment suggested that 'there should be more work done to upgrade the building' at Castle Lane, however the representative was 'happy with [their]... daughter with Praxis Care'.

To close a positive additional comment from one SU representative:

*'Things are going great as he is doing well in it that's it. He is well looked after. All the girls are lovely anytime I phone. We are very grateful to them. It's a great service that help, picked up here, we are very happy with it. It was great that he got to meet his brother too.'*



VIEWS OF  
STAFF AT  
CASTLE LANE

In June – July 2010 staff at Castle Lane were sent a short survey that asked their views and opinions on the scheme. This survey was completed by a total of 29 staff<sup>12</sup>; a breakdown of their job roles can be seen in the chart below. The length of employment at Castle Lane ranged from one to five years; the average number of years worked was three years and one month.



In writing this report, and in order to ensure anonymity, all responses were considered together (i.e. the manager's responses were not considered separately). Also, please note that due to selectivity on the part of the respondents, and rounding, percentages in bar charts may not sum to 100%. This does not apply to pie charts.

#### *The aim/purpose of the scheme*

Whilst some staff viewed Castle Lane as 'long term housing for adults with learning difficulties and mental health issues' others believed it to be 'a stepping stone in order to move onto living in the community'. In pursuit of 'promot[ing] independent living within the community' and to 'build confidence' staff believe Castle Lane aims to provide 'a safe, caring and uplifting environment' where service users have the opportunity to 'learn new skills and develop so that someday they could move out into their own home'. These new skills are developed through the use of 'person centred plans and programmes facilitated within the community' to help service users 'maximise their potential' 'in order to achieve individual goals and ambitions'.

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<sup>12</sup> Unfortunately a percentage response rate was not calculable since coding of the surveys for this purpose was viewed negatively by many staff members. In response to this non-coded surveys were left at the scheme; the result of which was that relief staff could also complete and return a survey without the researcher being aware.

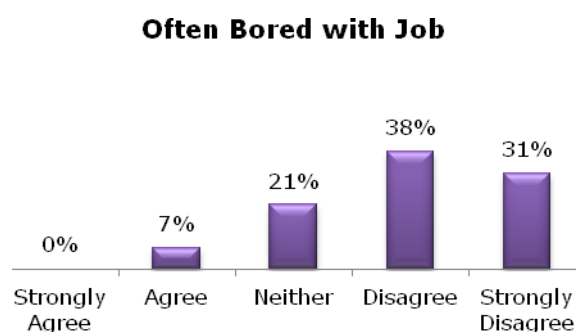
### *A caveat to reading this report*

In devising the survey that was sent to both staff and managers an effort was made to present questions both positively and negatively. Questions shown in the table below originally alternated between positive and negative in the survey. However, in the report questions were discussed according to the theme which they belonged. For this reason parts of the report may seem artificially negative or positive.

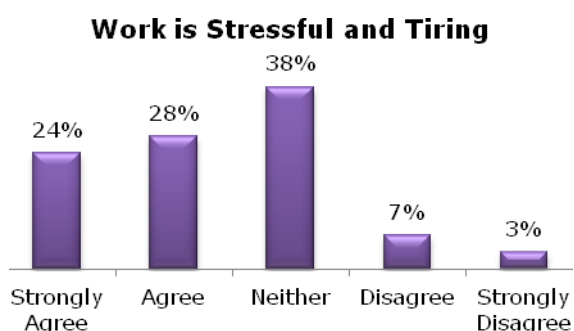
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
<b>a. I enjoy working at this scheme</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b. Working here is stressful and tiring</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>c. I like and respect my co-workers</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>d. Staff who are in a senior position do not value my views and opinions</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>e. My views and opinions are valued by my co-workers</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>f. Senior management do not communicate well with staff</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>g. There is a sense of co-operation and teamwork between staff</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>h. I am often bored with my job</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>i. The scheme that I work in is progressive and forward thinking</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>j. My job does not give me a feeling of personal achievement</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>k. I have regular supervision/feedback from my manager</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>l. I belong to an effective team</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>m. My job offers little or no opportunity to use my skills and ability</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Personal satisfaction at work

Staff were asked to either agree or disagree with statements about overall enjoyment and satisfaction with working at Castle Lane. Responses to this type of questions are shown below.

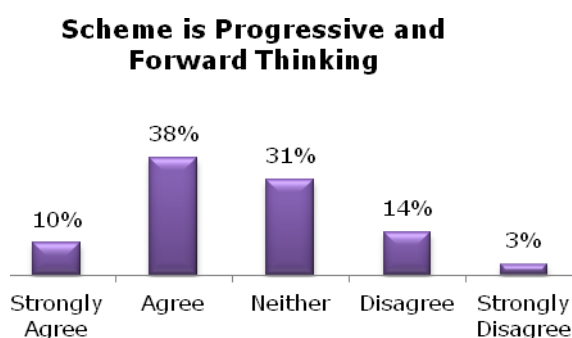
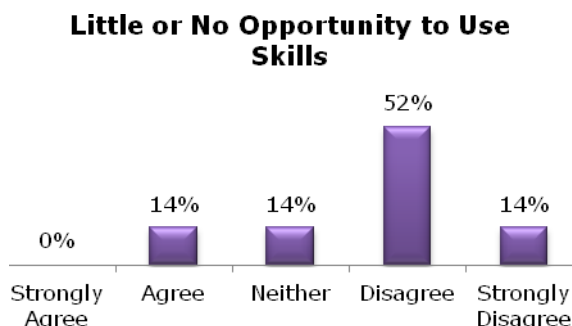


Whilst most staff either 'agreed' or 'strongly agreed' (N=14 and N=6, respectively) nearly a third 'neither agreed nor disagreed' that they enjoyed working at Castle Lane. A total of two staff members 'agreed' that they were often bored with their job at Castle Lane. However, over three quarters of staff either 'disagreed' or 'strongly disagreed' with the sentiment that they were often bored with their job; over a fifth (N=6) 'neither agreed nor disagreed' with the idea.



Whilst it is the case that most staff enjoy working at Castle Lane and are not bored with their job over half of staff believe that their work is 'stressful and tiring'. Over a third of staff (N=11) 'neither agree nor disagree' that their work is stressful and tiring. Also, one tenth of staff either 'disagreed' or 'strongly disagreed' that their work is stressful and tiring.

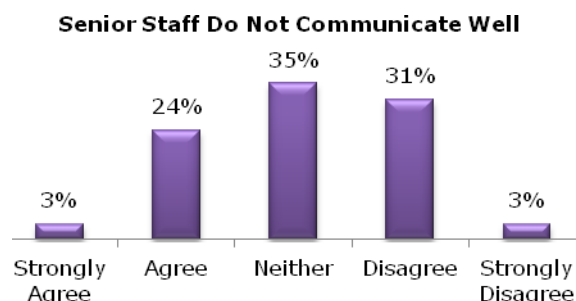
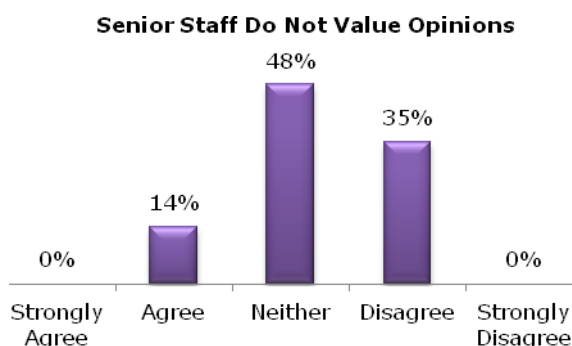
Nearly all staff members felt they had an opportunity to use their skills and ability; four staff chose to 'neither agree nor disagree'. A total of four staff members 'agreed' that they had little or no opportunity to use their skills in their work at Castle Lane. Whilst most staff (N=16) felt they did gain a sense of personal achievement from their job over a third (N=10) 'neither agreed nor disagreed' that they did not.



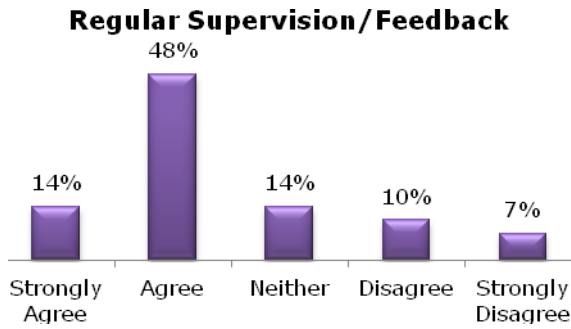
Whilst half of staff either 'agreed' or 'strongly agreed' (N=11 and N=3, respectively) that Castle Lane is a progressive and forward thinking scheme nearly a third (N=9) chose to 'neither agree nor disagree'. The remaining staff 'disagreed' or 'strongly disagreed' (N=4 and N=1, respectively) that Castle Lane is progressive and forward thinking.

### Opinion of senior staff

Staff were asked to indicate how far they agreed or disagreed with statements that asked about staff in a senior position to them. In this instance staff in a senior position is anyone who holds a higher position.



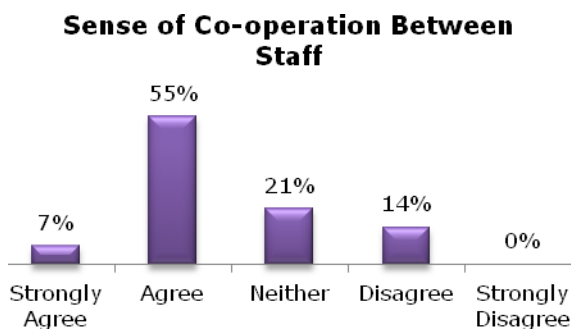
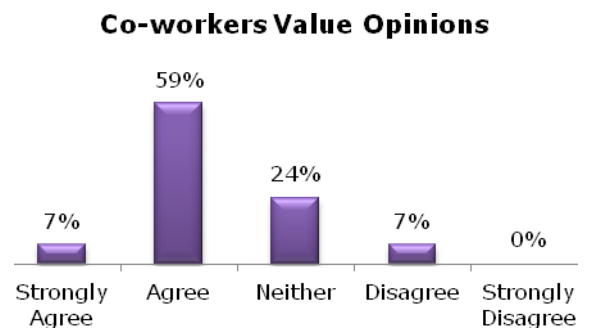
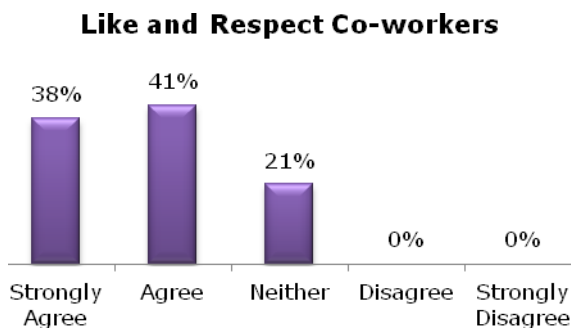
In total four staff members felt that staff in a senior position do not value their views and opinions and half chose to 'neither agree nor disagree' with this view; all other staff 'disagreed' (N=10) with the notion. Additionally, over a third of staff either 'disagree' or 'strongly disagree' (N=9 and N=1, respectively) that senior staff do not communicate well with staff. However, over a quarter of staff believe that senior staff do communicate well with staff. Over a third chose to 'neither agree nor disagree' that senior staff do not communicate well with staff.



Opinion was divided amongst staff when they considered whether or not they had regular supervision or feedback from their line manager. In total, more than half of staff indicated that they did have regular supervision of feedback from their manager, five staff members believed they did not and four 'neither agreed nor disagreed' that they did.

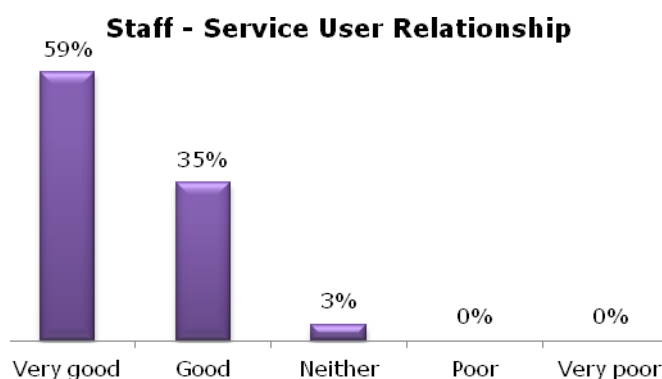
*Opinion of co-workers*

No staff members did not like and respect their co-workers, six staff members 'neither agreed nor disagreed' that they liked and respected their co-workers. The remainder (N=23) either 'agreed' or 'strongly agreed' that they liked and respected their co-workers. Two staff members felt that co-workers did not value their views and opinions, seven staff members 'neither agreed nor disagreed' that their opinions were valued. Over half of the staff members either 'strongly agreed' or 'agreed' that their views and opinions were valued by co-workers.



Over half of staff (N=19) indicated that they either 'agreed' or 'strongly agreed' that there is a sense of co-operation between staff at Castle Lane. Four staff members did not believe this was the case and 'disagreed' with the notion; six staff members chose to 'neither agree nor disagree'. Whilst over half of staff (N=19) either 'agreed' or 'strongly agreed' that they belonged to an effective team eight staff members chose to respond that they 'neither agreed nor disagreed' that they belonged to an effective team.

### Staff-service user relationship



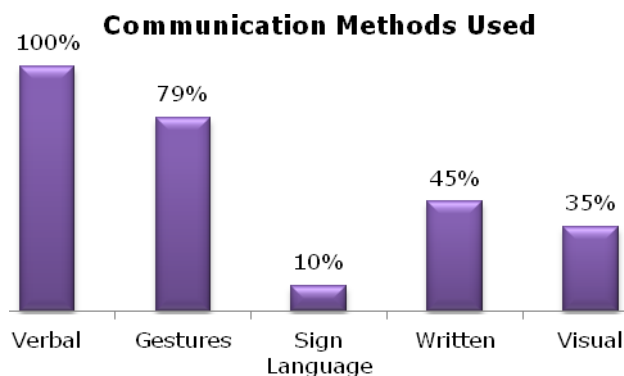
Staff were asked to rate the relationship between staff and service users at Castle Lane. As can be seen in the chart one staff member believed this relationship to be 'neither poor nor good'. Over half of the staff members felt that the relationship was 'very good' and over one third felt it was 'good'.

In the main staff believed they had 'built up a very good rapport with service users' and 'treat them with the respect and dignity they deserve' allowing them to gain awareness of 'likes, dislikes, behaviours and triggers'. Staff members also felt they 'have developed... good, respectful client centred relationship[s]' with service users through 'tak[ing] time to listen to each... regularly.... [which is not] tokenistic in... approach'.

Additionally, staff recognise that the length of time they have worked with service users has an impact whereby it allows them to develop 'an in-depth knowledge of how to respond to each' service user. They also recognise that their own attitude can impact on their relationship with service users whereby they 'try to maintain an open and positive attitude in order... [to promote] trust'. This reflection toward attitudinal values also extends to service users as the relationship between staff and service users was described as 'dependent on the mood and mental stability of each service user at the time'.

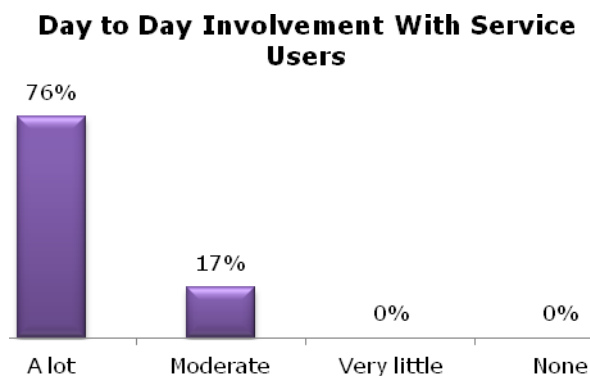
Lastly, staff took the opportunity to report that 'with the recent development of cutting staff... some tenants are not getting the time and support which they fully require' and that there is a 'general lack of empathy toward individuals, favouritism [and] a lack of understanding'.

The chart below shows the methods of interaction that staff at Castle Lane use to communicate with service users. All staff are able to communicate verbally with service users and 23 staff members also report the use of gestures as a medium of communication. Three staff members report using sign language and 13 report using written communication, respectively whilst the use of visual forms of communication i.e. symbols and pictures was used by ten staff members.



*Involvement with service users*

Staff were also asked about their involvement with service users on a daily basis. Staff rated their level of involvement on an average working day as follows:



Whilst two people had 'moderate' contact with service users on a daily basis, over three quarters (N=22) that they have a 'moderate' amount of contact and the remaining five staff members report that they have 'a lot' of contact on a daily basis.

Staff were asked to provide a breakdown of a normal working day under the headings: morning to break; break to lunch; and lunch to finish. Outlined below are the responses to this request.

*Morning to break*

During the first period of the day staff 'get service users up' out of bed, help them with their 'personal care'. 'medication' and to 'choose the appropriate clothing for the day'. Following this staff 'help promote healthy eating [at] breakfast' and, where applicable, 'observe' or 'help... with eating'. The opportunity is also taken at this point in the day to undertake schedules prepared by the Occupational Therapists and assist service users to undertake 'household duties [and] attend appointments'. Additionally, staff 'assist [service users] with money', 'preparing lunches' and 'transportation... for day care activities'.

A difference of duties between support workers and team leaders was evident where team leaders often spend much time during the day 'complet[ing] reviews, risk assessments, support plans and general correspondence'. Their support of service users is reported as being 'via organising structures for support staff to follow... [they are generally] not involved with the personal care of service users'.



### *Break to lunch*

Many of the same activities apply to this point of the day such as personal care, medication, attending appointments and household duties. Staff also accompany service users to day care, which they help to facilitate and support them in 'daily chores [i.e.] banking, shopping and assisting in cooking lunch'. Lastly, staff employ skills such as 'calming and defusing' where needed throughout the day.

### *Lunch to finish*

At this time of the day staff 'continue to facilitate day care [and] support tenants with any issues... [and] personal care', including medication. Transportation is again arranged from day care back to Castle Lane where 'staff support service users with daily living skills, cooking, cleaning and financial matters' such as 'budget plans/banking'. In the evening OT schedules are again followed and service users help with 'dinner prep[aration]' 'shopping' and 'clean[ing] up after'. Staff take this time to 'talk/communicate with [service users] informally' and service users will approach staff 'with concerns, issues or questions', 'night activities' are attended or staff and service users 'play games'. At the end of the evening staff ensure medications are taken and they help service users to 'get ready for bed'.

Staff supporting one another was also mentioned whereby they 'support each other to manage challenging behaviour'. Lastly, the distinction between team leader and support worker was gain evident where team leaders reported a 'desire... to spend as much time as possible with the [service users]... which often can't be facilitated due to the high amount of paperwork'.

### *Service user progress*

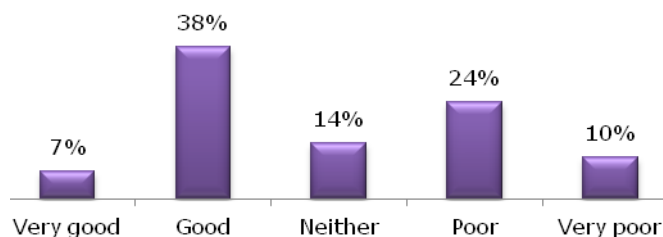
It is important for service user progress that assessment and planning is undertaken and adhered to. In total 27 staff members indicated that Castle Lane did employ assessment and planning for its service users (two did not answer this question).

Staff at Castle Lane report that they 'are required to read [assessment and planning documents] and follow them in order for the correct amount of support and care... [to be] given to individuals'. It is reported that 'everyone is aware of these and [they] are updated on a regular basis' and that they are 'implement[ed] and followed each day'.

However, some difficulties were reported in the implementation of assessment and planning where some service users 'are more demanding than others [which] puts pressure on staff and other service users feel left out, not listened to [or that they do] not [receive] enough staff time'. Additionally, whilst training is provided in assessment and planning there is 'very limited time for support staff to look at [these] during shift due to the demand of senior staff and service user challenging behaviour'. Lastly, staff feel that changes in plans need to be better communicated and that it is difficult to 'get the proper input... [from service users] due to staff resources, time or ability of the service user'.

Staff were divided in their opinion of service user progress. Whilst 13 staff believed progress to be 'good' or 'very good' four believed it to be 'neither good nor poor' and ten believed it to be 'poor' or 'very poor'.

## Service User Progress



The staff member who believed service user progress to be 'very good' believed 'most... with one or two exceptions have thrived greatly since moving' to Castle Lane. There is a feeling amongst staff that whilst 'the majority [of service users] had previous placements in the past which broke down' Castle Lane 'has been their most successful placement to date' and that 'individuals who are appropriately placed manage well and progress'.

However, it is also felt that 'the majority of service users have progressed to a point, remain[ed] at this point.... [and] some have regressed' and whilst 'progress is clear.... Deterioration in health needs for some [is] also clear'. In particular mental health needs were reported as 'taking a dip [for some service users] which requires more help than what [Castle Lane] can provide'.

A further obstacle which staff reported was that 'service users get away without any consequences if they have broken rules' and that even though Castle Lane is 'a support living facility... staff are expected to do more than necessary for [service users]'. Lastly a concern was expressed that service users have not moved out of the scheme and into the community since 'as yet no ... [service user] has moved to community living'. This is something that staff strongly feel 'should be the aim'.

Staff were also asked to consider what they believed helped or hindered service users at Castle Lane. This will now be discussed.

### Helps service user progress

A plethora of suggestions as to what helped service users to progress at Castle Lane were provided. Some praised the 'skills and commitment of the staff team' whereby staff 'listen to what [service users] want to achieve' and are 'respectful and patient'. Furthermore, it was believed that 'person centred planning is key' and the provision of 'routine, consistency' and 'skills... [to] build up their self esteem' and 'independence with integrating in [the] community'. The day care timetable is described as 'excellent... [and service users] avail of excellent opportunities within this'. The staff development department were also praised as having 'contributed to staff skills and knowledge'.

### Hinders service user progress

Staff report that there are many factors that hinder service user progress within Castle Lane. Many of the factors related to staff themselves whereby 'staff attitude' was viewed negatively at times when staff were felt to 'forget... who they are working for and why... [they are] working with [people with] learning disabilities'. Coupled with this is the stress that is placed on staff through 'staff shortages' and a 'high turnover of staff' that hinder 'individual 1:1 time... [and] person centred planning'. Additionally, it is felt that some staff members 'have a very autocratic

and firm way of getting their points across' and that 'staff [do] not all follow... the same rules and procedures... [leading to] more challenging behaviour [of service users]'.

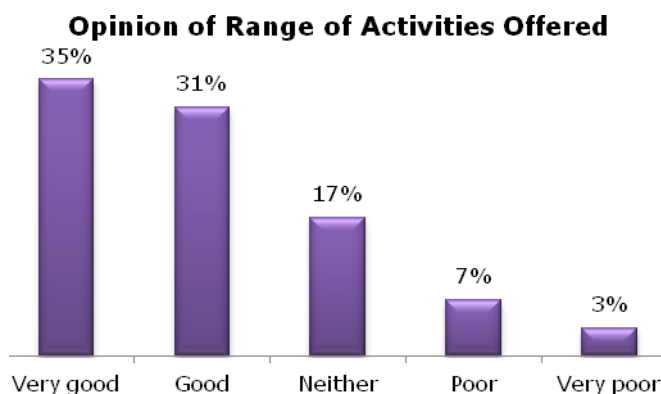
Coupled with the points discussed above staff feel that there is 'a lack of resources' which mean 'support... cannot always be met' and that 'service users get away without any consequences' (something previously mentioned). Additionally, it is reported that service users are 'not involv[ed]... in decisions or daily planning' and that 'day care provided [is] not suitable for a lot of service users though [they are] expected to attend... [due to] unnecessary pressure... from day care staff'. It is also felt that service users 'lack of motivation' hinders their progress and that service users are 'not integrating within society enough'.

A further statement of what hinders service user progress includes 'with holding options... [and] information..., mothering service users, [a] lack of cohesiveness and continuity, no clear communication up or down the line [and] no exit strategy for more capable individuals'.

On an organisational level it was reported that 'Praxis as an organisation hinders our service users as they are unable to provide answers to staff or... [service users] when situations arise which cannot be dealt with at scheme level'.

#### *Activities provided at Castle Lane*

Staff were asked to rate how good they felt the activities currently provided at Castle Lane were. Over half believed that the activities offered were 'very good' (N=10) or 'good' (N=9) and five believed it to be 'neither poor nor good'. However, two staff members believed that the range of activities offered was 'poor' and one believed it to be 'very poor'. The reasons offered for the ratings are discussed below.



Staff felt that since Castle Lane provides its own day care service, users 'are involved in a wide spectrum of activities'. These activities are described as 'excellent opportunities for those... who engage' and allow service users to 'experience different activities at their level of ability' since a 'person centred approach [is] used' and 'the emphasis [is] on personal development [and] social inclusion'.

Problems that are associated with day care are 'motivating... [service users] to participate', 'limited resources' that prevent service users from taking part in activities they would like to and that 'some of the activities are not suited for all clients'. Additionally, and in contradiction to a point above, activities are reported as 'not person centred [where] one activity [is expected] to suit all service users'.

Staff were also asked if there were any new or other activities they would like to see offered at Castle Lane. Staff were evenly split in their response to this question. Whilst two declined to answer three would like to see other activities offered and three would not. Many staff provided a written response to this question and would like to see 'a bigger choice of evening and day care choices to suit all' service users including 'integration with other Praxis schemes in [the] local area' and greater inclusion in the local community. Examples of such activities are 'swimming, horse riding', '5 a side football... [and] evening[s] out at the pub and clubs'. Also, staff would like to see greater 'skills development – numeracy..., basic food hygiene qualifications... [and] computer' skills along with 'more walking/outdoor/gym etc as a lot of service users are very overweight', to this end 'courses on healthy eating for [service users]' would also be appreciated.

### *Aspects that affect staff members job role*

In undertaking work with people with learning disabilities it is important that staff have adequate training. For this reason staff were asked if they felt they had sufficient training to perform their job role to the best of their ability. In total three quarters of staff indicated that they did have sufficient training to perform their job role (N=22).

Those who believed they did not have sufficient training (N=5) were asked to indicate what other training they felt they could benefit from. Staff indicated that they would like 'team building skills..., person centred planning, [a] cookery course [and] first aid at work'. Additionally, staff believe they would 'benefit from training relat[ed] to specific learning disabilities and mental [health]'.

### *Difficulties in carrying out job role*

Again it was reported that 'the level of staff does not meet the requirements of the scheme' which means that service users 'aren't getting as much help and support as required'. It is felt that 'this can result in a lot of challenging and violent behaviour... [which] puts staff in danger'. It was also reported that 'some staff... [are] negative towards day care and [show] an unwillingness to participate'. 'Poor communication between team leaders and staff' was reported and the view that 'voices of the most vulnerable staff are not listened to... when they have valid and substantive issues'.

Staff also find it 'difficult to grab a bite of lunch or dinner within a shift' and some were not comfortable with the cooking role they fulfil and on arrival to Castle Lane were not 'adequately prepared to cook for a majority of service users'. Staff morale was reported as 'low which makes it hard to work in that environment' and 'how [staff] carry out [their] jobs', one explanation of why the low moral exists is again 'staff shortages'. Staff shortages again are held accountable for 'difficulties implementing specialised therapeutic programmes' and having the time to complete paperwork which was described as having 'increased'. In general a 'stressful atmosphere' is reported where staff are 'getting stressed or even burned out'.

### *Most difficult aspects of job*

The most difficult aspects of working at Castle Lane have been discussed in previous sections. Only unique points, not previously mentioned, will be discussed here. Staff report that it is difficult that there is 'no communal space' for service users and that 'the amount of challenging behaviour and verbal abuse... can be very difficult to handle at times'. Lone working and sleepovers also present problems where staff are 'not able to take a break' and 'at times have to [do] up to 3 sleepovers in one week'. A lack of recognition for when 'staff... do more than expected' was expressed and a call for 'more recognition [made] to staff who complete work above and beyond what the organisation sees as their role'.

Lastly, staff indicated that there is a difficulty 'completing tasks... [as they are] constantly under pressure to do other things for service users' making it difficult to 'meet all the demands'.

### *Most rewarding aspects of job*

Staff believed that 'helping [service users] reach their goals [and] seeing that some... appreciate what you do for them', which is shown in 'getting back a smile or a thank you', is rewarding. Enjoyment was gained from 'being able to spend more time with [service users and] see[ing] that they are happy' and that there is an 'improvement in the[ir] coping abilities'. Additionally, staff felt it was 'rewarding to work with... enthusiastic staff... [who service users] respond in confidence to' and that the progress of service users was due to 'care plans [that] are working' and the disproving of 'preconceived thoughts of individuals capabilities'. Many staff seem happy at Castle Lane and 'love [their] job' gaining from it a pride in 'achievements to date'.

### *Working conditions improved upon*

Staff shortages were again mentioned in how working conditions might be improved upon where staff feel that 'at the moment we do not have adequate staffing levels which puts a lot of pressure on us... [This begs the question] How are we supposed to work to the best of our ability if there is too much to do?' There is also a sense that staff would like Castle Lane 'to be assessed regarding needs and support of the [service users]'. 'External office space' for day care staff was also thought important 'as day care worker[s]... can get pulled into accommodation issues instead of being able to concentrate on day care'.

Also deemed important to improve working conditions was the provision of 'allocated break times as working 8 hours without a break can be quite stressful and tiring'. There is also a feeling that there are 'favourites' amongst the staff and that 'management and team leaders... [should be more] approachable and not so overworked [which] creates a stressful environment'.

Lastly, staff would like a 'staff kitchen to keep food in [and] staff lockers to keep personal belongings' and also a 'new alarm [for those]... who work at night with no way to contact [a] sleeping team leader up the stairs'.

### *Additional Comments*

Staff took the opportunity to state that they 'enjoy' and 'love' working at Castle Lane. However, it was stated that the job role was 'hard to carry out due to work over load [and] lack of sleep'. It was felt that 'Castle Lane would benefit from more structure... [and that] staff moral [was] very low' but that staff could be 'happier if issues raised by staff... were dealt with effectively and sensitively'. Further calls were made for a staff room and it was reported that 'team leaders should go out with service users more on day trips etc' in order for them to 'build up [a] better rapport and relationship with' service users.

## Appendix A: Sample of Vineland Adaptive Behaviour Scale

### About the Individual:

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Current or Highest Grade Completed (if applicable): \_\_\_\_\_

School or Other Facility (if applicable): \_\_\_\_\_

Language Spoken at Home: \_\_\_\_\_

Does the individual have any disabling conditions? \_\_\_\_\_

Sex (circle one): F M

Year                      Month                      Day

Test Date: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Chronological Age: \_\_\_\_\_

# Vineland-II

Record  
Booklet

*Vineland Adaptive Behavior Scales, Second Edition*

## Parent/Caregiver Rating Form

Sara S. Sparrow, Domenic V. Cicchetti, and David A. Balla  
A revision of the Vineland Social Maturity Scale by Edgar A. Doll

### About the Respondent:

Name: \_\_\_\_\_ Sex: \_\_\_\_\_

Relationship to Individual: \_\_\_\_\_ Telephone: \_\_\_\_\_

PEARSON

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Product Number 31013



## Communication

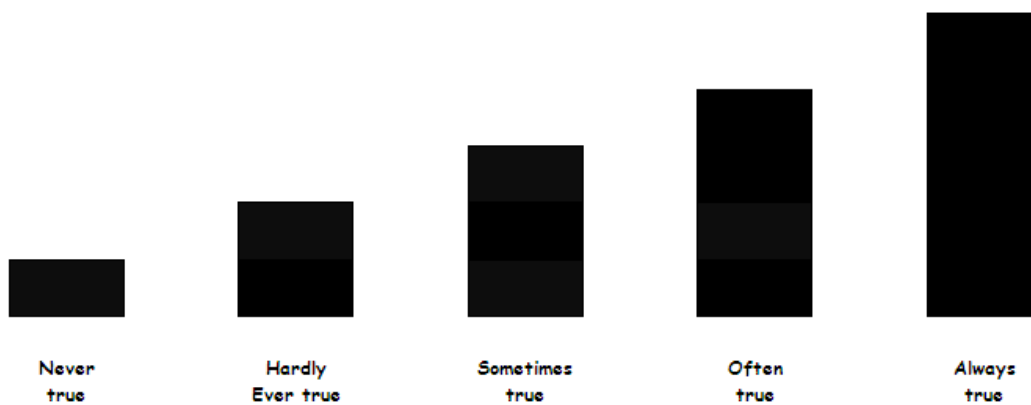
Response Options: 2 = Usually, 1 = Sometimes or Partially, 0 = Never, DK = Don't Know

Listening and Understanding						Circle "DK" If You Have a Question	
Start Age <b>0-4</b>	1	Turns eyes and head toward sound.	2	1	0	DK	?
	2	Looks toward parent or caregiver when hearing parent's or caregiver's voice.	2	1	0	DK	?
	3	Responds to his or her name spoken (for example, turns toward speaker, smiles, etc.).	2	1	0	DK	?
	4	Demonstrates understanding of the meaning of no, or word or gesture with the same meaning (for example, stops current activity briefly).	2	1	0	DK	?
	5	Demonstrates understanding of the meaning of yes, or word or gesture with the same meaning (for example, continues activity, smiles, etc.).	2	1	0	DK	?
	6	Listens to story for at least 5 minutes (that is, remains relatively still and directs attention to the storyteller or reader).	2	1	0	DK	?
	7	Points to at least three major body parts when asked (for example, nose, mouth, hands, feet, etc.).	2	1	0	DK	?
Start Age <b>5+</b>	8	Points to common objects in a book or magazine as they are named (for example, dog, cat, cup, key, etc.).	2	1	0	DK	?
	9	Listens to instructions.	2	1	0	DK	?
	10	Follows instructions with one action and one object (for example, "Bring me the book"; "Close the door"; etc.).	2	1	0	DK	?
	11	Points to at least five minor body parts when asked (for example, fingers, elbows, teeth, toes, etc.).	2	1	0	DK	?
	12	Follows instructions with two actions or an action and two objects (for example, "Bring me the crayons and the paper"; "Sit down and eat your lunch"; etc.).	2	1	0	DK	?
	13	Follows instructions in "if-then" form (for example, "If you want to play outside, then put your things away"; etc.).	2	1	0	DK	?
	14	Listens to a story for at least 15 minutes.	2	1	0	DK	?
	15	Listens to a story for at least 30 minutes.	2	1	0	DK	?
	16	Follows three-part instructions (for example, "Brush your teeth, get dressed, and make your bed"; etc.).	2	1	0	DK	?
	17	Follows instructions or directions heard 5 minutes before.	2	1	0	DK	?
	18	Understands sayings that are not meant to be taken word for word (for example, "Button your lip"; "Hit the road"; etc.).	2	1	0	DK	?
	19	Listens to an informational talk for at least 15 minutes.	2	1	0	DK	?
	20	Listens to an informational talk for at least 30 minutes.	2	1	0	DK	?

Talking						Circle "DK" If You Have a Question	
Start Age <b>0-4</b>	1	Cries or fusses when hungry or wet.	2	1	0	DK	?
	2	Smiles when you smile at him or her.	2	1	0	DK	?
	3	Makes sounds of pleasure (for example, coos, laughs, etc.).	2	1	0	DK	?
	4	Makes nonword baby sounds (that is, babbles).	2	1	0	DK	?
	5	Makes sounds or gestures (for example, waves arms) to get parent's or caregiver's attention.	2	1	0	DK	?
	6	Makes sounds or gestures (for example, shakes head) if he or she wants an activity to stop or keep going.	2	1	0	DK	?

## Appendix B: Sample of Rosenberg Self Esteem Scale

I feel I am a good person, as good as other people.





## Appendix C: Sample of Life Experiences Checklist

# The bild Life Experiences Checklist

Alastair Ager

Name..... Date.....  
Address..... Informant.....  
..... (if different from above)  
..... Date of birth.....

### Scores

Home .....  
Leisure .....  
Relationships .....  
Freedom .....  
Opportunities .....  
**Total** .....

Comments.....  
.....  
.....  
.....  
.....

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**bild**

Please tick statements which apply to you or - if filling it in on behalf of someone else - the above named person. No one is likely to score 'full marks'. Just tick the statements that genuinely apply.

**Home**

- My home has more rooms (counting living-rooms and bedrooms) than people
- My home is well decorated (e.g. it does not require a lot of repapering, painting etc.)
- My home is carpeted and has comfortable furniture
- My home has a garden
- I have never been attacked by someone when at home
- I have never had anything of mine stolen from home
- I use a telephone at home at least once a week
- My home has central heating
- Visitors have sometimes said how nice they think my home is
- I have my own room (or share with my partner only)

Subsection score

Comments

**Leisure**

- I visit friends or relatives for a meal at least once a month
- I go to a cafe or restaurant for a meal at least once a month
- I do some sport at least once a month
- I go to a local club, class or meeting at least once a month
- I go to the cinema or theatre at least once a month
- I go out to meet friends or relatives (e.g. at the pub or in someone's home) at least once a week
- I go away on holiday for at least two weeks each year
- I go to church (or other place of worship) at least once a month
- I have a hobby or interest (e.g. photography or collecting)
- There is lots for me to do at home (e.g. play records, watch videos, play games, read books etc.)

Subsection score

**Relationships**

- I have several close friends
- I feel loved and accepted by those who live with me
- I am called by my first name by those who live with me
- Some people address me formally (that is, call me Mr, Mrs, or Ma\_\_\_\_\_)
- I am married (or have a steady partner)
- I have friends to stay with me at home at least once a year
- When I am sad there are people who listen to me and help me
- There are both men and women living in my home
- I stay overnight with friends at least once a year
- I get on well with my family

Subsection score

**Freedom**

- I can spend time by myself (in privacy) when I want to
- I chose (or helped to choose) how my home is decorated
- I myself chose to live in my present house
- I have a bank or post office account from which I can withdraw money
- Meal times are changed to fit in with my plans
- I choose for myself what I do in my spare time
- I have a vote in elections
- I have my own personal possessions (which others may use if I choose)
- I earn some money (other than benefit or pension)
- I choose my own clothes

Subsection score

## Appendix C: Sample of HoNOS-LD

HoNOS-LD	A Brief Outcome Measure for People with Learning Disabilities and Mental Health Needs		
Client name:			
Client ID:			
Gender		Age:	
Date of assessment	DD	MMM	200__
Name of rater:			
Profession of rater:			
Location of assessment:			
Care status	New referral <input type="checkbox"/>	Current case <input type="checkbox"/>	
Legal status:	Referred <input type="checkbox"/>	Detained <input type="checkbox"/>	
Details of physical conditions:	<i>(e.g. cerebral palsy, epilepsy, sensory impairments, Down's syndrome)</i>		
Degree of learning disability:	1 = Mild    2 = Moderate    3 = Severe    4 = Profound		<input type="checkbox"/>
Psychiatric and developmental conditions:	<i>(including autism and offending behaviour and, if available, ICD-10 codes)</i>		
Nature of accommodation:	1 = Lives independently    4 = Long-stay hospital    7 = Other 2 = Family home    5 = Group home (staffed) 3 = Acute hospital    6 = Group home (unstaffed)		<input type="checkbox"/>

<b>KEY</b> <i>Ratings should be over the past four weeks. For all the following items rate as follows:</i>	0 = No problem 1 = Mild problem 2 = Moderate problem 3 = Severe problem 4 = Very severe problem 9 = Not known	SUBJECTIVE RATING <input type="checkbox"/>
---	--	--

**1. Behavioural problems – directed to others**

Include behaviour that is directed to other persons. Do not include directed towards self (item 2) or behaviour primarily directed at property or other behaviours (item 3). Rate risk as it is currently perceived.

0	No behavioural problems directed to others during the period rated.
1 Mild	Irritable, quarrelsome, occasional verbal abuse.
2 Mod	Frequent verbal abuse, verbal threats, occasional aggressive gestures, pushing or posturing (harassment).
3 Sev	Risk, or occurrence of, physical aggression resulting in injury to others requiring simple first aid or requiring close monitoring for prevention.
4 V sev	Risk, or occurrence, of physical aggression producing injury to others serious enough to need casualty treatment and requiring constant supervision or physical intervention for prevention (e.g. restraint, medication or removal).

**2. Behavioural problems – directed to self (self injury)**

Include all forms of self-injurious behaviour. Do not include behaviour directed towards others (item 1), or behaviour primarily directed at property or other behaviours (item 3).

0	No self-injurious behaviour during the period rated.
1 Mild	Occasional self-injurious behaviour (e.g. face tapping); occasional fleeting thoughts of suicide.
2 Mod	Frequent self-injurious behaviour not resulting in tissue damage (e.g. redness, soreness, wrist-scratching).
3 Sev	Risk or occurrence of self-injurious behaviour resulting in reversible tissue damage and no loss of function (e.g. cuts, bruises, hair loss).
4 V sev	Risk or occurrence of self-injurious behaviour resulting in irreversible tissue damage and permanent loss of function (e.g. limb contractures, impairment of vision, permanent facial scarring), attempted suicide.

**3. Other mental and behaviour problems**

This is a global rating to include behavioural problems not described above. Do not include behaviour directed towards others (item 1), or self-injurious behaviour (item 2). Rate the most prominent behaviours present. Include: A. Behaviour destructive to property; B. Problems with personal behaviours e.g. spitting, smearing, eating rubbish, self-induced vomiting, continuous eating or drinking, hoarding rubbish, inappropriate sexual behaviour; C. Rocking, stereotyped and ritualistic behaviour; D. Anxiety, phobias, obsessive, compulsive behaviour; E. Others.

0	No behavioural problem(s) during the period rated.
1 Mild	Occasional behavioural problem(s) that are out of the ordinary or socially unacceptable.
2 Mod	Behaviour(s) sufficiently frequent and severe to produce some disruption of and impact on own or other people's functioning.
3 Sev	Behaviour(s) sufficiently frequent and severe to produce significant disruption and impact on own or other people's functioning, requiring close monitoring for prevention.
4 V sev	Constant, severe problem behaviour(s) producing major disruption of and impact on functioning requiring constant supervision or physical intervention for prevention.

A   
B   
C   
D   
E

**4. Attention and concentration**

Include problems that may arise from underactivity, overactive behaviour, restlessness, fidgeting or inattention, hyperkinesia or arising from drugs.

0	Can sustain attention and concentration in activities/programmes independently during the rating period.
1 Mild	Can sustain attention and concentration in activities/programmes with occasional prompting and supervision.
2 Mod	Can sustain attention and concentration in activities/programmes with regular prompting and supervision.
3 Sev	Can sustain attention and concentration in activities/programmes briefly with constant prompting and assistance.
4 V sev	Cannot participate in activities and programmes even with constant supervision and assistance.

**5. Memory and orientation**

Include recent memory loss and worsening of orientation for time, place and person in addition to previous difficulties.

0	Can reliably find their way around familiar surroundings and relate to familiar people.
1 Mild	Mostly familiar with environment/person but some difficulty in finding their way.
2 Mod	Can relate to environment/person with occasional support and supervision.
3 Sev	Can relate to environment/person with regular support and supervision.
4 V sev	Not apparently able to recognise or relate to people and environments.

**6. Communication (problems in understanding)**

Include all types of responses to verbal, gestural and signed communication, supported if necessary with environmental cues.

0	Able to understand first language (mother tongue) about personal needs and experience during rating period.
1 Mild	Able to understand groups of words / short phrases / signed communications about most needs.
2 Mod	Able to understand some signs, gestures and single words about basic needs and simple commands (food, drink, come, go, sit, etc.).
3 Sev	Able to acknowledge and recognise attempts at communication with little specific understanding (pattern of response is not determined by nature of communication).
4 V sev	No apparent understanding or response to communication.

## Appendix D: Service User Semi-Structured Interview Schedule

### Day Service Evaluation 2010-2011 Service User Semi Structured Interview

#### **Demographics:**

##### **Show Green Card**

1. The building is:

---

2. The tools [gardening tools etc (SG and K), computers, games, books etc (CL)]  
at [Scheme name] are:

---

3. The outside areas at [Scheme name (SG and K only)] are:

---

4. Can you tell me why you rated:

The building [as...]:

.....  
.....

The tools [as...]:

.....  
.....

The outside area [as...]:

.....  
.....

#### **About the Scheme:**

##### **Show Blue Card**

5. Staff like to know what I think about things at [Scheme name]: [i.e. how to do  
jobs, what they like or do not like etc]

---

6. I enjoy coming to [Scheme name]:

---

7. Staff tell me how well I am doing at [Scheme name]:

---

8. I choose what I want to do at [Scheme name]:

---

Can you tell me about this?

.....  
.....

##### **Show Green Card**

9. The help and support I get from staff is: \_\_\_\_\_

10. Staff’s willingness [agreement/want/desire] to listen to me is: \_\_\_\_\_

11. What staff know about my needs is: \_\_\_\_\_

12. How staff answer my needs is: \_\_\_\_\_

13. Have you made any complaints to [Scheme name] in the last year? .....

[If yes] Were you happy with how your complaint was seen to?

.....  
.....

**Staff – Service User Relationship:**

**Show Green Card**

14. Staff and I get along: \_\_\_\_\_

15. Can you tell me about how you get along with staff at [Scheme name]:  
.....  
.....

**Service User Progress:**

16. Do you have a support plan? [excluding K] Yes      No  
**(go to Q.17)**    **(go to Q.19)**

17. Do you know what it says? Yes      No  
**(go to Q.19)**    **(go to Q.18)**

18. Would you like to know what it says? Yes      No

**Show Greed Card**

19. My progress at [Scheme name] is:  
.....  
.....

20. Can you tell me about this?  
.....  
.....  
\_\_\_\_\_

21. What helps you to do well at [Scheme name]?

.....  
.....  
.....  
.....

22. What stops you from doing well at [Scheme name]?

.....  
.....  
.....  
.....

**Show Green Card**

23. I think that [Scheme name] is:

\_\_\_\_\_

24. Why do you think this?

.....  
.....

**Your Thoughts:**

**Show Green Card**

25. The number of activities at [Scheme name] is:

\_\_\_\_\_

26. Can you tell me about this?

.....  
.....

27. Is there anything else that you would like to do at [Scheme name]?

\_\_\_\_\_

[If yes,] What other things would you like to do?

.....  
.....

28. Is there anything else you would like to tell me?

.....  
.....

**Thank you for taking the time to talk to me today.**

# Appendix E: Service User Representative Semi-Structured Interview Schedule

**Day Service Evaluation 2010-2011**  
**Service User Representative Semi-Structured Interview**

**Demographics:**

1. What is your relationship to the service user?  
 .....

2. What do you see as the aim/purpose of the scheme?  
 .....  
 .....  
 .....

3. Using the response options on this green card what is your opinion of the following areas of [scheme name]? (This question does not apply to Castle Lane SU Reps)

<i>* Interviewer to write D/K beside question if interviewee indicates they don't know.</i>	<b>Very poor</b>	<b>Poor</b>	<b>Neither poor nor good</b>	<b>Good</b>	<b>Very good</b>
The building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The grounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Can you tell me why you rated:

The building  
 [as...]:.....  
 .....

The equipment  
 [as...]:.....  
 .....

The grounds  
 [as...]:.....  
 .....



**About the Scheme:**

5. Please tell me how far you agree or disagree with the statements I am about to read using the response options on this blue card.

<i>* Interviewer to write D/K beside question if interviewee indicates they don't know.</i>	<b>Strongly agree</b>	<b>Agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree</b>	<b>Strongly disagree</b>
Staff at [scheme name] value my views and opinions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[Scheme name] does not provide information when I request it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[Scheme name] is progressive and forward thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Strongly agree</b>	<b>Agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree</b>	<b>Strongly disagree</b>
I do not receive feedback from the scheme about [SUs name] progress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information I receive is inadequate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have a good knowledge of what happens at [Scheme name]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Using the green card can you tell me how you would rate the staff you have contact with in the following areas:

<i>* Interviewer to write D/K beside question if interviewee indicates they don't know.</i>	<b>Very poor</b>	<b>Poor</b>	<b>Neither poor nor good</b>	<b>Good</b>	<b>Very good</b>
Helpfulness/Supportiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to listen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of [SUs name] needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsiveness to [SUs name] needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Can you tell me about your relationship and dealings with [Scheme name]

.....

.....

.....

.....  
.....  
.....

8. Have you made any complaints to [Scheme name] in the last year? .....

If yes, were they resolved to your satisfaction?

If no, why was their resolution not satisfactory?

.....  
.....  
.....

**Staff – Service User Relationship:** The next questions ask what you think of the relationship between the [SU name] and the staff at [Scheme name].

9. In general, how would you rate [SUs name] relationship with the staff at [Scheme name] using the categories on the green card?

**Very poor**

**Poor**

**Neither poor  
nor good**

**Good**

**Very good**

Please briefly explain this rating:

.....  
.....  
.....

**Service User Progress:**

10. Do you know if [SU name] has a support plan?

Yes



No

11. Do you know what this support plan says?

Yes

No

Would you like to know what this support plan says?

12. Yes

No

13. How would you rate [SUs name] progress at [Scheme name] using the categories on the green card?

<b>Very poor</b>	<b>Poor</b>	<b>Neither poor nor good</b>	<b>Good</b>	<b>Very good</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please briefly explain this rating:

.....

.....

.....

14. Please briefly state what you believe helps [SUs name] progress at [Scheme name]:

.....

.....

.....

15. Please briefly state what you believe hinders [SUs name] progress at [Scheme name]:

.....

.....

.....

16. Using the green card how would you rate the quality of the services provided at [Scheme name]?

<b>Very poor</b>	<b>Poor</b>	<b>Neither poor nor good</b>	<b>Good</b>	<b>Very good</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please briefly explain this rating:

.....

.....

.....

17. Has [Scheme name] made an impact on [SUs name] quality of life? .....

[If yes] Can you explain how? [i.e. positive, negative]

.....

.....

.....

**Your Thoughts:**

18. What do you think about the staffing levels at [Scheme name]?

.....  
.....  
.....

19. If the Government gave you or the service user money to purchase services, would you choose ...?

Yes

No

Please explain this.

.....  
.....  
.....

20. Would you recommend ... to others?

Yes, definitely

Not sure

Definitely not

Don't know

21. Do you feel staff at [Scheme name] have sufficient training to work with [SU name]?

Yes

No



22. What other training do you believe they would benefit from?

.....

.....

.....

23. Using the green card to respond what is your opinion of the range of activities provided by/at [Scheme name]?

**Very poor**

**Poor**

**Neither poor  
nor good**

**Good**

**Very good**

Please briefly explain this rating:

.....

.....

.....

24. Are there any new or other activities that you would like to see provided at [Scheme name]?

Yes



No

25. What new or other activities would you like to see provided?

.....

.....

.....

26. What changes, both positive or negative, have you noticed in [SU name] since he/she started at [Scheme name]?

.....

.....

.....

.....  
.....  
.....

27. Were any of these changes unexpected or surprising? If so, why?

.....  
.....  
.....  
.....  
.....  
.....

28. Are there any other comments that you would like to make?

.....  
.....  
.....  
.....  
.....  
.....

**Thank you for taking the time to complete this survey**

**Appendix F: Staff Survey**  
**Day Service Evaluation 2010-2011**  
**Staff Questionnaire**

As part of the day services evaluation of the Secret Garden, Castle Lane and Kilcreggan Farm we ask that you complete this questionnaire and return in the prepaid envelope provided.

All responses will be confidential and if any of the information is reported it will be done so anonymously. Completion of the questionnaire is voluntary and choosing not to complete it will not affect your position in any way.

The return date for completed questionnaires is **Monday 19 July 2010**.

If you have any questions please do not hesitate to contact the Research Officer, Jo Wilson by phone: 028 90727 195 or email: [joannewilson@praxiscare.org.uk](mailto:joannewilson@praxiscare.org.uk).



**Day Service Evaluation 2010-2011  
Staff Questionnaire**

**Demographics:**

1. What is your job title? .....

2. How long have you worked at your scheme? ..... (to the nearest year)

3. What do you see as the aim/purpose of the scheme?

.....  
 .....  
 .....

4. What is your opinion of the following areas at your scheme? (This question does not apply to Castle Lane staff)

	<b>Very poor</b>	<b>Poor</b>	<b>Neither poor nor good</b>	<b>Good</b>	<b>Very good</b>
a. The building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The grounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please briefly explain these ratings:

Building:.....  
 .....

Equipment:.....  
 .....

Grounds:.....  
 .....



**Day Service Evaluation 2010-2011  
Staff Questionnaire**

**Demographics:**

5. What is your job title? .....

6. How long have you worked at your scheme? ..... (to the nearest year)

7. What do you see as the aim/purpose of the scheme?  
.....  
.....  
.....

8. What is your opinion of the following areas at your scheme? (This question does not apply to Castle Lane staff)

	<b>Very poor</b>	<b>Poor</b>	<b>Neither poor nor good</b>	<b>Good</b>	<b>Very good</b>
d. The building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The grounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please briefly explain these ratings:

Building:.....  
.....

Equipment:.....  
.....

Grounds:.....  
.....

**General Questions:**

9. Please tick one box for each statement below to show how far you agree or disagree:

	<b>Strongly agree</b>	<b>Agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree</b>	<b>Strongly disagree</b>
n. I enjoy working at this scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Working here is stressful and tiring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. I like and respect my co-workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Strongly agree</b>	<b>Agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree</b>	<b>Strongly disagree</b>
q. Staff who are in a senior position do not value my views and opinions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. My views and opinions are valued by my co-workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Senior management do not communicate well with staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t. There is a sense of co-operation and teamwork between staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u. I am often bored with my job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. The scheme that I work in is progressive and forward thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
w. My job does not give me a feeling of personal achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x. I have regular supervision/feedback from my manager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
y. I belong to an effective team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
z. My job offers little or no opportunity to use my skills and ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Please briefly describe any difficulties you may have had in carrying out your job role:

.....

.....

.....

**Staff – Service User Relationship:** This section asks what you think of the relationship between staff and service users at your scheme.

7. In general, how would you rate your relationship with the service users at your scheme? (please tick one box only)

Very poor	Poor	Neither poor nor good	Good	Very good
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please briefly explain this rating:

.....

.....

.....

8. What type(s) of communication do you use to interact with service users? (please circle all that apply)

Verbal	Gestures	Sign language	Written
Visual (i.e. signs and symbols)	Other (please state).....		

9. What is your level of involvement with service users during your average work day?

None	Very Little	Moderate	A lot
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Please briefly describe how you support service users during a normal working day:

Morning to break:

.....

.....

.....

Break to lunch:

.....

.....

.....

Lunch to finish:

.....

.....

.....

**Service User Progress:**

11. Does your scheme employ Assessment and Planning/Support Plans for service users?

Yes



**If yes, go to Q.12.**

No

**If no go to Q13.**

12. Please describe the extent to which these are actively employed:

.....  
.....  
.....

13. In general, how would you rate the progress of service users at your scheme?

Very poor

Poor

Neither poor nor  
good

Good

Very good

Please briefly explain this rating:

.....  
.....  
.....

14. Please briefly state what you believe helps service users to progress at your scheme:

.....  
.....  
.....

15. Please briefly state what you believe hinders service user progress at your scheme:

.....  
.....  
.....

**Your Thoughts:**

16. Do you feel you have sufficient training to perform your role to the best of your ability?

Yes

**If yes, go to Q18.**

No

**If no go to Q17.**



17. What other training do you believe you would benefit from?

.....  
.....  
.....

18. What is your opinion of the range of activities provided by/at your scheme?

Very poor

Poor

Neither poor nor  
good

Good

Very good

Please briefly explain this rating:

.....  
.....  
.....

19. Are there any new or other activities that you would like to see provided at your scheme?

Yes



**If yes, go to Q.20.**

No

**If no go to  
Q21.**

20. What new or other activities would you like to see provided?

.....  
.....  
.....

21. Please describe briefly how you think your own working conditions might be improved upon:

.....  
.....  
.....

22. Please tell us about the most difficult aspects of your job:

.....  
.....  
.....

23. Please tell us about the most rewarding aspects of your job:

.....  
.....  
.....

**Please use this space for any additional comments that you would like to make:**

.....  
.....  
.....  
.....  
.....  
.....  
.....

**Thank you for taking the time to complete this survey**