



# AUTHORISATION SCHEME

## Standard Operating Procedures

Home Support Services  
Services for Older People - Community Operations

It should be noted that work is on-going within the HSE to streamline processes relating to Home Support Services (HSS) to ensure a greater standardisation where this is appropriate. Accordingly, procedures relating to Home Support may be amended, or added to, over time.

A joint programme of work between the Department of Health and the HSE is underway for the design and development of the new Statutory Home Support Scheme and Regulation, with the Department of Health leading out on the detailed process to determine the future model of service delivery in Ireland to reform how we provide Home Support to adults (over-18). HIQA are also developing for publication the National Standards for Homecare and Support Services.

All Home Care/HSS Providers will be subject to compliance with any relevant legislation enacted and associated regulations and standards. The outcome of this tender process and the arrangements and agreements arising are subject to any superseding legislation that may impact on HSS in Ireland, even where this arises within the planned timelines of this process and emerging Agreements.

In the event that there are other Regulatory changes which come into effect after the award of contracts (and which for example, affect some but not all Approved Providers) the HSE reserves the right to take the appropriate course of action at the relevant time which may include the re-tendering of services the subject matter of this tender process as the HSE considers necessary and appropriate having regard to all relevant circumstances prevailing at the time.

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## Introduction

This Standard Operating Procedure (SOP) is for use in relation to the operation of contracts awarded following the Home Support Tender 2023 process, the outcome of which led to the establishment of the Home Support Authorisation Scheme. Accordingly in this document, any references made to tender documents and/or process may be interpreted as also referring to the Authorisation Scheme documents and/or process.

The SOP is to be followed in the implementation of Service Arrangements, and has regard to the Authorisation Scheme Service Specifications, the Invitation(s) to Participate documentation, as well as the clarifications issued to all interested Providers during the tender process. The associated Tender 2023 documents are being circulated with the first issuing of this SOP.

The HSE has implemented an Authorisation Scheme (AS) for the supply of HSS. Under the AS system the rates for HSS are fixed for all Approved Providers. The choice of Approved Provider will be made by the client, the user of the service. Such a system will be more patient-centred and less onerous administratively. It also allows for the introduction of new Approved Providers who meet the minimum qualifications/service specifications during the lifetime of the Authorisation Scheme.

The HSE has appointed HSS Providers as Approved Providers under the Authorisation Scheme in each CHO. The list of Approved Providers will be issued as separate documents to each CHO and made available on the HSE website. This list will include the names of individual members of consortia, where applicable.

Approved Providers under these Arrangements are to be utilised for all new Home Support clients approved from date of commencement of these arrangements where the service cannot be provided by HSE directly employed staff.

The SOP is set out in three sections. All staff responsible for HSS must read and understand their responsibilities relating to all three sections.

**Section One:** Operational Procedures for the service with reference to the Authorisation Scheme Service Arrangements and National Guidelines & Procedures for the Standardised Implementation of the Home Support Service.

**Section Two:** Management and Monitoring of Service Arrangements (SAs). This is particularly relevant to managers and senior staff.

**Section Three:** Sets out the administration and data collection required in order to have oversight of the implementation of the SAs with Approved Providers and provide data for analysis in the context of the overall arrangements.

Reference to “Home Support Manager” in this document is to encompass all staff responsible for the HSS regardless of their actual title or grade. Where Home Support Manager is referred to, this will also include his/her nominated staff.

# Section One

## Operational Procedures

**Section One** should be used in conjunction with the *National Guidelines & Procedures for the Standardised Implementation of the Home Support Service (HSS Guidelines 2018)*

### Topics Covered

- 1.1 Client Application and Determination
- 1.2 Procedures for Allocation of all New Home Support Service (HSS) to Approved Providers
- 1.3 Operation of Arrangements
- 1.4 Thirty Minute Calls
- 1.5 Getting the HSS Started
- 1.6 Payments to Approved Providers
- 1.7 Withdrawal of Service
- 1.8 Change of Carer
- 1.9 Confirmation Service has been delivered to Client
- 1.10 Client Monitoring & Review and Complaints
- 1.11 Use of HSE Logo by Approved Providers

## 1.1 Client Application and Determination

The procedures for application, assessment, determination and review of HSS are set out in the National Guidelines & Procedures for the Standardised Implementation of the Home Support Service (HSS Guidelines).

### Home Support Tender 2023

The HSE invited tender submissions from interested parties for the provision of high quality, HSS for older people, where HSE directly employed staff are not available to deliver such services.

The HSS procured in this Tender incorporates;

1. Services previously tendered as Enhanced Homecare Services.
2. Traditional Home Help Services which have been part of the single funded HSS since 1st January 2018.
3. HSS provided through Intensive HCP/Complex Case home support funded arrangements.
4. Consumer Directed HSS.

The outcome of this tender process will apply to any new clients receiving a HSS allocated from the commencement of the new Agreement where HSE directly employed staff are not available to deliver the Service.

In the case where a client is in receipt of home support and is admitted to hospital, this client is considered an existing client when home support resumes on the client's discharge. Continuity of service is paramount so home support staff known to clients should be re-assigned when clients are discharged. Home Support staff may be assigned to alternative work on an interim basis, e.g. covering leave etc. Local arrangements will be required between the HSE and the Provider with regard to the re-assignment of home support staff when the client's discharge date is being planned. The Provider should remain in contact with the HSE to keep up to date on the client's status. If it is unlikely that the client will be discharged home, local arrangements may be made with the HSE with regard to the re-assignment of home support staff to another client.

In the case where a client is admitted to long-term residential care, this client is considered a new client if subsequently discharged and home support is resumed.

## 1.2 Procedures for Allocation of all New HSS to Approved Providers

In the first instance, when putting a new HSS in place, the capacity of the HSE within its own directly employed staff should be used where available. Only in situations where there is insufficient capacity within the HSE service to meet the needs of clients, should external Providers be used and, in that case, only Approved Providers on the 2023 list are to be utilised from date of commencement 14 August 2023.

### 1.2.1 Client in receipt of Grant Funded HSS from External Provider and is approved for additional HSS

Each new HSS allocated to an Approved Provider will incorporate any home support hours delivered by grant funded Providers. The HSE will advise the client that his/her existing grant funded service will become part of the new HSS and the entire service will be delivered by the Approved Provider of the client's choice. (Ref: Standard Letter in the HSS Guidelines)

A notification will issue from the CHO to existing grant funded Providers (non-HSE direct) advising that from date of commencement all new HSS clients will receive their HSS through the Tender 2023 arrangements.

In relation to each individual new client, a notification will issue to the grant funded Provider setting out;

- The date the existing grant funded service delivery arrangement will cease.
- That funding for these hours will cease from that date and therefore cannot be re-allocated to a new client.
- That the SA with the grant funded Provider will be adjusted accordingly (Standard Letters Appendix 2 (a) & (b)).

See Section 1.2.2 regarding the calculation of adjustments to grant funding.

### 1.2.2 Adjustment of Grant Funding – extracted from Tender Document

No Approved Provider shall use grant funding to discharge the cost of services performed under the Service Arrangements. In respect of any Provider providing services under the Tender 2023 Service Arrangements, which is currently in receipt of grant funding for providing those services, it is intended that the grant funding for that Approved Provider shall be reduced by the amounts invoiced by them to the HSE for the provision of services under the Service Arrangements.

**Example:**

*An Approved Provider is delivering five (5) HSS hours from grant funding, and from a given date will also deliver ten (10) additional home support hours by virtue of being an Approved Provider, then all fifteen (15) hours performed by that Approved Provider for that individual client (in respect of both grant funded Home Support and additional Home Support hours) will be paid for on an invoiced basis at the Authorisation rate. Grant funding for the relevant Services will, in this case, be reduced based on the five (5) HSS hours.*

- Where an existing HSS client receiving services funded through grant funded arrangements is approved for additional HSS, both the existing service and the additional HSS must be provided by an Approved Provider.
- If the existing Provider is a grant funded Provider and is an Approved Provider in Tender 2023 and is chosen by the client/allocated the service, the grant funding for that Provider will be reduced.

- If the existing Provider is a grant funded Provider & is not allocated the service (not chosen/not allocated the Service/not an Approved Provider) then the grant funding is reduced having regard to the existing hours & the grant funding rate per hour that applies to that grant aided Provider.
- If the client insists, they can stay with an existing grant funded Provider but can do so only for existing hours (i.e. hours in place on commencement date of these arrangements) in which case the grant funding will not be impacted until client ceases or alternative arrangements are made.
- When grant funded clients cease, the grant funding will be reduced having regard to the existing hours & the grant funding rate per hour that applies to that grant aided Provider.
- Grant funding for the relevant services, will be reduced in each case from grant funding pro-rata in the year the arrangement is being adjusted, and full year cost in subsequent years. Appendix 3(a) sets out a number of examples.
- Copies of correspondence and related documentation to be retained by the HSS Manager to confirm that the process was followed.
- Each CHO will record all of the relevant data in the required format to ensure existing arrangements are ceased and the associated funding becomes available to support the HSS (See Appendix 3(b)).

### 1.2.3 Approved Provider to deliver entire HSS

An Approved Provider cannot choose to deliver a portion of a HSS (e.g. a HSS consisting of a 7 day service – the Provider cannot accept the weekdays and refuse to deliver the weekend service).

If the Provider cannot deliver the full home support requirement offered by the HSE (excluding HSE direct), the HSS will be offered to an alternative Approved Provider.

In exceptional circumstances, if no individual Approved Provider can deliver the entire HSS, then consideration can be given to allocating the HSS to a number of Approved Providers having regard to the client's expressed preferences.

## 1.3 Operation of Arrangements

The process for the award of HSS under the AS will be as follows:

**1.3.1** The HSE assesses and approves hours (or monetary value and indicative hours for Consumer Directed Home Support (CDHS)), service requirements, etc., having regard to client's assessed need and available resources in the area.

**1.3.2.** The HSE will provide a list of Approved Providers to the client and the client selects their preferred Provider(s) (Appendix 4(a) – Information on Choosing a Home Support



Approved Provider & Client Choice Form). The list of Approved Providers is presented in random order.

**1.3.3** Where CDHS approach is approved, the client will contact his/her chosen Provider from the list of Approved Providers to arrange services in line with CDHS approach determined by the HSE.

**1.3.4** Where CDHS approach is not applicable, the following approach will apply:

- a) If the client has chosen a specific Approved Provider, an email will issue to that Approved Provider and provided that Approved Provider responds within the timeframe contained in the email, with a named home support staff member that Approved Provider shall be awarded the services required by the client.
- b) If the client chooses more than one Approved Provider, then an email will issue to all of those Approved Providers identified by the client. The first Approved Provider to respond to the email within the HSE timeline, confirming it is in a position to provide the services, and identifying a named home support staff member, shall be awarded the contract for services to the client.
- c) If the client has not chosen an Approved Provider or the client's selected Provider cannot deliver the service, then the HSE will email all Approved Providers, and provided that an Approved Provider responds within the timeframe contained in the email, with a named home support staff member, that Approved Provider shall be awarded the contract for service to the client. Such Approved Provider shall be paid based on the 2023 Authorisation Rate.

**1.3.5** If the above process does not fulfil the requirement, the HSE will reserve the right to examine what alternative options are available to deliver the support required by the client including clustering of clients in geographical areas. An approach to clustering will be developed if and when required.

**Important**

*The 2023 Authorisation Scheme Rates should not be exceeded in any circumstances.*

**Important**

*It is recommended that Each CHO would arrange a standard time (or times) each day (e.g. 11am and/or 2pm) when emails requesting HSS will issue to Approved Providers. This will help to ensure greater levels of responses from Providers. In general, response times will be determined by HSE Service Managers on the basis of the individual case. Response times will not normally exceed and will generally be less than 24 hours. The email to the Approved Providers (Sample at Appendix 5) offering the HSE service requirement must supply adequate information on duties required in each case.*

**1.3.6** Copies of all emails and responses received should be retained as back up to decisions made regarding allocation of work to Providers and as evidence that offers have been issued and refused, or in the case of non-response, that this is noted on the

Provider's record. Each CHO will need to have in place a system for monitoring refusals and reasons for same so that appropriate monitoring of Service Arrangements and KPIs can be undertaken.

**1.3.7** Acceptance of HSE offers of work must include a named home support staff member. If a change is required following finalisation of the care plan, this can be accommodated.

**1.3.8** HSE Staff must always presume the relevant person has decision making capacity, Where a person's decision-making capacity is in question, all HSE staff must act in accordance with the Guiding Principles of the Assisted Decision-Making (Capacity) Act 2015. Any action taken must be taken in a manner that:

- Minimises the restriction of the person's rights and freedom of action.
- Has regard to the need to respect the rights of the person to his or her dignity, bodily integrity, privacy, autonomy, and control over his or her financial affairs and property.
- Be proportionate to the significance and urgency of the situation.
- Be as limited in duration as is possible in the circumstances.
- Permit, encourage and facilitate the person to participate in the decision.
- Give effect, in so far as practicable, to the past and present will and preferences of the person, if these are reasonably ascertainable.
- Take into account the beliefs and values of the person.
- Take into account any other factors which the person likely wants considered, unless not appropriate or practicable consider the views of those named by the person to be consulted and any decision supporters.
- Act always in good faith and for the benefit of the person.

**1.3.9** The CHO is to decide the most efficient point at which the client should be asked to express choice but it is recommended that this be at the time of application. The full list of Approved Providers is published on the HSE website for the public to view.

**1.3.10** The client will be advised that where the total allocation of the HSS cannot be delivered by HSE employed staff, those hours that cannot be delivered by HSE staff will be offered to the client's choice of Approved Provider.

**1.3.11** A request by an existing HSS client to change Providers is to be dealt with in line with the client choice procedures and utilising the 2023 Approved Provider list.

## **1.4 Thirty Minute Calls**

30 minute calls may be allocated where it represents an appropriate input to the client's needs.

The use of half hour calls for new clients will be managed as follows:

- Limit the extent of half hour calls being approved for HSS under 2023.

- 30 minute calls to be limited to 25% of the overall total of calls (under Tender 2023 and under previous Tender Arrangements) per Approved Provider in the CHO. See calculation below.
- If the 25% limit is reached, an Approved Provider may accept additional 30 minute calls at the approved rate or may refuse same without penalty for such refusals. The work can be offered to the next Approved Provider of client's choice.
- Each CHO must have a system in place to monitor the allocation of 30 minute calls to enable HSS managers to have full information on uptake of 30 minute calls for that CHO to confirm compliance with 25% limit per Provider per CHO. Calculation of the 25% limit will be as follows:
  - **Denominator:** Number of clients who are in receipt of Home Support on last day of reporting period
  - **Numerator:** Number of Home Support clients who are in receipt of 30 minute calls on last day of the reporting period
  - **Calculation:** Numerator/Denominator x 100 =Target of 25% or less.

## 1.5 Getting the HSS Started

Once the HSS is organised, the HSS manager will;

- Confirm in writing, and if urgent by phone, to the client the name of the Approved Provider who has accepted the work, and the HSS that will be delivered by this Provider.
- Advise client that the Provider will be in contact to arrange risk assessment of the home before HSS can commence and to provide name(s) of home support staff member(s) assigned.
- Clients must have met their home support staff member in advance of support commencing.
- Record the details of the HSS arrangement in the client's file and in data collection templates.
- Arrange for any existing grant funded service provision by non-HSE direct Providers to cease and funding to be ceased for remainder of the current year and full year costs thereafter (See Section 1.2.2).

## 1.6 Payments to Approved Providers

HSS, provided by Approved Providers, will be paid for by the HSE on an invoiced basis having regard to the hourly/30 minute 2023 Authorisation Scheme Rates i.e. the Rates as set out in Schedule 3 and Schedule 6 of the Service Arrangement Part 2 (Service Schedules).

Tender 2023 Rates apply to new HSS clients approved and to additional hours approved for existing clients, and delivered by Approved Providers 2023, after the commencement date.

**Important**

*Existing HSS pre-Tender 2023 rates under previous tender arrangements for Approved Providers will move to the Rates. If an existing client is approved for additional hours, which are delivered by an Approved Provider, the additional hours will be paid at the Rates.*

Approved Providers rates for existing **non-tendered** business will move to the Rates on the 14<sup>th</sup> of August, 2023.

Existing Home Support clients in receipt of a service from a Provider who has not been appointed to the Authorisation Scheme, may continue to receive the service from the existing Provider at the rates set out in those previous arrangements.

**Consumer Directed Home Support**

The hourly rate for allocation of weekly monetary value to CDHS approved hours is the Monday to Saturday Authorisation Scheme core hourly Rate of €31.00 as and from the commencement date. In relation to new Consumer Directed Home Support clients, the HSE will be invoiced by the Provider showing the number of hours delivered as certified by the client, the Authorisation Scheme Rate and the total amount being billed for the billing period. Providers may charge less than the Authorisation Rate but may not charge more. The maximum payable in all cases will be the amount approved in each case by the HSE.

In respect of existing CDHS clients, the Authorisation Scheme core hourly Rate (€31.00) will apply from the commencement date i.e. 14<sup>th</sup> of August, 2023 where services are being delivered by an Approved Provider. If an existing client is approved for additional hours, which are delivered by an Approved Provider, the additional hours will be paid at the core hourly Monday to Saturday Rate.

Existing CDHS clients in receipt of a service from a Provider who has not been appointed to the Authorisation Scheme, may continue to receive the service from the existing Provider at the rates set out in those previous arrangements.

**Payment Terms**

All relevant remuneration, PAYE and PRSI deductions, insurances and payment of all statutory contributions in respect of earnings are payable by the tenderer on behalf of their staff. The tenderer must honour the 2023 Authorisation Rates for the duration of the contract, with the exception of any legally binding adjustments in statutory payments.

*(Any such adjustments that may arise & be approved will be notified to the CHOs by the National Office Services for Older People)*

No additional charges for premia / overtime will be allowed.

No premium will be paid for “personal or perceived higher skilled tasks”. Carers\* must be capable of providing generic type home support and personal support at the required standards.

The HSE will not pay any additional fees outside of the Rates, with the exception of any travel payments that may be agreed on an individual basis.

### 30 Minute Calls

For call outs, the 30 minute fixed rate will apply. Anything over 30 minutes will be rounded up to the nearest half hour or hour, in which case the hourly rate will apply. Any visits over an hour will be rounded up to the nearest half an hour, and charged on a pro rata basis to the hourly rate.

In the event that a client requires the assistance of two or more home support staff members for a 30 minute call (Double-Up Call), those calls will be paid at the 30 minute Rate, in respect of the number of care staff present for that call.

For successful Providers to the Authorisation Scheme, 30 minute calls, which exist prior to Tender 2023, shall move to the appropriate Authorisation Scheme Rate.

If a further 30 minute call is required, after the commencement date of the Authorisation Scheme, on a different day or requiring a separate visit to the client’s home on the same day, then the Tender 2023 Rate for that 30 minute call will apply in respect to the additional 30 minute call.

If the client requires an hour of service which replaces the existing 30 minute call (for either pre-Tender 2023 or post Tender 2023) then this is no longer a 30 minute call and will be paid at the appropriate rate per hour of service under Tender 2023. The HSE will not pay two 30 minute rates for a single hour of service.

\*The word Carer in this context refers to the home support staff member

### Management of Payments to Providers not appointed to the Authorisation Scheme

Providers who have not signed up to the Authorisation Scheme or were unsuccessful will continue with the relevant pre-Tender 2023 existing rate(s) in respect of existing clients.

Where existing HSS clients in receipt of a service from a Provider who did not participate or was unsuccessful in Tender 2023 is allocated additional hours after the commencement date of these Arrangement (14th August, 2023) and the client wishes to remain with this Provider, the additional service may be provided by the existing Provider at a rate that does not exceed the Authorisation Scheme applicable Rate.

#### 1.6.1 Cancellation of Calls

The HSE will not pay cancellation fees where any Home Support Service is cancelled with eight (8) hours prior notice. In the event that the HSE or the client does not provide eight (8) hours' notice of cancellation to the Provider and the Provider is not then required, the HSE will pay the Provider in respect of 50% of the charge applicable to the cancelled call only and no further charge shall be payable to the Provider.

If a client refuses, cancels, suspends or cuts short the delivery of home support before the allocated time has elapsed, then the home support staff member must advise the Provider, who will advise the HSE, so as the HSE is aware of the situation and can consider appropriate action. It is important that Providers have in place arrangements to receive such reports in order to consider reasons for same and what action is required on the part of the Provider to protect the client's welfare and provide for their care needs. It is anticipated that in the vast majority of cases, a client will notify the Provider through the contact details issued to the client by the Provider.

#### 1.6.2 Travel

Guidance In relation to Travel (Mileage) is attached at Appendix 1.

#### 1.7 Withdrawal of Service

Approved Providers shall not withdraw services from a client without prior consultation with the appropriate HSE staff. If HSS are being withdrawn the Approved Provider shall provide at least three (3) months' written notice to the HSE in advance of such service withdrawal. This written notice must include the Approved Provider's proposals as to how it will manage the hand back of the Home Support package to ensure continuity of Services and the least disruption to the client.

In the event of exceptional circumstances, such as incidences of criminal activity, anti-social behaviour, bullying and harassment of staff (including sexual harassment), decisions in relation to the withdrawal of service will be dealt with on a case by case basis in conjunction with the

local HSE Home Support Manager. All such incidents should, in the first instance, be reported to the relevant Home Support Manager.

### 1.8 Change of Carer

Approved Providers will give a commitment that, wherever possible, HSS will routinely be delivered by the same home support staff member(s); alternative staff members may provide services when the assigned staff member(s) is sick or on leave. In such cases, the Approved Provider will notify the client with regards to the change of new staff member(s) in an appropriate and timely manner.

### 1.9 Confirmation Service has been delivered to Client

The basic requirement is that the client or his/her representative should sign to confirm service delivery. If an alternative system is in use to the satisfaction of CHO management (and in compliance with HSE National Financial Regulations) then such arrangements may continue.

**Important**

*One hour of home support procured from an Approved Provider relates to the time spent with the client.*

If confirmation of service delivery presents as an issue then appropriate engagement should take place with the relevant CHO Home Support Manager.

### 1.10 Client Monitoring & Review and Complaints

In line with the HSS Guidelines, HSS will be subject to regular clinical review by the relevant HSE staff e.g. public health nurse and/or other relevant health care professional(s).

Each Provider is required to have clinical oversight arrangements in place to ensure;

- a) Guidance and oversight on personal care to ensure optimum client safety, dignity and welfare.
- b) Review of Home Support on a regular basis to ensure optimum standard of care and client satisfaction.

Providers also have confirmed they have in place mechanisms to deal with complaints and a procedure for referring complaints as appropriate to the HSE for follow up. The HSE policy for dealing with complaints is also available to clients.

Further details regarding monitoring arrangements are set out in Section 2 of this document.

### 1.11 Use of HSE Logo by Approved Providers

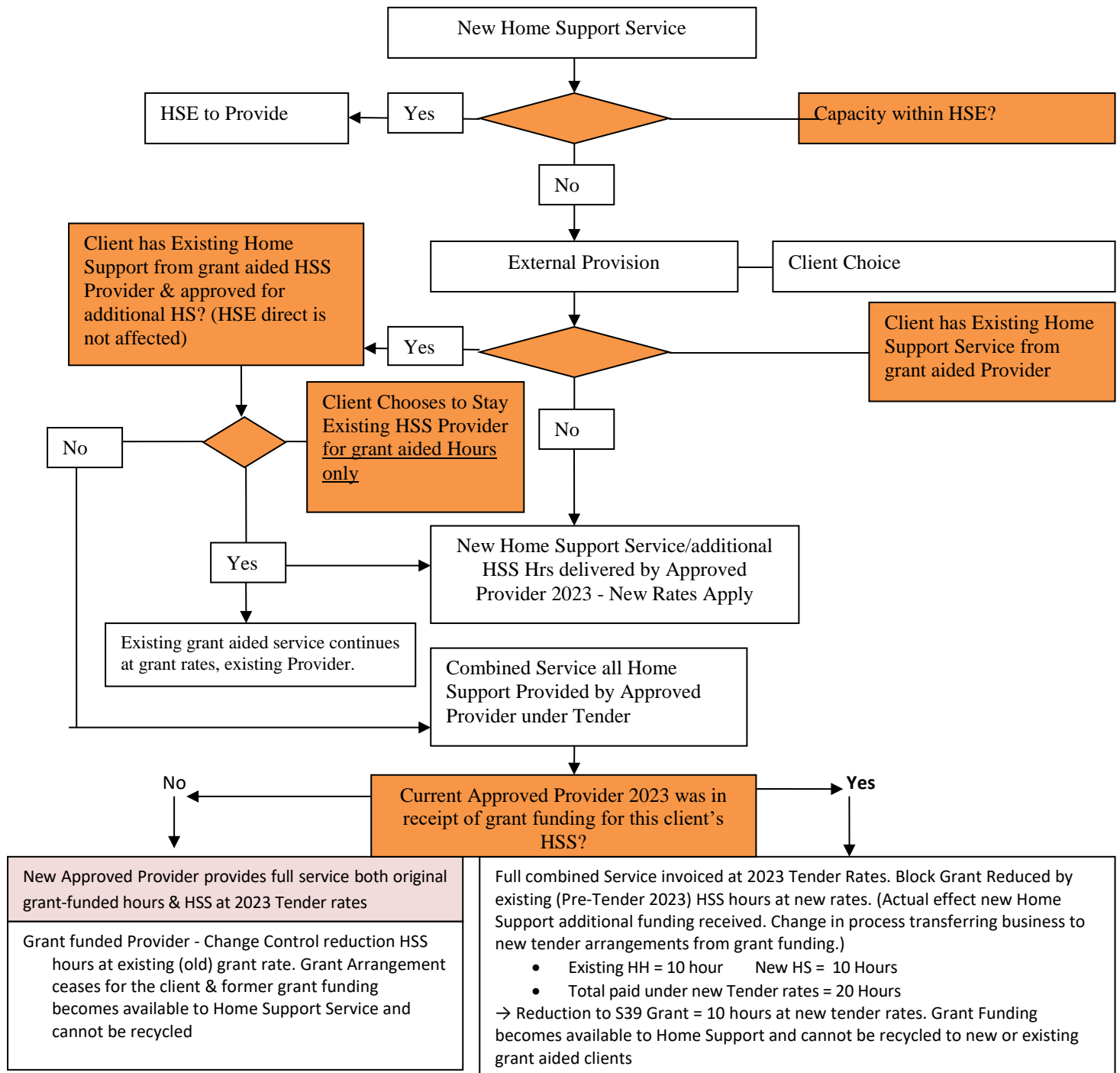
Approved Providers will be permitted to use a small HSE logo accompanied by the words “HSE Approved Home Support Provider 2023/2024”. HSE guidance on use of the logo is available on [www.hse.ie/branding](http://www.hse.ie/branding)



The following Flow Chart summarises key questions and processes relating to Tender 2023 arrangements:

## Home Support Tender 2023

**Relates to all new HSS clients approved following commencement of Tender 2023**  
**Existing Home Supports are not affected except where service is transferring from grant aided Providers to Approved Providers**



**Key:** HSS – Home Support Service    **Orange Shading:** Key Question/Decision



# Section Two:

## Management & Monitoring of Service Arrangements

**Section Two** should be used in conjunction with the Service Arrangement signed by  
Provider and HSE

### Topics Covered

- 2.1 HSE National Governance Framework
- 2.2 Management & Monitoring of Approved HSS Providers
- 2.3 Key Performance Indicators – Home Support Tender
- 2.4 Audit

## 2.1 HSE National Governance Framework

The Home Support AS will be managed by the application of the HSE Governance Framework which will include National Standard Service Arrangements. As these are tendered services, all Providers will be managed by Service Arrangements (i.e. not Grant Aid Agreements).

## 2.2 Management & Monitoring of Approved HSS Providers

As of the date of publication of this SOP, the Service Arrangements are in the process of being finalised. The final agreed documents and processes relating to the Service Arrangements for Home Support will be issued by separate correspondence.

## 2.3 Key Performance Indicators – Home Support Tender

The HSE will operate **7 key performance indicators (KPIs)** in the management of the Service Arrangements. (Template - Appendix 6)

The KPIs have been developed with reference to the Quality Standards set out in the Tender 2023 Service Specification. Approved Providers will be required to complete a self-declaration on a quarterly basis and submit it to the HSS Manager/Head of Older Persons' Services. The HSE must consider the performance reported to ensure that it reflects the HSE experience (as determined from complaints received, GPS records if available from certain Providers, client confirmation of service delivery, spot checks, client reviews etc.), sign the declaration and file as part of its quality assurance system for monitoring over time.

No financial penalties in terms of a deduction from invoices will apply to under performance in relation to these KPIs. However, if performance remains unsatisfactory, the penalties provided for in the SA may be applied.

**The 7 KPIs are as follows:**

### **2.3.1 Training /Qualifications**

This KPI refers to the qualifications standard required by the HSE in relation to the Home Support Worker providing HSS to HSE clients and has two parts.

**(a) New Entrants to Home Care Industry & Staff with < 1yr Experience:**

*All new entrants to the Home Care industry and those with less than one year of paid Home Care industry experience in the last 3 years must, **prior to working on this HSE Contract**, have as a minimum;*

- *Obtained at a minimum QQI Level 5 Modules - Care Skills and Care of the Older Person and certification in Infection Prevention & Control, **and**.*

**(b) Unqualified Existing Home Care Staff:**

*All staff with paid Home Care industry experience of more than 1 year in the last 3 years, who do not hold a recognised relevant qualification, **must prior to working on this HSE Contract**, have as a minimum;*

- *Committed to obtaining at a minimum QQI Level 5 Modules - Care Skills and Care of the Older Person within 11 months of first working on this HSE contract (irrespective of employer).*

**KPI Detail:** Providers must self-declare the % of their staff working on HSE contracts that have successfully completed the 2 modules - Care Skills & Care of the Older Person modules in the required timescales.

**(a) % of New Entrants to Home Care Industry & Staff with < 1yr experience** this quarter who have completed the two modules prior to commencement on HSE contract.

- **Denominator** – total number of new entrants employed for first time on HSE contract this quarter.
- **Numerator** – total number of new entrants this quarter who had obtained the required modules prior to commencement on HSE contract.
- **Calculation** – Numerator divided by Denominator multiplied by 100.
- **Target** 100% at any time.

**(b) % of Unqualified Existing Home Care Staff who are compliant with commitment** on commencement on HSE contract this quarter and have not exceeded time line of 11 months for obtaining the 2 required QQI modules.

- **Denominator** – total number of unqualified staff employed this quarter on HSE contract who committed to qualification requirement.
- **Numerator** – total number of unqualified staff employed on HSE contract remaining within the terms of their agreement i.e. have not exceeded time commitment (11 months) for qualification requirement.
- **Calculation** – Numerator divided by Denominator multiplied by 100.
- **Target** 100% at any time i.e. all unqualified staff members who committed to 2 modules within 11 months of commencement of employment remain compliant at the end of reporting quarter.

Provider's records must be available for data validation for 12 months following conclusion of the Contracts.

### **2.3.2 Carer Competency Assessment**

This KPI refers to the requirement that all new Home Support Staff providing HSS to HSE Service Users must have a fully completed National Carer Competency Assessment following his/her initial appointment to their role. The Approved Provider will carry out the Carer Competency Assessment on all new employees to satisfy the Approved Provider and Contracting Authority that the new staff member has the required and necessary skills to deliver care.

**KPI will be as follows:**

**(a) New Staff** - The HSE will require the Approved Provider to self-declare the % number of new staff who have completed the National Carer Competency Assessment. This helps the HSE to ensure that Approved Providers are recruiting appropriately skilled staff to deliver care as specified.

- **Denominator** – total number of staff newly recruited this quarter – each episode counted once.
- **Numerator** – total number of staff with completed Carer Competency Assessment (each episode counted only once) this quarter.
- **Calculation** - Numerator divided by Denominator multiplied by 100. This will provide % of “staff with completed Carer Competency Assessment” e.g. 0% so insert 100% on template to report % of all newly appointed staff with completed Carer Competency Assessment.
- **Target** 100% at any time i.e. all newly appointed staff with completed Carer Competency Assessment.

**(b) Existing Staff** - The HSE will require the Approved Provider to self-declare the % number of existing staff who have completed an updated National Carer Competency Assessment following each year of complete service. This helps the HSE to ensure that Approved Providers are recruiting appropriately skilled staff to deliver care as specified.

- **Denominator** – total number of existing staff who require an annual Carer Competency Assessment review this quarter – each episode counted once.
- **Numerator** – total number of existing staff with completed annual Carer Competency Assessment review (each episode counted only once) this quarter.
- **Calculation** - Numerator divided by Denominator multiplied by 100. This will provide % of “existing staff with completed annual Carer Competency Assessment review” e.g. 0% so insert 100% on template to report % of existing staff with completed annual Carer Competency Assessment review.
- **Target** 100% at any time i.e. all existing staff with completed annual Carer Competency Assessment review.

**2.3.3 Garda Vetting/Police Clearance**

This KPI refers to the requirement that all new Home Support Staff providing HSS to HSE Service Users have completed an up to date Garda Vetting and/or Police Clearance at the time of appointment. The Approved Provider will carry out Garda Vetting/Police Clearance on all new employees to satisfy the Approved Provider and Contracting Authority that such an appointment does not pose a risk to Service Users and employees.

**KPI will be as follows:**

The HSE will require the Approved Provider to self-declare the % number of staff who are in possession of an up to date Garda Vetting/Police Clearance. This helps the HSE to ensure that Approved Providers are recruiting appropriate staff to deliver care as specified.

- **Denominator** – total number of staff newly recruited this quarter – each episode counted once.
- **Numerator** – total number of staff with up to date Garda Vetting/Police Clearance (each episode counted only once) this quarter.
- **Calculation** - Numerator divided by Denominator multiplied by 100. This will provide % of “Staff with Garda Vetting/Police Clearance” e.g. 2% so insert 98% on template to report % of staff who have Garda Vetting/Police Clearance.
- **Target** 100% at any time i.e. all newly appointed staff in the quarter with up to date Garda Vetting/Police Clearance.

#### **2.3.4 Home Support Care Plans – Service Delivery in accordance with Plan – “No Show”**

This KPI is a quality assurance measure related to delivery of care in accordance with the clients Home Support Care Plan. The metric for the attendance KPI is ‘NO SHOW’ as follows & is an indicator of reliability and an important quality indicator of service provision:

*No show by Provider care staff - as per the quality standards the Provider must ensure that the Home Support hours accepted by the Provider are delivered as agreed at the specified time.*

#### **KPI will be as follows:**

The HSE will require the Provider to self-declare the number of episodes of staff not showing up for an episode of Home Support or showing up late. This helps the HSE to ensure that Providers are delivering care as specified.

- **Denominator** – total number of episodes of care this quarter – each episode counted once.
- **Numerator** – total number of episodes of staff not showing up for an episode of Home Support or showing up late (each episode counted only once) this quarter.
- **Calculation** - Numerator divided by Denominator multiplied by 100. This will provide % of “No Shows” e.g. 2% so insert 98% on template to report % of clients whose services are delivered on time.
- **Target** 100% at any time i.e. all episodes of care should be delivered as specified.

#### ***Important:***

*This KPI must be **accompanied with a statement** detailing missed calls to include number of incidences, number of associated hours of service and reasons for same.*

*“In the event of the agreed Home Support Care Plan – Schedule of Service not being delivered (e.g. missed calls, unforeseen absences) the Approved Provider must provide a statement of all missed calls and related reasons when submitting monthly invoices for payment.*

#### **2.3.5 Home Support Care Plans – Service Delivery in accordance with Plan – Timely acceptance of work and delivery to Plan**

This KPI refers to the Approved Provider’s acceptance or rejection of offers of work promptly, and to the delivery of the required Home Support in line with the client’s care plan following

acceptance of the offer of work. The metric is an indicator of responsiveness and an important quality indicator of service provision:

**KPI will be as follows:**

**(a) Response to Offer of Hours** – The HSE will require the Approved Provider to self-declare its timely responses to HSE requests and is based on the number of offers responded to (whether accepting or refusing the offer(s) of work is not relevant to this KPI) within the time scale determined by the HSE Service Manager. This helps the HSE to ensure that Approved Providers accept or reject offers of work in a timely manner so as to enable HSE to arrange care for its clients without undue delays. Time scale for response following request for Service is determined by the HSE Service Manager.

- **Denominator** – total number of offers of business this quarter – each client counted once.
- **Numerator** – total number of offers (each client counted only once), that were responded to (accepted or rejected) within HSE determined timeline this quarter.
- **Calculation** - Numerator divided by Denominator multiplied by 100.
- **Target** 100% at any time i.e. all offers of hours should be accepted or rejected within HSE requirements.

**(b) Response Time to deliver services when work has been accepted by Provider:**  
The HSE will require the Provider to self-declare its ability to deliver the service following acceptance of the work, and is based on the number of offers accepted by the Approved Provider that have been delivered within the time scale determined by the HSE Service Manager.

- **Denominator** – total number of offers of hours accepted this quarter – each client counted once.
- **Numerator** – total number of offers (each client counted only once) where service was delivered within HSE timeline this quarter.
- **Calculation** - Numerator divided by Denominator multiplied by 100.
- **Target** 100% at any time i.e. all offers of hours accepted should be delivered within HSE timelines.

### **2.3.6 Complaints Management**

These KPIs refers to quality assurance measures related to Approved Provider's Complaints Management policies and procedures. The metrics are an indicator of responsiveness and an important quality indicator of service provision and compliance with Tendered requirements.

**KPI will be as follows:**

The HSE will require the Provider to self-declare the number of episodes of complaints received this quarter, and the number of complaints resolved within 30 days, as set out in the HSE Your Service Your Say - The Management of Service User Feedback for Comments,

Compliments and Complaints (2017). This helps the HSE to ensure that Providers are delivering care as specified.

- **Denominator** – total number of complaints received this quarter – each episode counted once.
- **Numerator** – total number of complaints resolved within 30 days – each episode counted only once, this quarter.
- **Calculation** - Numerator divided by Denominator multiplied by 100. This will provide % of compliance, on template to report % of clients whose complaints were resolved on time.
- **Target** 100% at any time i.e. all complaints should be resolved on time. (Note the KPI target for HSE services is 75%).

**Important:**

*“Your Service Your Say - % of complaints where an Action Plan is identified as necessary, is in place and progressing”. The target is set at 65%.*

### **2.3.7 Quantum of Service Delivered**

This KPI refers to the Approved Provider’s overall capacity to deliver HSE offers of work. The metric is an indicator of responsiveness and an important quality indicator of service provision and compliance with tendered requirement to deliver capacity across the CHO.

**KPI will be as follows:**

The HSE will require the Approved Provider to self-declare its non-acceptance/non-response or refusals of services offered by the HSE, and is based on the number of offers not-accepted/not-responded to, or refused by the Approved Provider. The KPI only considers offers and refusals as outlined below.

**Important:**

*Records of refusals and non-responses will be also be retained by HSE to validate self-declarations and to support any decision relating to KPIs.*

**Number of offers of services refused include;**

- 1) Refusals of offers based on client choice, and
- 2) Offers not responded to (where the HSE has not advised that service has been allocated to an approved Provider i.e. No Provider responded in timeline), and
- 3) Where offer was accepted but not implemented by Approved Provider (due to Approved Provider issues i.e. excludes services not implemented for client or HSE reasons i.e. client deceased or admitted to long stay care).

*Each such refusal 1, 2 and 3, will count as 1 refusal.*

- **Denominator** – total number of offers (new and/or additional) this quarter defined relating to (1) (2) and (3) above.
- **Numerator** – total number of offers (new and/or additional) this quarter as defined above that were refused.

- **Calculation** - Numerator divided by Denominator multiplied by 100.
- **Target** less than 30% of offers in the above categories were refused in the reporting quarter.

### **Penalties**

The above Key Performance Indicators include penalties for non-performance in relation to these quality standards and apply to each Provider whether operating independently or as part of a consortium. These penalties also apply in relation to operation of the Service Arrangement and will escalate according to the severity of the non-compliance, and include, but not be limited to;

- 1) **Suspension** from the agreement for a defined period of time (one / three / six months) for new packages, and/or
- 2) **Removal** of a Provider's existing packages due to a Provider's non-responsiveness to requests for Services under the Authorisation Scheme, a Provider failing to meet response times, a Provider's failure to deliver the required Services and/or duty of care concerns.

#### ***Important:***

*Where an Approved Provider is part of a consortium, then any action imposed by the HSE will apply to all members of that consortium.*

Each CHO will have arrangements in place to;

- Receive KPI reports from Providers.
- Consider same.
- Raise issues with Approved Provider regarding performance and determine appropriate actions if any.
- Each CHO will submit KPI reports to the National Office Services for Older People (Operations) for collating overall national KPI data in relation to the Tender 2023 (Authorisation Scheme).

## **2.4 Audit**

In the absence of Legislation and Regulation of home support, the HSE must monitor Approved Providers and other external Providers of HSE funded home support. By auditing once a year (or more often if required as a priority), undertaking regular client reviews and undertaking regular operational meetings with each individual Provider as outlined above, the CHO can have oversight of the service delivered to clients.

Each CHO should have at least one Home Support Audit Team to monitor the Approved Providers through an onsite audit at least once a year or more often if required. It is recommended that, as well as Approved Providers, the audit should also over time extend to all other home support Providers that operated under previous tender frameworks and/or local Arrangements.



# Section Three:

## Data

**Section Three:** *Should be used in conjunction with the National Guidelines & Procedures for the Standardised Implementation of the Home Support Service, the data requirements in relation to the National Service Plan and National Divisional Operational Plan for Services for Older People, as well as the Service Arrangement*

### Topics Covered:

3.1 HSS Data

3.2 Home Support Tender 2023 (Authorisation Scheme) - Summary Monthly Return

### 3.1 HSS Data

**Important:**

*The HSE must ensure that data collected is relevant and provides accountability for resources and services delivered to the client.*

This section sets out the requirements for each CHO in relation to data collection, collation, monitoring and required actions specifically associated with:-

- Key Performance Indicators referred to in Section 2.
- Monthly Home Support Dataset routed to BIU.
- Monthly NSP Tracker Reporting to the National Home Support Office.

It is acknowledged that there is a variety of systems in operation for recording HSS activity. In the absence of a national IT system it is imperative that, at a minimum, the following fields are included within the CHO's core Home Support Data Recording System. This to ensure that the CHO can record and report on the Approved Provider's activity to ensure accurate payment of invoices at the appropriate Rates for the Authorisation Scheme and the management of payments to Providers not appointed to the Authorisation Scheme.

Each CHO's Head of Service for Older Persons Services will need to ensure that systems are in place that will deliver the required data. The required information includes:

- 1) **Client Details** – Ensure that the following information is easily identifiable from your core HSS Data Recording System, as you will need it to complete the monthly reports:
  - a) Personal details of the HSS Clients who were approved under the 2023 Tender process, including name, address, DOB, start date, finish date, day/night hours approved, Rates applicable for invoicing (This will need to encompass services delivered under pre-Tender 2023/local arrangements where relevant).
  - b) Provider(s) detail for each client.
  - c) Number of clients whose HSS service ceased in any given month and year to date.
  - d) Number of new clients that were approved in any given month and year to date.
  - e) Number of clients who have benefited from a HSS under Tender 2023 year to date (the sum of active clients on the first day of January and number of new clients year to date).
  - f) Number of active clients on last day of month.
  - g) Number of clients approved for CDHS each month.
  - h) Number of clients availing of CDHS at month end (Active on last day of the month).

- 2) **Home Support Tender Rates** - Ensure system differentiates between clients in receipt of HSS relating to the different arrangements under which they have been approved so as to ensure that correct rates are paid in respect of each individual HSS.
- 3) **Approved Provider Selection Mechanism**
  - a) Client choice.
  - b) Random selection as set out in section 1 of these procedures.
- 4) **Client Reviews** – Date of most recent review and next scheduled review.

**Important:**

*Additional specific reporting requirement associated with Tender 2023 Authorisation Scheme will be communicated to the CHO's in due course.*

Records will also need to be maintained in a manner that will demonstrate the SA and Tender arrangements generally, were fairly and consistently implemented. Records should therefore be maintained in a manner that the following can be obtained as required for SA monitoring:

- List of staff working on HSE contracts including, Garda Vetting, qualifications, confirmation of vulnerable adult training, competency assessment and training plan, together with any validation of these lists undertaken by the CHO.
- Number & weekly value of HSS offered to and refused by each Provider and the reason for refusal.
- Number & weekly value of each HSS accepted and implemented.
- Number & weekly value of each HSS accepted and not subsequently implemented & reason for same.
- Numbers approved for CDHS approach and any issues arising, including with Providers, in relation to same.
- Data on use of thirty minute calls to comply with agreed limits.
- Data on volume and breakdown of core and non-core hours.
- KPI data.
- Number of Client Reviews completed within agreed timeframes.
- Number of Approved Provider Audits completed & outcomes.
- Communications record e.g. email offer of work form on file, response by Approved Provider, client request to remain with grant funded Provider for pre-Tender 2023 home support hours, etc.
- Detailed data on each client in receipt of grant funded services as adjustments will be required on an on-going basis to grant funded Service Arrangements to take account of the Tender (as set out in Section 1).

The information will need to be available to the Chief Officer, Head of Older Persons' Services and the National Office Services for Older People (Operations) on request.

### **3.2 Home Support Tender 2023 (Authorisation Scheme) - Summary Monthly Return (*Appendix 8*)**

The purpose of this template is to monitor;

- a) How the Provider was chosen e.g., client choice or using the random selection approach set out in Section 1.
- b) Number of clients in receipt of HSS under the Tender 2023 (Authorisation Scheme) arrangements.
- c) New clients per month.
- d) Total number of hours provided per month under Tender 2023 (Authorisation Scheme).
- e) Total approved costs per month under Tender 2023 (Authorisation Scheme).

This report should be submitted to the Head of Older Persons' Services by each HSS Manager within 5 working days of the end of each month. The Head of Older Persons' Services should submit same to the Chief Officer and National Office Services for Older People (Operations) as required.

# Appendices

## Appendix 1: Travel Costs (Mileage)

### **Important:**

- *New HCPs approved from 1st September 2016*
- *National Guidance effective from 30th November 2016*

### **1. Context:**

The payment of travel costs (mileage) may be considered in relation to Home Support Package (HSP) approved after 1st September 2016 where;

- It is considered essential in order to provide critical services, particularly in rural areas where no other arrangement is possible, or
- Where services such as collection of medications or essential shopping for food is specifically itemised by HSE staff in the clients home care plan (home care/home support schedule of services).

### **2. Criteria**

The following criteria for such cases will apply;

- The HSS service being provided is essential in the HSE's view to maintaining the person in their own home.
- Having explored the options available no suitable alternative arrangement can be made for delivery of medications or essential shopping (as determined by HSE).
- Where travel costs are sought by a Provider in order for Carers to deliver Home Support service (other than collection of medications/essential shopping) HSE staff will need to be satisfied that there is no alternative for care delivery e.g. staff in the local area that could be redeployed, or the option to avail of a day care service as an alternative etc.
- Carers travel costs to deliver Home Support service will only be considered where the total travel to and from the clients home exceeds 20 km per care visit i.e. from base/or previous client (whichever is shorter), plus return to base or next client (whichever is shorter). (The travel claimed must be specific to care provision arising from a new HCP only, awarded under the 2016 Tender process and approved after 1st September 2016).
- If Carers travel cost is being considered, the Provider must clearly demonstrate that a specific journey in excess of 20km is necessarily undertaken to deliver care to an individual under the 2016 Tender process.
- Provider to certify to HSE that the individual Carer is receiving at least the benefit of the travel costs being paid by HSE. This can be included as a written statement from the Provider during the consideration of each application for travel costs.
- Proposals for the HSE to contribute to travel costs in line with these criteria must be considered on a case by case basis and, if approved must be signed off by the appropriate Home Support Manager (budget holder) for Home Support. Any travel costs approved will have to be met within the funding allocation for Home Support packages.

### **3. Rate**

The rates applicable to travel associated with carers providing services under the Home Support Tenders 2016 to Tender 2023 are set out in the following bands and HSE staff should

satisfy themselves that the band is appropriate to the actual journey costs having regard to actual costs of such journeys.

- 20-30 km - €3 per journey
- 30-40km - €4 per journey
- 50-60km - €5 per journey

**Important:**

*Parking fees, fines, etc. are not refundable by HSE.*

#### 4. Tender 2016 Clarifications

##### PROVIDER CLARIFICATIONS

Question No:	Question and Response
<b>Q.40</b>	In relation to pricing, HSE will in certain circumstances approve travel arrangements where it appears to be of benefit to maintain services in rural areas, will these travel arrangements be paid for outside the Provider's submitted Tender Hourly Rates? If so will the travel specific rates be stated by the HSE?
<b>HSE Response</b>	Yes. Further clarification on this matter is pending.
<b>Q.48</b>	Point 8 on the Compulsory Pricing Document states;  <i>"The HSE will not pay any additional fees outside of the tendered hourly rates, with the exception of any travel payments that may be agreed on an individual basis."</i>  Can you advise what the criteria would be for agreed travel payments and also what rate would be applied? Can you confirm whether parking fees will be included as an additional premium on travel?
<b>HSE Response</b>	Please refer to Response 40. Further clarification on this matter is pending. Parking fees will not be permitted as an additional premium.
<b>Q.52</b>	What Travel arrangements and payments will the HSE support when travel is approved?
<b>HSE Response</b>	The HSE will consider contributions towards travel where it is considered essential in order to maintain critical services, particularly in rural areas.
<b>Q.67</b>	Not every HCP will involve collection of medication from a Pharmacy. Therefore how can the hourly rate price in something that might only happen on a case by case basis? How will the HSE pay the travel expenses involved in providing a medication collection service?
<b>HSE Response</b>	This is included because it is a type of work that might be required. The hourly rate should not be affected by the travel cost. Where they are significant, they may be addressed by separate arrangement on a case by case basis.

<b>Q.74</b>	Often HSE staff and agency staff work side by side delivering home care support to a client. Does the terms of this tender envisage that the terms & conditions of HSE staff will be different to agency staff when it comes to paying travel to home care workers?
<b>HSE Response</b>	<p>The terms and conditions of HSE staff and those of third party staff will not be affected by this tender process in relation to paying travel to home care Providers or otherwise.</p> <p>The HSE has identified that it will be willing to consider travel payments in certain circumstances under this tender process.</p> <p>However, these are contract for services arrangements; the HSE is not the employer, and is assuming no employer responsibilities. Such travel arrangements if agreed in individual cases would have to be invoiced by the Approved Provider as part of normal invoicing for the service.</p> <p>It should be noted that such staff are employed directly by the Approved Provider, and as such are not “Agency” staff under the terms of the European Agency Workers Directive.</p>
<b>Q.84</b>	<p>In relation to the pricing schedule, “<b>breakdown</b>”:</p> <ol style="list-style-type: none"> <li>Should the figures be included for labour and other costs be on the basis of providing 1 hour of care?</li> <li>Not all carers would have travel costs. Should we include an average rate (based on a typical month) for the travel costs?</li> <li>Overtime rates would apply when required. Should we include an average rate?</li> <li>For training costs, should this figure be calculated using total training costs for the year per man hour?</li> <li>Should all business overheads be included in the Non-labour element section?</li> </ol>
<b>HSE Response</b>	<ol style="list-style-type: none"> <li>Yes, as stated: “Tendered hourly day rate 08.00 to 22.00 Monday to Saturday”.</li> <li>Yes. In this context “travel” relates to any travel costs incurred by the organisation that are charged and included in the hourly rate. If such costs are not charged in the hourly rate, then they should not be included. The HSE has already identified that it would pay separate travel costs on a case by case basis, if it is considered a requirement for the delivery of the service.</li> <li>No, these should not be included for 08.00 to 22.00 Monday to Saturday rates, for the purposes of this worksheet.</li> <li>Yes.</li> <li>Yes, provided they are funded from the tendered rate. If they are funded from, or relate to, other customers, then they should not be included.</li> </ol> <p>It should be noted that, while this breakdown worksheet is required to be completed, it does not form part of the cost scoring evaluation process. The</p>



	purpose of completing this section is to provide ongoing data relating to the breakdown of costs.
<b>Q.97</b>	<p>In response to Question 50, you have stated that existing HSE Packages will not be paid for at any new rates applicable to new packages under Tender 2016. Surely, this will bring about the ridiculous situation, whereby a member of staff attending a new client, under tender 2016, could be paid more than a member of staff attending the next door neighbour at exactly the same time under an old contract. This will definitely have an effect on staff morale and could lead to industrial unrest.</p> <p>Furthermore, there is the likelihood that some agencies, who were successful in Tender 2014, but who, 2 years later, still do not have any physical presence or staff in the area, will be able to poach staff because they will be able to offer much higher salaries as a result of including premia payments and travelling costs which are allowed for under Tender 2016.</p>
<b>HSE Response</b>	A blended rate was sought in 2011/2012, whereby premia (for Sundays, bank holidays) were to be included in the flat rate tendered.
<b>Q.113</b>	Responses 40 and 48 state that further clarification on travel payments is 'pending'. Will this address travel time as well as travel expenses and, if not, have you consulted with NERA on the legal position in regard to such costs? How can tenders complete the Compulsory Pricing Schedule in the absence of the 'pending' clarification?
<b>HSE Response</b>	<p>All pending clarifications have now been addressed.</p> <p>To the extent to which working time is deemed by a competent Court to include travel time in the context of delivering the services then the HSE will reimburse the Approved Provider in respect of such costs.</p> <p>NERA no longer exist as an agency and such the HSE has not consulted with NERA.</p>
<b>Q.126</b>	<p>In section 7.3 notes on pricing in the ITT document it states;</p> <p><i>"The HSE will in certain circumstances approve travel arrangements particularly where it appears to the HSE to be of benefit for maintaining services in rural areas"</i></p> <p>Can we assume that would be at the home help / civil service rate? If not, either can you provide details per Lot of the suggested rate?</p>
<b>HSE Response</b>	Actual cost or as close to it as possible. The HSE will develop a framework for this at CHO level.
<b>Q.132</b>	In the ITT to tender document in anticipated duties it refers to shopping for food and does not refer to mileage/travel. Is the assumption that costs associated here apply too, as it does for collecting prescriptions from the pharmacy?
<b>HSE Response</b>	The time & mileage required to undertake such tasks will be paid at the appropriate rate if the task is required as part of the Care Plan set out by the HSE. Please also refer to Response 126.

**Appendix 2(a): General Letter to All Grant Funded Home Support Providers****Important:**

The following letter is to issue from the CHO to every Provider of **grant funded** HSS (*excluding HSE direct service provision*)

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**Re: Changes to grant funding of home support for new/current HSS clients 2023**

Dear (Provider),

In line with the HSE's service improvement plans for the Home Support Service (HSS) for Older People, it is intended that as far as possible, the number of Providers involved with any one client will be minimised. This is in line with older people's expressed views.

Following on from the arrangements that were implemented as part of Tender 2016 and Tender 2018 for HSS, arrangements are now being put in place to implement Tender 2023 (Authorisation Scheme).

From DD/MM/20XX, HSS approved for new clients and for existing clients who are in receipt of grant funded HSS provided by non-HSE staff, will have their entire HSS delivered either by the HSE directly where services/staff availability is available, or where this is not the case, by an approved Provider.

Accordingly, I wish to inform you that the arrangements regarding grant funded clients, that were first introduced in Tender 2016, will continue where any current client, in receipt of grant funded Home Support funded by the HSE, is approved for a home support service after the above date, his or her entire service will transfer to the selected approved Provider and the current grant funded service arrangement for that client will cease unless the client advises us otherwise. The funding allocation for each such revised arrangement will also cease as it will be funding part of the overall HSS for the client, and will therefore not be available for re-allocation to any other client.

Furthermore, as all new clients will be provided with services through the Approved Provider List established following the commencement of Tender 2023 (Authorisation Scheme), no new clients can be allocated grant funded home supports. Therefore, as existing clients (pre-Tender 2023) in receipt of grant funded HSS cease to need same, the funding will be returned to the HSE. Part year funding will be retracted for any clients ceasing at any time during the application of the Tender 2023 (Authorisation Scheme) Arrangements. Grant funding will be adjusted each following year to take account of the full year impact of each adjustment.

Your current Service Arrangement with the HSE will be amended accordingly. The HSE will advise you of funding adjustments affecting your service as they arise.

Yours,

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**Head of Older Persons' Services**

**Appendix 2(b): Letter to Grant Funded Home Support Approved Providers re Individual Cases Ceasing**

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**Re: Changes to Grant Funded Home Support**

Dear (Provider),

I refer to my letter of (date) regarding the above.

I wish to advise you that (client name and address), who is currently in receipt of a grant funded Home Support Service (HSS) from you, will on (date) no longer be availing of the grant funded home support service.

Accordingly, the current arrangements with you for grant funded HSS for this client will cease with effect from close of business on (date). The client has been advised of this adjustment. Final payments, if any, will be arranged for services provided and the funding will no longer be available for allocation to home support clients. An adjustment will be made to your grant allocation this year – for part year impact – and in subsequent years to reflect the full year impact of this adjustment.

**And if applicable –**

I note that the client has selected your company (*as a HSE Home Support Service Approved Provider 2023*) to provide the HSS. Accordingly, the entire HSS will be delivered from the commencement date above under the HSS arrangements and all of the hours being delivered will be funded in line with the agreed prices for HSS as per the Tender 2023 (Authorisation Scheme). The adjustment to your grant funded home support funding will therefore be at the Tender 2023 (Authorisation Scheme) Rates.

**And all letters**

The adjustment relating to this client will result in a reduction in your grant in the amount of €.....in 2023, and €.....in a full year.

Yours,

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**Head of Older Persons' Services**  
**CHOXX**

## Appendix 3(a): Existing Grant Funded HSS Adjustments - Examples

### Example 1:

Client Mr. AB is approved for a HSS (25 hrs p/w), and chooses an Approved Provider under Tender 2023 (Authorisation Scheme). He has been in receipt of **grant funded** home support (5 hrs p/w) from an external Provider who will not be delivering the revised HSS.

- 1) Advise client that HSS has been approved which includes existing grant funded hours and will be delivered by the Approved Provider – total 25 hours p/w.
- 2) Calculate the value of the home support service being delivered by the grant funded home support Provider;
  - **Number of grant funded hours** per week (5 hours) multiplied by cost per hour of the grant funded service (e.g. €20.00 per hour) having regard to the grant funding SA.
  - **Calculate the value of this service** to year end by multiplying by the number of weeks remaining in the current year (2023) and reduce grant payments in the current year (2023) by this amount e.g. a HSS commencing 1<sup>st</sup> October 2023 – 5 hours x €20per hour x 13 weeks to year end = €1,300.
  - **Calculate the full year value** of this service in the next calendar year (2024) as the grant aid arrangement will be reduced in 2023 by this amount - 5 hours x €20per hour x 52 weeks full year cost = €5,200 less the amount adjusted in 2023 = €5,200-€1,300 = €3,900 to be adjusted in 2024. This reduction will continue to apply in subsequent years.
- 3) Advise grant funded Provider that the client's grant funded services will cease from the date the new HSS is to commence.
- 4) Advise Provider of the amount by which the current year (2023) grant payment is being reduced (€1,300 in this example) & the full year value of this adjustment for the next calendar year (2024) and following years (€3,900 in this example).
- 5) Advise Provider that the funding is no longer available in the current year (2023) and these hours cannot be recycled to a new client.
- 6) Advise Provider that as each grant funded client ceases (e.g. admission to long stay care, deceased) the grant funding relating to such clients is no longer available in the current year (2023) and these hours cannot be recycled by the Provider to a new client. Advise Provider of the amount by which the current year (2023) grant payment is being reduced relating to the ceased client & the full year value of this adjustment for the next calendar year (2024) and subsequent years. Adjustments for clients ceasing to avail of HSS will be calculated at the grant funding rate per hour.

If client asks to remain with current grant funded Provider for the pre-Tender 2023 (Authorisation Scheme) home support hours, this should be facilitated for the pre-Tender 2023 (Authorisation Scheme) home support hours only and hours approved under Tender

2023 (Authorisation Scheme) arrangements will be delivered by the Approved Provider. In this case there is no adjustment to the arrangement with the grant funded home support Provider until the client ceases or other alternative arrangements are made.

**Example 2:**

Client Ms. CD is approved for a HSS (25 hrs p/w), and chooses an Approved Provider under the 2023 (Authorisation Scheme). This Approved Provider is currently delivering her existing home support service of 5 hrs p/w under a **grant funded** arrangement.

- 1) Advise the client that HSS has been approved and will include existing home support hours and service will be delivered by the Approved Provider – total 25 hours p/w;
  - **Calculate the value** of the grant funded HSS being delivered under grant funded arrangements with the Approved Provider.
  - **Number of home support hours per week** (5 hours p/w) multiplied by cost per hour of the service having regard to the rates agreed for the Tender 2023 (Authorisation Scheme), e.g. €22.00 per hour.
  - **Calculate the value of this service to year end** by multiplying by the number of weeks remaining in the current year (2023), and reduce the grant arrangement to the Provider in the current year (2023) by this amount.
  - 5 hours x €22 per hour x 13 weeks to year end = €1,430.
  - **Calculate the full year value of this service** in the following year (2024), as the grant aid will be reduced in 2024 by this amount - 5 hours x €22 per hour x 52 weeks full year cost = €5,720 less the amount adjusted in the current year (2023) = €5,720 - €1,430 = €4,290 to be adjusted for in the following year (2024). This reduction will continue to apply in subsequent years.
- 2) Advise the grant funded Provider that clients grant funded services will cease from the date HSS is to commence.
- 3) Advise the Provider of the amount by which the current year (2023) grant payment is being reduced, (€1,430 in this example) & the full year value of this adjustment for the following year (2024), and following years (€4,290 in this example).
- 4) Advise the Provider that the funding is no longer available in the current year (2023) and these hours cannot be recycled to a new client.
- 5) Advise the Provider that as each grant funded client ceases (e.g. admission to long stay care, deceased), the grant funding relating to such clients is no longer available in 2023 and these hours cannot be recycled by the Provider to a new client. Advise Provider of the amount by which the 2023 grant payment is being reduced relating to ceased client & the full year value of this adjustment for 2024 and following years. Adjustments for clients ceasing to avail of HSS will be calculated at the grant funding rate per hour.

**Example 3:**

Client Ms. EF is approved for HSS and chooses an Approved Provider under the Tender 2023 (Authorisation Scheme). She has been in receipt of **grant funded** HS (5 hrs) from an external Provider and chooses to stay with the HS Provider for these grant funded home support hours.

- 1) Advise client that additional HSS hours have been approved and will be delivered by the Approved Provider & that as per clients expressed wish, the 5 hours of grant funded service will continue with existing grant funded Provider. Client is to be made aware that there will be two Approved Providers involved.
- 2) No adjustments are required as grant funded HSS will continue to be delivered by existing grant funded Provider at existing rates.

**Example 4:**

Client Mr. GH is in receipt of grant funded HSS from an external Provider prior to commencement of Tender 2023 (Authorisation Scheme). He has not been approved for any additional HSS.

- 1) No adjustments are required to grant funded Provider as HSS that preceded Tender 2023 arrangements, is continuing.
- 2) When client ceases to need the service (e.g. due to admission to long stay care, deceased or other change), the grant funding will be reduced and cannot be recycled to any other client.

**Example 5:**

Client Mr. IJ is approved for a HSS and chooses an Approved Provider under the Tender 2023 (Authorisation Scheme). He has not been in receipt of **grant funded** home support.

- 1) No adjustments are required to grant funded home support Provider as the HSS will be delivered by Approved Provider under the Tender 2023 (Authorisation Scheme).

### Appendix 3(b): Template for Recording Grant Funded Adjustments

The data recording template below sets out how the records for grant funded Home Support Providers might record the adjustment to grant funded home support arrangements which are required in relation to the above examples. This table can be transferred to a Microsoft Excel document and used as the relevant recording template.

Home Support Providers												
CHO:		4										
LHO:		South Lee										
Grant funded Home Support Provider:					AAA Home Help Services				Approved Provider Tender 2023:		Yes	
Hourly Rate P/H			€20.00	Grant SA	€22.00	Tender 2023 SA if applicable						
Client Listing												
Name	Address	DOB	ID if any	HH Hrs p/w	Current Cost p/w	HH Start date	HH Finish Date	Date of Transfer of support to HSS if applicable	Name of HSS Approved Provider	Current Year impact on HH Grant	Full Year impact on HH Grant	Comment
AB	1, White Road, Cork	01/01/1932	CK1601	5	€100	01/02/2015	01/10/2023	01/10/2023	We Support Bandon	€1,300	€5,200	Client moving to HSS with new Approved Provider 2023; Grant arrangement with Provider reduced @grant rates
CD	1, Black Road, Cork	01/01/1932	CK1602	5	€100	01/02/2015	01/10/2023	01/10/2023	No change in Provider	€1,430	€5,720	Client to HSS with grant funded Provider who is an Approved Provider 2023 ; Grant arrangement with Provider reduced @ Tender 2023 rates
EF	2, Orange Road, Cork	01/02/1942	CK1604	5	€100	10/04/2023		HSS (20 hrs) commenced 01/11/2023 - Total 35 hrs	Home Now Cobh	€0	€0	Client requested to stay with current grant funded Provider for existing pre-Tender 2023 service; No adjustment to grant
GH	2, Blue Road, Cork	20/10/1945	CK1605	5	€100	01/02/2014		(N/A – no HSS approved)				HSS continues under existing grant arrangement @existing rates until client ceases



## **Appendix 4(a): Choosing a Home Support Approved Provider – A Guide for Home Support Clients**

If HSE staff cannot deliver your Home Support Service, the service will be offered to your choice of Provider(s).

Following a Tender process, the HSE has appointed a number of Home Support Providers who have been approved to deliver Home Support on behalf of the HSE.

The Approved List of Providers for your area is attached. The order of the names does not indicate any ranking of Provider ability or standards of support as each Approved Provider had to confirm that they could deliver Home Support to the standards required by the HSE; that they had appropriate policies and procedures in place; that they had the required levels of insurances; and that staff recruitment, vetting, supervision and competencies were satisfactory.

As you have applied for, or have been approved for, a Home Support Service, the HSE would like you to choose which Approved Provider in your area will deliver the Home Support Service, if HSE staff are not available to do so.

For further information on any of these Approved Providers, you should contact them directly and contact details are supplied.

If you do not choose, then the HSE will choose a Provider for you from the list on a random basis in order to be fair to all Providers.

**You may like to talk to some of the Providers listed for your area and the following list of questions might be of help.**

- How will you and your staff respect my privacy and dignity?
- Do you visit the home prior to the support commencing?
- What training do you provide for your staff before they commence work and during their employment?
- How will you ensure that I have the same regular Home Support staff member?
- Will you provide me with a named Home Support staff member and a possible replacement?
- What happens if my regular Home Support staff member does not show up?
- Do you provide a contact number in case of emergencies 24/7?
- What happens if my regular Home Support staff member is off sick or on annual leave?
- Do your staff wear a uniform?
- May I have a copy of your complaints policy?
- How do you make sure that quality of support is maintained?
- Do you invite feedback from your clients and is that available for me to see?
- If I do not get along with my Home Support staff member what happens?

Once you have decided on your choice(s) of Provider, please insert a tick (✓) opposite any Providers that you would like to deliver your Home Support service. You may tick all of them if you wish.

Please return your completed form to the address on the form.

The HSE will ask the Providers you select to deliver your Home Support. The Provider who responds first to confirm they are in a position to deliver your Home Support will be allocated to you.



In order to ensure that the number of Providers involved in your support are minimised, the Provider must deliver the entire Home Support offered by the HSE and cannot select elements of the service only (e.g. if your HSE funded Home Support involves a seven day service, the Provider cannot accept the weekdays and refuse to deliver the weekend service). Where this is not possible, the HSE may facilitate 2 or more Providers to share the service delivery.

The support will then be organised with the Provider and you will be advised of the details.

**Client Choice of Approved Provider Selection Form on the following page. Please select an Approved Provider from this list** *(if HSE staff cannot deliver your Home Support Service).*

## Appendix 4(b): Client Choice of Approved Provider Selection Form



### HOME SUPPORT SERVICES FOR OLDER PEOPLE CLIENT CHOICE SELECTION FORM 2023

Client Name: \_\_\_\_\_ Home Support Ref: \_\_\_\_\_

Client Address: \_\_\_\_\_

Eircode: \_\_\_\_\_ Phone No: \_\_\_\_\_

This form should be completed after reading “*Information on Choosing a Home Support Approved Provider – A Guide for Clients*” Section of this document.

Please indicate your choice of Provider by inserting a tick (v) opposite any Provider(s) that you would like to deliver your Home Support Service. You may tick all of them if you wish. The list below is in random order. All Providers listed are approved by the HSE and are compliant with the standards defined by the HSE.

In the event that Approved Providers listed for your area are not in a position to deliver your Home Support Service, the HSE will proceed, as the next step in line with its Tender arrangements, to request service delivery from other Providers who meet the service specifications set out in Tender 2023 (Authorisation Scheme).

If you need assistance to complete this form please contact your local Home Support Office. Once you have completed this form, please send it to your local Home Support Office (*Local Office contact details are listed at the end of this document*).

CHO XX LHO, LHO, LHO, LHO			
APPROVED PROVIDER NAME	CONTACT TELEPHONE NUMBER		CLIENT CHOICE SELECTION (v)
ABC Ltd	Dublin Office:	01-1234567	<a href="http://www.abc.ie">www.abc.ie</a>

#### Consortium Members

Sometimes a group of Providers work together across an area. This is referred to as a Consortium. The members of each Consortium (in the Approved Provider list above) are listed here for your information.

The following information is provided solely to inform clients of the names of the Providers who form the Consortium on the Approved Provider list.

CONSORTIUM NAME		CONSORTIUM MEMBERS	
(Consortium Name)	Lead: Company Name	Member Company Name	Member Company Name

### Information Sharing & Data Protection

The HSE will need to share your relevant information with Approved Providers in order to put your Home Support Service in place. The HSE and its Approved Providers are required to comply with data protection law. By signing this form you are confirming that you understand that the sharing of your information is necessary in order to deliver the appropriate service. The HSE Privacy Statement for Patients and Service Users is available from your local Home Support Office or on [www.hse.ie/eng/gdpr/hse-data-protection-policy/hse-privacynotice-service-users.pdf](http://www.hse.ie/eng/gdpr/hse-data-protection-policy/hse-privacynotice-service-users.pdf)

**Client Signature:**

**Please print;**

**Client Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Eircode:** \_\_\_\_\_

**Date Signed:**

### To be completed only where the person who may need Home Support is unable to choose their Approved Provider

I can confirm that I am a nominated decision supporter as outlined hereunder;

- Nominated Support Person (informal arrangement) ☐
- Decision-Making Assistant ☐
- Co-Decision-Maker (form to be signed by both parties) ☐
- Decision-Making Representative\* ☐
- Enduring Power of Attorney\* ☐
- Designated Healthcare Representative\* ☐

\* These arrangements are formal arrangements, made via the courts and registered with the Decision Support Service.

I have discussed this Client Choice Selection Form with him/her and I have informed them that this selection is being made on their behalf.

**Signature:**

**Date signed:**

## Appendix 5: Standard Referral Email

**Important:**

- The following email is for use in contacting Approved Providers in line with the process set out in Section 1.3.
- Copies of all emails and responses received should be retained as back up to decisions made regarding allocation of work to Providers and for monitoring purposes.

\*\*\*\*\*

**Dear (Insert Approved Provider Contact Name)**

Home support is required for the client whose details are set out below.

This offer arises as a result of Client Choice - Yes/No (HSE to circle appropriate option)

Name of Client or Initials	Address of Client	Summary of Assessed Needs to be supported	Detail of Service Required (Days, times, total hours, number of home support staff members, etc.)

If you are in a position to accept this work, please revert to me by **(insert time and day and date), by email, with the name of the home support staff member(s) that is available to deliver this service.** The Provider who responds first within the timeline will be offered the work.

If you do not respond within the timeline, it will be assumed that you are not available to provide the service. Non-responses will be included in Key Performance Indicators except where the HSE has notified Providers that a particular offer of work has been allocated before the timeline for responses has expired.

The HSE will email all Approved Providers to advise that the service requirement has been filled.

Your non-availability to deliver support in this case will not impact on future offers unless this becomes a consistent issue at which time we will discuss the position with you under the terms of our Service Arrangement with you.

**Yours**

**HSS MANAGER**

## Appendix 6 – Quarterly Self-Declaration by Provider

Reporting Template – SELF-DECLARATION BY PROVIDER - QUARTERLY				
KEY PERFORMANCE INDICATORS - Home Support Tender 2023				
Company:			Quarter Under Review	
Total Hours Delivered & Invoiced this quarter			No. of Clients	
			No. of Client Attendances	
Metric	Measure	Target %	Performance % Compliance	Commentary
<b>1(a) Training</b> (QQI Level 5 - 2 Modules)  New Entrants to Home Care Industry % Staff with < 1yr experience: All new entrants to the Home Care industry & those with less than one year of paid Home Care industry experience in the last 3 years must, prior to working on this HSE Contract, have as a minimum; <b>• Obtained at a minimum QQI Level 5 Modules- Care Skills and Care of the Older Person</b>	Quality	100%		<i>a) Providers must self-declare the % of their "new entrant" staff working on HSE contracts that have successfully completed the 2 modules - Care Skills &amp; Care of the Older Person modules before taking up duty.</i>
<b>1(b) Training</b> (QQI Level 5 - 2 Modules)  Unqualified Existing Home Care Staff :- All staff with paid Home Care industry experience of more than 1 year in the last 3 years, who do not hold a recognised relevant qualification, must prior to working on this HSE Contract, have as a minimum; <b>• Committed to obtaining at a minimum QQI Level 5 Modules - Care Skills and Care of the Older Person within 11 months of first working on this HSE contract</b>	Quality	100%		<i>b) % of Unqualified Existing Home Care Staff who are compliant with commitment on commencement on HSE contract this quarter and have not exceeded timeline of 11 months for obtaining the 2 required QQI modules</i>
<b>2(a) Carer Competency Assessment – <u>Newly recruited staff</u></b> with completed National Carer Competency Assessment	Quality	100%		<i>Provider recorded 100% of newly recruited staff in the reporting period had completed the National Carer Competency Assessment</i>
<b>2(b) Carer Competency Assessment – <u>Existing staff with updated</u></b> National Carer Competency Assessment (annually)	Quality	100%		<i>Provider recorded 100% of existing staff in the reporting period had completed an annual review</i>

<b>3. Garda Vetting/Police Clearance</b> - Newly recruited staff with completed up to date Garda Vetting / Police Clearance at time of Appointment	Quality	100%		<i>Provider recorded 100% of newly recruited staff in the reporting period had completed Garda Vetting/Police Clearance.</i>
<b>4. Care Plans</b> – Service Delivery in accordance with Plan “ <b>No Show</b> ” – Care delivered on time	Quality	100%		<i>Provider recorded 2% of planned Client Attendances that were “no show” so 98% were on time.</i>
<b>5. Care Plans</b> – Service Delivery in accordance with Plan – Timely acceptance of work and delivery to Care Plan  <b>(a) Response Time to Offer of Hours.</b> Time scale for response following request for Service is determined by the HSE Service Manager.	Quality	100%		<i>Provider responded outside of the specified time from HSE Service Manager (turnaround to a request for service) 5% of the time.</i>
<b>(b) Response time to deliver services</b> when hours have been accepted by Approved Provider	Quality	100%		<i>Provider responded outside of the specified time from HSE Service Manager (turnaround to a request for service) 5% of the time.</i>
<b>6. Complaints Management</b> – Number of complaints received and resolved	Quality	100%		<i>Provider resolved complaints received within 30 days of receipt.</i>
<b>7. Quantum of Services Delivered</b> - Number of Offers of Home Support not accepted / refused or not responded to.	Service Capacity	<30% refusal rate		
<b>Commentary :</b>				
<b>Declaration</b>				
<b>Provider</b>				
<b>Signature</b>				
<b>HSE Home Support Service Manager Sign Off Date</b>				

## Appendix 7: Complaints Template

Approved Provider HSS Tender 2023 (Authorisation Scheme) Complaints Log for Submission to the HSE as per Service Arrangement					
Date Received	Nature of Complaint	Summary of Action Undertaken	Outcome	Status Open / Closed / On-going	Reported to HSE: Yes / No & Date

**Signed:**

**Date:**

## Appendix 8: Summary Monthly Return for/to Head of Older Persons' Services

Monthly Return on HSS Tender Approved Providers											Blue Cells: (automatically generate)									
CHO (pick from Drop Down List)											CHO Office Generate									
TABLE 1 - New Clients	Number of NEW CLIENTS per Category for each Approved Provider under the HSS Tender 2023 (Authorisation Scheme)																			
	2023							2024												
INPUT APPROVED PROVIDER NAME1	Aug	Sept	Oct	Nov	Dec	2023 YTD Position		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	2024 YTD Position
Client Choice						0														0
Random Selection						0														0
Total	0	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0
INPUT APPROVED PROVIDER NAME2	Aug	Sept	Oct	Nov	Dec	2023 YTD Position		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	2024 YTD Position
Client Choice						0														0
Random Selection						0														0
Total	0	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0
INPUT APPROVED PROVIDER NAME3	Aug	Sept	Oct	Nov	Dec	2023 YTD Position		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	2024 YTD Position
Client Choice						0														0
Random Selection						0														0
Total	0	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0
INPUT APPROVED PROVIDER NAME4	Aug	Sept	Oct	Nov	Dec	2023 YTD Position		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	2024 YTD Position
Client Choice						0														0
Random Selection						0														0
Total	0	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0
Total for each category for all Approved Providers	Aug	Sept	Oct	Nov	Dec	2023 YTD Position		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	2024 YTD Position
Client Choice	0	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0
Random Selection	0	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	



TABLE 2- Active Clients		Total No. of Active Clients on the last day of the month under the HSS Tender 2023 (Authorisation Scheme)																		
<b>Active Clients</b> : The number of Active Clients on the last day of the reporting period must <b>EQUAL</b> the number of active clients at the end of the previous month <b>PLUS</b> new clients approved during the reporting month <b>LESS</b> clients ceased during the reporting month																				
	2023							2024												
	Aug	Sept	Oct	Nov	Dec	2023 YTD Position		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	2024 YTD Position
						0														0
						0														0
						0														0
						0														0
						0														0
	Total	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0
TABLE 3 - Hours		Total no. of Hours Provided per month under the HSS Tender 2023 (Authorisation Scheme)																		
	2023							2024												
	Aug	Sept	Oct	Nov	Dec	2023 YTD Total Hrs Provided		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	2024 YTD Total Hrs Provided
						0														0
						0														0
						0														0
						0														0
						0														0
	Total	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0
TABLE 4 Costs		Total Approved Costs per month under the HSS Tender 2023 (Authorisation Scheme)																		
	2023							2024												
	Aug	Sept	Oct	Nov	Dec	2023 YTD Total Approved Costs		Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	2024 YTD Total Approved Costs
						0														0
						0														0
						0														0
						0														0
						0														0
	Total	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0