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Health Service Executive

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29th June 2020

Ms. Aileen Fallon,
Clerk to the Committee,
Special Committee on COVID-19 Response,
Leinster House,
Dublin 2.

Re: Submission on Disability Sector (SCC19R-I-0253)

Dear Ms. Fallon,

I refer to your invitation from the Special Committee to make a written submission on the topic of people with disabilities and the disability sector.

Please find attached (in a separate document) a submission paper from the HSE for the attention of the Committee members.

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

Yours sincerely,

Ray Mitchell
Assistant National Director
Parliamentary Affairs Division

Encl.

June 2020

HSE SUBMISSION TO OIREACHTAS SPECIAL COMMITTEE ON COVID- 19 RESPONSE

Impact of Covid-19 on People with Disabilities and the Disability Sector

Community Operations - Disability Services

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1. Introduction

In preparing for and responding to COVID-19 and to fully align with Public Health guidance as recommended via the NPHET, the HSE and its partner service providers put in place a range of measures, which included the prioritisation of vital residential and home support services whilst curtailing or closing certain services such as day services, respite services, and certain clinical supports in order to; a) prioritise essential public health services at CHO level and b) ensure continued delivery of the referenced residential and home supports provision. Additionally, emergency co-ordination arrangements involving National Disability Representative Bodies were also instituted in order to support the overall response within the disability sector.

In the absence of regular access to some service and supports, CHOs and service providers tried to maintain services that can be delivered safely; providing outreach and telecare solutions, using digital/ assistive technology where possible; and using creative and innovative models of care to support service users, both adults and children.

The HSE continues to plan the re-establishment of vital non-covid supports and services. This includes very careful and detailed work on the part of the Disability Sector with national guidance and will result in directing how all funded agencies can deliver services on a medium to long-term basis. Plans have to comply with guidance as set out by the National Public Health Emergency Team as well as Public Health specialists in the HSE.

In addition the Disability Sector is re-establishing a number of structures including the National Consultative Forum as well as other operational structures that will co-ordinate and support the sector as we continue to navigate this pandemic and make every effort to deliver supports and services in line with Public Health Guidance.

2. Covid-19 response for people with a disability

2.1. Covid-19 Infections and clusters in disability settings

Official data from the Computerised Infectious Disease Reporting system (CIDR) of the Health Protection Surveillance Centre (HPSC) is provided, on a daily basis, under 'outbreak and mortality for all Long Term Residential Settings' – this includes Disability Centres. This data is provisional and subject to ongoing verification.

As of midnight, June 26th, HSPC data indicates:

- Approx. 8,400 people with disabilities live in HIQA-registered disability centres ranging from single apartments to group homes in the community to campus-based facilities.
- Just over 521 people are COVID-19 positive laboratory confirmed
- It is estimated that circa 56% of those affected were staff, and 44% were residents
- Unfortunately, 13 people **have died, all of them residents
- While there has been no outbreak of COVID 19 (two or more cases) in over 85% of centres, outbreaks have been recorded to date in 98 HSPC-confirmed disability centres.* Approx 79% have now been declared closed after 28 days with no new cases.
- In addition, as of 22nd June, three residents aged under 50, four aged between 50-54, five aged between 55-59 and eight between 60-64 living in nursing homes have died where COVID-19 was confirmed or suspected. Some of these may include younger people with disabilities living in these homes.

*validation of centre types is ongoing

** one death declassified

2.2. Availability of data disaggregated by disability for Covid-19

There are approximately 1,300 Disability Centres with capacity for 8,400 people with disabilities registered with the Health Information and Quality Authority (HIQA) in respect of residential and respite care.

HIQA has been supporting the national public health response to COVID-19 through the monitoring/tracking of confirmed or suspected outbreaks of the virus. The COVID tracker is based on mandatory NF02 notifications, whereby registered providers are mandated to report outbreaks within 72 hours.

The HIQA Disability Tracker provides information on confirmed and suspected cases of COVID-19 among the residents of registered disability residential facilities **at a point in time**. The table below the breakdown of confirmed, Covid+ cases reported on April 29th, 2020, which according to the HIQA tracker was the date on which the highest cumulative number of confirmed cases was reported from the NF02 database. This data is broken down below by HSE Community Health Organisation (CHO) Area.

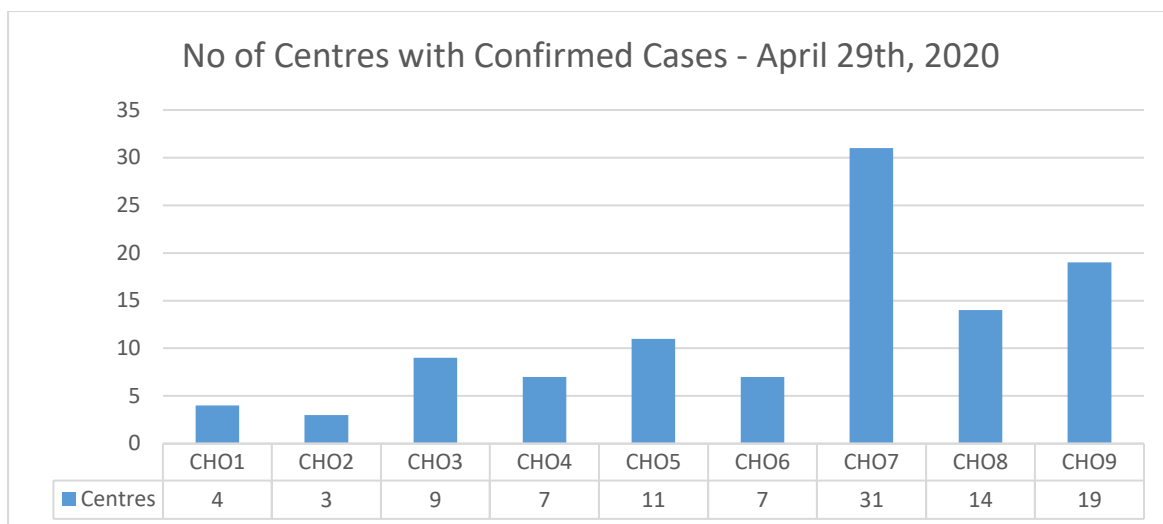


Figure 1: Disability Centres with Confirmed Cases – Source: HIQA NF02 Database

As at April 29th, 2020, the HIQA NF02 tracker reported a total of 103 confirmed cases among residents and 198 confirmed case among staff. Further 68 residents and 169 staff were recorded as “Suspected” cases on this date. The total no of centres affected was 105.

Confirmed case numbers by CHO are broken out further in Figure 2 below:

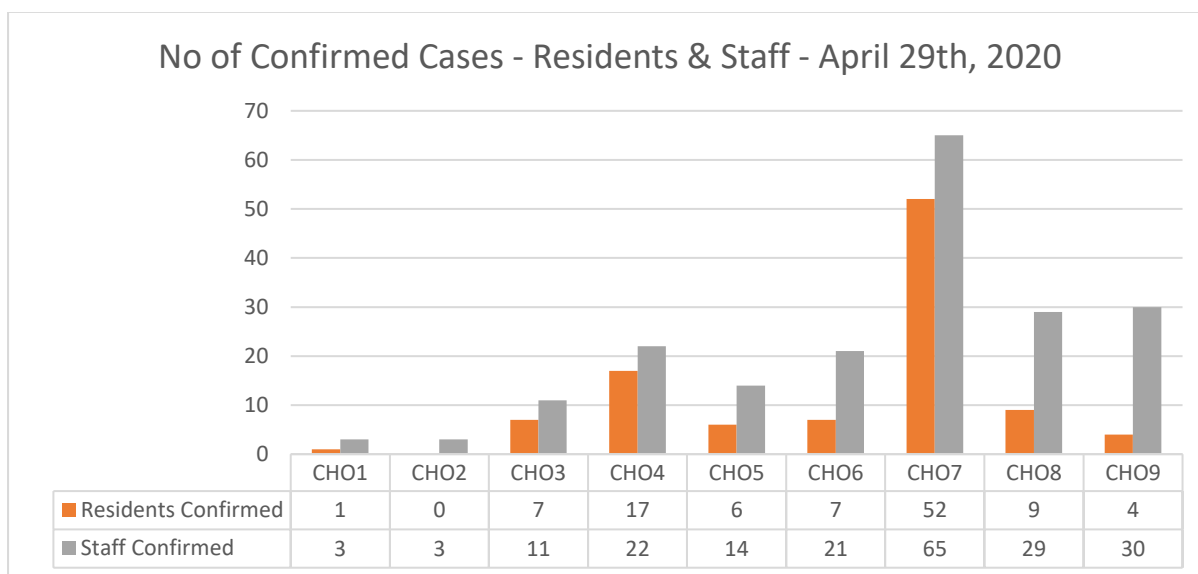


Figure 2: Confirmed Cases by CHO - Source: HIQA NF02 Database

2.3.PPE - Supplies and supports for disability sector and carer

Notwithstanding National supply constraints regarding PPE at the beginning of the pandemic that affected the health and social care system as a whole, disability services, through direct supply by the HSE CHO areas, and direct purchasing by service providers (on a reimbursement basis) has ensured consistent and effective supply of PPE for Disability Services, in particular Disability Residential Services, which has no doubt been a positive, contributory factor in the relatively low level of infection within Disability Services.

Cost of ongoing supply remain a significant issue. To illustrate, over the two-month period from April 14th, 2020 to June 16th, 2020, the average total PPE volume requirement per day was 57,520 units per day across 54 organisation with residential services.

This equates to a one-month supply requirement of 1,725,613 units of PPE per month at a cost of €1,859,895 per month – for residential services alone.

The above calculation does not take into the account the further precautionary PPE requirements that will be necessary for gradual service resumption in non-residential services, namely:

- Day Services - in excess of 23,000 adults with physical and sensory disabilities, intellectual disability and autism in over 950 service locations throughout the country
- Home Support and Personal Assistance Hours to approximately 10,000 persons with a disability
- Respite Services – Over 6,000 persons with disability availing

While the precautionary level of PPE can be calculated once final HSPC guidance is received, provision will also need to be made to allow for an enhanced level of PPE to deal with any potential second-wave or infection outbreak that may occur in the short to medium term. Therefore, the ongoing cost of PPE procurement and distribution will remain significant going forward.

2.4.Accessibility of public health information on Covid-19 for persons living with disabilities

Under the governance of the HSEs National Integrated Operations Hub chaired by the Chief Operations Officer and work relating to vulnerable people, disability operations have had a team in place with the responsibility for providing supports and capacity building training for the sector via the previously referenced National Disability Emergency Co-ordination Team, including key representation comprised of Disability Representative Bodies.

To date, a range of guidance material has been developed as is set out in the appendices.

Central to the above has been continued engagement and Liaison with National Representative Bodies representing Service Providers and Family/service Users & Carer Representation Group representing the interest of service users, their families as well as provider organisations.

These forums work as a team with each having specific and identified work streams working through regular tele and video-conference. Taking this approach ensured two-way communication as well as working groups with assigned tasks in response to the Covid-19 emergency.

The Service Provider & Representative Organisation Team worked with the HSE and provided a consultative forum on aforementioned key guidance documentation and capacity building initiatives and support for the HSE-funded disability sector. This team included representatives from Federation of Voluntary Bodies, Disability Federation of Ireland, Not for Profit Association, and the HSE

The HSE also constituted a Family, Carer, and Service Users to ensure that the view of services users, families, and carers was to the fore in any guidance materials/supports and/or capacity building & training provided to the disability sector. This group included representatives from Inclusion Ireland, Family Carers Ireland, and the HSE.

To date, a range of guidance material has been developed to support people with disabilities, families and staff, including:

- Alternative Models of Care (Non-Residential)
- Frequently Asked Questions for People with Disabilities and Carers.
- Streamlined Health Passport for people with disabilities who are admitted to hospital
- Guidance on Use of PPE in Disability Services
- Guidance for supporting adults in a community residence/at home
- Guidance of supporting children in a community residence/at home
- Support coordination in a pandemic; practical checklist to avoid stressors for service users

The FAQ, in particular, explains the pathway for supports for family carers and includes dedicated guidance and advice on a range of issues relating to COVID-19 together with a list of local and national helpline numbers.

In addition, a number of specific guidance's were developed in easy-read version to ensure greater accessibility for service users, families, and carers. These include:

- *Guidance of COVID-19 testing in Disability Services Easy Read Version V1*
- *Guide for Supporting adults in a community residence/at home Easy Read Version V1*
- *Guide for Supporting children in a community residence/ at home Easy Read Version V1*
- *Covid 19 Guide on how to stay connected using communication apps Easy to Read Version*
- *Coronavirus (Covid-19) Frequently Asked Questions for people with disabilities and family carers*

For the full list of Guidance/Advice documentation, see Appendix 1, and the following is the central repository for accessing these disability specific guidance materials during the COVID-19 emergency.

<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/>

3. Impact of Covid-19 on daily life and services

3.1. Impact on educational supports for people with disability

The impact of School closure during the pandemic has been a source of particular strain for parents of children with a disability and special education needs from mainstream and specialist school setting.

Based on figures from the National Council for Special Education (NCSE) as at 31st December, 2019, there were:

- 8,004 children in special schools
- 6,846 children in primary special classes
- 2,413 children in second level special classes
- 22,238 children in mainstream schools with Special Needs Assistants (SNAs)

While the education and school sector has endeavoured to maintain contact with children and parents during the pandemic via usage of telephone and online supports, parents of children with special educational needs have been reporting increasing difficulty in managing their family member in the domestic setting, with many pointing to the absence of the daily routine and structure afforded by school attendance as particularly problematic.

Family Carers Ireland (FCI), who were part of Sectoral working group in partnership with the HSE undertook research recently entitled 'Caring during Covid'. Selected insight arising this research are set out below, with indicator that the most acute situations were those in which there is more than one person with a disability or those caring for someone with Intellectual Disability/Autism Spectrum Disorder in the household. Most significant problems self-identified by carers at – as reported by FCI - included:

1. Inability to manage sensory overload at home without access to activities
2. Parents seeking training in restraint and self-protection from challenging behaviours. Behavioural assessment and behavioural support plans need to be developed for parents to implement at home
3. Physical and emotional exhaustion of the family carer due to loss of daytime respite in special school or centre
4. Significant financial hardship due to suspended supports e.g. special dietary needs catered usually in special schools, and repair damage in the home
5. Confusion and lack of equity re day service resumption, school leaver assessment and July provision
6. Access to PPE – where normally provided for routine care, due to Covid, many carers were left with no or little PPE.

In view of the above, the HSE considers it of paramount the need to deliver a consistent level of intervention over the summer months – in a parallel with the Department of Education's July Provision Programme - for children and their families that may be most impacted by the covid-19 emergency situation and the severe curtailment experienced in terms of access to services. The HSE and the Department of Education have agreed that SNAs can now opt, on a voluntary basis, for the HSE led programme over the Summer months. Having SNA resources made available to us during the covid-19 emergency is hugely important especially given these restrictions and impact of the available workforce to you owing to other priorities. The added value that SNA colleagues can bring cannot be over emphasised given their experience and skill set. SNAs can be requested to consider both centre based as well as home based visits during the summer months, and a matching programme to link SNAs to specific children and families is currently underway within CHO areas – subject to the availability of SNA's volunteering for the scheme.

3.2. Services for people with disability post Covid-19

It is important to emphasise that since the publication of the Governments 'Roadmap for reopening Society & Business' as well as the 'Return to work safely' protocol, the HSE is finalising plans to re-establish vital non-covid supports and services. This includes very careful and detailed work on the part of the Disability Sector with national guidance and will result in directing how all funded agencies can deliver services on a medium to long-term basis. In effect this means that the HSE will soon set out its plans in terms of how we can safely begin to commence services, which will have to comply with guidance as set out by the National Public Health Emergency Team as well as Public Health specialists in the HSE.

The changes in service delivery have resulted in significant stressors being placed on families and individuals with disabilities across Ireland. In times of such uncertainty it was imperative that the vulnerable members of our community remained supported by our service providers, therefore, it was essential that a shift in focus occurred in terms of how services were delivered.

One of the primary opportunities which has occurred a result of the presence of Covid-19 has been that the pandemic has acted as a catalyst to the development of alternative models of service delivery. It is from this position that the reshaping process of services occur and consideration is given to how services will now be best delivered, mindful of the assessed individualised needs and wishes of people with disabilities and in accordance with Government Public Health guidelines. During this planning phase, there is a need to engage with individuals and, as appropriate, with their families, in reshaping what people with disabilities choose that their day should look like in order to have a "meaningful life".

Disability Services and Supports will require cultural and behavioural changes to previous work practices that will involve the implementation of: 1) Strict and effective social distancing measures, 2) The use of PPE as required and where social distancing measures cannot be applied, 4) Additional hygiene and cleaning controls to those previously used in accordance with existing Infection Control and Hand Hygiene Policies, and 5) Communication, education, awareness and responsibility by all staff for compliance with infection control measures. Implementation of these changes will vary for each location.

The HSE and its service provider partners are currently undertaking detailed planning with respect of the operational delivery of disability services, most notable day services and access to therapies. It is however anticipated that there will be cost pressures in respect of facilities modification, PPE expenses, and potential increased staffing costs to mitigate against activity delivery restrictions inherent with working alongside the continued presence of Covid-19 in the short to medium term and maintaining the prevailing social distancing and infection prevention and control requirements.

Key Guidance Documents developed by HSE Disability Services with respect of Service Resumption and Post-Covid Services are as follows:

Reshaping Disability Services from 2020 and beyond in line with COVID-19 restrictions (Respite, Home Supports, Residential and PA supports) [<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/reshaping-disability-services-from-2020-and-beyond.pdf>]

Framework for the Resumption of Adult Disability Day Services – supporting people with disabilities in the context of COVID-19 – the next year [<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/framework-for-resumption-of-adult-disability-day-services.pdf>]

3.3. Accessibility – public transport particularly and of public sanitation facilities

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

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

Current physical distancing and IPC requirements will have a significant impact of the capacity of existing transport infrastructure. To facilitate service users that will require transport to attend at a day service location on any day/s, Service providers need to assess their transport fleet in line with COVID guidance and agree the number of service users that can be transported safely at any time. This will vary depending on the needs of service users and their understanding of the behaviours required to comply with COVID etiquette.

It is also likely that Families previously availing of transport routes with capacity restrictions provide transport for their son/daughter on the day/s that they are going to attend at a day service and/or respite location. It is acknowledged that this will not be possible for all families and may pose particular challenges for families in rural areas with no access to public transport.

In additional, protocols for the modification, cleaning and maintenance of transport vehicles will need to be implemented by all service providers, which will also limit route/passenger pick-up capacity.

3.4. Impact on those in employment and employment opportunities

The economic downturn and widespread closure of all but non-essential workplaces have severely limited present opportunities for employment, supported employment, work experience and job coaching for persons with a disability.

Please note that although HSE-funded day services provide support for people to acquire the skills that are required to become employable, the provision of supported employment is the remit of Department of Employment Affairs and Social Protection (DEASP). HSE-funded day services support people to access supported employment programmes provided by DEASP

While many persons will be in receipt of a compensatory Covid payment, this does not apply to persons on work experience or job coaching initiatives. Also significant is the loss of community and workplace participation by persons with a disability owing to the prolonged shut-down of many workplaces. Allied to this is the potential loss of acquired skills and self-esteem afforded by participation in mainstream employment.

4. Impact of Covid-19 on carers and families of those with disability

4.1. Impact of Covid-19 on carers and families of those with disability

Given the unprecedented public health emergency and the difficulty of delivering closer personal contact services such as Home Support and Personal Assistance Hours, the focus of the HSE and partner provider organisations was on maintaining services to greatest practicable degree to the highest/critical need cases. As a result, subject to a Covid-19 Service Needs Prioritisation Review, many clients with lower priority needs have had their home support service temporarily ceased or reduced with the support of family members and/or alternative forms of volunteer-provided local supports. In these cases, each client has/will be contacted to advise of the assessment and decision, alternative support available and assistance given to ensure that essential requirements continue to be provided. The HSE also frequently encountered cases where Families/Service Users have refused prioritised service delivery in the home due the risk of potential infection. Clients have been under review should individual circumstances change, but this has nonetheless placed a burden on parents and carers for the duration of the pandemic.

Further, the availability of Centres-based respite has been severely curtailed during the pandemic. Availability was impacted through the necessity to re-prioritise existing respite centres to provide for isolation capacity, but most significantly, Infection Control and Social Distancing Requirements, which meant that centres that could have traditionally offered respite to five or six individuals were only equipped to offer respite to just one or two persons depending on the physical lay-out of the buildings in question.

While the targeted, prioritised delivery of sessional in-person support and/or tele/virtual supports have been welcomed by service users, families and carers, the absence of the structure of Day Services and/or the School settings has led to significant stressors for some families.

In Inclusion Irelands recent survey of parents of children with disabilities who are home educating during Covid, 10% of responders have no access to any technology to complete schoolwork, adding to the challenges of home schooling while parents are working themselves from home or working on frontline and isolating at home. Inclusion Ireland survey of people who access Day Services indicates that over 7% have no access to technology & 30% do not have a Broadband connection.

HSE's Service User and Families Representative Bodies Group advised of increasing behaviours of concern, self-harm, disruptive sleep, social isolation in absence of day services and therapies and also, increasing carer stress and burnout as the pandemic progressed. Inclusion Ireland's survey of people who use Day Services (to be published end of this week starting June 22nd);

- Over 38% report an increase in behaviours that can be a challenge
- Over 36% are lonelier
- Over 33% are more anxious
- Over 21% are happier at home
- Nearly 20% are more withdrawn
- 18% are more angry

4.2. Impact on those caring for persons with disabilities in an informal capacity (e.g. families taking over from carers)

The HSE works in partnership with carer and service user representative bodies. This is central to our core commitment to actively listen and take on board the experiences of people in need of public health and social care services. For example, Family Carers Ireland (FCI) recent research on 'Caring during Covid' found family carer concerns in following order of frequency:

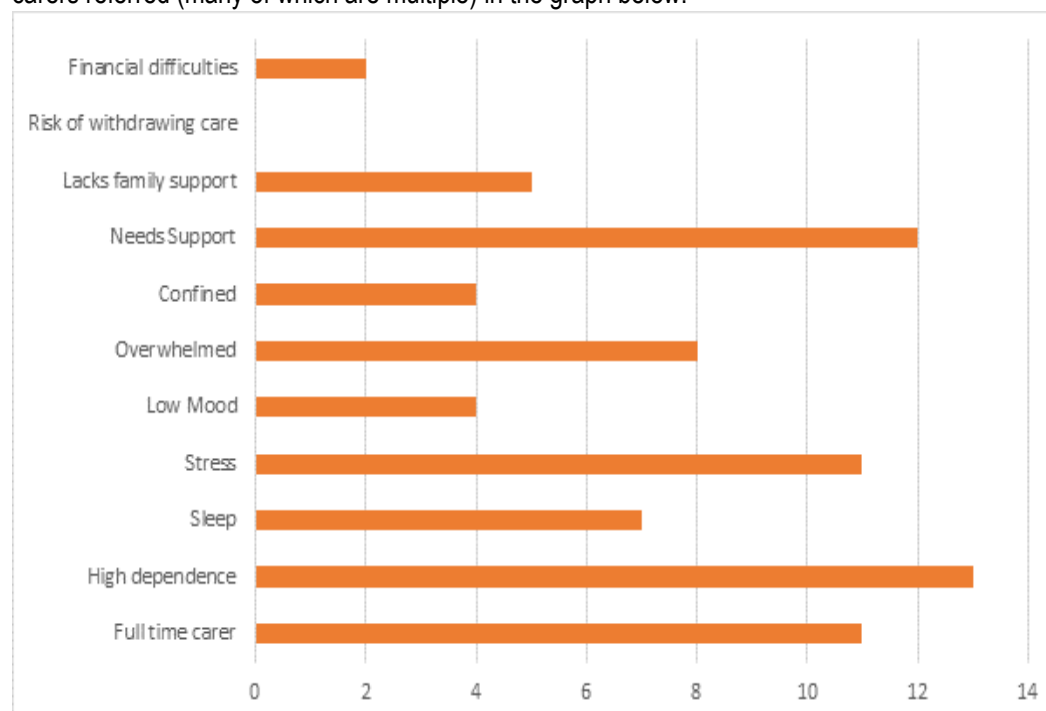
1. Concern re behavioural problems and long-term decline in mental and psychological health of the person they care for due to lockdown and withdrawal of services
2. Impact of increased stress and responsibility on carer's own physical and mental health
3. 56% concerned about increase in challenging behaviours displayed by the person they care for
4. Long-term regression and relapse due to service closure & loss of vital therapies including behavioural therapy

FCI advised of 41% increase in carer calls to their Carer Support Managers for 1-2-1 advice and support over a 4-week period from March to April 2020. Contacts to FCI social media platforms for information and advice have increased x 500% since the beginning of the crisis and currently are in excess of 100,000 per month.

Under a grant awarded by Irish Life, the vast majority of respite hours granted and equipment purchased by FCI was to support family carers of a person with a disability at home (often more than 1 child with a disability) whose behaviours are difficult to cope with.

FCI's free online professional counselling service for family carers launched in May and by mid-June, over half of available counselling hours had been used, mostly requested by parents of children or adults with special needs who are struggling to cope due to service closure and increasing behaviours that challenge

FCI is running a pilot with the HSE (CHOs 4 5 and 8) on a Model of Intensive Assessment and Action Planning programme for family carers. Commenced in May, the first 15 cases show range of challenges of those family carers referred (many of which are multiple) in the graph below.



4.3. Impact on funding and services provided in disability sector (e.g. S39 disability providers)

The majority of disability service provision in Ireland has historically and continues to be provided by voluntary agencies, which are funded under Section 38 and Section 39 of the Health Act 2004. Some of these organisations can be characterised as systemically challenged in terms of financial sustainability. This was the case prior to the onset of the COVID-19 public health emergency.

It is important to note that the HSE, prior to COVID-19, put measures in place in order to support vulnerable provider organisations, including delivery of a national service improvement programme. Additionally, the HSE and the Department of Health were developing options in terms of immediate as well as long-term policy considerations.

During the current public health emergency, the HSE has developed and circulated Financial Guidance re COVID Related Expenditure & Section 38/39 Provider Organisations, the purpose of which is to provide guidance to CHOs regarding potential service and related financial impacts of the COVID-19 pandemic for providers delivering 'essential' or 'core' Health and Social Care services during the COVID-19 Emergency Response. Please note that the guidance is temporary and remains applicable for the duration of the emergency only.

From a national perspective, a total of over €3 million additional financial support was given amongst some Section 39s in the period March to May 2020. This support was given as per norm and is separate to any COVID-19 issues

Supports provided by CHOs to S39 organisations during the period from March to May 2020 include the following:

- PPE continues to be provided to all funded agencies
- Infection Prevention and Control support, advice and training continues.
- Public Health advice/support is ongoing with regard to suspected/positive cases.
- Residential Preparedness Groups
- Facilitating the testing of all residential staff
- A COVID response Team to assist and support residential service providers. This team will now oversee and support the reshaping of disability services as a result of COVID 19
- Funding for emergency residential placements
- A weekly or now bi-weekly call/forum with all funded agencies to support them throughout the duration of the crisis
- Accommodation
- Logistics in the form of transport

With regard to funding, CHOs are having ongoing discussions in general with some of the Section 38 and Section 39 organisations in their areas. While additional funding has been agreed in some areas, in the main, additional funding has yet to be disbursed in this regard as a period of review and validation is required to determine the legitimate necessity for additional funding above 2020 pre-COVID agreed levels.

Emerging now from the peak of the pandemic, disability service providers are most concerned with regard to their financial sustainability position. The Department of Health will be aware of the financial sustainability of the sector which is not new and predates the 'Covid' emergency challenge. S38/39 providers are now faced with an even greater sustainability challenge more generally in the context of increased expenditure as well as falling

revenue generating efforts. Whilst the HSE can assist in terms of temporary remedial support for “essential” and “core” frontline services, the wider financial impacts cannot be dealt with by HSE.

In this context, the HSE would strongly endorse the need to progress the Departments own work in this area in respect of the “capacity assessment report” and indeed consider the medium to long-term much needed reform of disability policy/ sector. That is, given there has been much effort in adapting the way we are working in the context of Covid more broadly, there remains an important and unique opportunity to capitalise on these efforts whereby we fundamentally reform disability policy in line with Sláintecare.

5. Appendix 1: List of Guidance Documents developed by HSE Disability Services

No.	Name of Document	Date of Issue	Target Audience
1	Contingency Plan for Home Support Managers and Health Care Support Assistants and Disability Managers/Personal Assistance during Mitigation Phase V2	22/04/2020	Home Support Managers Health Care Support Assistants Disability Managers Personal Assistants
2	Guidance for COVID-19 in Social Care Group Homes and Residential Services – Disabilities	15/05/2020	Healthcare Workers Managers In non-nurse led services
3	Guidance for COVID-19 in Nurse Led Residential Care Services for people with disabilities	15/05/2020	Healthcare Workers Managers In residential centres where service is nurse-led
4	Guidance for testing for COVID-19 in Disability ServicesV1	31/03/2020	Social Care Workers Nursing staff In residential services for people with disabilities
5	Guidance of COVID-19 testing in Disability Services <i>Easy Read Version V1</i>	31/03/2020	People with a disability Social Care Workers Nursing staff In residential services for people with disabilities
6	Guide for Supporting adults in a community residence/at home <i>Easy Read Version V1</i>	31/03/2020	Adults with a disability Carers Staff Families Who are supporting adults with disabilities
7	Guide for Supporting children in a community	31/03/2020	Children with a disability Carers Staff

	residence/ at home <i>Easy Read Version</i> V1		Families Who are supporting children with disabilities
8	Streamlined hospital passport for people with disabilities who are admitted to hospital V1	31/03/2020	To be completed with people who have disabilities (with support where required) To be read by all Healthcare Workers caring for the person with a disability when they are in the hospital.
9	Guidance to support a person with additional needs who becomes distressed and angry when you try to engage with them. V1	31/03/2020	Staff or carers who do not normally work with people with disabilities, e.g. Hospital Staff
10	Support Coordination in a Pandemic – A practical checklist to avoid stressors for service users V1	31/03/2020	Carers Staff Families Who are supporting people with disabilities
11	Adapted Models of Support (Non-Residential) - Guidance for All Service Providers	20/5/2020	CHOs All Service Providers Who are supporting people with disabilities
12	Guidance on the use of Personal Protective Equipment (PPE) in Disability Services V3	27/04/2020	Healthcare Workers Managers In residential centres for people with disabilities
13	Coronavirus (Covid-19) Frequently Asked Questions for people with disabilities and family carers	20/05/2020	People with disabilities, their families and carers
14	Staff Guide for communicating with people with intellectual disability and with	23/04/2020	Staff in test centres, community assessment hubs, hospitals

	Autism (short version)		
15	Staff Guide for communicating with people with intellectual disability and with Autism	23/04/2020	Staff in test centres, community assessment hubs, hospitals
16	Staff Guide on communicating with Deaf and Hard of Hearing people	23/04/2020	Staff in test centres, community assessment hubs, hospitals
17	Staff Guide on working with an ISL or English interpreter	23/04/2020	Staff in test centres, community assessment hubs, hospitals
18	Covid 19 Guide on how to stay connected using communication apps <i>Easy to Read Version</i>	23/04/2020	People with disabilities, their families and carers
19	Covid-19 Test Process explained for Deaf and Hard of Hearing people	23/04/2020	Deaf and Hard of Hearing people
20	A message from Cathal Morgan, Head of Disability Operations, HSE for people with disabilities and their families.	24/04/2020	People with disabilities, their families and carers
21	Clinical Pathway – Clinical Consultation required – disability services	27/04/2020	Social Care Workers Nursing staff In non-nurse led residential services for people with disabilities
22	Clinical Guide for hospital clinicians when supporting a person with a disability	19/04/2020	Staff or carers who do not normally work with people with disabilities, i.e. Hospital Staff – doctors, nurses, allied health professionals

23	Pathway to HIQA Registration and model for developing an Enhanced Support Facility for people with disabilities during COVID-19	16/04/2020	Service Providers for people with disabilities
24	Webinar – Prevention and Preparedness in Disability Residential Facilities	27/04/2020	Carers Staff Who are supporting people with disabilities
25	Guidance on End of Life in social care-led disability centres during COVID-19	28/04/2020	Social Care Workers Nursing staff In non-nurse led residential services for people with disabilities
26	Appendices to accompany Guidance on End of Life in social care-led disability centres during COVID-19	28/04/2020	Social Care Workers Nursing staff In non-nurse led residential services for people with disabilities
27	Coronavirus (Covid-19) Frequently Asked Questions for people with disabilities and family carers <i>Easy Read version</i>	06/05/2020	People with disabilities, their families and carers
28	Q&A from Webinar held on April 27 2020	15/05/2020	Carers Staff Who are supporting people with disabilities
29	Communicating with families	15/05/2020	Carers Staff Who are supporting people with disabilities
30	Supporting people who are in isolation	15/05/2020	Carers Staff Who are supporting people with disabilities
30a	Activities to support people in isolation	15/05/2020	Carers Staff Who are supporting people with disabilities

30b	Risk Assessment tool for people in isolation	15/05/2020	Carers Staff Who are supporting people with disabilities
30c	Disability Services Pathway (for people who may need to leave their residence for isolation)	15/05/2020	Carers Staff Who are supporting people with disabilities
31	Approved Communication Supports for Deaf Patients in healthcare settings during Covid-19 – Information Card	20/05/2020	Deaf and Hard of Hearing people Staff
32	Framework for the Resumption of Adult Disability Day Services – supporting people with disabilities in the context of COVID-19 – the next year	29/05/2020	Adults with a disability Carers Staff and Management Families who are supporting adults with disabilities
33	Reshaping Disability Services from 2020 and beyond in line with COVID-19 restrictions (Respite, Home Supports, Residential and PA supports)	29/05/2020	Adults with a disability Carers Staff and Management Families who are supporting adults with disabilities