



Framework for the Resumption of Adult Disability Day Services

**Supporting People with Disabilities in the context of
COVID-19: The Next Year**

**New Directions Subgroup
May 2020**

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Introduction

Day service locations where people receive day service supports have closed since the middle of March. At the time of closure, service providers and HSE Disability teams were requested to identify their most vulnerable service users and agree how some home based support could be provided for them. The other requirements from day service providers at that time was to identify staff that could be redeployed to residential services, identify premises that could be used for COVID related work including isolation units and to identify transport fleets that could be utilised to support the community for the duration of the restrictive measures imposed.

During the last nine weeks, CHOs have maintained contact with service providers to greater and lesser extents in regard to the reconfigured supports being provided to day service recipients. The degree of contact has been completely dependent on the work load of the HSE guidance service and many of the guidance and administrative staff have been redeployed on COVID work.

Some support is being provided to service users in each CHO. The type and quantum of support varies from CHO to CHO. In some CHOs service users that present with complex needs and behaviours that challenges are being brought into empty day service locations and receive their supports in that location within the context of Public Health Guidelines. Other providers are in regular contact with families by phone or online video calls and share programmes that are deemed beneficial for the service user to provide some continuity in their day. Service providers that have residential services are using staff to shore up rosters and to provide support in the home for people that would usually attend a day service location.

Considering the very serious nature of this pandemic and the vulnerability of people with disabilities as a care group, the Public Health advice and guidance and the structure of services to people with disabilities has resulted in minimising the negative impact for the majority of this care group to date. The structure of day services with a network of over 1,000 locations from which day service supports are provided and the occupation of those locations on a daily basis by an average of 25 people, provides a significant challenge as we embark on planning for service resumption.

For the safety of service users, their families, staff that support them and the general public, planning to resume the provision of day service supports has to be approached with extreme caution and must be underpinned by continued Public Health Guidance and the Government's planned phases for reopening the country. The COVID evidence to date shows how the disease has been managed much better within smaller units of service with reduced numbers of service users and reduced contacts with support staff.

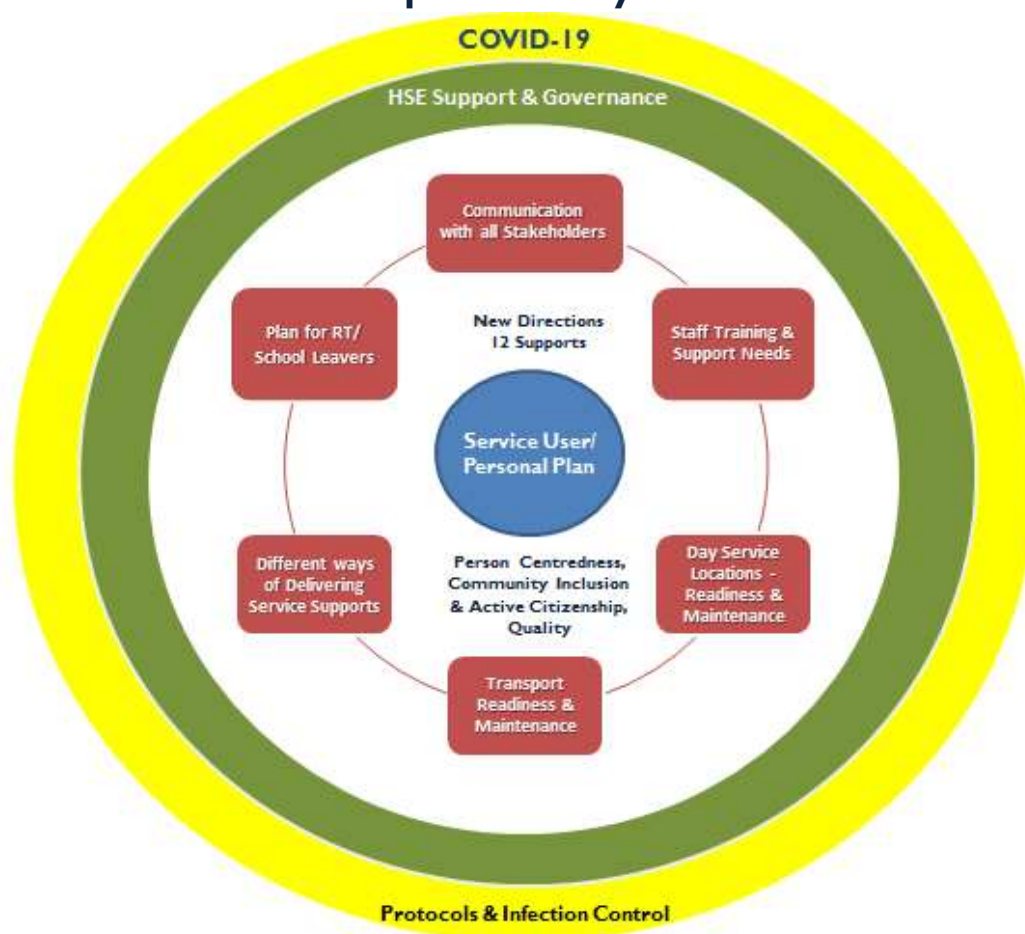
Notwithstanding the challenges ahead, there is evidence during the last nine weeks of innovative practice and new ways of working that have been developed in line with policy and further developments can be explored with the use of technology.

A key element for the planning phase as we prepare to resume day services will be communicating a clear message to our service users and their families in regard to the changed ways of working that are going to be necessary in order that we keep our service users, their families, our staff and the general public safe and COVID free. Service capacity will be reduced and supports will be provided in a different way and we need to support service users and families to come to terms with this new normality whilst acknowledging the needs of our service users and the health and welfare of their families and carers.

There will be a requirement in the context of other disability supports including Residential, Home Support, Respite and Personal Assistant (PA) to look at the overall package of supports that are being planned for each service user as equity of approach and meeting priority needs will be of paramount importance. Service Resumption Planning in respect of the above has also been completed – see *‘Reshaping Disability Services from 2020 and Beyond in line with COVID-19 Restrictions’*.

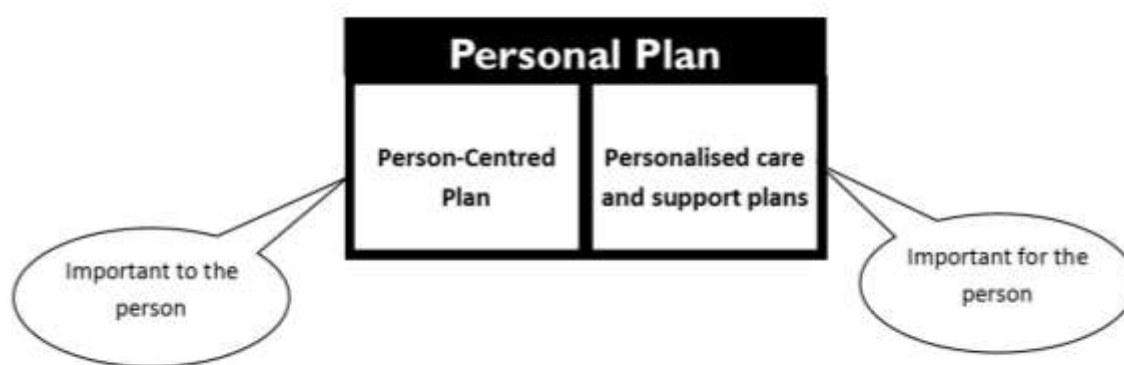
To assist in developing the plan for day service resumption, the following Framework has been developed to describe the key elements of work that are required to be addressed and the key drivers that need to inform that work.

Framework for the Resumption of Day Services



Service User – Personal Plans

Day service supports are provided within the policy – New Directions. The provision of service supports are embedded in the person centred approach with each adult having a Personal Plan. This plan is comprised of two components – the person centred plan reflecting the person’s dreams and wishes and the things that are important to them and the personal support plans that address their specific needs and are important for them e.g. medication management, behavioural support etc.



As the resumption of services will result in service users receiving a reduced quantum of service supports, it is recommended that the personal plan for each individual should be reviewed to agree what is going to be achievable during the year ahead. The core value of community inclusion and active citizenship will need to be addressed within the current COVID restrictions and the phases of reopening the country outlined by Government.

There should be a particular focus on the personalised support plans as it is acknowledged that the impact of COVID and the change in the lives of service users as a consequence may have resulted in new needs that will require to be addressed as a priority.

In particular, service users may be traumatised as a result of the significant change in their routine and in some cases the loss of loved ones as a result of contracting the disease. This trauma may manifest in a number of ways including the escalation of behaviours that challenge. The converse situation may also arise where service users are happier to be at home in their own surroundings and as a consequence behaviours that have challenged may now have significantly reduced.

There are also new opportunities that have been developed to support service users that will need to be factored in to the review of their personal plan.



In planning for the resumption of day services, service providers will need to progress the following key requirements as part of their service resumption planning:-

- Devise a plan to train service users in COVID etiquette and the importance of same in terms of their safety. **(Guidance already developed and available).**
- Plan to review the personal plans of each service user to address their priority needs during the year ahead. Ensure that the revised plan captures any needs identified since COVID commencement and also new approaches to meeting needs using remote supports and the use of technology. **(Submissions will be sought from providers regarding the need for some resource to develop technology responses for new ways of working where service users have neither the skills nor equipment to facilitate this development.)**
- Agree the priority rating for each service user in terms of the quantum and type of support to be provided. **(Draft Prioritisation Guidance Schedule appendix I).**
- In relation to day service users that are also in receipt of a residential placement, plan where possible to have the agreed quantum and type of support provided to those adults from the location of their residence. This approach will reduce the challenge of transporting people to day service locations as well as minimising the number of contacts for these service users.
- Where day services and residential services are provided by different service providers a MOU will be required to address infection control to maintain safety of all. **(MOU guidance to be developed).**
- As the phases of reopening progress, incorporate into service user plans their need to have resumed contact with their friends.
- When decisions have been made on the number of service users that can be supported in a service location at any time, planned attendance should take account of particular friendships between service users so that this valuable social contact can be resumed.

- The reduction in the quantum of service will lead to greater communication and reliance on service user families/carers and their needs will have to be identified in the context of supports that they will require within the new way of working. These needs will have to be considered in the process of service prioritisation but also in a wider sense where their COVID experience may result in a significant focus on safety and an unwillingness to continue to access support needs from day service providers. Balancing family/carer wishes and the needs of service users will be a challenge.

Staff Training and Support Needs

Our staff at all levels of the day service sector are the most valuable resource that we have in the context of providing supports for approx. 18,500 service users. During the past nine weeks, staff have displayed a flexibility of approach and commitment to the maintenance of service supports that is the hallmark of our disability day service workforce.

In many situations staff have had to be redeployed to maintain essential services and to become involved in reskilling to address key issues such as testing and contact tracing. When planning for day service resumption a key consideration will be on the impact of COVID on our staff who may also be experiencing trauma as a result of the challenges of COVID both in their work and personal lives.

We need to be sure that staff feel safe and supported within the context of all service resumption planning and their concerns and needs will have to be considered when service providers are completing their service resumption planning.



The Government publication – ‘Return to Work Safely Protocol’ - is a general document applicable to all work situations. It is not designed to prohibit the introduction of further specific measures in particular sectors as long as they enhance the measures set out in the Protocol.

In that context the following key issues need to be addressed by each service provider organisation when agreeing service resumption plans:-

- Each service provider should develop a return to work safely protocol building on the Government’s protocol but incorporating specific requirements that take cognisance of the disability care group and the infrastructure that supports the delivery of day services. **(Documentation to be developed to support the application of the Government’s protocol as well as additional measures identified).**
- Staff that have been redeployed need to have an agreed plan for repatriation to day services.

- Staff training to be provided regarding new ways of working and COVID etiquette including the use of PPE. Staff need to have a heightened awareness of all infection control measures that must be adhered to when providing supports to service users in service locations, the community and in service user's homes. **(Some guidance already available. Others to be developed).**
- The safe protocol should focus on minimising the contacts between staff, service users, families and the public.
- It is recommended that dedicated staff should support dedicated service users or that staff should work in small teams to minimise the contacts arising from service delivery.
- To facilitate new ways of working submissions will be invited from service providers for the use of technology to support innovative practice. **(Submission criteria to be developed).**

Day Service Locations – Readiness and Maintenance

There are in excess of 1,000 day service locations throughout the country. These range in size from small units that are supporting less than 10 people with complex needs to larger units that are supporting 50 + service users.



Where larger numbers are supported the service has been provided on the basis that a significant number of service users will be accessing the community for many of their supports on a daily basis. With the current and ongoing community restrictions and the evidence of the management of COVID to date, the numbers of service users that can attend at a location for the foreseeable future will be greatly restricted. Within each CHO there may be potential to explore interagency working to provide supports to service users close to their own home.

What is essential for service resumption planning is that all service providers would complete the following:-

- Carry out an assessment of each day service location in the context of COVID guidance and etiquette and determine the number of service users and staff that can safely attend at the location on any one time. This assessment will have to take into consideration the needs and abilities of the service users that are supported from each location.
- Identify the day service locations that have been used since the commencement of COVID for COVID related work and plan for the reinstatement of those locations for day service use. Where service providers have reconfigured service locations as isolation units to support their residential service, a plan needs to be put in place as to how service users day service supports will be provided until the buildings are restored for day service use. It may be possible to identify other community facilities that are currently vacant as a consequence of COVID restrictions that could be adapted for short term use as a day service location. Any such facilities will require the same rigour of assessment and compliance as will apply to all day service locations.
- Take account of the Government Return to Work Safely Protocol but develop enhanced measures that take cognisance of the needs of service users. In particular where personal care is an element of service additional measures to reduce risk will be required.
- Develop a plan for the maintenance of locations taking account of the needs and abilities of service users and the throughput of people on a daily basis.
(Guidance will be produced for service providers).

Different ways of Delivering Service Supports

Heretofore day service supports have been provided at a day service location and in the wider community. Since the onset of COVID some supports have been provided by day service staff remotely and limited supports have been provided in some service user homes.



For the foreseeable future with the limited capacity at day service locations, remote supports and supports provided in service user homes will become a key feature of day service supports.

There are also limitations with regard to remote supports as many service users may find the use of technology challenging and some may have families/carers that will be unable to support them to access remote supports.

In planning for the months ahead, service providers will have to carry out the following key tasks:-

- Identify service users that have the ability and the tools to communicate remotely and identify the most appropriate form of communication for each service user.
- Training courses to be developed to support the use of remote working with service users. **(Some examples may already be available and can be shared - others may require development).**
- Some resource will be made available to support remote working for both service users and staff **(submission criteria to be drafted).**
- Safe protocols for the provision of supports in a service user's home will have to be developed to ensure safety of all stakeholders. **(Identify protocols already in place for home support/PA and build on these to align with COVID Guidance).**
- The sharing of learning regarding remote support initiatives that have been developed since the commencement of COVID to be progressed. **(Appendix 2 – Identification of Innovative working).**

Plan for RT/School Leavers

There are approx. 1,200 young people leaving school this year that will require a HSE funded day service. There are also approx. 500 people graduating from Rehabilitative Training Programmes that will also require an onward transition to a HSE funded day service.



Traditionally, the needs of this cohort are identified through a profiling process that leads to the allocation of the funding provided and negotiation of placements during the months of April and May with placements confirmed to families by late May or early June.

At the time that COVID commenced the majority of profiles had been completed and the funding was allocated to CHOs mid April. However, as school closed on March 12th and with the related COVID restrictions, the progression of negotiations with service providers regarding the provision of placements has been limited and where progress has been made it is mainly by telephone communication.

Service providers have been asked to accept referrals on a provisional placement basis from September onwards but a phasing in of this new intake will require planning as the majority of service providers have not met with those referred. This presents significant challenges in regard to health and safety as service providers have limited information regarding the needs and abilities of those referred.

There are some situations where service providers are also providers of Special Educational services on behalf of the Department of Education and in those instances there should be opportunities for a smooth transition of all information pertaining to individual need when a school leaver is being referred to a day service provided by the same service provider.

Similarly those adults graduating from Rehabilitation Training that require a HSE funded day service may have been referred to the same service provider that has provided their Rehabilitative Training Programme. The transition of information regarding the needs of those now referred to a day service provided by the same provider can be easily accommodated in this situation also.

Protocols in respect of those school leavers that are largely unknown to service providers will be required. In that regard there is a requirement for the HSE at CHO level and each service provider to whom referrals have been made to plan for the commencement of new service user intake as follows:-

HSE

- The RT/School leaver nominee in each CHO should arrange for permission from families to share the outcomes of the profiling process and any additional reports that they have gathered regarding the needs of those referred with the provider to which the person is referred.
- There are a small number of people referred that have not been profiled as yet and a protocol needs to be developed to capture the needs of these adults as the profiling process is not aligned with COVID guidance. **(Protocol to be developed and circulated).**
- There is a requirement for the HSE Guidance service to establish whether RT programmes have been continued to be delivered remotely since the onset of COVID and whether or not extensions to RT programmes will have to be considered. **(RT/School Leaver nominees to review the position of those due to exit RT in 2020).**

Service Providers

- There is essential information that each service provider will require regarding the needs and abilities of each person referred. Should more explicit details be required to comply with COVID guidance than that already provided as a result of the profiling process and subsidiary reports, service providers will need to request this information from the service user and their family prior to having them attend at a day service location. **(Essential information to be identified and format for capturing same agreed).**
- The introduction of new referrals to any service location should be approached with caution and it is recommended that small numbers of new referrals be accommodated at the service location at dedicated times with the focus on Induction and COVID training. There will be an increased opportunity with new referrals to establish the new ways of working as they will not be drawing comparisons to pre COVID service delivery and will not have to make that adjustment. However, the transition from school to day services is a very significant transition for each young person. Welcoming and inducting new referrals should be approached with great caution and deliberation.

The process to plan for 2021 RT/School Leavers usually commences in April/May of the preceding year. In that context, considering that schools have been closed since mid March, the current number of referrals notified to HSE for 2021 are few. There is still no notification as to when schools are likely to reopen and until the HSE can engage with the school system, the number of people that will require a service in 2021 will be unknown. However, there is good data in regard to the previous five years referrals and some planning can commence using an average projection of 2021 need.

The development of a process to address 2021 new need must be progressed although the timelines connected with the process cannot be agreed until the reopening of schools is confirmed and a revised approach to capturing the needs of RT/School leavers is agreed.

In conjunction with all CHOs the National RT/School Leaver Project Group need to develop and agree a process for 2021 RT/School Leaver's day service needs. This plan needs to address the following:-

- Review the profiling process that is used each year to capture the support needs of each individual and agree how people's needs can be profiled within COVID 19 restrictions and guidance. **(HSE and NDA to develop and agree revised process).**
- Develop a process to train and brief RT/School Leaver profilers on the agreed profiling process to be utilised for the 2021 referrals. **(HSE and NDA to develop and agree revised training of profilers).**
- Agree timelines for the delivery of the RT/School leaver process once clarification on school reopening is available from Public Health.
- Develop communication for all stakeholders so that there is a good awareness of the revised process in place for 2021 referrals.

Transport Readiness and Maintenance

Despite ambiguity regarding the provision of transport services to enable adults access day service locations, the HSE has provided this service on the basis that a large cohort of those adults that access day services would be unable to receive this service if transport was not provided.



The latest data indicates that approx. 8,000 adult day recipients are provided with transport to access their day service location. A key part of other day service recipients service has been to up skill them to use public transport to access services. Families also play a key role in transporting others to and from their service.

COVID guidance in regard to social distancing and infection control presents many challenges for the provision of transport to and from day service locations. In the context of the resumption of services the following guidance needs to be adopted by all service providers:-

- Families of service users should be asked to provide transport for their son/daughter on the day/s that they are going to attend at a day service location. It is acknowledged that this will not be possible for all families.
- To facilitate service users that will require transport to attend at a day service location on any day/s, Service providers need to assess their transport fleet in line with COVID guidance and agree the number of service users that can be transported safely at any time. This will vary depending on the needs of service users and their understanding of the behaviours required to comply with COVID etiquette.
- Protocols for the modification, cleaning and maintenance of the vehicles should be implemented by all service providers. **(Protocols to be developed and distributed).**
- Service providers need to develop revised transport training for those recipients that use public transport to ensure that they understand and comply with COVID guidance on public transport.

Communication with all Stakeholders

The most important issue identified to date in relation to planning for service resumption is the need for clear communication with stakeholders but particularly with families and services users regarding when services may be resumed and what the future service will look like for their son/daughter/sibling.



By its nature, the COVID pandemic and the need to respond to the changing prevalence of the disease in the country has been challenging regarding communication. The Government's plan for reopening the country sets out phases which indicate a very gradual lessening of restrictions over the coming months. In line with this plan active planning is underway to prepare services to also gradually resume health and personal social services in line with Public Health advice and the Government's reopening plan.

The planning process to resume day services for people with disabilities is now underway in all CHOs and service provider organisations. There is now need to agree a communication plan to ensure that all stakeholders are kept informed of what will be happening in the weeks and months ahead, when services are likely to resume, how those services will differ both in type and quantum to the service and supports provided pre COVID.

At this time, the following key actions are deemed essential:-

- The HSE should immediately issue some basic information to service users and families informing them of the steps that are currently underway to plan for the resumption of day services. This communication should include details of how services may change both in type and content but provide reassurance that emerging needs will be addressed in so far as is possible within COVID restrictions. **(Appendix 3)**.
- A Communication Plan needs to be developed that can respond to the needs of all stakeholders as the COVID restrictions ease and the expectations from families and service users of a resumption of services. The development of this communication plan needs to be prioritised. **(Plan to be developed)**.
- Plain English and Easy Read versions of agreed communication need to be developed to support service users, their families and all stakeholders.

HSE Support and Governance

At the present time there is approx. €500m of the state's funding invested in the provision of day services to people with disabilities.



In excess of 18,000 people have been availing of day service supports and there is an expectation of a further 1,200 school leavers entering services this year with an additional expenditure of €25m full year costs committed for this additional service provision.

Whilst the service has to deal with the reality of COVID-19, the quantum and type of service supports will undergo a significant change. This situation will provide many opportunities in progressing the individualised supports recommended in the policy New Directions and new ways of working to support the implementation of that policy. It will also provide many challenges in dealing with the expectation of service responses particularly for service users and families that are used to the traditional model of delivery which is centred around day service locations.

There will be a requirement to account for the significant €5b public funding provided and to be able to illustrate clearly the service that is being provided to each service user.

Since the onset of COVID – there is a lack of clarity of exactly what service is provided and to whom the service is being provided. The term “outreach” has been used exhaustively but the definition of this term is being applied very broadly. In some circumstances outreach refers to a weekly phone call to service users and their family/carer to see how they are. In other circumstances outreach means visiting the service user home, taking the service user out of the home to a service location and engaging in aspects of their personal plan for a number of hours each day.

During this time of service change and reconfiguration there is a need to track the change in service delivery and the quantum of service being provided to each individual.

In order to develop a tracking mechanism to record this information and report on the investment in day service supports it is essential to capture the current status of service provision that has evolved since the winding down of day services.

As a result of work completed by all day service providers and HSE day service staff during the last year, we now have the following information:-

- Address and details of all day service locations.
- The identity of all service users receiving day service supports from each location.
- The quantum (in hours) of the service being provided to each individual.

Building on this information we now need to know what type and quantum of service each individual has been receiving since COVID commenced. From this baseline information we can develop a system of reporting to track the changes that occur over the coming months as service supports are being restored.

With the cooperation of the day service sector and the HSE CHO staff the following actions are required at this time:-

- Capture the current state of day service supports that are being provided to day service recipients. **(Appendix 2 – Capturing current provision for completion by day service providers).**
- Adjust the Disability Day Services Database to accommodate the recording of the quantum and type of day service support that is being provided to each individual once services resume. **(Disability Day Service Business Manager to develop adjustments to the database to capture required data).**
- A structure to agree the collection and collation of regular reporting needs to be agreed with the CHOs and Service Providers. **(Develop process in agreement with CHOs and Service Providers to agree process).**

Whilst the directive in regard to service resumption is that service provision has to be in line with current budgets (with exception to COVID direct additional costs such as PPE and Infection control) it has to be acknowledged that the stress and pressure on families/carers arising from the reduction in service capacity and the changed ways of working will inevitably lead to some significant pressures for individual families in caring for their loved one. It would therefore be prudent to agree how such needs can be addressed and escalated.

Our policy advocates supporting people to live ordinary lives in ordinary places. In this regard the provision of intensive home based supports is a much more appropriate response for service users and their families as opposed to the requirement for 24/7 residential care which is not an outcome that is recommended for any of our day service recipients. In this regard the following is recommended:-

- The HSE should agree a process and resource that can be utilised to address emergency need as the new ways of working and reduced service capacity impacts on vulnerable service users and their families so that the system can respond to policy and enable people to live safely in their own homes.

COVID-19 Protocols and Infection Control

All actions arising from the day service resumption plan are underpinned by COVID-19 guidance and all decisions taken must be COVID proofed.



All HSE Guidance and Resources for Disability Services for COVID-19 are available on <https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources>. This information source will be updated to reflect the work required to prepare the disability day service sector for the resumption of day services.

Summary

The resumption of services over the coming months will bring about many changes in the way in which day service supports are delivered. Whilst the service capacity will be reduced there are also many opportunities that will present to progress the day service policy New Directions which has a focus on the provision of individual supports in line with identified need. The services that people will receive will hopefully result in a richer individualised package of supports for each day service user with a focus on improved outcomes.

Considering the magnitude of change that will occur once services resume, an ongoing review of emerging needs and issues will be an integral part of all day service provision.

It is recommended that a comprehensive review of day service provision arising from changes brought about by COVID-19 be carried out after a six month period. This review will be informed by the data collection process that will be implemented to track the provision of services to each individual service user over the coming months.

Appendix I – Draft Prioritisation Guidance Schedule

The following key principles are a given prior to embarking on prioritising the quantum and type of service that each day service recipient will receive as we plan to resume day service supports:-

- All staff employed to support the provision of day services that have been redeployed since the commencement of COVID-19 will be repatriated to day services.
- A review of the Personal Care plan for each individual will be at the core of the prioritisation process.
- Equity of service is a key principle that service management should work to deliver notwithstanding the need to prioritise greatest need.
- Should service users / families decline to have any service supports at this time – the service provider should continue to engage with the individual and their family as the decision to discontinue supports may not be the wish of the service user.

<p>Priority 1 (P1) Service users</p> <p>Red Risk on Matrix</p>	<p>Having considered the individuals overall package of care and the presenting needs of the individual and their family, the profile of a P1 persons will be as follows:-</p> <ul style="list-style-type: none"> ➤ Day Attendees ➤ Persons not receiving any or very limited ancillary/social care supports e.g. respite, home support/PA ➤ Persons with noted increase in Behaviours of concern. ➤ Persons who have a noted decline in presentation i.e. Mental Health, Physical health etc due to absence of a regular Day Service. ➤ Safeguarding. ➤ Familial vulnerabilities/circumstances i.e. single parent, elderly parents, residing with persons who are immune compromised, limited external supports, parents returning to work.
<p>Priority 2 (P2) Orange risk on Matrix</p>	<p>Having considered the individuals overall package of care and the presenting needs of the individual and their family, the profile of a P2 persons will be as follows:-</p> <ul style="list-style-type: none"> ➤ Persons receiving limited ancillary services/social care supports presenting with an emerging need that could escalate to P1 should Services not respond. <p>Persons are managing reasonably well at home and/or are lonely, seeking contact with peers.</p>

<p>Priority 3 (P3)</p> <p>Orange/Green on Matrix</p>	<p>Having considered the individuals overall package of care and the presenting needs of the individual and their family, the profile of a P3 persons will be as follows:-</p> <p>Persons are contented at home and the Services provide support to reassure & enable them to have a structured day.</p> <p><i>In offering remote Services consider infrastructure, interest and capacity of individuals.</i></p>
<p>Priority 4 (P4)</p> <p>Orange/Green on Matrix</p>	<p>Having considered the individuals overall package of care and the presenting needs of the individual and their family, the profile of a P4 persons will be as follows:-</p> <p>Persons may opt in or out of this offered support. Not anxious to avail of support during this COVID-19 pandemic.</p> <p><i>In offering remote Services consider infrastructure, interest and capacity of individuals.</i></p>

Key Considerations

Prioritisation is closely associated with having a knowledge of your Service Users and their unique needs. In considering your response to any Service user a full scoping of their entire package of care is a priority as this will inform your provision of Day Service support. Communicating with the wider Disability team will enable an assessment of any P.A /Home Support hours and/or Respite arrangements, Share a Break, part time Residential placement, current Multidisciplinary Support in place. The Prioritisation of supports to individuals is a live monitoring exercise revisited at least weekly or more frequently if issues present. Individuals can escalate from a P4 to a P1 very quickly and this in the main relates to two areas, change in circumstances and/or change in profile of the individual. Most persons will present as a P3. It's reasonable that they would have minimum once weekly face to face contact.

A lived example of a provider's response to Risk that presented & measured high during the COVID-19 Pandemic.

Prioritising any need is centred on a risk assessment and corresponding matrix score. Mitigating controls/responses will vary for each individual: i.e. someone who is high risk due to familial vulnerabilities such as age profile of carers, underlying conditions, comorbidities etc. Services, in this context may not respond with direct hours of support as this would present a further risk, rather Services focus on external supports such as shopping, pharmacy, daily phone call, MDT/SW alert & contact. Whereas another individual with measured high risks and an increase in behaviours of concern will require the 30 hours external support in Day Services to support/maintain the home placement if their package of care is solely in Day Services.

Appendix 2 – Questionnaire regarding the current status of Day Services arising from COVID-19 Day Service Delivery

Covid - provider questionnaire v2 - Microsoft Excel

File Home Insert Page Layout Formulas Data Review View

Normal Page Layout Page Break Preview Custom Views Full Screen

Ruler Formula Bar Gridlines Headings Zoom 100% Zoom to Selection

New Window Arrange All Freeze Panes Hide Split View Side by Side Synchronous Scrolling Reset Window Position Save Switch Workspace Windows

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Provider Name **FIRST DRAFT Questionnaire regarding the current status of Day Services arising from COVID-19 Day Service Delivery**

Below is a list of your locations. Please complete the table for each location

CHD	Day Service Location	Address Line 1	Area	No. of Day Service Users	No. of front line staff supporting this location pre-covid?	Redeployed - COVID-19		Residential		Non-Residential			Number of non residential People receiving Focused Individualised Day Service Support				Number of People in receipt of General Support Only							
						Taken over as COVID-19 location ? Y/N	No. of front line staff redeployed for COVID work?	No. of day service users in receipt of residential services	No. of day service staff providing Day Service supports in Residential location.	No. Of Non residential Service Users receiving Day Service Supports at this time ?	No. Of Non residential Service Users receiving NO Day Service Supports at this time ?	No. of Non Residential Service Users attending the location at this time	Face to Face		Remote		Weekly telephone call	Optional video activities	Do not want any support during this time					
													1 - 5 hpw	5-10 HPW	10-20 HPW	20 - 30 HPW	1-5 hpw	5-10 HPW	10-20 HPW	20 - 30 HPW				
CH04	Location 1	KILLARNEY	KERRY	14																				
CH04	Location 2	HASHIE STREET	KERRY	42																				
CH04	Location 3	BONERUE	KERRY	6																				
CH04	Location 4	ST JOHN OF GODS SERVICES	KERRY	1																				
CH04	Location 5	MORRISVILLE INDUSTRIALS	KERRY	6																				
CH04	Location 6	MORRISVILLE CENTRE	KERRY	21																				
CH04	Location 7	TOBAIRCOH	KERRY	6																				
CH04	Location 8	LISWEL	KERRY	12																				
CH04	Location 9	KILLINGLIN DAY SERVICE	KERRY	11																				
CH04	Location 10	DOHRIC STREET	KERRY	13																				
CH04	Location 11	OILKAR BEO	KERRY	12																				
CH04	Location 12	KENMARE	KERRY	3																				

Sheet 1


Ready

60%


09:12 20/05/2020

Innovative Practices: Please let us know of any innovative practice that you have developed to respond to the COVID-19 crisis. This will help us plan and share learning across the day service sector.

Appendix 3 – Draft Communication – Adult Disability Day Services and COVID-19



Draft Adult Disability Day Services and COVID-19
25th May 2020



Over 18,000 adults are receiving Adult Disability Day Service Supports from 91 Service Providers. There are over 1,200 school leavers who will require day service supports from September 2020.

Supports in Day Service Locations were wound down in March under public health COVID-19 guidance.

Some supports continue to be provided in a number of ways, for example by telephone, online communication and responses to address emergency needs.

A National group representative of service users and families, Service providers and HSE are working together to prepare for the resumption of day service supports in line with COVID-19 guidance.

This National group are looking at all the COVID-19 guidance and see how Day Services can be provided during COVID.

The safety of service users and staff is of critical importance therefore the attendance at locations will be reduced.

The Next Steps:

- Social distancing means that less people can be in a location at any one time. Services will have to be delivered in a different way with less attendance at a day service location.
- Providers will have to develop a plan for the resumption of services. The providers have to look at how to provide day services whilst minimising the risk to service users and staff.
- The HSE Community Healthcare Organisations will ensure Service Provider plans are strong and adhere to public health guidance.
- Providers will make contact with day service users and they will talk about how to provide supports to each person.
- HSE and Service Providers where identified, will continue to communicate with school leavers and their families to plan and organise for September.
- Staff and Service User training will be made available.

The National Group plan to have more detailed guidance available by??

Service Provision during COVID-19 National Public Health Guidance
Maintain Social Distancing • Hand Hygiene • Cough Etiquette • Personal Protection Equipment