



PAC-R-1219

Correspondence 3A.4  
Meeting 112 –  
30/01/2014

Health Service Executive  
Parliamentary Affairs Division  
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Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

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29<sup>th</sup> January 2014

Mr. Ted McEnery,  
Clerk to Committee,  
Committee of Public Accounts,  
Leinster House,  
Dublin 2.

Dear Ted,

I refer to your correspondence dated 24<sup>th</sup> January from the Committee to Mr. Tony O'Brien, Director General in relation to payments made to the Rehab Group.

Please find attached for the Committees attention a response from the National Director for Social Care on the matter as requested.

If any further information is required please do not hesitate to contact me.

Yours sincerely,

**Ray Mitchell**  
**Assistant National Director**  
**Parliamentary & Regulatory Affairs Division**

## Response to Public Accounts Committee:

During 2013 the HSE placed priority focus on Senior Managers' salaries in the Section 38 Agencies as they account for €2.4bn (or 74%) of the €3.2 billion allocated by the HSE to non statutory providers. Unlike the employees of Section 38 Agencies the employees of Section 39 Agencies are not public servants, are not members of public sector pension schemes and unlike their Section 38 counterparts are not directly bound by the Department of Health's Consolidated Salary Scales. There are over 2,600 agencies who receive financial assistance from the Health Service Executive pursuant to Section 39 of the Health Act, 2004 culminating in over 4,100 individual service arrangements.

Since the introduction of the *National Standard Governance Framework with the Non - Statutory Sector* the HSE has been continuously reviewing and strengthening these arrangements in accordance with the requirements of sound governance and accountability and in order to ensure that it is aligned with the ever changing exigencies of our health and personal social services. One such enhancement was the introduction in 2013 of a requirement on all agencies covered by a service arrangement, both Section 38 and 39, to complete a template setting out details of the remunerative arrangements for Senior Managers (Grade VIII and above).

In relation to the Section 39 agencies in particular, the HSE is currently involved in a process of verifying and validating the Service Managers' remuneration templates with a priority focus on the larger Section 39 Agencies who receive in excess of €5million in funding annually from the HSE. This matter was discussed during the last meeting of the HSE with the Joint Oireachtas Committee.

We hope to have a full detailed report on that information by the end of the first quarter 2014.

### Rehab

The HSE has service arrangements in place with two wholly owned subsidiaries of the Rehab Group (CRO ref; 14800). There are 27 arrangements in place with Rehabcare (CRO Ref: 282889) at a cost of €40m in 2013 and 19 with the National Learning Network (248453) at a cost of €10.2m in 2013.

| <u>Year</u> | <u>National Learning Network (NLN)</u> | <u>Rehabcare</u> | <u>Rehab Total</u> |
|-------------|--|------------------|--------------------|
| 2009        | €7.5m*                                 | €40.5m           | €48m               |
| 2010        | €7.4m                                  | €40.5m           | €48m               |
| 2011        | €10m                                   | €38.8m           | €48.8m             |
| 2012        | €11m                                   | €40m             | €51m               |
| 2013        | €10m                                   | €40m             | €50m               |

\* Please note that there is an element of estimation in the figure for NLN for 2009 as that was the first year the National Register for HSE funded agencies was introduced.

Attached for information copy of Service Agreement with Rehab Care for 2013.

**Pat Healy**  
**National Director**  
**Social Care Division**

**ENDS**



**Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive**

**and**

**RehabCare  
Care Group : DISABILITY HSE – Dublin Mid Leinster 2013**

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**SERVICE ARRANGEMENT**

**PART 2 OF ARRANGEMENT –SERVICE SCHEDULES - 2013**

Section 39 Health Act 2004

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These schedules should be indexed as appropriate in Part 1 of the Service Arrangement

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## SCHEDULE 1

### Contact Details

#### Purpose

The purpose of this schedule is to set out the key contact details of both the Executive and the Provider.

| <b>Part A – The HSE</b>  |   |
|--|---|
| <b>Name &amp; Address of Regional Director of Operations</b>   | Mr. Gerry O’Dwyer,<br>Regional Director of Operations,<br>DML, HSE,<br>Oak House,<br>Millenium Park,<br>Naas,<br>Co.Kildare |
| <b>Name of HSE Area Manager/designated Lead Manager where schedules pertain to more than one HSE area:</b>   | Ms. Marion Meany  |
| <b>HSE Area Address:</b>   | HSE<br>Civic Offices<br>Bray<br>Co Wicklow  |
| <b>Telephone Number:</b>   | 01 274 4260   |
| <b>Fax Number:</b>   |   |
| <b>E-mail:</b>   | marion.meany@hse.ie   |
| <b>Main contact person:</b><br><i>(This is the nominated key contact person who will have operational responsibility for the contract)</i>   | Ms. Marion Meany  |
| <b>Authorised signatory:</b><br><i>(This is the person who has been assigned responsibility for signing service arrangements)<br/>This should not be confused with the authorised signatory for Garda vetting.</i> | Ms Marion Meany   |
| <b>Service Lead:</b>   | Ms. Marion Meany  |
| <b>Department/Specific area of responsibility:</b>   | General Manager   |
| <b>Address:</b>  | HSE<br>Civic Offices<br>Bray<br>Co Wicklow  |
| <b>Telephone Number:</b>   | 01 274 4260   |
| <b>E-mail:</b>   | Marion.meany@hse.ie   |
| <b>H.R. Contact:</b>   | Ms. Marion Meany  |
| <b>Address:</b>  | HSE<br>Civic Offices<br>Bray<br>Co Wicklow  |
| <b>Telephone Number:</b>   | 01 274 4260   |

|  |   |
|--|---|
| E-mail:  | Marion.meany@hse.ie   |
| <b>Finance Contact:</b>  | Ms. Marion Meany  |
| Address:   | HSE<br>Civic Offices<br>Bray<br>Co Wicklow                            |
| Telephone Number:  | 01 274 4260   |
| E-mail:  | Marion.meany@hse.ie   |
| <b>Emergency Contact:</b><br><i>(Ref: Local emergency/crisis protocol)</i> | Martina Queally   |
| Address:   | HSE<br>Dublin South East<br>Vergemount Hall<br>Clonskeagh<br>Dublin 6 |
| Telephone Number:  |   |
| E-mail:  | Martina.queally@hse.ie  |

| <b>Part B – The Provider</b>  |  |
|---|--|
| <b>Registered Name:</b><br>(Legal Entity)   | RehabCare  |
| <b>Trading Name:</b>  | RehabCare  |
| <b>Address:</b>   | Roslyn Park,<br>Beach Road,<br>Sandymount,<br>Dublin 4   |
| <b>Legal Status:</b>  | Company limited by Guarantee   |
| <b>Registered Charity Status:</b>   | RehabCare is a registered charity  |
| <b>Registered Charity Number:</b>   | CHY 12729  |
| <b>Registered Company Number:</b>   | 282889 – RehabCare   |
| <b>Tax Clearance Number :</b>   | 08282889-28927N  |
| <b>Parent organisation Name and Address:</b><br><i>(Where an organisation is a subsidiary of a national organisation)</i>   | Rehab Group<br>Roslyn Park,<br>Beach Road,<br>Sandymount,<br>Dublin 4  |
| <b>Franchise organisation Name and Address:</b> <i>(Where the legal entity is operating as a franchise)</i>   | N/A  |
| <b>Main Contact Person:</b><br><i>(This should be the person who has overall responsibility for execution of the contract and will be the key contact person with the Executive.)</i> | National:<br>Ms. Laura Keane,<br>Director Health and Social Care services,<br>RehabCare,<br>Roslyn Park,<br>Beach Road,<br>Sandymount,<br>Dublin 4 |
| <b>Chief Officer/Director or appropriate senior official (please give title):</b>   | Ms. Laura Keane,<br>Director Health and Social Care services   |
| <b>Chairperson:</b>   | Ms. Angela Kerins  |
| <b>Authorised signatory:</b><br><i>(This should be the person authorised by the Board of the Provider to sign the Service Arrangements)</i><br><i>Chairperson or Equivalent</i>       | Ms. Laura Keane,<br>Director Health and Social Care services   |
| <b>Address:</b>   | Rehab Group,<br>Roslyn Park,<br>Beach Road,<br>Sandymount,<br>Dublin 4   |
| <b>Telephone Number:</b>  | 01 2057 393  |
| <b>Email:</b>   | <a href="mailto:laura.keane@rehab.ie">laura.keane@rehab.ie</a>   |
| <b>Service Lead/s</b>   | Mr. Michael O'Connor   |
| <b>Specific area of responsibility:</b>   | East & South East Regions  |
| <b>Address:</b>   | RehabCare,<br>Kylemore Life House,<br>Kylemore Road,<br>Ballyfermot.   |

|  |   |
|--|---|
|  | Dublin 10   |
| Telephone Number:  | 01 626 9979 / 087 6544465   |
| E-mail:  | <a href="mailto:michael.oconnor@rehabcare.ie">michael.oconnor@rehabcare.ie</a>    |
| <b>Finance Contact:</b>  | Ms. Michelle McEvoy   |
| Address:   | RehabCare,<br>Roslyn Park,<br>Sandymount,<br>Dublin 4                             |
| Telephone Number:  | 01 2057 200   |
| E-Mail:  | <a href="mailto:Michelle.mcevoy@rehabcare.ie">Michelle.mcevoy@rehabcare.ie</a>    |
| <b>H.R. Contact:</b>   | Ms. Claire McKenna  |
| Address:   | RehabCare,<br>Roslyn Park,<br>Sandymount,<br>Dublin 4                             |
| Telephone Number:  | 01 2057 200   |
| E-mail:  | <a href="mailto:Claire.mckenna@rehab.ie">Claire.mckenna@rehab.ie</a>              |
| <b>Emergency Contact:</b><br><i>(Ref: Local emergency/crisis protocol)</i> | Mr. Michael O'Connor  |
| Address:   | RehabCare,<br>Kylemore Life House,<br>Kylemore Road,<br>Ballyfermot,<br>Dublin 10 |
| Telephone Number:  | 01 626 9979 / 087 6544465   |
| E-mail:  | <a href="mailto:michael.oconnor@rehabcare.ie">michael.oconnor@rehabcare.ie</a>    |



## SCHEDULE 2

### Quality and Safety

#### Purpose

This schedule should specify the quality service standards, and service assurance aspects which must be adhered to by the Provider in consideration for the funding (see **Schedule 6, Funding**) provided by the Executive.

#### 1. Mission Statements:

*This section contains the mission statements of both the Executive and the Provider.*

##### **The mission of the Health Service Executive is:**

*To enable people live healthier and more fulfilled lives*

##### **The mission of the Provider is:**

- **Mission** - “RehabCare is the provider of choice of person centred, health and social care services that facilitate people who are disadvantaged to participate in the life of their local community in ways that match their choices, aspirations and needs”.
- **Vision** – “Every person living life to the full and valued for and as themselves”

#### 2 Principles:

The Parties agree that in carrying out their respective obligations under this Service Arrangement, they shall each agree to:

- Comply with all relevant current and future statutory regulations including EU Directives relating to quality and standards of service and provision of information – including engagement with appropriate regulatory authorities.
- Comply where relevant with all current and future mandated National Standards and the Clinical Effectiveness Guidelines
- Identify respective clear lines of responsibility and accountability for implementation of quality and service user safety.
- Promote a continuous quality improvement culture
- Participate in the Executive’s quality and safety programmes and initiatives and provide information to facilitate benchmarking nationally.

- Participate in secondary quality and safety programmes and initiatives where necessary for regulatory compliance, however accreditation with external bodies may only be sought with the expressed approval of the Executive.
- Assure that where service arrangement(s) with third party companies are put in place that these also comply with the requirements of this schedule.

### 3 Regulation and Compliance

The Executive is committed to working towards compliance with relevant legislation, regulations and statutory obligations, and is continuing to develop structures to enable activities for compliance with these obligations to be identified, documented, monitored and reported upon on an ongoing basis. Within this context, all providers must ensure that they meet their legislative and regulatory obligations which include providing care to Service Users without discrimination on account of race, sex, sexual orientation, civil/family status, colour, religion, national origin, age, physical or mental illness, intellectual disability or physical disability.

The Parties are required to work with regulatory bodies to promote and implement structured programmes of quality assurance to ensure that standards of quality and patient safety are adopted by and embedded within the Services, and that value for money in the delivery of health and personal social services is achieved.

The Provider shall comply with their statutory obligation to provide information to HIQA in accordance with the Health Act 2007 and shall comply with all mandatory reporting and provide information as required, to all relevant regulatory bodies (e.g. to Mental Health Commission, to HIQA, to HSEA, etc). These reports and information shall also be sent to the Executive on request. In undertaking this Arrangement the Provider will implement recommendations arising from both internal and external reviews/reports and investigations in collaboration with the Executive.

While Providers must ensure they are aware of their statutory obligations with regard to legislation and regulation, *Appendix 1* highlights specific regulatory bodies and regulations which the Executive consider particularly relevant for the Services under this Arrangement.

### 4 Corporate/Clinical Governance:

The service provider shall comply with the Code of Practice for the Governance of State Bodies, and by signing this Schedule are deemed to have made a declaration to that effect.

The service provider shall also have a code of governance in place that is compliant with the *Framework for the Corporate and Financial Governance of the Health Service Executive* prepared by the Executive pursuant to Section 35 of the Health Act 2004.

The Executive may at any time request, and be provide with, a copy of the Provider's code of governance and evidence of compliance with the above.

The National Standards for Safer Better Healthcare provide a high level outcome framework for the delivery of quality and safety. Clinical Governance is the system (structures and processes) to support providers in delivering on quality and safety, thereby supporting them in achieving the National Standards. It is built on the model of the Chief Executive Officer/General Manager/Area Manager or equivalent, working in partnership with the clinical director, director of nursing/midwifery and service/professional leads. Service providers are

accountable for the quality, safety and satisfaction of patients in the care they deliver through the system of clinical governance and the outcomes within the National Standards.

Processes for Clinical Governance:

- Accountability arrangements for quality, patient safety and clinical outcome
- The use of quality and performance indicators
- Arrangements for patient service user and public community involvement
- Risk management and patient safety
- Clinical effectiveness and audit plans
- Learning and sharing information pertaining to quality and patient safety
- Staffing and staff management for quality and patient safety
- Information management for quality and patient safety
- The organisation's capacity and capability for quality and patient safety

The QPS Directorate has provided resources and guidance on Clinical Governance which is available on the HSE website and will provide support to organisations on Clinical Governance on request.

The focus must at all times concentrate on effective governance, accountability, quality, and risk management throughout the organisation. The Provider must strive for an environment that enables a governance system that clearly specifies, delegates and integrates corporate and clinical governance. A well governed service is clear about what it does, how it does it, and is accountable to its stakeholders. It is unambiguous about who has overall executive accountability for the quality and safety of the services delivered. The Provider's governance arrangements must ensure that there are clear lines of accountability at individual, team and service levels so that healthcare professionals, managerial staff and everyone working in the Service are aware of their responsibilities, accountability and authority.

#### **Corporate & Clinical Governance**

*This section should provide details of the Corporate & Clinical Governance Structure in place (This may include organisation chart.) Please provide documentation including the Memoranda & Articles of Association.*

RehabCare is a company limited by guarantee and is a wholly owned subsidiary of the Rehab Group. Rehab Group and RehabCare have separate Boards. The Rehab Group Board has a number of sub committees, which look across the group including Audit committee, Best Practice committee and Remuneration committee. The Director of Health and Social Care Services has responsibility for RehabCare and reports to the CEO of Rehab Group and directly to the Board of RehabCare. The Rehab Group has an internal auditor ensuring compliance with legal financial requirements and with Group policies and procedures relating to finance. The Audit Committee oversees an annual work plan for internal audit.

RehabCare's Financial Statements are prepared in accordance with Generally Accepted Accounting Practice in Ireland and are audited by external auditors (Price Waterhouse Coopers) annually. The statutory audited accounts are provided to the HSE on an annual basis.

The Director of Health & Social Care Services has overall management responsibility for

RehabCare services supported by a management team representing the four operational regions and central functions. RehabCare has a risk register and a robust Risk Management system.

The RehabCare Memorandum and Articles of Association are as provided previously.

Clinical Governance:

The Policy and Service Compliance function within Rehab Group is responsible for developing and monitoring service compliance and clinical governance structures across the Group and advising on policy and best practice. RehabCare is a member of the Clinical Indemnity Scheme and reports clinical incidents accordingly (as per 5.1 below).

Staff are recruited with relevant professional qualifications as required such as, Health and Social Care, Behavioural Therapists, Clinical Psychologist etc. Policies, Procedures and training in all relevant areas are provided.

## **5 Quality Assurance/Monitoring**

As part of the Executive's obligations in meeting regulatory and compliance requirements, the Executive, together with service providers are required to provide assurance both internally and externally.

The 'Performance Monitoring' outlined in Schedule 4, includes Quality Indicators and outcome measurements that providers will be required to report against as part of this schedule. These quality indicators are included in the 2013 National Service Plan performance indicator suite. Throughout the year there may be changes to some of these indicators/outcome measurements and the Executive hereby agrees to inform the Provider at the earliest opportunities.

In undertaking their responsibilities the Executive, in addition to undertaking the processes outlined above, will also undertake healthcare audit and monitoring to provide assurance to the Executive's Board. All the services covered by this schedule may be subject to audit by the Quality Patient Safety Audit function. The service provider will facilitate and fully support the audit process and implement the recommendations from such audits

The Executive and the provider have an obligation to meet the National Standards for Safer Better Healthcare. Executive and provider performance against the standards will be by self assessment through a process determined by the QPS Directorate. The Regulatory Authority will carry out independent audit at its discretion.

There are five distinct processes that will be required in order for the Executive and the Provider to meet their obligations above.

5.1 Internal Assurance – the Executive shall support and encourage providers, through the reporting structures of the organisation to undertake a process of local auditing and monitoring to continually improve performance leading to compliance against the various standards/codes of practice.

5.2 The Regional Directors of Operations (RDO's) will undertake to monitor local implementation, monitoring and reporting on all indicators, outcome measurements,

risk and incident reporting and assessments against standards, and implementation of recommendations. The RDO's will make this information available to the Quality and Patient Safety Directorate to enable national monitoring to take place.

5.3 Healthcare Audit: The provider, RDO, or QPS may request an audit at any time to provide independent evidence and assurance of performance.

5.4 External Assurance - the Executive shall support and encourage the Provider to participate in all relevant external assurance programmes as outlined by regulatory Bodies.

5.5 The Provider shall monitor implementation of the National Standards for Safer Better Healthcare and supporting standards and guidance (see paragraph 6 below), which shall be reviewed in line with the overall review procedures of this Arrangement.

*Appendix 2* outlines the specific requirements of the Executive in relation to participation of the Provider in quality assurance programmes.

### **Monitoring of Quality and Standards**

*This section should outline the plan/actions the agency has in place to monitor quality and standards. This should include actions such as:*

- *Audit tools appropriate to service*
- *Service user inputs*
- *Service user experience surveys*
- *Service user evaluations*
- *Carer evaluations*
- *Service evaluations*

*The information recorded below should link to Schedule 3 Service Outcomes.*

#### **Monitor Person Centeredness**

RehabCare are committed to an ethos of Continuous Improvement and have been working in line with the Business Excellence Framework – EFQM. The organisation achieved Recognised for Excellence in 2009 at a national level. In addition, a number of services achieved EQUASS certification in 2011 and 2012 and the remainder of services are currently undergoing an accreditation process.

RehabCare undertakes a number of specific measures to monitor quality and standards. They include

- Stakeholder satisfaction surveys
- Service User satisfaction surveys
- Employee Engagement surveys
- Individual client and service evaluations
- Internal reviews in line with HSE Guidelines and HIQA Standards
- Internal reviews Finance

These measures are linked to the organisations strategic objectives.

## 6 HSE Initiatives (including Standards and Guidance)

To support the Executive and Providers to continually improve their performance leading to compliance with the National Standards for Safer Better Healthcare the Executive will continue to initiate, support and deliver on a number of QPS initiatives.

- a) The Provider shall support and contribute to the development, implementation and review of all initiatives, standards and guidance associated with the services. Such initiatives will be supplementary to and shall not affect existing statutory requirements and relevant legislation.
- b) The Provider shall comply with relevant service initiatives with a view to continuous quality improvement.

These include but are not limited to:

- Implementation of the Executive's Directorate of Clinical Strategy and Programme outputs (the Care Programmes)
- The Medication Safety Programme, including
- The Radiation Safety Programme
- The Decontamination of Reusable Invasive Medical Devices Programme
- The Medical Devices and Equipment Management Programme
- The Healthcare Acquired Infection Programme
- The Healthcare Records Management Programme
- The Integrated Care Programme
- National Consent Programme
- National Clinical Audit Support Programme
- HSE Healthcare Audits
- Patient Safety Culture Survey
- HSE Performance Indicator Initiative
- Integrated Risk Management processes such as HSE Incident Management and Risk Register processes.

*Appendix 3A* specifies the additional particular actions the Provider should be implementing to ensure quality and safety standards, while *Appendix 3B* sets out additional relevant codes of practice to be adhered to in relation to the services specified in **Schedule 3 Service Delivery Specification**.

### 7. Quality and Patient Safety Improvement Plan:

The Executive may require the Provider to, develop and implement a Quality and Safety Improvement Plan which specifies annually the actions the Provider shall take to improve quality and service user safety.

The Quality and Patient Safety Improvement Plan if requested shall be based on the organisations self assessment against the National Standards for Safer Better Healthcare. The QPS directorate will provide guidance for the implementation of the

National Standards for Safer Better Healthcare including guidance and supports for the development of Quality Improvement Plans where required.

Additional actions may be added to the plan to deal with activities required to address failure to achieve Quality Indicator targets, implement audit recommendations, and implement recommendations from major reports/investigations.

Monitoring of the implementation of the plan will be through the service arrangement performance review meetings as set out in schedule four, where it will be a standing agenda item.

The RDO and /or the QPS directorate may request that an audit of the implementation of the plan be carried out at any time.

**Appendix 1 –Quality and Safety Schedule:**

Service Providers must ensure they are aware of their statutory obligations with regard to legislation and regulation.

| <b>A: Regulatory Bodies</b>  |   |   |                                     |
|--|---|---|-------------------------------------|
| <i>The list below includes some of the main regulatory bodies/units, the list is not exhaustive and is given for illustrative purposes only Full listing with web links to sites etc. available on <a href="http://www.hse.ie/eng/about/Who/qualityandpatientsafety/Links%20to%20Statutory%20bodies.pdf">http://www.hse.ie/eng/about/Who/qualityandpatientsafety/Links to Statutory bodies.pdf</a></i> |   |   |                                     |
| Academy of Medical Laboratory Science  | Medical Council                                     |   |                                     |
| Adoption Authority of Ireland  | Mental Health Commission                            |   |                                     |
| An Bord Pleánála   | National Cancer Registry N/A                        |   |                                     |
| An Bord Altranais/Irish Nursing Board  | National Consumer Agency                            |   |                                     |
| Child and Family Support Agency  | National Disability Authority                       |   |                                     |
| Commission for Public Service Appointments<br>N/A  | National Employment Rights Authority                |   |                                     |
| Companies Registration Office  | National Standards Authority of Ireland             |   |                                     |
| Competition Authority  | Office of the Data Protection Commissioner          |   |                                     |
| Dental Council   | Office of the Director of Corporate Enforcement     |   |                                     |
| Governmental Departments   | Office of the Refugee Applications Commissioner     |   |                                     |
| Environmental Protection Agency  | Opticians Board                                     |   |                                     |
| Financial Regulator  | Pensions Board                                      |   |                                     |
| Food Safety Authority of Ireland   | Office of the Revenue Commissioners                 |   |                                     |
| Health and Safety Authority  | Pharmaceutical Society of Ireland                   |   |                                     |
| Health and Social Care Professionals Council   | Pre-Hospital Emergency Care Council N/A             |   |                                     |
| Health Information Quality Authority (HIQA)  | Radiological Protection Institute of Ireland<br>N/A |   |                                     |
| Health Insurance Authority   | Standards in Public Office Commission               |   |                                     |
| Health Protection Surveillance Centre  | State Claims Agency                                 |   |                                     |
| Health Research Board  |   |   |                                     |
| Irish Auditing and Accounting Supervisory Authority (IAASA)  |   |   |                                     |
| Irish Blood Transfusion Service  |   |   |                                     |
| Irish Medicines Board  |   |   |                                     |
| Irish National Accreditation Board   |   |   |                                     |
| Labour Court   |   |   |                                     |
| Labour Relations Commission  |   |   |                                     |
| Law Reform Commission  |   |   |                                     |
| <b>B: Regulation:</b>  |   |   |                                     |
| <i>The following listing sets out those regulations which the Executive wish to highlight as particularly relevant for the services under this arrangement. The list below may not be exhaustive and may be added to as appropriate. (PLEASE TICK BOXES)</i>   |   |   |                                     |
| <b>Generic may apply to all</b>  | <input checked="" type="checkbox"/>                 | <b>Care Group Specific</b>                                  | <input checked="" type="checkbox"/> |
| Health Acts 1947-2010  | <input checked="" type="checkbox"/>                 | Child Care Acts 1991 - 2011                                 | <input checked="" type="checkbox"/> |
| Disability Act 2005  | <input checked="" type="checkbox"/>                 | The Protection of Persons Reporting Child Abuse Act, 1998   | <input checked="" type="checkbox"/> |
| The Non Fatal Offences Against the Person Act 1997   | <input checked="" type="checkbox"/>                 | Commission to Inquire into Child Abuse (Amendment) Act 2005 | <input checked="" type="checkbox"/> |



|   |     |   |   |
|---|-----|---|---|
| Equality Act 2004   | √   | Ombudsman for Children Act 2002   | √ |
| Companies Act 1963 - 2009   | √   | Children's Act 2001   | √ |
| Data Protection Acts 1988 & 2003  | √   | Mental Health Acts 2001 - 2008  | √ |
| Freedom of Information Acts 1997 & 2003   | √   | Protection of Children (Hague Convention) Act 2000  | √ |
| Safety Health & Welfare at Work Act 2005  | √   | Education for People with Special Educational Needs (EPSEN) Act 2004                                  | √ |
| E.U. Procurement Directive 2004/18/EC   | √   | United Nations Standard Rules on the Equalisation of Opportunities for Persons with Disabilities 1993 | √ |
| Competition Act 2002  | √   | United Nations Convention on the Rights of the Child  | √ |
| Health & Social Care Professionals Act 2005   | √   |   |   |
| Public Health Tobacco (Amendment) Act 2004  | √   |   |   |
| Ombudsman Act 1980  | √   |   |   |
| Employment Equality Acts 1998 and 2004  | √   |   |   |
| Equal Status Acts 2000 to 2004  | √   |   |   |
| Ethics in Public Office Acts 1995   | N/a |   |   |
| Comptroller and Auditor General (Amendment) Act 1993  | √   |   |   |
| Standards in Public Office 2001   | √   |   |   |
| Department of Finance Circular No. 17/2010 (Requirements for Grants & Grants in Aid)                                    | √   |   |   |
| EU Directive 2005/36/EC and all related Statutory Instruments   | √   |   |   |
| Financial Emergency Measures in the Public Interest Act 2010  |     |   |   |
| Department of Finance Circular 3/2011 (Control of Secured Borrowings by General Government) & S.I. 40/2011              |     |   |   |
| S.I. 359 of 2008: European Communities (Vehicle Drivers Certificate of Professional Competence)(No. 2) Regulations 2008 | √   |   |   |
| The Protection of Employees (Temporary Agency Work) Act, 2012.  | √   |   |   |

**Appendix 2 - Quality and Safety Schedule:**

| <b>Quality Assurance:</b>  |     |   |   |
|--|-----|---|---|
| <i>This section should set out the requirements, if any, of the Executive in relation to participation of the Provider in quality assurance programmes e.g. HIQA programmes. Any of the internal policies and procedures may be requested by the Executive for review and approval, in addition the Executive may seek evidence of the Provider's compliance with same. The Provider shall comply with any such request.</i> |     |   |   |
| <b>Generic may apply to all</b>  | √   | <b>Care Group Specific</b>  | √ |
| HSE Process to review documentation supplied by the Service Provider to include Child Protection Policies  | √   | National Quality Standards: Residential Services for People with Disabilities 2009 (HIQA)   | √ |
| Involvement of Quality Assurance, Audit & Risk & Financial Audit   | √   | Audit of staffing rosters and demonstration of critical review and adjustment to rationalise staff deployment patterns in line with client need, with monitoring and quantification of efficiencies achieved (VFM Review recommendation)<br>Note:<br>RehabCare is committed to providing value for money in respect of service delivery. It is noted that parameters and templates have not as yet been discussed and agreed in respect of this recommendation. |   |
| Involvement of HIQA in the evaluation Process  | √   | Children First in Disability Services – A Guide to Policy Formation and Implementation  | √ |
| National Standards for the Prevention & Control of Healthcare Associated Infections (HIQA)   | √   |   |   |
| Ombudsman  | √   |   |   |
| Ombudsman for Children   | √   |   |   |
| E.U. Consumer Affairs  | √   |   |   |
| Consumers Association of Ireland   | √   |   |   |
| National Standards for the Protection and Welfare of Children (HIQA) July 2012   |     | As per Schedule 8   |   |
| National Standards for Safer Better Healthcare (HIQA) June 2012  | N/A |   |   |

**Appendix 3 - Quality and Safety Schedule:**

| <b>A: Quality and Standards in Place:</b>   |     |  |     |
|---|-----|--|-----|
| <i>This section should specify the additional particular actions the Provider should be implementing to ensure quality and service standards. This list may not be exhaustive and may be added to if appropriate. Any of the internal policies and procedures may be requested by the Executive for review and approval, in addition the Executive may seek evidence of the Provider's compliance with same. The Provider shall comply with any such request.</i> |     |  |     |
| <b>Generic May apply to all</b>   |     | <b>Care Group Specific</b>   |     |
| Individual Care Plans for Clients   | √   | National Standards for Children's Residential Centres 2001   | √   |
| Personal Development Plans for Staff  | √   | National Standards for Special Care Units 2003 (DOH)   | N/A |
| Personal Outcomes Accreditation   | N/A | National Quality Standards: Residential Services for People with Disabilities 2009 (HIQA)              | √   |
| Financial Audit   | √   | Protocol on the Role of the National Advocacy Service for People with Disabilities (HSE)               | √   |
| Risk Management   | √   | Time to Move on from Congregated Settings – A Strategy for Community Inclusion (HSE – June 2011)       | √   |
| Continuous Quality Improvement  | √   | National Housing Strategy for People with a Disability 2011 – 2016                                     | √   |
| Service Quality Accreditation   | √   | New Directions – Personal Support Services for Adults with Disabilities                                | √   |
| Residential Care Guidelines & Standards   | √   | Report of the Wording Group on Respite/Residential Care with Families in a Community Setting           | √   |
| Excellence Through People   | √   | National Policy and Strategy for the Provision of Neuro-Rehabilitation Services in Ireland 2011 - 2015 | √   |
| HACCP (system of food quality standards)  | √   | National Review of Autism Services, Past, Present and the Way Forward 2011                             | √   |
| ISO Standards   | N/A | Review of National Audiology Review Group (HSE – April 2011)   | √   |
| Health Quality Mark   | N/A | HSE Policy on Domestic, Sexual and Gender Based Violence   | √   |
| Quality & Fairness - A Health System For You 2001   | √   | National Strategy on Domestic, Sexual and Gender-Based Violence 2010-2014                              | √   |
| Trust in Care 2005  | √   | Report of the Value for Money and Policy Review of the Disability Services Programme                   |     |

|   |     |  |  |
|---|-----|--|--|
|   |     | (VFM) July 2012<br>Note: RehabCare is committed to providing value for money in respect of service delivery. It is noted that parameters and templates have not as yet been discussed and agreed in respect of this recommendation. Specific standards have not as yet been specified under this report. |  |
| Vision for Change 2006  | √   |  |  |
| Children First – National Guidelines for the Protection and Welfare of Children 2011  | √   |  |  |
| Your Service Your Say – The Policy and Procedures for the Management of Consumer Feedback to include Comments, Compliments and Complaints in the Health Service Executive August 2008 (Schedule 8 refers) | √   |  |  |
| Template for Capturing Statistics Relating to Complaints & Guidelines for the Completion of the Template  | √   |  |  |
| Standard Operating Procedure for Dealing with the Provision of Information to Elected Public Representatives November 2007  | N/a |  |  |
| National Strategy for Service User Involvement in the Irish Health Service 2008-2013  | √   |  |  |
| Best Practice Guidelines for Establishing and Developing a Service User Panel within a Health Setting   | √   |  |  |
| Framework for Corporate & Financial Governance for Agencies Funded by the Department of Health & Children April 2006  | √   |  |  |
| LGBT Health: Towards Meeting the Health Care Needs of Lesbian, Gay, Bisexual and Transgender People (HSE Report)  | √   |  |  |
| National Standards for the Prevention & Control of Healthcare Associated Infections (HIQA)  | √   |  |  |
| National Hygiene Services Quality Review 2008: Standards & Criteria (HIQA)  | N/a |  |  |
| HSE Circular 012-2009 ‘Prevention of Transmission of Blood Borne Diseases in the Healthcare Setting’  | √   |  |  |
| Linking Service and Safety: Together Creating Safer Places of Service (HSE 2008)  | √   |  |  |
| Procedure for Escalation of Issues (including incidents and near misses) in HSE operated or funded services (HSE QCCD/ISD)  | √   |  |  |
| HSE Good Faith Reporting Policy April 2009<br>RehabCare has a whistle blowing policy  |     |  |  |
| Procedures on Protected Disclosures of Information in the Workplace RehabCare has a whistle blowing   |     |  |  |

|  |                  |  |   |
|--|------------------|--|---|
| policy   |                  |  |   |
| Working with Lesbian, Gay, Bisexual and Transgender People: Good Practice Guidelines for Health Service Providers RehabCare has a Diversity policy   |                  |  |   |
| On Speaking Terms: Good Practice Guidelines for HSE Staff in the Provision of Interpreting Services  | √                |  |   |
| HSE Code of Governance 2011  | √                |  |   |
| What you should know about Information Governance (A Guide for health and social care staff) HIQA  | √                |  |   |
| Standards for the Assessment of Need 2007 (HIQA)   | √                |  |   |
| General Practice Messaging Standard Version 2.0 (HIQA) November 2011   |                  |  |   |
| Policy Statement on Fraud – Information & Guidelines for Staff (Document 2.3 of HSE Code of Governance)  | √                |  |   |
| ICT & Data Protection Policies (Refer to HSE Internet website at <a href="http://www.hse.ie/eng/services/Publications/pp/ict/">http://www.hse.ie/eng/services/Publications/pp/ict/</a> )   | √                |  |   |
| Child Protection and Welfare Practice Handbook (HSE)   | √                |  |   |
| National Standards for the Protection and Welfare of Children (HIQA) July 2012   | √                |  |   |
| National Standards for Safer Better Healthcare (HIQA) June 2012  | N/a              |  |   |
| Site Specific Emergency Plan<br>Each service has a Business Continuity plan  |                  |  |   |
| Future Health: A Strategic Framework for Reform of the Health Service 2012-2015 (DOH – Nov 2012)   | √                |  |   |
| Department of Health Statement of Strategy 2011-2014   | √                |  |   |
| Your Health is Your Wealth -A Policy Framework for a Healthier Ireland 2012 -2020  | √                |  |   |
| <b>B: Codes of Practice:</b>   |                  |  |   |
| <i>This section should set out additional relevant codes of practice to be adhered to in relation to the services specified in Schedule 3 Service Delivery Specification. This should include any agreed local and national codes of practice associated with such services. This list may not be exhaustive and may be added to if appropriate. Any of the internal policies and procedures may be requested by the Executive for review and approval, in addition the Executive may seek evidence of the Provider's compliance with same. The Provider shall comply with any such request.</i> |                  |  |   |
| <b>Code of Practice –Generic may apply to all</b>  | √                | <b>Code of Practice –Care Group Specific</b>   | √ |
| HR/Employment Codes of Practice including: <ul style="list-style-type: none"> <li>• Bullying / Dignity at Work Policy</li> <li>• Disciplinary Procedures</li> <li>• Equal Opportunity aspect of Recruitment Selection &amp; Promotion</li> <li>• Grievance Procedures</li> </ul>   | √<br>√<br>√<br>√ | Elder Abuse Code of Practice<br>RehabCare has an Adult service users and Child Protection policy |   |

|  |   |  |   |
|--|---|--|---|
| • Management of Attendance / Absence Management  | √ |  |   |
| Policy for Lone Working (HSE – May 2012) RehabCare have a policy for Lone working  |   | HSE Elder Abuse Policy – Responding to Allegations of Elder Abuse 2007<br>RehabCare has an Adult service users and Child Protection policy |   |
| Guidelines for Lone Workers (HSE – Sept 2012) RehabCare have a policy for Lone working   |   | Code of Ethics & Good Practice for Children’s Sport 2006   | √ |
| Risk Management<br>RehabCare have a risk register and range of risk management policies  |   | Our Duty to Care - The Principles of Good Practice for the Protection of Children & Young People 2002 (DOH&C)                              | √ |
| Confidentiality  | √ | Guidelines on Person Centred Planning in the provision of Services for People with Disabilities in Ireland (NDA)                           | √ |
| Trust in Care 2005   | √ |  |   |
| Codes of Professional Conduct as Pertains to Relevant Disciplines  | √ |  |   |
| Financial/Accountancy Code of Practice   | √ |  |   |
| Code of Good Practice in Professional Supervision & Mentoring ( <i>Various as appropriate</i> )                                | √ |  |   |
| Safety Statement   | √ |  |   |
| National Standards for the Prevention & Control of Healthcare Associated Infections (HIQA)                                     | √ |  |   |
| Guidance for Directors and Senior Managers on their Responsibilities for Workplace Safety & Health (Health & Safety Authority) | √ |  |   |
| What you should know about Information Governance (A Guide for health and social care staff) HIQA                              | √ |  |   |
| HSE Code of Standards and Behaviour (Document 2.1 of HSE Code of Governance)   | √ |  |   |
| Child Protection and Welfare Practice Handbook (HSE)   | √ |  |   |
| Working with Children & Young People – A Quick Guide for Frontline Staff (HSE)   | √ |  |   |
| Policy on the Management of Professional Registers and Amendments to such Registers – January 2010                             |   |  |   |

## SCHEDULE 3

### Service Delivery Specification

#### Purpose

This Schedule is intended to specify the functional details of the health and personal social services which will be provided by the Provider in consideration for the Funding (as set out in **Schedule 6 Funding**) provided by the Executive. The performance of the Services will be monitored as set out in **Schedule 4 Performance Monitoring**.

This Schedule may be augmented by the addition of relevant reports and completion of excel templates to allow for effective information management. The schedule is divided into four parts:

- Section 1      Service Overview - this should include a general overview of the services provided and may be augmented by the addition of relevant reports.
- Section 2      This section should include service location, description, scope and quantum of services, service user numbers and catchment areas. This section may be more suitably managed by the use of excel, and may be subject to a national standard template, dependant on care group and services provided. *(This will be made known to you by your relevant HSE Contact)*
- Section 3      Information is also required on the following aspects of the service
- a) Service Outcomes
  - b) Staff Qualifications
  - c) Access, Referrals, Safeguarding, Admission and Discharge procedures
  - d) Performance indicators
  - e) Third Party contracting
- Section 4      Additional Services - This section sets out the process to be undertaken to increase the quantum and scope of services already agreed in this Arrangement.

#### Section 1:

##### Service Overview:

Please provide a brief overview of the service provision - relevant Care Group eg intellectual disability, physical & sensory disability, children services, social inclusion, mental health, older persons etc. You may reference additional documentation if this would provide further context.

*In the case of services where both ID and P&S services are provided please indicate this by including both in the description.*

**If applicable, list additional documents appended:**

Within the catchment area of Dublin/ Mid-Leinster the following care groups are catered for:

Residential Adult Services (Prader Willi Syndrome)  
Residential Adult Services (Supported accommodation)  
Adult Day Services catering for:  
Intellectual Disability  
Physical & Sensory Disability  
Mental Health  
Acquired Brain Injury  
Home based respite

**Residential Services** – which supports individuals to live as independently as possible and to achieve their maximum potential through a range of programmes, person centred plans and behaviour support plans. RehabCare adopts a positive behavioural support approach to supporting people with challenging behaviours and facilitates community based living, personal development and social inclusion; plans that involve a systematic process of goal setting and review.

**Supported Accommodation Services** - to enable individuals to reside within their communities and to facilitate their personal development, independent living, community integration, safety awareness, and social and leisure skills. All service users are facilitated to develop their own Individual Action Plans to meet identified needs.

**Resource Centres** - maintain and enhance the core capabilities and quality of life of people with disabilities. Through person centred plans (PCP's) that are flexible and designed to meet the needs, wishes and desires of each person. These PCP's can include independent living skills, educational needs, and personal development and community integration skills including part-time work. Each plan is reviewed on a continual basis, ensuring service users involvement in planning, consultative and decision-making forums.

**Home Based Respite** is a service designed to give support and assistance to individuals aged under 65, who have physical disabilities, sensory disabilities or mental health challenges. The aim of the Home Based Respite service is to improve the quality of life of the service user by providing basic assistance with activities of daily living while encouraging their independence.

This home-based service supports service users by assisting with challenges in mobility, promoting safe living within the home, encouraging continued learning and providing social and leisure activities.

## Section 2:

There is a National Standard Templates (Excel) in use for all disability services to ensure consistency of information management. This will be made available to you by your HSE contact. This template provides the required information for section 2 of this schedule and should be appended when this schedule is signed by both parties.

Full instruction is provided with the template. The following are the required inputs:-

*Differences from the 2012 template are highlighted in Blue.*



Additional requirements for Section 2:

- *The provider will keep accurate data on each client and will register each client who consents to be registered on the National Intellectual Disability Database or the Physical and Sensory Disability Database and where appropriate will support the completion of the Guidance Service/RT Database, in line with the nationally agreed policies and procedures and will provide data to the HSE on all clients in receipt of services for the purposes of monitoring and tracking.*
- *Information needs to be reconciled to the relevant disability databases and the number of people not registered on the databases should be stated.*

**Catchment Area(s) may be incorporated into template above. Otherwise, please provide requested information**

Where appropriate, this section should describe the catchment area for the services and a spatial map if available should be attached. The Electoral Divisions of the catchment area (if known or if appropriate) should also be listed.

(Please note that this section will not apply to all services, as some services will be demand led regardless of a client's home address.)

e.g. :

by health and social care networks

by DED

by HSE Area

National

Dublin/ Mid-Leinster HSE Region

All services in this region are detailed in Schedule 3 excel spreadsheet provided.

### **Section 3:**

#### **a) Service Outcomes**

This section needs to indicate the anticipated outcomes that the service will deliver so that they can be monitored and evaluated. This is on the basis of an increasing emphasis on outcomes. Do you have a Framework in Place to Measure Qualitative Outcomes? If so please give details. It should be noted that:

- Cognisance needs to be taken not to marginalise the most disadvantaged or complex cases in order to achieve better outcomes.
- Initial intermediate outcomes eg number of persons signing up for training awareness programmes, may be set out.

The information recorded below should link to **Schedule 2 Quality and Safety**  
As in Schedule 4

All service users will have the opportunity to complete a service support plan leading to a Person centred plan. All service users who have a person centred plan have an annual review. All

service users will be able to access the services as per the attendance schedule enclosed in the appendix attached.

RehabCare day services - Ballyfermot Resource Centre and Dun Laoghaire Resource Centre - have achieved eQuass accreditation in respect of the service in 2012.

*Examples could include.*

- Number of clients taking up supported employment.
- Level of Outcomes achieved as anticipated in I.C.P.'s.
- Facilitating clients to reach their maximum potential.
- Number of clients moved to supported living in the community.

*For each outcome specified above, please state results achieved with identifiers for the relevant clients.*

## **b) Staff Qualifications**

**This section should contain a statement regarding the registration and qualifications of staff as appropriate.**

The agency's statement should refer to HR policy on the recruitment of staff with appropriate recognised qualifications for relevant positions and the validation process engaged in with the relevant professional bodies. Reference should also be made to the implementation and support of Continuous Professional Development for all relevant grades of staff. Where appropriate, staff should be registered with the appropriate professional organisation as required by legislation.

(This section is the narrative which relates to the statistical data which will be returned in **Schedule 9 on Staffing Numbers**)

Copies of policy documents may be attached.

An outline of the skill mix employed and the appropriateness of this particular mix to meet the needs of the client base should be included.

RehabCare have a Recruitment and selection policy applicable to all recruitment of staff. This includes an application process, interview process, pre employment checks including Garda vetting, references, proof of identity, pre employment medical questionnaire, proof and verification of qualifications with any relevant professional bodies as required based on the specific criteria and role.

RehabCare has a Staff Training Policy and training is provided by the organisation in the following areas based on mandatory requirements and specific individual needs dependent on role, skills and competencies.

Regional Induction, Disability Awareness, Occupational First Aid, Heart Saver AED, Safe Administration of Medication, Buccal Midazolom , CPI, Manual Handling, IOSH, Care Skills, Protection of children and vulnerable adults, Recruitment and Selection, Policies and Procedures, Accident Incident/Investigation training, Risk Assessment, Fire Safety, Safety rep. training, Person Centred Planning, EHOA Primary Course in Food Safety.

Training in 2013 requires ongoing review and prioritising as a direct result of reductions in

funding. Note: All staff detail in Schedule 3 as section 39 provider.

**c) Access, Referrals, Safeguarding, Admissions & Discharge Procedures**

This section should set out (attach if more appropriate) the agreed policies and protocols in operation for access criteria, referral, safeguarding etc. for service(s). It should include, when required, agreement on access for all clients including those with greater levels of dependency or behavioural problems. Attach, where appropriate, any policy documents in this regard to ensure that everyone (client, families, HSE staff etc.) understands the criteria governing access to, use of and discharge from the service. *Any of the internal policies and procedures may be requested by the HSE for review and approval and the Provider shall comply with any such request.*

**Admission criteria and procedure should include an assessment and prioritisation process agreed by the HSE:-**

*It is accepted by the Service Provider that should vacancies arise in congregated settings during the year for reasons of client deaths or transfers, the funding linked to the vacancies will be utilised to address emergency residential needs presenting. This solution may involve the short term of an individual to the actual congregated setting but in all cases where this occurs, an immediate focus should be on identifying a more appropriate residential response within the context of the resource that has become available by virtue of the vacancies.*

| Generic may apply to all services  | ✓ | Care group Specific | ✓ |
|--|---|---------------------|---|
| Referral Policy  | ✓ |                     |   |
| Admissions Policy  | ✓ |                     |   |
| Discharge Policy   | ✓ |                     |   |
| Trust in Care 2005   | ✓ |                     |   |
| Policy and Procedures for the Notification to HSE of Discharge or Change of Circumstances of Clients                       | ✓ |                     |   |
| Case Conference Policy   | ✓ |                     |   |
| Policy on Anti Discriminatory Practice   | ✓ |                     |   |
| Anti Bullying Policy   | ✓ |                     |   |
| Health and Safety Policy   | ✓ |                     |   |
| Site Specific Emergency Plan   | ✓ |                     |   |
| Non-Accidental Injury Policy   | ✓ |                     |   |
| Policy to Protect Staff  | ✓ |                     |   |
| Procedure for Escalation of Issues (including incidents and near misses) in HSE operated or funded services (HSE QCCD/ISD) | ✓ |                     |   |
| Policy on the Management of Professional Registers and Amendments to such Registers – January 2010                         |   |                     |   |
| HSE Good Faith Reporting Policy April 2009   | ✓ |                     |   |
| Procedures on Protected Disclosures of Information in the Workplace  | ✓ |                     |   |
| Standards for the Assessment of Need   | ✓ |                     |   |

|                |  |  |  |
|----------------|--|--|--|
| 2007<br>(HIQA) |  |  |  |
|----------------|--|--|--|

RehabCare operates a range of policies and procedures. Admissions and discharges from services are in agreement with the HSE and established criteria in this regard. RehabCare has a detailed referral and assessment process which is conducted for all new individuals requiring a service. The organisation has a detailed Health and Safety, statement, policy and procedures and a safety file present in every service location. The organisation has also revised policies on the Protection of vulnerable adults and protection of children in line with Children first. In relation to Bullying/ Harassment, the organisation has a Dignity in the Workplace policy for staff. NRAC, which is the service users' representative body, has an appropriate policy for service users.

Local policies, the HSE Training and Occupational Services approve referrals in relation to resource centres. Admissions to accommodation services are accepted and agreed involving discussions with key HSE staff and RehabCare representatives subsequent to a referral through the disability service manager.

#### **d) Performance Indicators**

This section should specify the Performance Indicators needed by setting out details appropriate to the service. This should include any relevant local and national standards, where appropriate. Examples of targeted activities include:

Please see National Service Plan Metrics for your care group in Appendix 1 attached and include relevant Performance Indicators here.

Any additional performance metrics as collected by Corporate Planning and Corporate Performance Business Information Unit may also be relevant to this funding arrangement and should be included.

#### **(e) Third Party Contracting**

This section should provide full particulars of any third parties who are engaged by the Provider to provide any part of the service (Please note that all new third party arrangements require prior approval by the HSE in accordance with Clause 17.1 of the Part 1 Service Arrangement)

##### **Details to include:**

Name and address of third party organisation.

Details of the services delivered, to include service location and quantum

Details of the agreements in place (copies to be provided if requested by the HSE)

N/A

## **Section 4:**

### **Additional Services**

Where the scope of the Services provided pursuant to this Arrangement is increased, whether by developing existing Services or introducing new Services, the increase must be authorised in advance in writing by the Executive utilising the Change Control process in Schedule 10 Change Control.

A detailed specification for the Additional Services must be agreed in writing between the parties to this Arrangement prior to any Additional Services being provided by the Provider, including the range, type, and volumes of Services, together with the amount and timing of payments due in respect of the Additional Services utilising the Change Control process in Schedule 10 Change Control.

The contract Change Note under Schedule 10 shall be appended to this Arrangement and should be in the general format of the functional headings as set out earlier in this schedule.

Elements to be covered should include.

- Location of service
- Description of service
- Quantum of service if applicable
- Start date of service
- End date of service if applicable
- Staffing implication
- Funding required current year
- Funding required full year costs
- Client identifier and profile either individual or general cohort description.

Templates may be advised by your HSE contact

## SCHEDULE 4

### Performance Monitoring

#### Purpose

This schedule states the agreed performance management requirements. These have been developed with reference to the Performance Indicators detailed within **Schedule 3 (Service Delivery Specification)**. This schedule also contains the associated reporting timetable regarding reports and meetings. The level of performance monitoring will depend on the type of service and the level of functions.

| <b>Information Requirements</b>  |   |        |           |           |         |
|--|---|--------|-----------|-----------|---------|
| <i>The following table should outline the key information required to monitor the activity and performance levels (tick as appropriate). This section aims to set out the list of reports that the Provider must provide to the Executive to facilitate the performance management function. (Please note that separate guidance as to the format of the individual reports i.e. financial, activity data, P.I.s etc. will be provided).</i> |   |        |           |           |         |
| Form No.   | Report Required   | Annual | Bi-annual | Quarterly | Monthly |
|  | Financial Report – Activity *   |        | ✓         |           |         |
|  | Financial Report – Governance   | ✓      |           |           |         |
|  | Activity Data – summary of services *   |        | ✓         |           |         |
|  | Activity Data – Admissions/Discharges/Relocations   |        | ✓         |           |         |
|  | Staffing reports  |        |           |           |         |
|  | Review of Service Plan Priorities   |        |           |           |         |
|  | Health Statistics (as relevant) to HSE  |        |           |           |         |
|  | Quarterly Monitoring Returns on the Introduction of Children First in Disability Services – A Guide to Policy Formation and Implementation (Template to be provided) Note: note yet implemented   |        |           |           |         |
|  | Quarterly Monitoring Returns on the Value for Money review initiatives including the review & adjustment to rationalise staff deployment patterns in line with client need etc.<br>Note: RehabCare is committed to providing value for money in respect of service delivery. It is noted that parameters and templates have not as yet been discussed and agreed in respect of this recommendation. |        |           |           |         |
|  | Quarterly Monitoring Returns of the service specification template with updated position at each quarter end.<br>As per existing Disability Services KPI metadata 2013<br>- Day service (Bi Annual)<br>- Residential Services (Quarterly)   |        | ✓         | ✓         |         |
|  | Bi-Annual Complaints reporting (As per Schedule 8)  |        |           |           |         |
|  | Report on Complaints received by the Provider involving alleged or suspected client abuse involving staff or volunteers. Any complaints dealing with the above should be advised to the key contact immediately. (As per schedule 8)  |        |           |           |         |
|  | <b>Information requirements as collected through the National Disability Databases.</b><br>• National Physical and Sensory Disability   |        |           |           |         |

|  |  |   |  |  |  |
|--|--|---|--|--|--|
|  | <ul style="list-style-type: none"> <li>Database (NPSDD) <ul style="list-style-type: none"> <li>• National Intellectual Disability Database (NIDD)</li> <li>• HSE Occupational Guidance Disability Database <ul style="list-style-type: none"> <li>○ Rehabilitative Training Database (RTD)</li> <li>○ Work] Activity/Work Like Database</li> </ul> </li> </ul> </li> </ul> |   |  |  |  |
|  | <b>Disability Act Compliance data collection process</b>   |   |  |  |  |
|  | <b>**Key Performance Indicators – This information is collected through a monthly process. Information and a template will be provided.</b><br>Note: note yet specified  |   |  |  |  |
|  | Number of persons with intellectual disability and/or autism benefiting from Other Day Services (excl. RT and work/like-work activities) - <b>Adult</b>  | As per existing Disability Services KPI metadata 2013 |  |  |  |
|  | Number of persons with physical and/or sensory disability benefiting from Other Day Services (excl. RT and work/like-work activities) - <b>Adult</b>   | As above  |  |  |  |
|  | Number of persons with intellectual disability and/or autism benefiting from Residential Services - <b>Adult</b>   | As above  |  |  |  |
|  | Number of persons with intellectual disability and/or autism benefiting from Residential Services - <b>Child</b>   | As above  |  |  |  |
|  | Number of persons with physical and/or sensory disability benefiting from Residential Services - <b>Adult</b>  | As above  |  |  |  |
|  | Number of persons with physical and/or sensory disability benefiting from Residential Services - <b>Child</b>  | As above  |  |  |  |
|  | Number of persons with intellectual disability and/or autism benefiting from residential centre based respite services - <b>Adult</b>  | As above  |  |  |  |
|  | Number of persons with intellectual disability and/or autism benefiting from residential centre based respite services - <b>Child</b>  | As above  |  |  |  |
|  | Number of bed nights in residential centre based respite services used by persons with intellectual disability and/or autism - <b>Adult</b>  | As above  |  |  |  |
|  | Number of bed nights in residential centre based respite services used by persons with intellectual disability and/or autism - <b>Child</b>  | As above  |  |  |  |
|  | Number of persons with physical and/or sensory disability benefiting from residential centre based respite services - <b>Adult</b>   | As above  |  |  |  |
|  | Number of persons with physical and/or sensory disability benefiting from residential centre based respite services - <b>Child</b>   | As above  |  |  |  |
|  | Number of bed nights in residential centre based respite services used by persons with physical and/or sensory disability - <b>Adult</b>   | As above  |  |  |  |
|  | Number of bed nights in residential centre based respite services used by persons with physical and/or sensory disability - <b>Child</b>   | As above  |  |  |  |
|  | Number of adults with a physical and/or sensory disability in receipt of personal assistant (PA) hours - <b>Adult</b>  | As above  |  |  |  |
|  | Number of Personal Assistant (PA) hours delivered to adults with a physical and/or sensory disability - <b>Adult</b>   | As above  |  |  |  |
|  | Number of persons with a physical and/or sensory disability benefiting from Home Support Hours - <b>Adult</b>  | As above  |  |  |  |
|  | Number of persons with a physical and/or sensory disability benefiting from Home Support Hours - <b>Child</b>  | As above  |  |  |  |

|              |          |  |  |  |
|--------------|----------|--|--|--|
| Other - List | As above |  |  |  |
|--------------|----------|--|--|--|

*\*Where information is available, and for new services, the financial reports should separately identify each separate service, and link the service activity and staffing with the funding allocated.*

*\*\*Further information (definitions, calculations, etc) on the KPIs (Key Performance Indicators) is available in the "KPI Metadata" [[www.hse.ie/eng/services/Publications/](http://www.hse.ie/eng/services/Publications/)].*

| <b>Review Meetings</b>   |                    |                 |                  |
|--|--------------------|-----------------|------------------|
| <b>To be agreed at the Service arrangement meeting.</b>  |                    |                 |                  |
| <i>This section should set out the schedule of review meetings appropriate to the level of funding provided. (Please note that separate guidance will be issued in this regard).</i> |                    |                 |                  |
| <b>Month</b>   | <b>Description</b> | <b>Location</b> | <b>Attendees</b> |
|  |                    |                 |                  |
|  |                    |                 |                  |
|  |                    |                 |                  |
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## SCHEDULE 5

### Information Requirements

#### Purpose

This schedule sets out wider information requirements in the context of the service in question and the obligations for the Provider to provide business critical information to the Executive i.e. Annual Reports, Audited Accounts and other evaluation reports.

#### Annual Report

*The Provider shall provide an Annual Report to the Executive in respect of the services no later than 30 September in each Year. The Annual Report will include the following minimum information:*

- *A general statement on the services provided;*
- *Governance arrangements;*
- *Report on the implementation of the Business Plan or equivalent;*
- *Report required by Part 9 Section 55 (Complaints) of the Health Act 2004;*
- *The Annual Audited Accounts.*

#### Audited Accounts

*The Provider shall submit a copy of its audited accounts and the auditor's certificate and report on the accounts to the Executive within the period specified by the Executive. (including the management letter, if requested). For the avoidance of doubt, the expenses of the audit of the Provider's accounts shall be payable by the Provider.*

*The Provider's audited accounts shall separately identify funding and expenditure related thereto received from the Executive, as distinct from other funding received during the financial year. In addition the Provider shall comply with the provisions of Circular No. 17/2010 Requirements for Grants and Grants-in-aid issued by the Department of Finance and any direction, clarification or interpretations issued to the HSE by the Department in respect of that circular.*

#### Audits, Evaluations, etc

*This section should set out details of any audit, evaluation, inspection, investigation or research undertaken by or on behalf of the Provider or any third party in connection with the quality of any or all of the services.*

Note: eQuass accreditation has been achieved in respect of day services

HIQA reports on accommodation services when enacted, can be made available

#### Other Information

*This section should set out any other information requirements relevant to the particular services being provided.*

The HSE Risk and Incident Escalation form which has been developed as an interim arrangement. In the absence of guidelines as to its use by Voluntary bodies, the existing communication arrangement between the HSE staff and the local/ regional management has been examined. This arrangement has shown itself to be adequately meeting the needs of the HSE to date, in this regard. It has been agreed that the existing agreement continue pending review by the HSE and further discussion.

At present, the local service manager liaises with the Disability Manager/ key contact as and when required in respect of issues arising including, allegations involving alleged or suspected client abuse.

## SCHEDULE 6

### Funding

#### Purpose

This Schedule is intended to specify details of funding, payments and financial monitoring for the health and personal social services which will be provided by the Provider. The performance of the financial management will be monitored as set out in Financial Reporting Schedule 4 Performance Monitoring.

#### Total Payments

Subject to Clause 4 of Part 1 of this Arrangement, the Funding to be paid by the Executive to the Provider in consideration for the provision of the Services in accordance with the terms of this Arrangement in the financial year commencing on 1<sup>st</sup> January 2013 and ending on 31<sup>st</sup> December 2013 (the "Financial Year") shall not exceed (and will be inclusive of a 1.93% funding reduction) €8,188,989 plus capitation and travel estimated for 2013 of €55,077. Total funding for the Dublin South East/Wicklow Area in 2013 will be €8,244,066. Also included in the Schedule 3 minimum dataset activity is €21,531 core plus €30,846(est.) capitation and travel monthly from HSE Northern Area, and €22,533 core paid quarterly plus €156,633(est.) capitation and travel paid monthly from the HSE South Western Area. In addition to capitation Midwest HSE Clare €5754.96 and from HSE South East Waterford €5821.45 for clients attending services in the Dublin Mid Leinster area.

Should the HSE receive an instruction to apply the national 1.2% cut, the difference will be reimbursed to the organisation and a Schedule 10 completed to reflect this.

The Executive will use its reasonable endeavours to notify the Provider of the level of Funding in advance of the financial year.

The total to be paid should be detailed linking back to **Schedule 3 Service Delivery Specification** where appropriate and/or setting out the various amendments if this is an annual review of an existing service arrangement.

\*Fixed Cash profile is outlined below:

**Schedule of Payments to Provider Account Number:** \_\_\_\_\_

| Date | Details | Amount | Method |
|------|---------|--------|--------|
|      |         |        |        |
|      |         |        |        |
|      |         |        |        |

\* will be issued in accordance with the rules applicable to the Health Service Executive's Vote (Vote 40) appropriated by the Exchequer each year.

#### Charging of Service Users

*This section should set out the criteria and procedures for charging service users and the rates that will be applied.*

Note: Service user contributions only

Accommodation services: Service users are tenants of a housing association and arrangements are with and between the tenants and the housing association. Tenants live as independently as possible, subject to support by RehabCare, as appropriate. Personal living

and utility expenses are the shared responsibility of the tenants.

### **Patient Private Property**

*Where an organisation has charge of client's private property, then an appropriate system of administration and control, needs to be in place to ensure compliance with regulations.*

## SCHEDULE 7

### Insurance

#### Purpose

This schedule sets out the mandatory minimum requirement that the Provider must have in relation to insurance and liability cover, in addition to the indemnities provided under Clause 14 of Part 1 of the Service Arrangement.

RehabCare's insurance details are attached as an appendix

1. Public Liability insurance with a limit of indemnity of €6,400,000 (€6.4 million) any one occurrence, with an indemnity to the Executive arising from the provision of the Services, which insurance will also cover claims arising from the activities of any sub-contractor engaged by the Provider.
2. Employers Liability insurance with a limit of indemnity of €12,700,000 (€12.7million) any one occurrence, with an indemnity to the Executive arising from the provision of the Services.
3. Motor Insurance (if services involves use of motor vehicle by service provider on business of the HSE) with a third party property damage limit of €2,600,000 (€2.6million) any one occurrence with an indemnity to the HSE arising from the use of motor vehicle in the provision of the Services.
4. Professional Indemnity

(a) Where appropriate, the Provider must apply for professional indemnity coverage under the Clinical Indemnity Scheme.

(b) To the extent professional service is provided and not otherwise covered have Professional Indemnity in accordance with the following thresholds or such other thresholds as may be specified by the Executive from time to time:

Low risk: Professional Indemnity with a limit of indemnity of €2,600,000 (€2.6million) any one occurrence.

Medium risk: Professional Indemnity with a limit of indemnity of €4,000,000 (€4million) any one occurrence.

High risk: Professional Indemnity with a limit of indemnity of €6,400,000 (€6.4million) any one occurrence.

(This would not apply to those bodies who have the protection of the Enterprise Liability - Clinical Indemnity Scheme).

## SCHEDULE 8

### Complaints

The National Advocacy Unit has developed systems with the Non-Statutory sector for the submission of Policy and Procedure Documents and reporting schedules. This document and reporting templates and explanations of headings are available for download from the HSE National Advocacy Unit webpage (<http://www.hse.ie/eng/services/ysys/Documentation/>).

### Purpose

This schedule specifies the requirement for the Providers to have in place a complaints policy in compliance with Part 9 of the Health Act 2004, and Health Act 2004 (Complaints) Regulations 2006 (S.I. 652 of 2006). The Provider's performance in complaints handling and resolution will be monitored as set out in this schedule.

**Timetable for submission of Policy & Procedures Document** The Provider shall submit a copy of their complaints policy to their relevant Consumer Affairs (CA) Area Office, who link in directly with the Provider if any changes/ amendments are required for approval and will validate the policy. The CA Area Office contact will advise the Provider and the Local Health Office when the policy has been approved.

In the case of a national service provider, a copy of the complaints policy must be submitted to the National Advocacy Unit

A list of area officers and their contact details are provided as an attachment to this Schedule

| Date to be Submitted by Provider | Date to be Reviewed by Executive                        | Amendments (Yes/No) | Comments |
|----------------------------------|---|---------------------|----------|
| 2012                             | August 2012 approved by the HSE Consumer Affairs Office |                     |          |

**General Report on Complaints Received by the Provider in accordance with Section 55(2) of the Health Act 2004.** Report to be submitted to the relevant Consumer Affairs Officer and the key contact person as set out in Schedule 1 (contact details). Standard Template must be utilised.

The Provider will submit returns on an agreed template to the relevant CA Area Office or National Advocacy Unit contact on a bi-annual basis for the periods of January-June and July-December. The deadline for the return of these templates shall be 20<sup>th</sup> July and 20<sup>th</sup> January respectively. Any queries arising from the templates will be followed up by the Consumer Affairs Area Officers or National Advocacy Unit contact.

The Consumer Affairs Area Office will liaise directly with the Providers to ensure that statistics are submitted on time and a reminder will issue one month prior to the deadline for submission.

| Date to be Submitted by Provider | Date to be Reviewed by Executive | Comments |
|----------------------------------|----------------------------------|----------|
|                                  |                                  |          |

|         |  |   |
|---------|--|---|
| July    |  | Returns will be submitted to Greg Price, National Director Consumer Affairs and National Advocacy officer on a bi-annual basis. |
| January |  |   |

National return process is in place. RehabCare Complaints Policies and Procedures were approved by the HSE, Quality & Patient Safety Directorate in August 2012

Returns will be submitted to Greg Price, National Director Consumer Affairs and National Advocacy officer on a bi-annual basis.

**General Report on Reviews assigned to the Provider by the Executive under Section 49(4) of the Health Act 2004. An agency must report on the number, nature and outcome of any reviews it undertakes.**

An agency must report on the number, nature and outcome of any reviews it undertakes.

| Date Submitted by Provider | Date Reviewed by Executive | Comments |
|----------------------------|----------------------------|----------|
|                            |                            |          |

**Report on Complaints received by the Provider involving alleged or suspected client abuse involving staff or volunteers. Any complaints dealing with the above should be advised to the key contact immediately. A record of same should be kept by the provider as follows. This should also be submitted with the general report above.**

| Date Submitted to Provider | Referred to HSE (Yes/No and Date)? If No, please comment | Summary of Action Taken | Date Reviewed by Executive | Comments   |
|----------------------------|--|-------------------------|----------------------------|--|
|                            |  |                         |                            | Returns will be submitted to Greg Price, National Director Consumer Affairs and National Advocacy officer on a bi-annual basis. The local service manager liaises with the Disability Manager/ key contact as and when required in respect of issues arising including, allegations involving alleged or suspected |

|  |  |  |  |               |
|--|--|--|--|---------------|
|  |  |  |  | client abuse. |
|--|--|--|--|---------------|

...the following information is provided for the purpose of the investigation...

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**Contact Details – Consumer Affairs**

**WEST CONTACT DETAILS**


**For Donegal, Sligo and Leitrim contact:**

|                |                                  |   |                   |                       |   |
|----------------|----------------------------------|---|-------------------|-----------------------|---|
| Mr. Ken Lillis | Consumer Affairs<br>Area Officer | HSE,<br>Navenny<br>Navenny<br>Ballybofey,<br>Co. Donegal. | House,<br>Street, | Tel:<br>074 9189153/4 |  |
|                |                                  |   |                   | Fax:<br>074 9130380   |   |
|                |                                  |   |                   | E-mail: FOI2@hse.ie   |   |

**For Galway, Mayo and Roscommon contact:**

|                 |                                  |  |       |                               |   |
|-----------------|----------------------------------|--|-------|-------------------------------|---|
| Mr. Liam Quirke | Consumer Affairs<br>Area Officer | HSE<br>Merlin Park University<br>Hospital,<br>Galway | West, | Tel:<br>091 775373            |  |
|                 |                                  |  |       | Fax:<br>091 775858            |   |
|                 |                                  |  |       | E-mail:<br>liam.quirke@hse.ie |   |


**For Clare, Limerick and North Tipperary contact:**

|                     |                               |   |  |   |
|---------------------|-------------------------------|---|--|---|
| Ms. Sinéad Kelleher | Consumer Affairs Area officer | HSE West, 31/33 Catherine Street, Limerick. | Tel: 1850 24 1850<br>Fax: 061 483350<br>E-mail: <a href="mailto:eolas@hse.ie">eolas@hse.ie</a> |  |
|---------------------|-------------------------------|---|--|---|


|  |                                   |     |                  |   |
|--|-----------------------------------|-----|------------------|---|
| Area<br>Mr. Area<br>Consumer<br>HSE<br>MerlinPark<br>Galway. | Christopher<br><br><br>University | 091 | 775751<br>771318 | <b>Manager:</b><br>Rudland,<br>Manager,<br>Affairs,<br>West,<br>Hospital, |
| Tel:   |                                   |     |                  |   |
| Fax: 091   |                                   |     |                  |   |

**DUBLIN MID LEINSTER CONTACT DETAILS**

**For Dun Laoghaire, Dublin South East, Dublin South City, Dublin West, & Wicklow contact:**

|                 |                           |  |  |   |
|-----------------|---------------------------|--|--|---|
| Mr John Cullen, | Consumer Affairs Officer, | HSE Dublin Mid-Leinster, Oak House, Millennium Park, Naas, Co. Kildare | Tel: 045 880 494<br>E-mail: <a href="mailto:john.cullen@hse.ie">john.cullen@hse.ie</a> |  |
|-----------------|---------------------------|--|--|---|

**For Kildare/West Wicklow, Dublin South West, Longford, Laois, Offaly, & Westmeath contact :**

|                  |                          |   |   |   |
|------------------|--------------------------|---|---|---|
| Ms Wendy Buckley | Consumer Affairs Officer | Dublin Mid-Leinster, Block 4 Central Business Park, Clonminch, Tullamore, Co. Offaly. | Tel: 057 93 57600<br>E-mail: <a href="mailto:wendy.buckley@hse.ie">wendy.buckley@hse.ie</a> |  |
|------------------|--------------------------|---|---|---|


| Area                         | Manager's | Office                | Contact  | Details:                                |
|------------------------------|-----------|-----------------------|----------|---|
| Ms Area<br>Consumer<br>Block | 4,        | Debbie<br><br>Central | Business | Keyes,<br>Manager,<br>Affairs,<br>Park, |

Clonminch,  
Tullamore,  
Co. Offaly.


Tel : 057 93 57876  
 Fax: 057 93 57881  
 Email: [Email](#)

**SOUTH CONTACT DETAILS**

**For Cork & Kerry contact:**

|                                  |                                |                             |  |   |
|----------------------------------|--------------------------------|-----------------------------|--|---|
| Ms. Evelyn Murray, Area Officer, | HSE<br>Aras<br>Wilton<br>Cork. | South,<br>Slainte,<br>Road, | Tel:<br>021<br>4923774<br>Fax:<br>021 4923627:                         |  |
|                                  |                                |                             | E-mail: <a href="mailto:evelyn.murray@hse.ie">evelyn.murray@hse.ie</a> |   |

**For Carlow, Kilkenny, Waterford, Wexford and South Tipperary contact:**


|                                |   |                   |  |   |
|--------------------------------|---|-------------------|--|---|
| Ms Sinead Byrne, Area Manager, | Consumer Affairs,<br>HSE<br>Office Complex,<br>Kilcreene Hospital,<br>Kilkenny. | South<br>Complex, | Tel:<br>056<br>7785598<br>Fax:<br>056 7785549                          |  |
|                                |   |                   | E-mail: <a href="mailto:sineadj.byrne@hse.ie">sineadj.byrne@hse.ie</a> |   |

| Area   | Manager's | Office | Contact | Details:  |
|--|-----------|--------|---------|---|
| Ms<br>Area<br>Consumer<br>Office<br>Kilcreene<br>Kilkenny. |           | Sinead |         | Byrne,<br>Manager,<br>Affairs,<br>Complex,<br>Hospital, |
| Tel  | :         |        | 056     | 7785598   |
| Fax:   |           | 056    |         | 7785549   |
| Email: <a href="#">Email</a>                               |           |        |         |   |


**DUBLIN NORTH EAST CONTACT DETAILS**

**For Cavan, Dublin (Dublin City north of the River Liffey, and Fingal County), Louth, Meath and Monaghan**

Louth, Cavan, Meath, Monaghan

|                |                       |         |                               |                      |   |   |
|----------------|-----------------------|---------|-------------------------------|----------------------|---|---|
| Alexia McKenna | Consumer Area Officer | Affairs | HSE North St. Complex, Cavan. | Dublin East, Felim's | Tel: 049/4360460<br>Fax: 049/4360494<br>E-mail: alexia.mckenna@hse.ie |  |
|----------------|-----------------------|---------|-------------------------------|----------------------|---|---|

Dublin South East, Dublin South Central, East Wicklow

|                   |   |                 |   |   |   |   |
|-------------------|---|-----------------|---|---|---|---|
| AnnMarie Donohue, | Consumer Area H.S.E. Dublin North East (Dublin North) | Affairs Officer | Unit Swords Business Campus Balheary Road Swords Co. Dublin | 7 | Tel: 01 8908728<br>Fax: 01 8131882<br>E-mail: Annmarie.donohue@hse.ie |  |
|-------------------|---|-----------------|---|---|---|---|

Area  
Ms.  
Area  
Consumer  
HSE  
Dublin  
Kells,  
Co.Meath.

Rosalie

Dublin

North

**Manager:**  
Smith-Lynch,  
Manager,  
Affairs,  
East,  
Road,

Tel:  
Fax: 049  
Email: [Email](#)

046 9280551 / 049 4360462/435 4360494

## SCHEDULE 9

### Staffing

#### Purpose

The purpose of this schedule is to ensure that there is an effective monitoring process in place to maintain employment numbers within the agreed levels for the delivery of the services specified in Schedule 3.

#### Employee Totals

*This section should detail the employee totals which are associated with the services specified in Schedule 3. This should give grade detail.*

All staff details are as contained in Schedule 3.

#### Employment Monitoring Return - N/A

*This section sets out the timetable for return of the employment monitoring report.*

| Date Due | Date Received | Comment |
|----------|---------------|---------|
|          |               |         |
|          |               |         |
|          |               |         |
|          |               |         |
|          |               |         |

**Senior Staff**

Please provide details of all senior staff in your organisation, this is all those paid at grade 8 level consolidated Pay Scales/equivalent, or above.

*This can be outlined below or may be requested on the available excel template*

| Name :<br>First | Name:<br>Second | Position/Title | Grade<br>(equivalent to<br>HSE<br>consolidated<br>Pay scales) | Salary €<br>(annual<br>gross salary<br>for 2013) | Allowances<br>€ | Pension €<br>(employers<br>contribution<br>) | Other<br>Benefits<br>Cash<br>equivalent € | Provide details<br>of benefits<br>provided |
|-----------------|-----------------|----------------|---|--|-----------------|--|---|--|
|                 |                 |                |   |  |                 |  |   |  |
|                 |                 |                |   |  |                 |  |   |  |
|                 |                 |                |   |  |                 |  |   |  |
|                 |                 |                |   |  |                 |  |   |  |

SCHEDULE 10

Change Control

**Contract Change Note**

*All requests for a variation to the arrangement should be accompanied by a completed and signed copy of the Contract Change Note below:*

**Contract Change Note**

Reference Number: .....

WHEREAS the Service Provider and the Executive entered into an arrangement for the supply of Services dated [ ] (the "Original Arrangement") and now wish to amend the Original Arrangement.

IT IS AGREED as follows:

1. With effect from [ ] the Original Arrangement shall be amended as set out in this Contract Change Note:

*[\*Drafting Note: Full details of any amendments to the Original Arrangement should be inserted here.]*

Save as herein amended all other terms and conditions of the Original Arrangement shall remain in full force and effect.

Signed by .....  
for and on behalf of the **HEALTH SERVICE EXECUTIVE:**  
Date .....

Signed by .....  
for and on behalf of **[PROVIDER]:**  
Date .....

\* Elements to be covered should include.

- Location of service
- Description of service change
- Quantum of service change if applicable
- Start date of service change
- End date of service change if applicable
- Staffing implication of service change
- Funding change required current year
- Funding change required full year costs
- Client identifier and profile either individual or general cohort description, involved in service change.

IN WITNESS WHEREOF this Arrangement is executed by the parties as follows:-

Signed by  
for and on behalf of the  
**HEALTH SERVICE EXECUTIVE:**

Date 5/12/13

.....  
*[Signature]*  
Name: .....

Title: ISA / as DSEW

Signed by  
for and on behalf of **Rehabcare:**

Date 05/12/13

.....  
*[Signature]*  
Name: LAURA KIRWE

Title DIRECTOR OF HEALTH +  
SOCIAL CARE SERVICES



Appendix 1

*National Performance Indicator and Activity Suite*

| Disability Services  |                        |                              |                                 |                        |                                |
|--|------------------------|------------------------------|---------------------------------|------------------------|--------------------------------|
| Performance Activity / Key Performance Indicator   | Reported and Frequency | By                           | Expected Activity / Target 2012 | Projected Outturn 2012 | Expected Activity Targets 2013 |
| <b>Day Services</b>  |                        | <b>AND Disabilities</b>      |                                 |                        |                                |
| No. of work / work-like activity WTE places provided for persons with intellectual disability (ID) and / or autism                     |                        | Bi-annually                  | 1,578                           | 1,557                  | 1,557                          |
| No. of persons with ID and / or autism benefiting from work / work-like activity services  |                        |                              | 3,084                           | 3,123                  | 3,123                          |
| No. of work / work-like activity WTE places provided for persons with physical and / or sensory disability                             |                        |                              | 71                              | 72                     | 72                             |
| No. of persons with physical and / or sensory disability benefiting from work / work-like activity services                            |                        |                              | 138                             | 144                    | 144                            |
| No. of Rehabilitative Training places provided (all disabilities)  |                        | AND Disabilities Monthly     | 2,627                           | 2,627                  | 2,627                          |
| No. of persons (all disabilities) benefiting from Rehabilitative Training (RT)   |                        |                              | 2,991                           | 2,948                  | 2,948                          |
| No. of persons with ID and / or autism benefiting from Other Day Services (excl. RT and work / work-like activities)                   |                        | AND Disabilities Bi-annually | 12,430                          | 13,382                 | 13,382                         |
| No. of persons with physical and / or sensory disability benefiting from Other Day Services (excl. RT and work / work-like activities) |                        |                              | 2,581                           | 2,793                  | 2,793                          |
| <b>Residential Services</b>  |                        | <b>AND Disabilities</b>      |                                 |                        |                                |
| No. of persons with ID and / or autism benefiting from residential services  |                        | Quarterly                    | 8,416                           | 8,172                  | 8,172                          |
| No. of persons with physical and / or sensory disability benefiting from residential services  |                        |                              | 708                             | 847                    | 847                            |
| <b>Respite Services</b>  |                        | <b>AND Disabilities</b>      |                                 |                        |                                |
| No. of bed nights in residential centre based respite services used by persons with ID and / or autism                                 |                        | Quarterly                    | 231,213                         | 213,346                | 213,346                        |
| No. of persons with ID and / or autism benefiting from residential centre based respite services                                       |                        |                              | 5,115                           | 5,087                  | 5,087                          |
| No. of bed nights in residential centre based respite services used by persons with physical and / or sensory disability               |                        |                              | 28,329                          | 32,917                 | 32,917                         |
| No. of persons with physical and / or sensory disability benefiting from residential centre based respite services                     |                        |                              | 1,220                           | 2,571                  | 2,571                          |
| <b>Personal Assistant (PA) / Home Support Hours</b>  |                        | <b>AND Disabilities</b>      |                                 |                        |                                |
| Total no. adults and children with physical and / or sensory disability benefiting from Home Support hours (incl. PA)                  |                        | Quarterly                    | 4,038                           | 4,166                  | 4,166                          |
| Total no of Home Support hours (incl. PA) delivered to adults and children with physical and / or sensory disability.                  |                        |                              | 1.68m                           | 2.11m                  | 1.68m                          |
| No. of adults with a physical and / or sensory disability in receipt of personal assistant (PA) hours                                  |                        |                              | Revised breakdown 2013          | ---                    | Subset above                   |
| No. of Personal Assistant (PA) hours delivered to adults with physical and / or sensory disability                                     |                        |                              | Revised breakdown 2013          | ---                    | Subset above                   |
| No. of adults and children with physical and / or sensory disability benefiting from Home Support hours                                |                        |                              | Revised breakdown 2013          | ---                    | Subset above                   |
| No. of Home Support hours delivered to adults and children with physical and / or sensory disability                                   |                        |                              | Revised breakdown 2013          | ---                    | Subset above                   |

| Disability Services  |                        |                  |                                 |                        |                                |
|--|------------------------|------------------|---------------------------------|------------------------|--------------------------------|
| Performance Activity / Key Performance Indicator   | Reported and Frequency | By               | Expected Activity / Target 2012 | Projected Outturn 2012 | Expected Activity Targets 2013 |
| No. of adults and children with an intellectual disability and / or autism in receipt of Home Support hours                              |                        |                  | ---                             | ---                    | New PI 2013                    |
| No. of Home Support hours delivered to adults and children with an intellectual disability and / or autism                               |                        |                  | ---                             | ---                    | New PI 2013                    |
| <b>Disability Act Compliance</b>   |                        | AND Disabilities |                                 |                        |                                |
| No. of requests for assessments received   | Quarterly              |                  | 3,636                           | 3,365                  | 3,501                          |
| No. of assessments commenced as provided for in the regulations  |                        |                  | 3,327                           | 3,168                  | 3,294                          |
| No. of assessments commenced within the timelines as provided for in the regulations   |                        |                  | 3,327                           | 2,353                  | 3,294                          |
| No. of assessments completed as provided for in the regulations  |                        |                  | 3,327                           | 2,291                  | 3,294                          |
| No. of assessments completed within the timelines as provided for in the regulations   |                        |                  | 3,327                           | 644                    | 3,294                          |
| No. of service statements completed  |                        |                  | 2,828                           | 2,388                  | 2,766                          |
| No. of service statements completed within the timelines as provided for in the regulations  |                        |                  | 2,828                           | 1,456                  | 2,766                          |
| <b>Services for Children and Young People</b>  |                        | AND Disabilities |                                 |                        |                                |
| % of Local Implementation Groups which have Local Implementation Plans for progressing disability services for children and young people | Bi-annually            | Q2               | 100%                            | 25%                    | 100%                           |
| No. of established geographically based teams having current individualised plans for each child   |                        |                  | ---                             | ---                    | New PI 2013                    |
| % of established geographically based teams having current individualised plans for each child   |                        |                  | ---                             | ---                    | New PI 2013                    |

Notes to Performance Indicators / Activity Measures: During 2012, the Disability Services PI suite was the subject of a major review and validation exercise which has resulted in amendments being made to the "Expected Activity/Target 2012" data contained in the National Service Plan 2012. Furthermore, refinements made to the definitions attaching to the service types has resulted, in some cases, in the "Projected Outturn 2012" data differing significantly from original expectations.

| Governance (QPS and Corporates)  |                        |                               |                                 |  |                                |
|--|------------------------|-------------------------------|---------------------------------|--|--------------------------------|
| Performance Activity / Key Performance Indicator   | Reported and Frequency | By                            | Expected Activity / Target 2012 | Projected Outturn 2012                                 | Expected Activity Targets 2013 |
| <b>Quality and Patient Safety Audit Service (QPSAS)</b>  |                        | ND Quality and Patient Safety |                                 |  |                                |
| No. of QPSAS audits commenced as specified in annual QPSAS strategic plan                            | Quarterly              |                               | 100%                            | 100%   | 24                             |
| No. of QPSAS audits completed within the timelines agreed in approved QPSAS audit plans              |                        |                               | 90%                             | 90%  | 20                             |
| % of QPSAS audits incorporating structured service user involvement                                  |                        |                               | 50%                             | 20%  | 50%                            |
| <b>Complaints</b>  |                        | ND Quality and Patient Safety |                                 |  |                                |
| % of complaints investigated within legislative timeframe  | Quarterly              |                               | 75%                             | 70%  | 75%                            |
| <b>Health Care Associated Infection: Antibiotic Consumption</b>                                      |                        | ND Quality and Patient Safety |                                 |  |                                |
| Consumption of antibiotics in community settings (defined daily doses per 1,000 inhabitants per day) | Bi-annually            |                               | 21                              | 23.3   | 23                             |
| <b>Finance and HR</b>  |                        | AND Finance                   |                                 |  |                                |
| Variance from budget under:  |                        | Monthly                       |                                 |  |                                |
| i). I&E  |                        |                               | ≤ 0%                            | To be reported in the Annual Financial Statements 2012 | ≤ 0%                           |
| ii). Income collection   |                        |                               | ≤ 0%                            |  | ≤ 0%                           |
| iii). Pay  |                        |                               | ≤ 0%                            |  | ≤ 0%                           |
| iv). Non pay   |                        |                               | ≤ 0%                            |  | ≤ 0%                           |
| v). Revenue and Capital Vote   |                        |                               | ≤ 0%                            |  | ≤ 0%                           |

**Governance (QPS and Corporates)**

| Performance Activity / Key Performance Indicator       | Reported and Frequency | By             | Expected Activity / Target 2012 | Projected Outturn 2012 | Expected Activity Targets 2013 |
|--|------------------------|----------------|---------------------------------|------------------------|--------------------------------|
| Absenteeism rates                                      | AND HR                 |                | 3.5%                            | 4.82%                  | 3.5%                           |
| Variance from approved WTE ceiling                     | Monthly                |                | ≤ 0%                            | -0.70%                 | ≤ 0%                           |
| <b>Parliamentary Questions</b>                         |                        |                |                                 |                        |                                |
| % of Parliamentary Questions dealt with within 15 days | ND                     | Communications | 75%                             | 75%                    | 75%                            |
|  | Quarterly              |                |                                 |                        |                                |

All relevant National Performance Indicators should be included along with cost containment measures and value for money initiatives.







Service Provided: Inpatient Outpatient  
 HSE Funding Area: Dublin North Centre

HSE: Prior parameters and to row 24 if entry exceeds this please raise a new parameter

| Service Unit No | Service Name   | Service Location  | Unit Manager    | Unit Manager Phone No | Unit Manager Address  | Outlet for Adult Services | Priority Group   | Programme Type          | Programme Detail  | Staff/Client support ratio | If Category of Programme Type provides support to other types | Service Capacity as at 1.1.2012 | No of service users under 18 years | No of service users over 18 years | Total No of service users                                       | Service User Profile | Primary LHD/Area     | Location (county) |
|-----------------|--|---|-----------------|-----------------------|---|---------------------------|------------------|-------------------------|---|----------------------------|---|---------------------------------|------------------------------------|-----------------------------------|---|----------------------|----------------------|-------------------|
| 1               | Development of Food  |   |                 |                       |   |                           | Other Adult Menu | Assessment of Need      | Not applicable  |                            |   |                                 |                                    |                                   | 0.00  |                      | Dublin North Central |                   |
| EABF            | RehabCare B&Ment<br>Mental Health Clinics also offered as a not a Disability Group Option                            | RehabCare<br>Wynemore Hill House,<br>Wynemore Road,<br>Dun Laoghaire,<br>Dublin 15                  | Amy O'Malley    | 087 450 4715          | RehabCare<br>Wynemore Hill House,<br>Wynemore Road,<br>Dun Laoghaire,<br>Dublin 15                  | ADP                       | 10 APAS<br>Adult | Day - Other Day Service | Day Active Community Participation (between 10 & 11.30) | 10:00                      |   | 40.00                           | 41.00                              | 41.00                             | 20 + MD<br>1 + MH<br>1 + PH<br>4 + S<br>13 + MH (Mental Health) | Dublin North Central |                      |                   |
| EABF            | RehabCare Day Language<br>Mental Health Clinics also offered as a not a Disability Group Option                      | RehabCare<br>Clonsilla House,<br>Clonsilla Street,<br>Dun Laoghaire,<br>Co. Dublin                  | Clara McQuillie | 086 800 1131          | RehabCare<br>Clonsilla House,<br>Clonsilla Street,<br>Dun Laoghaire,<br>Co. Dublin                  | ADP                       | 10 APAS<br>Adult | Day - Other Day Service | Day Active Community Participation (between 10 & 11.30) | 22.00                      |   | 22.00                           | 33.00                              | 33.00                             | 20 + MD<br>12 + MH<br>1 + PH<br>15 + S                          | Dublin North Central |                      |                   |
| EABD            | RehabCare Day<br>Mental Health Clinics also offered as a not a Disability Group Option                               | RehabCare<br>Southern Cross House,<br>Southern Cross Business Park<br>Saggart Road,<br>Co. Wicklow  | Rebecca Power   | 087 241 3070          | RehabCare<br>Southern Cross House,<br>Southern Cross Business Park<br>Saggart Road,<br>Co. Wicklow  | ADP                       | 10 APAS<br>Adult | Day - Other Day Service | Day Active Community Participation (between 10 & 11.30) | 25.00                      |   | 25.00                           | 25.00                              | 25.00                             | 14 + MD<br>1 + S<br>12 + MH<br>2 + PH<br>15 + S                 | Dublin North Central |                      |                   |
| EABD            | Priority Centre<br>Mental Health Clinics also offered as a not a Disability Group Option                             | RehabCare<br>Southern Cross House,<br>Southern Cross Business Park,<br>Saggart Road,<br>Co. Wicklow | Rebecca Power   | 087 241 3070          | RehabCare<br>Southern Cross House,<br>Southern Cross Business Park,<br>Saggart Road,<br>Co. Wicklow | ADP                       | 10 APAS<br>Adult | Day - Other Day Service | Day Active Community Participation (between 10 & 11.30) | 10.00                      |   | 10.00                           | 12.00                              | 12.00                             | 6 + MD<br>2 + MH<br>2 + PH<br>1 + S<br>12 + S                   | Dublin North Central |                      |                   |
| EABD            | Unit A/V Agreed Day Service  | RehabCare<br>Southern Cross House,<br>Southern Cross Business Park,<br>Co. Wicklow                  | Rebecca Power   | 087 241 3070          | RehabCare<br>Southern Cross House,<br>Southern Cross Business Park,<br>Co. Wicklow                  | ADP                       | 10 APAS<br>Adult | Day - Other Day Service | Day Active Community Participation (between 10 & 11.30) | 3.00                       |   | 3.00                            | 3.00                               | 3.00                              | 3 + PH<br>5 + S   | Dublin North Central |                      |                   |
| EABD            | RehabCare Centre<br>Mental Health Clinics also offered as a not a Disability Group Option                            | RehabCare<br>Unit 20,<br>Saggart Business Park,<br>Saggart Road,<br>Co. Wicklow                     | Amy O'Malley    | 087 450 4715          | RehabCare<br>Unit 20,<br>Saggart Business Park,<br>Saggart Road,<br>Co. Wicklow                     | ADP                       | 10 APAS<br>Adult | Day - Other Day Service | Day Active Community Participation (between 10 & 11.30) | 38.00                      |   | 38.00                           | 38.00                              | 38.00                             | 14 + MD<br>5 + PH<br>2 + S<br>15 + MH (Mental Health)           | Dublin North Central |                      |                   |
| EABD            | New Horizon Park House   | RehabCare<br>Park House,<br>Saggart,<br>Co. Wicklow   | Jane Johnson    | 087 21 31176          | RehabCare<br>Park House,<br>Saggart,<br>Co. Wicklow   | ADP                       | 10 APAS<br>Adult | Day - Other Day Service | Day Active Community Participation (between 10 & 11.30) | 5.00                       |   | 5.00                            | 5.00                               | 5.00                              | 5 CP<br>5 P<br>5  | Dublin North Central |                      |                   |
| EABD            | Mentoring, Counselling & Placement Services<br>Mental Health Clinics also offered as a not a Disability Group Option | RehabCare<br>Block 7, Unit C,<br>Wynemore Road,<br>Dun Laoghaire,<br>Dublin 15                      | Kevin O'Malley  | 087 407 8050          | RehabCare<br>Block 7, Unit C,<br>Wynemore Road,<br>Dun Laoghaire,<br>Dublin 15                      | ADP                       | 10 APAS<br>Adult | Day - Other Day Service | Day Active Community Participation (between 10 & 11.30) | 24.00                      |   | 24.00                           | 24.00                              | 24.00                             | 24 + MH (Mental Health)   | Dublin North Central |                      |                   |









| Service Unit No. | Service Item  | Service Location   | Unit Manager    | Staff WTE No. | Staff WTE No. | Staff WTE No. | Staff WTE No. | Staff WTE No. | Staff WTE No. | Part Description of the Staffing numbers entered under each heading should be provided below | Costs £  |               |             | Revenue £  |                         |                                      |               | Surplus (Deficit) £ |
|------------------|---|--|-----------------|---------------|---------------|---------------|---------------|---------------|---------------|--|----------|---------------|-------------|--|-------------------------|--------------------------------------|---------------|---------------------|
|                  |   |  |                 |               |               |               |               |               |               |  | My Costs | Non-Pay costs | Total Costs | HEE Revenue (Incl Area UNO/BU/Job or funding post) | HEE Revenue other Areas | Client Income from Other HSE Charges | Other Revenue |                     |
|                  | Assessment of Need  |  |                 |               |               |               |               |               |               |  |          |               |             |  |                         |                                      |               |                     |
| EA0P             | RehabCare Safety Unit<br>Mental Health Clients also attend - this is not a Disability Group Option  | RehabCare, Kynema Life House, Kynema Road, Ballyhenry, Dublin 10                                       | Amy O'Malley    | 1.00          | 3.36          | 5.11          |               |               |               | 210.56   | 110,177  | 320,726       | 223,822     | 65,220   |                         |                                      | 319,072       | -1,656              |
| EA0Y             | RehabCare Day Hospital<br>Mental Health Clients also attend - this is not a Disability Group Option | RehabCare, Clontarf House, Clontarf Road, Clontarf, Co. Dublin   | Clara McAuliffe | 1.10          | 1.32          | 3.42          |               |               |               | 179,046  | 413,786  | 592,834       | 275,681     | 14,810   |                         |                                      | 260,760       | -2,854              |
| EA0D             | RehabCare Day Hospital<br>Mental Health Clients also attend - this is not a Disability Group Option | RehabCare, Southern Cross House, Southern Cross Business Park, Bagginbun Road, Ballyhenry, Co. Wicklow | Rebecca Power   | 1.00          | 2.30          | 4.30          |               |               |               | 197,148  | 79,315   | 276,463       | 261,614     | 13,849   |                         |                                      | 274,512       | -1,947              |
| EA0C             | RehabCare Day Hospital<br>Mental Health Clients also attend - this is not a Disability Group Option | RehabCare, Southern Cross House, Southern Cross Business Park, Bagginbun Road, Ballyhenry, Co. Wicklow | Rebecca Power   | 1.00          | 1.00          | 3.00          |               |               |               | 87,686   | 54,909   | 142,595       | 141,742     |  |                         |                                      | 141,742       | -1,853              |
| EA0S             | RehabCare Day Hospital<br>Mental Health Clients also attend - this is not a Disability Group Option | RehabCare, Southern Cross House, Southern Cross Business Park, Bagginbun Road, Ballyhenry, Co. Wicklow | Rebecca Power   | 1.00          | 2.30          | 3.30          |               |               |               | 148,275  | 72,954   | 221,229       | 219,594     |  |                         |                                      | 219,594       | -735                |
| EA0T             | RehabCare Day Hospital<br>Mental Health Clients also attend - this is not a Disability Group Option | RehabCare, Southern Cross House, Southern Cross Business Park, Bagginbun Road, Ballyhenry, Co. Wicklow | Amy O'Malley    | 1.00          | 3.00          | 4.40          |               |               |               | 154,014  | 192,270  | 377,284       | 275,540     | 88,394   |                         |                                      | 274,944       | -2,220              |
| EA0U             | RehabCare Day Hospital<br>Mental Health Clients also attend - this is not a Disability Group Option | RehabCare, Southern Cross House, Southern Cross Business Park, Bagginbun Road, Ballyhenry, Co. Wicklow | Amy O'Malley    | 0.70          | 0.80          | 1.30          |               |               |               | 88,880   | 41,200   | 130,080       | 100,312     |  |                         |                                      | 100,312       | -768                |
| EA0V             | RehabCare Day Hospital<br>Mental Health Clients also attend - this is not a Disability Group Option | RehabCare, Southern Cross House, Southern Cross Business Park, Bagginbun Road, Ballyhenry, Co. Wicklow | Nessa Carrivan  | 1.00          | 1.00          | 3.00          |               |               |               | 182,072  | 128,413  | 277,485       | 252,483     | 24,394   |                         |                                      | 279,877       | -1,648              |



| Service Unit No. | Service Name                 | Service Location                     | Unit Manager    | Staff FTE No. | Staff FTE No. (incl. vacant posts) | Staff FTE No. (not including vacant posts) | Staff FTE No. (not including vacant posts) | Staff FTE No. (not including vacant posts) | Staff FTE No. (not including vacant posts) | Staff WTE No. | Total WTE (incl. vacant posts) | Task Descriptions of the Staffing numbers entered under each heading should be provided below   | Costs €   |               |             |  |                         |  | Revenue €     |               |                     |           |               |             |
|------------------|------------------------------|--------------------------------------|-----------------|---------------|------------------------------------|--|--|--|--|---------------|--------------------------------|---|-----------|---------------|-------------|--|-------------------------|--|---------------|---------------|---------------------|-----------|---------------|-------------|
|                  |                              |                                      |                 |               |                                    |  |  |  |  |               |                                |   | Pay Costs | Non-Pay Costs | Total Costs | HSE Revenue this Area (including management fee) | HSE Revenue other Areas | Client Income (Revenue from related charges) | Other Revenue | Total Revenue | Surplus (Deficit) € | Revenue € |               |             |
|                  |                              |                                      |                 |               |                                    |  |  |  |  |               |                                |   |           |               |             |  |                         |  |               |               |                     | Pay Costs | Non-Pay Costs | Total Costs |
| 303A             | Case & Support Residential   | 2 Beech Park, Cabinteely, Co. Dublin | Jane Daly       | 0.00          | 0.00                               | 0.00                                       | 0.00                                       | 0.00                                       | 0.00                                       | 0.00          | 0.00                           | 1 x Chief Nurse, 1 CMT Case workers and 1 Support Nurse   | 0.00      | 0.00          | 0.00        | 0.00   | 0.00                    | 0.00   | 0.00          | 0.00          | 0.00                | 0.00      |               |             |
| 303B             | Residential Services         | 2 Beech Park, Cabinteely, Co. Dublin | Jane Daly       | 0.00          | 0.00                               | 0.00                                       | 0.00                                       | 0.00                                       | 0.00                                       | 0.00          | 0.00                           | 1 x Residential Services Manager (1 x 0.5), 1 x Health & Social Care Practitioner, 2 x Team Leader, 2 Support Nurses, 1 x Support Worker (1 x 0.5), 1 x Care Worker (1 x 0.5) | 67,880    | 197,780       | 61,696      | 67,880   | 67,880                  | 0.00   | 61,696        | 67,880        | 67,880              | 61,696    | 67,880        | -4,564      |
| 303C             | Residential Services         | 2 Beech Park, Cabinteely, Co. Dublin | Jane Daly       | 0.00          | 0.00                               | 0.00                                       | 0.00                                       | 0.00                                       | 0.00                                       | 0.00          | 0.00                           | 1 x Health & Social Care Practitioner, 2 x Team Leader, 2 Support Nurses, 1 x Support Worker (1 x 0.5), 1 x Care Worker (1 x 0.5)   | 67,880    | 197,780       | 61,696      | 67,880   | 67,880                  | 0.00   | 61,696        | 67,880        | 67,880              | 61,696    | 67,880        | -4,564      |
| 303D             | Community Support            | 2 Beech Park, Cabinteely, Co. Dublin | Clara McAuliffe | 0.00          | 0.00                               | 0.00                                       | 0.00                                       | 0.00                                       | 0.00                                       | 0.00          | 0.00                           | 1 x Community Support Worker  | 0.00      | 11,750        | 11,750      | 11,662   | 0.00                    | 0.00   | 0.00          | 11,662        | 11,662              | 11,662    | 11,662        | 47          |
| 303E             | Day Support                  | 2 Beech Park, Cabinteely, Co. Dublin | Clara McAuliffe | 0.00          | 0.00                               | 0.00                                       | 0.00                                       | 0.00                                       | 0.00                                       | 0.00          | 0.00                           | 1 x Health & Social Care Practitioner, 1 x Community Support Worker   | 72,301    | 21,720        | 94,021      | 93,342   | 0.00                    | 0.00   | 0.00          | 93,342        | 93,342              | 93,342    | 93,342        | 495         |
| 303F             | Dublin Wicklow Region        | 2 Beech Park, Cabinteely, Co. Dublin | Clara McAuliffe | 0.00          | 0.00                               | 0.00                                       | 0.00                                       | 0.00                                       | 0.00                                       | 0.00          | 0.00                           | 1 x Community Support Worker  | 72,301    | 21,720        | 94,021      | 93,342   | 0.00                    | 0.00   | 0.00          | 93,342        | 93,342              | 93,342    | 93,342        | 495         |
| 303G             | Head Office contact handlers | 2 Beech Park, Cabinteely, Co. Dublin | Laura Reave     | 0.00          | 0.00                               | 0.00                                       | 0.00                                       | 0.00                                       | 0.00                                       | 0.00          | 0.00                           | 1 x Health & Social Care Practitioner, 1 x Support Worker, 1 x Care Worker  | 68,080    | 192,200       | 78,170      | 78,170   | 78,170                  | 0.00   | 0.00          | 78,170        | 78,170              | 78,170    | 78,170        | 6,300       |
| 303H             | Head Office contact handlers | 2 Beech Park, Cabinteely, Co. Dublin | Laura Reave     | 0.00          | 0.00                               | 0.00                                       | 0.00                                       | 0.00                                       | 0.00                                       | 0.00          | 0.00                           | 1 x Health & Social Care Practitioner, 1 x Support Worker, 1 x Care Worker  | 68,080    | 192,200       | 78,170      | 78,170   | 78,170                  | 0.00   | 0.00          | 78,170        | 78,170              | 78,170    | 78,170        | 6,300       |
| 303I             | Head Office contact handlers | 2 Beech Park, Cabinteely, Co. Dublin | Laura Reave     | 0.00          | 0.00                               | 0.00                                       | 0.00                                       | 0.00                                       | 0.00                                       | 0.00          | 0.00                           | 1 x Health & Social Care Practitioner, 1 x Support Worker, 1 x Care Worker  | 68,080    | 192,200       | 78,170      | 78,170   | 78,170                  | 0.00   | 0.00          | 78,170        | 78,170              | 78,170    | 78,170        | 6,300       |





