



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

**Draft Interim Standards for New Directions,
Services and Supports for Adults with Disabilities**

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1 Introduction

In Ireland, day services for adults with disabilities provide a vital network of support for over 18,000 people. The people who use these services have a diverse set of interests, aspirations and personal circumstances. They are people with a wide range of abilities and ages, who live in small communities, in isolated rural areas and in cities and towns. **'New Directions'**, the Review of HSE Day Services and Implementation Plan, published in 2012 proposes an approach to the provision of these services which is based on the principles of person-centredness, community inclusion, active citizenship and high-quality service provision.

Person-centredness is also a key message of the **Value for Money and Policy Review of Disability Services** (Department of Health, 2012) which proposes 'the migration from an approach that is pre-dominantly centred on group-based service delivery towards a model of person-centred and individually chosen supports.' It also provides the context of future service development, advocating the move to the provision of supports which focus on the wider needs of the person and the contributions they can make. These supports embed the person in their natural support system and wider community, drawing on formal mainstream and specialist disability supports in response to people's needs. It is in this context that the Interim Standards for New Directions are drafted.

New Directions sets out twelve supports that should be available to people with disabilities using 'day services'. It proposes that 'day services' should take the form of individualised outcome-focussed supports to allow adults using those services to live a life of their choosing in accordance with their own wishes, needs and aspirations.

The National Disability Strategy Implementation Plan 2013-2015 states that the Interim Standards for New Directions should ensure that the perspective of people with disabilities impact on policy and services. These Interim Standards require service providers and key stakeholders to involve people with disabilities in the design, delivery, monitoring and evaluation of the services and supports provided. They aim to be a catalyst for community inclusion and self determination in the lives of people with disabilities and to provide a framework to assist stakeholders to deliver services and supports in accordance with the vision and stated objectives outlined in the New Directions and the Value for Money Reports.

Figure 1. Illustration of the 12 Supports from New Directions, Review of HSE Day Services and Implementation plan 2012-2016



2 Principles

These draft Interim Standards for Services and Supports for Adults with Disabilities are based on a number of key principles. The principles are to:

1. Provide person-centred services and supports that are tailored to individual need
2. Provide person-centred services and supports that promote community inclusion and active citizenship
3. Provide person-centred services and supports that promote independence and a good quality of life for people using them
4. Promote and uphold the equal rights of adults with disabilities
5. Promote and improve the health and development of each person
6. Provide safe services and supports that promote positive risk management
7. Provide effective governance arrangements with clear leadership, management and lines of accountability
8. Plan and use resources effectively
9. Deliver responsive and consistent services based on evidence and good practice

3 Scope of the Interim Standards

These Interim Standards will apply to services and supports for adults with disabilities which are funded by the HSE, whether they are operated by public, private or voluntary bodies or organisations. They will not apply to:

- mental health services, which are regulated by the Mental Health Commission¹
- residential services for adults and children with disabilities, which are regulated by the Health Information and Quality Authority

¹ The Mental Health Commission has published the 'Quality Framework for Mental Health Services in Ireland'. This framework will apply to mental health supports provided to adults with disabilities.

- personal assistant services
- home care / home support packages
- home help services

4 Development of the Interim Standards

The development of these Interim Standards arose from recommendations in **New Directions**, the Review of HSE Day Services and Implementation Plan 2012-2016.

A National Implementation Group for **New Directions** was established in July 2012 under the auspices of the National Consultative Forum². The National Implementation Group made the development of these interim standards one of the priority areas of work. Appendix 1 lists the membership of the Standards Sub-group established by the National Implementation Group to develop these Interim Standards. The National Disability Authority supported the development of these interim standards through its involvement in the National Implementation Group and Standards Sub-group.

A consultation process was undertaken with people who use current adult day services to inform the development of these Interim Standards, prior to the issue of the Interim Standards for a wider public consultation.

5 How the Interim Standards are structured

Themes in the Interim Standards

The Interim Standards are based on the framework devised by the Health Information and Quality Authority (HIQA) for the development of Standards. The themes forming part of this framework are closely aligned with **New Directions**.

The Interim Standards are set out under seven Themes. The first three Themes which relate to quality and safety are:

- Individualised Services and Supports

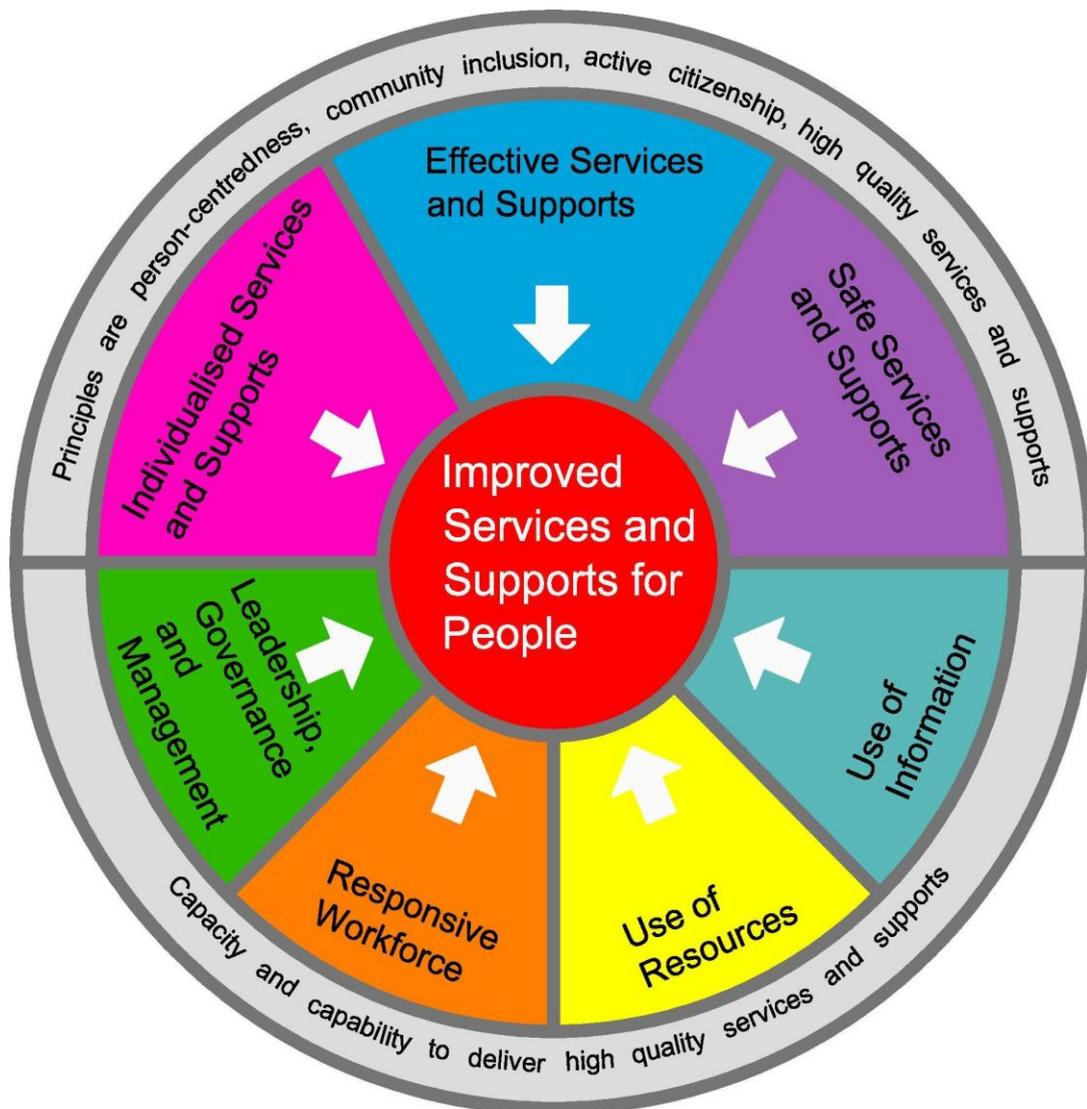
² The Group has representation from three disability umbrella organisations (Disability Federation of Ireland, National Federation of Voluntary Bodies and Not for Profit Business Association), Inclusion Ireland, National Parent and Sibling Alliance, National Disability Authority, HSE and the Department of Health.

- Effective Services and Supports
- Safe Services and Supports

Delivering improvements within these quality themes depends on services having capability and capacity in four keys areas, as outlined in the last 4 Themes in these interim standards:

- Leadership, Governance and Management
- Responsive Workforce
- Use of Resources
- Use of information

Figure 2. Themes in the Interim Standards for New Directions, Services and Supports for Adults with Disabilities



Standard Statements

The Interim Standards are outcome-based. This means that each standard provides a specific outcome for the service to meet which is described in the 'standard statement'. The standard statement describes the high-level outcome required to deliver quality services and supports for adults with disabilities.

Features and 'What it means for you' Sections

There are two sections under each standard statement, the features and the 'What it means for you' section. The features are examples of arrangements and outcomes that service providers meeting the Interim Standards are likely to have in place. This is not an exhaustive list and service providers may find other valid ways to meet the Interim Standards. However, the service provider should assure the public, themselves and the HSE that they are meeting the Interim Standards through the arrangements they have put in place.

The 'what it means for you' section gives examples of what service providers meeting the Interim Standards will mean for people using the services and supports.

6 Monitoring and Implementation

Once the Draft Interim Standards are finalised, a proposed structure to support the implementation of the Standards will be developed by the New Directions National Implementation Group and presented to the HSE National Social Care Division for approval. This development will take cognisance of the role of HIQA as the independent Health Information and Quality Authority and the structure developed will be dependent on any projected timeframe within which HIQA may assume responsibility for the monitoring of the Standards.

In the immediate short term the New Directions National Implementation Group will focus on the development of a self-assessment tool for service providers so that within a reasonable timeframe of the Standards being finalised, service providers can engage in a process of self-assessment in preparation for any more formal independent monitoring structure that may be developed and implemented.

7 Terminology used in the Interim Standards

Person / people

Throughout this document, the term 'person' is used to refer to an individual adult with a disability. When more than one person with a disability is being referred to, the term 'people' is used.

8 Consultation

This document presents for public consultation the proposed Draft Interim Standards for **New Directions**, Services and Supports for Adults with Disabilities, for a period of six weeks. All submissions received during the public consultation process will be reviewed and considered.

Following this process, the Interim Standards for **New Directions**, Services and Supports for Adults with Disabilities will be finalised. The Interim Standards will be produced in different formats when the final version is approved.

The closing date for submissions is **5pm on October 17th 2014**.

How to make a submission

A number of consultation questions have been prepared for your consideration when reviewing the Draft Interim Standards. These questions are grouped together in the consultation feedback form. There are not intended, in any way, to limit feedback and any other comments are welcome.

There are two ways to tell us what you think:

- You can email consultation feedback to this email address:

standards@nda.ie

- You can post consultation feedback to this address:

Ruth O'Reilly,

Consultation on Draft Interim Standards for New Directions,

National Disability Authority,

25 Clyde Road,

Dublin 4.

If you have any questions, you can contact Anne Melly by emailing anne.melly@hse.ie.

9 Next Steps

Following the consultation process, the feedback received on the Draft Interim Standards for **New Directions**, Services and Supports for Adults with Disabilities will be reviewed and the Draft Interim Standards will be revised. Once approved by the HSE National Social Care Division, they will be forwarded to the HSE Quality and Patient Safety Directorate who will sign them off on behalf of the HSE.

**10 Draft Interim Standards for New Directions, Services
and Supports for Adults with Disabilities**

Summary of Draft Interim Standards for Standards for New Directions, Services and Supports for Adults with Disabilities

Theme 1: Individualised Services and Supports

Standard 1.1: The rights and diversity of each person are respected and promoted.

Standard 1.2: The dignity, privacy and autonomy of each person are respected and promoted.

Standard 1.3: Each person has access to information to enable them to make well-informed plans and choices, provided in a format that is accessible to their information and communication needs.

Standard 1.4: The right of each person to make decisions is respected and supports are provided to facilitate decision-making, including access to advocacy services.

Standard 1.5: Each person has a personal plan that outlines the services and supports to be provided to them to achieve a good quality of life and to realise their goals.

Standard 1.6: Each person is supported to use local community facilities and to develop a range of relationships in their community, in line with their choices, needs and abilities.

Standard 1.7: Each person is supported to make transitions between supports provided by specialist and mainstream services and tries new experiences on an ongoing basis, in line with their choices, needs and abilities.

Standard 1.8: Each person makes progress towards achieving their goals and aspirations.

Standard 1.9: Each person's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.

Theme 2 Effective Services and Supports

Standard 2.1: Each person receives services and supports that are responsive to their individual choices, needs and abilities, in line with the service provider's statement of purpose.

Standard 2.2: People are involved in the planning, design, delivery, monitoring and evaluation of services.

Standard 2.3: Each person's access to services and supports is determined on the basis of fair and transparent criteria.

Standard 2.4: People develop their personal and social skills in line with their choices, needs and abilities, so that they can realise their goals and aspirations.

Standard 2.5: People develop skills to manage their own lives and maximise their independence in line with their choices, needs and abilities.

Standard 2.6: People explore, identify and are supported to develop valued social roles in their community, in line with their choices, needs and abilities.

Standard 2.7: People explore their own creativity and find their own means of self-expression, in line with their choices, needs and abilities.

Standard 2.8: People are supported to access health services and to take responsibility for their own health and well-being, in line with their choices, needs and abilities.

Standard 2.9: People access formal education programmes, in line with their choices, needs and abilities.

Standard 2.10: People access bridging programmes to vocational training, in line with their choices, needs and abilities.

Standard 2.11: People access vocational training and employment, in line with their choices, needs and abilities.

Standard 2.12: Premises and facilities are designed to support the delivery of community-focussed, high quality, person-centred, and safe services and supports.

Standard 2.13: The effectiveness of services is systematically monitored, evaluated and continuously improved.

Theme 3: Safe Services and Supports

Standard 3.1: Each person is protected from abuse and their safety and welfare is promoted, while using services and supports.

Standard 3.2: Each person receives services and supports that promote positive behaviour and emotional well-being.

Standard 3.3: Adverse events and incidents are managed and reviewed in a timely manner and outcomes inform practice at all levels.

Theme 4: Leadership, Governance and Management

Standard 4.1: The service provider develops and promotes a culture of quality, person-centredness, community inclusion and active citizenship throughout the service.

Standard 4.2: The service provider performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each person and promote their welfare.

Standard 4.3: The service provider has effective leadership, governance and management arrangements in place and clear lines of accountability.

Standard 4.4: The service provider has a publicly available statement of purpose that accurately and clearly describes the services and supports provided.

Standard 4.5: The service provider has appropriate service level agreements, contracts and/or other similar arrangements in place with the funding body or bodies.

Theme 5: Responsive Workforce

Standard 5.1: Safe and effective recruitment practices are in place to recruit staff.

Standard 5.2: Staff have the required competencies to manage and deliver high quality, person-centred and reliable services and supports.

Standard 5.3: Staff are supported and supervised to carry out their duties to deliver high-quality, person centred and reliable services and supports.

Standard 5.4: Training is provided to staff to improve outcomes for people using services and supports.

Theme 6: Use of Resources

Standard 6.1: The use of available resources is planned and managed to provide high quality, person-centred and reliable services and supports.

Theme 7: Use of Information

Standard 7.1: Information is used to plan and deliver high quality, person-centred and reliable services and supports.

Standard 7.2: Information governance arrangements ensure secure record-keeping and file-management systems are in place to deliver high quality, person-centred and reliable services and supports.

1. Theme 1: Individualised Services and Supports

Person-centredness is a set of beliefs, attitudes and expectations about the right and capacity of a person with a disability to live their life in accordance with their aspirations, needs and abilities. A person-centred approach to service provision is one where services are planned and delivered with the active involvement of people who use services. When services are person-centred, the service provider truly listens to and respects the choices that the individual makes and tailors services and supports around these choices to enable people to lead a life of their choosing.

Services supporting people with disabilities should have an individualised approach, which recognises the uniqueness of each person. Services and supports should be tailored on a person-by-person basis, taking into account the diversity of each person's needs, wishes and aspirations. Service providers should use creativity and flexibility to support the person to achieve their goals, as set out in their personal plan.

People using services and supports should be actively involved in decisions about the supports they receive and empowered to exercise their rights, including the right to be treated equally in the allocation of services and supports, the right to refuse a service or some element of a service and to exit a particular service in favour of another one. People should make their own choices, participate in the running of services and contribute to the life of the community, in accordance with their wishes. Support for community inclusion and active citizenship is a fundamental core value of person-centred services.

Where people have difficulties in communicating their wishes or making informed decisions, there is an obligation on service providers to work in close collaboration with the person's representative who will ascertain the person's wishes and facilitate them in achieving a desired outcome.

Standard 1.1

The rights and diversity of each person are respected and promoted.

Features of a service meeting this standard are likely to include:

1.1.1. The rights of people with disabilities as enshrined in the UN Convention on the Rights of People with Disabilities and in Irish law are promoted and protected.

1.1.2. Each person is:

- informed of their rights
- supported in understanding their rights
- facilitated in exercising their rights.

1.1.3. Each person is treated with dignity and respect, their equality is promoted and the service respects their age, gender, sexual orientation, disability, family status, civil status, race, religious beliefs and membership of an ethnic group or Traveller community.

1.1.4. Each person is facilitated to access advocacy services or an advocate of their choice in line with their wishes and needs.

What it means for you as a person using the service when this standard is met:

- Your rights within the service are explained to you in a way that you can understand
- Your rights are respected and promoted when you are using the services and supports
- Staff treat you with consideration at all times and always respect your individuality
- Staff will help you to find an advocate if you wish

Standard 1.2

The dignity, privacy and autonomy of each person are respected and promoted.

Features of a service meeting this standard are likely to include:

1.2.1. Services and supports are designed and delivered in a manner which promotes each person's dignity, privacy and autonomy.

1.2.2. Staff understand the individual needs of people with disabilities and demonstrate respect for their privacy and dignity by the manner in which they relate to them.

1.2.3. Each person's personal information is protected and respected at all times in line with legislation and best available evidence.

What it means for you as a person using the service when this standard is met:

- You can discuss your needs in confidence and privacy with a member of staff if you want to
- Staff listen to you
- Staff respect your right to privacy and dignity
- Your personal information is kept secure and is only shared with those who need it as agreed with you

Standard 1.3

Each person has access to information to enable them to make well-informed plans and choices, provided in a format that is accessible to their information and communication needs.

Features of a service meeting this standard are likely to include:

1.3.1. Information is provided about both specialist and mainstream services and opportunities.

1.3.2. Assistance and support are provided to access information, to communicate with others through a variety of media and to make contact with other services and people in the community.

1.3.3. Information is provided at the earliest opportunity and as required thereafter to enable people to make informed plans and choices.

1.3.4. Each person is informed of how to access advocacy services or an advocate of their choice to facilitate communication and information sharing.

1.3.5. Each person is provided with an accessible copy of these Interim Standards and time is spent by staff explaining the standards to each person.

1.3.6. Each person is informed and consulted about developments in the service.

1.3.7. Each person is informed of day-to-day arrangements in the service, and whether any arrangements are subject to change.

1.3.8. Each person is informed about what personal information is being maintained by the service, who has access to this information, including other professionals and how they can access their personal information.

What it means for you as a person using the service when this standard is met:

- You have the information that you need to help you to make decisions about issues that affect you, in a format and language that you can easily understand and keep
- You are supported to access information and make contact with other people and services in different ways, for example using the phone, text, email or other accessible means

- Staff will help you to find an advocate, if you wish
- You are given a copy of these Interim Standards in a format that is accessible to you, and they are explained to you
- You are told what information the service keeps about you, who has the right to look at it and how access to the information is controlled

Standard 1.4

The right of each person to make decisions is respected and supports are provided to facilitate decision-making, including access to advocacy services.

Features of a service meeting this standard are likely to include:

1.4.1. Each person is consulted and supported to make decisions about the supports they receive and their views are actively and regularly sought by staff.

1.4.2. Each person is listened to carefully and with respect by staff. Their views are a core consideration in all decisions which affect them.

1.4.3. Each person is presumed to have capacity to make their own decisions, and is supported to make them, where necessary. Only when all other supports have been exhausted should a decision be taken on someone's behalf. Such a decision should be based on the best understanding of their will and preferences.

1.4.4. Each person is given clear information in a format and language they can understand in order to help them make informed choices and decisions.

1.4.5. Each person is facilitated and supported to access citizen's information, advocacy services or an advocate of their choice when making decisions, in accordance with their wishes.

1.4.6. Self-advocacy is supported and facilitated, in line with each person's needs and wishes.

What it means for you as a person using the service when this standard is met:

- You are supported to understand all of the information you receive, as well as the effect of each available choice
- You can decide the services and supports that are right for you, with support from staff if you need it
- Staff will help you to find an advocate, if you wish
- The service provider provides supports for self-advocacy

Standard 1.5

Each person has a personal plan that outlines the services and supports to be provided to them to achieve a good quality of life and to realise their goals.

Features of a service meeting this standard are likely to include:

1.5.1. The service provider uses a person-centred approach to provide effective facilitation of a personal planning process to each person.

1.5.2. Each person has a personal plan that outlines the services and supports that they need to achieve a good quality of life and to realise their goals, which may include supports:

- to access health services
- to access education, life-long learning and employment support services
- for building friendships
- for belonging and inclusion in the community
- for active citizenship
- to access social services
- to access transport services
- to access assistive technologies
- for the development where appropriate of a network or circle of personal supports
- for maximising independence
- for transitions

1.5.3. Each person's personal plan takes into account:

- their life stage
- their age
- their particular needs, abilities, skills and wishes

- other specific plans such as health plans, risk management plans, intimate support plans, plans developed by a person's residential service

1.5.4. Each person is supported to develop and document their personal plan in a way that that is accessible to them, and has a copy of their personal plan.

1.5.5. Each person has opportunities to try out different forms of community engagement as part of the personal planning process.

1.5.6. Risk assessment and positive risk taking underpin the delivery of each person's personal plan.

1.5.7. The service provider appoints a key worker in agreement with each person and/or their representatives, whose primary responsibilities are to support the person, in accordance with their wishes, in developing their personal plan and to oversee its implementation. Other key professionals, family members and friends participate in the planning process in line with the person's needs and wishes.

1.5.8. Service providers support families and others to be involved in developing and supporting the person's personal plan, in line with the person's needs and wishes.

1.5.9. Each person's personal plan is formally reviewed annually or more frequently if there is a change in needs or circumstances. The review of the plan is conducted in a manner that ensures the maximum participation of each person.

1.5.10. The review of the personal plan assesses its effectiveness with a focus on progression and outcomes for the person. It takes into account changes in circumstances and new developments, and names those responsible for pursuing objectives in the plan within agreed timescales. The review process is recorded and the rationale for any changes is documented.

1.5.11. Where a person declines to engage in the planning process, the service provider ensures that arrangements are put in place to address their needs as identified in an assessment and their aspirations and wishes insofar as these can be ascertained. A record is kept of all attempts to engage people and their representatives in the planning process.

What it means for you as a person using the service when this standard is met:

- You are involved in planning and agreeing your personal plan
- Your personal plan reflects your hopes, needs and choices

- When developing your personal plan, you are given the support you need to think about the risks you want to take and to make informed choices.
- You have a copy of your personal plan
- You have a named member of staff, who is your key worker. Your key worker supports you to develop your personal plan and co-ordinates the services and supports that you receive.
- Your personal plan is reviewed regularly and you take part in the review
- You don't have to develop or review a personal plan if you don't want to. If you choose not to develop a personal plan, you will still be provided with services and supports to meet your needs and wishes insofar as the service provider can find out what these are

Standard 1.6

Each person is supported to use local community facilities and to develop a range of relationships in their community, in line with their choices, needs and abilities.

Features of a service meeting this standard are likely to include:

1.6.1. Service providers actively engage with community leaders to raise awareness about disability and to facilitate inclusion in community life and education.

1.6.2. Service providers have detailed information about community facilities and activities and actively network with community-based organisations.

1.6.3. People are introduced to local services and actively supported to access them.

1.6.4. People are supported to get to know the community and local people and to build natural relationships with people in their community.

1.6.5. Service providers are pro-active in identifying and facilitating initiatives for:

- participation in the wider community
- developing friendships
- involvement in local social, educational and professional networks

1.6.6. Supports to access assistive technology and communication aids are provided to facilitate contact with friends and access to the wider community.

What it means for you as a person using the service when this standard is met:

- You are supported to take part in activities in the local community as a member of that community
- You choose the activities that you want to take part in, with support from staff if you need it
- The service provider works with other services and groups in the community to make it easier for you to take part in activities in the community

- You are supported to develop a full range of social relationships, including developing friendships, if that is what you want
- If you need specific supports or devices to communicate, you will be supported to access them

Standard 1.7

Each person is supported to make transitions between supports provided by specialist and mainstream services and tries new experiences on an ongoing basis, in line with their choices, needs and abilities.

Features of a service meeting this standard are likely to include:

1.7.1. Service providers develop a transition plan in conjunction with the person around the key issues for that person during the transition.

1.7.2. Each person is facilitated to try out a new environment to enable them to make a final decision on the transition.

1.7.3. Service providers co-operate actively with other service providers, in particular when people are transferring within and between services.

1.7.4. Service providers share information to facilitate seamless transitions, in a timely and appropriate manner and in line with the person's wishes and relevant data protection legislation.

1.7.5. Service providers work with the person to co-ordinate the supports required during a transition. These may include supports from family, staff and others.

What it means for you as a person using the service when this standard is met:

- If you are moving from one service to another or leaving a service, you are fully involved in planning and discussing the move
- The service provider works with you to plan and organise the supports that you will need during the move, to make sure that everything goes smoothly, as far as possible
- You have time to decide on the change and can try out the new services and supports before you make a decision on whether you want to make the move
- Staff from your old service provider will work with staff from the new service provider to make sure that the move goes smoothly for you, as far as possible

Standard 1.8

Each person makes progress towards achieving their goals and aspirations.

Features of a service meeting this standard are likely to include:

1.8.1. Each person is supported to plan for a developmental progression in their learning and their life.

1.8.2. Each person is encouraged and supported to try new experiences and do new things in their life on an ongoing basis, in line with their wishes, needs and abilities.

1.8.3. Achievements are recognised by way of formal accreditation (preferably mainstream accreditation) or by less formal but structured means of recognition, where appropriate.

What it means for you as a person using the service when this standard is met:

- You are supported to work towards your personal goals in all aspects of your life
- You are encouraged and supported to try out new experiences
- Your achievements are recognised, where appropriate

Standard 1.9
Each person's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.

Features of a service meeting this standard are likely to include:

1.9.1. Each person is encouraged and supported to express any concerns safely and is reassured that there are no adverse consequences for raising an issue of concern, whether informally or through the formal complaints procedure.

1.9.2. There is a culture of openness and transparency that welcomes feedback, the raising of concerns and the making of suggestions and complaints. These are seen as a valuable source of information and are used to make improvements in the services and supports provided.

1.9.3. Concerns are addressed immediately at local level and, where appropriate, without recourse to the formal complaints procedure, unless the person wishes otherwise.

1.9.4. There is a procedure for making formal complaints. This procedure is consistent with relevant legislation and regulations, HSE protocols and takes account of best practice guidelines. People are given information about how to take complaints outside of the service for resolution.

1.9.5. Information on the complaints procedure is available and explained to people in an accessible and appropriate format.

1.9.6. Responses to complaints are as timely as possible, taking account of the requirements to fully address the issues raised by the complainant.

1.9.7. Each person is facilitated to access advocacy services or an advocate of their choice when making a complaint or concern.

1.9.8. Staff are trained to understand behaviour that indicates an issue of concern or complaint that a person with a disability cannot communicate by other means. Concerns and complaints raised by such behaviour receive the same positive response as those raised by other means.

What it means for you as a person using the service when this standard is met:

- You are encouraged and supported to make your views on the service known and can freely discuss any concerns you have with staff

- You are given information so that you know how to make a comment or complaint about the service.
- If you make a complaint, the services and supports you receive will not be negatively affected at the time or in the future
- Your concerns and complaints will be responded to as quickly as possible and you will be informed about what will happen as a result of the complaint
- You can have support from an advocate to make a complaint if you wish

2. Theme 2: Effective Services and Supports

Effective services ensure that the proper support mechanisms are in place to enable people with disabilities to lead a fulfilling life. Personal planning is central to supporting people to identify their goals, needs and preferences and what supports need to be put in place by the service to ensure that each person achieves their goals.

The nature of supports provided depends on the particular needs and wishes of each individual. These include supports for maximising independence, community inclusion and active citizenship as well as for learning, education and employment, in line with the service provider's statement of purpose.

Service providers should involve people who use their services in the planning and design of services. They should review and monitor the effectiveness of their services to inform a process of continuous improvement.

Standard 2.1

Each person receives services and supports that are responsive to their individual choices, needs and abilities, in line with the service provider's statement of purpose³.

Features of a service meeting this standard are likely to include:

2.1.1. Services and supports are provided that reflect the goals set out in each person's personal plan.

2.1.2. Each person's participation in any programme is designed, monitored and evaluated on an individual basis to help them to progress and to achieve the particular goals they have chosen.

2.1.3. Flexible services and supports are provided, which may include offering supports in the evenings and at weekends.

2.1.4. The services and supports provided to each person take account of their changing needs and wishes.

What it means for you as a person using the service when this standard is met:

- The services and supports that you use are flexible and respond to your individual needs and wishes
- The services and supports that you use will change as your needs change

³ See Standard 4.4, relating to the Statement of Purpose

Standard 2.2

People are involved in the planning, design, delivery, monitoring and evaluation of services.

Features of a service meeting this standard are likely to include:

2.2.1. People are provided with the information they need to enable them to contribute to the development and review of policies and practices which affect the services and supports they receive.

2.2.2. Supports and formal structures are in place to facilitate people with disabilities and their families, where appropriate, to contribute their views and participate in areas such as:

- relevant policy development
- exploration and review of best practice in service provision
- monitoring and evaluation of services
- preparation and review of service plans
- service change and transitions
- selection of service locations
- staff recruitment
- staff training and development
- peer training and development.

2.2.3. Staff are trained to listen and respond to people's views and are equipped to work in services where the user is a partner in service rather than a recipient.

2.2.4. Service providers consult with representative organisations, where appropriate.

What it means for you as a person using the service when this standard is met:

- You are supported to contribute to the management of your service in areas such as the daily running of the service, recruiting and training staff, monitoring the quality of the service and developing plans for the service

- You have the opportunity to take part in meetings about how the support service is run and how it might be changed and improved
- You are asked to provide feedback on the services and supports that you receive so that they can be improved
- The service provider takes the views and preferences of the people who use their services into account when they are planning and delivering services and supports

Standard 2.3

Each person's access to services and supports is determined on the basis of fair and transparent criteria.

Features of a service meeting this standard are likely to include:

2.3.1. There is a written policy on admission, transition and leaving a service that take accounts of the rights of people with disabilities and is consistent with these Interim Standards.

2.3.2. Each person is told about key aspects of service provision and given the information they need to help them decide about using a service or support, in a format that is accessible to them.

2.3.3. Opportunities are provided to meet with a member of staff prior to using a service, to discuss what the transition will mean and to discuss the application for admission. Each person is facilitated, where possible, to try out the services and supports, in line with their needs and wishes.

2.3.4. Admission to and discharge from a service is timely, determined on the basis of fair and transparent criteria and placements are based on written agreements with the service provider.

2.3.5. Each person and/or their representative sign an agreement, in an accessible format with the service provider. If a person or their representative are unable to or choose not to sign, this is recorded.

2.3.6. The agreement provides for and is consistent with the person's identified needs and includes a service statement.

2.3.7. There is a planned introduction for each person when they start using services and supports.

2.3.8. People who decide to move or who are requested to move from a service are assisted in the preparation for the move, and are supported through the transition process.

What it means for you as a person using the service when this standard is met:

- You are provided with information to help you make a decision about using a service. Before you decide, you can meet with a staff member to discuss it or try out the service

- When you decide to start using a service, there is a written agreement between you and the service provider
- When you start using a service, the service provider plans an introduction to the services and supports for you
- If you decide to move from a service or are requested to move, you are given support and assistance with the move

Standard 2.4

People develop their personal and social skills in line with their choices, needs and abilities, so that they can realise their goals and aspirations.

Features of a service meeting this standard are likely to include:

2.4.1. Each person has access to personal and social development opportunities which:

- are appropriate for their age and life stage
- take account of their particular needs and experience
- are community based and community focussed as far as possible
- support them to develop their personal and social skills and enhance their capacity to engage in relationships with others around them.

2.4.2. Service providers work with local community groups, mainstream service providers and advocacy groups to ensure that people can access opportunities for personal and social development in community settings as far as possible.

2.4.3. Service providers offer supports for personal and social development to meet people's needs, which may include offering supports in the evening and at weekends.

2.4.4. Service providers link with residential, respite and community staff and with parents, carers and families as appropriate, so that integrated and responsive supports are provided, in line with each person's wishes.

What it means for you as a person using the service when this standard is met:

- You are offered supports to develop your personal and social skills, if that is what you want
- Opportunities for developing personal and social skills are offered in the community and supports are available in the evenings and at weekends, as far as possible

Standard 2.5

People develop skills to manage their own lives and maximise their independence in line with their choices, needs and abilities.

Features of a service meeting this standard are likely to include:

2.5.1. People explore what independence means for them and plan ways of securing that independence, through the personal planning process.

2.5.2. People are supported to identify and develop the skills they need to manage their own lives in line with their choices, needs and abilities.

2.5.3. People are equipped to manage risk in a positive way, through risk-assessment procedures carried out in partnership with the person.

2.5.4. Service providers provide opportunities for the development of life skills which focus on experiential learning in real situations in the community.

2.5.5. Service providers work with the person to co-ordinate an integrated package of supports to meet each person's needs and ensure that there are appropriate links between home life and other services that support people to develop their independence, in accordance with their needs and wishes.

2.5.6. Service providers encourage families to support and enable people to take as much responsibility as possible for their own lives, where appropriate.

What it means for you as a person using the service when this standard is met:

- Services and supports are provided that help you to develop and maintain your independence, if that is what you want
- When you are planning how to become more independent, you are given the support you need to think about the risks you want to take and to make informed choices.
- The service provider will work with your family and other services, where appropriate, to co-ordinate the supports you need to develop and maintain your independence, in line with your wishes

Standard 2.6

People explore, identify and are supported to develop valued social roles in their community, in line with their choices, needs and abilities.

Features of a service meeting this standard are likely to include:

2.6.1. People are supported to explore what, for them, would represent valued social roles in their community, for example as a volunteer, family member, advocate, peer, friend, learner, parent, member of a parish, local group or committee.

2.6.2. People are supported to achieve, manage and enjoy the social roles that they choose.

2.6.3. People are supported to gain the knowledge, skills and experience they need to fulfill their chosen roles well.

2.6.4. Service providers work with local community groups, mainstream service providers and advocacy groups to develop opportunities for people with disabilities to take up meaningful social roles.

What it means for you as a person using the service when this standard is met:

- You are encouraged and supported to take up a social role of your choice in the community, such as becoming a volunteer, an advocate or a member of a local group, if that is what you want
- The service provider works with other organisations in the community to make it easier for you to take up social roles of your choice

Standard 2.7

People explore their own creativity and find their own means of self-expression, in line with their choices, needs and abilities.

Features of a service meeting this standard are likely to include:

2.7.1. Flexible supports are provided to facilitate people's personal preferences in relation to different forms of creativity and self-expression, for example artistic projects, dance, sport, music, drama, crafts, or gardening.

2.7.2. Service providers recognise the value of creative expression and support people to access and participate in opportunities for creativity and self-expression in their local community.

2.7.3. Supports for creativity and self-expression are provided to meet people's needs, which may include offering supports in the evening and at weekends.

What it means for you as a person using the service when this standard is met:

- You are supported to take part in different forms of creativity of your choice, especially in your local community
- Flexible supports are provided to meet your needs for taking part in activities, including the provision of supports in the evenings and at weekends, as far as possible

Standard 2.8

People are supported to access health services and to take responsibility for their own health and well-being, in line with their choices, needs and abilities.

Features of a service meeting this standard are likely to include:

2.8.1. People are equipped with the information, knowledge and skills to access their local health services, visit their general practitioner and use community sports facilities.

2.8.2. People are supported to access appropriate health information and education both within the service and in the local community, including information on:

- diet and nutrition
- recreation, interests and activities
- the risks associated with smoking, alcohol and drug consumption
- exercise and physical activity
- sexual relationships and sexual health

2.8.3. People are supported to access multi-disciplinary team services to meet their identified, specialist and particular needs.

2.8.4. The service provider has medication management policies and procedures in place that comply with legislative and professional regulatory requirements and best practice guidelines.

2.8.5. Supports for health and wellbeing take account of changing needs throughout a person's life cycle, as well as unique needs such as women's health needs, men's health needs or health needs related to a particular disability.

2.8.6. Service providers work with community and mainstream health service providers to widen access for people with disabilities and maximise opportunities for people to access mainstream health services.

What it means for you as a person using the service when this standard is met:

- You are supported to use local health services

- You are supported to access information and facilities (such as sports facilities) that will help you to stay healthy
- Service providers work with community health service providers to advise them on how to make it easier for you to access mainstream health services
- The service provider has policies and procedures to ensure that any medication that you need is managed safely and properly
- If you need to take medication, you are encouraged to take responsibility for taking it yourself, in line with your wishes and needs

Standard 2.9

People access formal education programmes, in line with their choices, needs and abilities.

Features of a service meeting this standard are likely to include:

2.9.1. Service providers work with community and mainstream educational providers to widen access for people with disabilities and maximise opportunities for people to access mainstream educational programmes.

2.9.2. People are supported to access mainstream education programmes as a first option.

2.9.3. People are provided with specialist educational programmes where required. Where possible, these should be provided in integrated educational settings.

What it means for you as a person using the service when this standard is met:

- Service providers work with organisations that provide education programmes to advise them on how to make it easier for you to access mainstream education
- You are supported to access mainstream educational programmes of your choice, in line with your wishes, needs and abilities
- Specialist educational programmes are provided to you if that is what you want and need

Standard 2.10

People access bridging programmes to vocational training, in line with their choices, needs and abilities.

Features of a service meeting this standard are likely to include:

2.10.1. Service providers work with mainstream vocational training providers to jointly develop and provide bridging programmes to vocational training, in line with people's personal plans.

2.10.2. The content and duration of bridging programmes to vocational training are tailored to reflect the needs and abilities of people participating in the programmes.

2.10.3. People are supported, through carefully designed bridging programmes, to test, acquire and strengthen their capacity to benefit from vocational training, in line with the goals in their personal plan.

2.10.4. People take part in work experience as part of bridging programmes, that informs them about future training and employment choices.

2.10.5. Service providers support people to plan and access the supports they need to participate in training and to put those supports in place.

What it means for you as a person using the service when this standard is met:

- Service providers work with organisations that provide vocational training, to organise bridging programmes. A bridging programme will help you to prepare to access vocational training, in line with your personal plan
- The bridging programmes provided are designed to meet your needs
- If you choose to take part in a bridging programme, you are provided with the supports that you need to participate

Standard 2.11 People access vocational training and employment, in line with their choices, needs and abilities.

Features of a service meeting this standard are likely to include:

2.11.1. People are supported to participate in and benefit from vocational training and to maximise their chances of working in the open labour market, in line with their wishes and needs.

2.11.2. People are supported to access and maintain employment in their community or supported employment programmes, in line with their wishes and needs.

2.11.3. Service providers provide an appropriate alternative response for some people who do not access open or supported employment, in line with their wishes and needs.

What it means for you as a person using the service when this standard is met:

- If you choose to do vocational training, you are supported to participate successfully in the training
- You are supported to access and maintain employment, or supported employment programmes, in line with your wishes, needs and abilities

Standard 2.12

Premises and facilities are designed to support the delivery of community-focussed, high quality, person-centred, and safe services and supports.

Features of a service meeting this standard are likely to include:

2.12.1. Premises and facilities comply with relevant legislative requirements, including fire safety legislation, relevant building regulations and health and safety legislation. A safety statement and procedures for the management of risks to health and safety are in place.

2.12.2. The service provider adheres to best practice in achieving and promoting Universal Design and accessibility. It regularly reviews the accessibility of its premises and facilities in collaboration with the people who use them and with reference to its statement of purpose. Alterations are carried out as required to ensure that premises and facilities are accessible to all.

2.12.3. As far as possible, services are located in integrated community-based settings, to maximise the potential for inclusion. Any new building developments or re-located services take the form of a 'hub' from which people can be supported to access local services.

2.12.4. Where closed circuit television (CCTV) systems are used, they do not intrude on privacy and there is a policy on the use of CCTV which is informed by relevant legislation.

2.12.5. Premises and facilities are kept in good structural and decorative repair. Clear records of major repairs, capital works and maintenance works are kept.

2.12.6. Premises and facilities are maintained to a high standard of hygiene and are adequately lit, heated and ventilated.

2.12.7. Premises and facilities are insured and there is a valid insurance certificate or written confirmation of insurance cover.

2.12.8. If meals are provided, they are varied and nutritious and take people's preferences, dietary requirements and cultural and religious beliefs into account.

2.12.9. Where vehicles are required to transport people with disabilities, they are accessible, roadworthy, regularly serviced, insured, equipped with appropriate safety equipment and driven by persons who are properly licensed and trained.

2.12.10. All equipment purchased meets appropriate standards and is maintained and operated in line with manufacturers' instructions and good practice.

What it means for you as a person using the service when this standard is met:

- The service provider's premises and facilities meet any requirements set down by law
- The service provider's premises and facilities are accessible
- As far as possible, service provider's premises are based in the community and act as a 'hub' or centre from which services and supports are delivered
- The service provider's premises are clean, in good repair and are safe and comfortable to use
- The service provider's equipment and vehicles are easy to use, well maintained and meet relevant standards

Standard 2.13

The effectiveness of services is systematically monitored, evaluated and continuously improved.

Features of a service meeting this standard are likely to include:

2.13.1. Service providers use relevant national performance indicators and benchmarks where they exist, to monitor and evaluate the quality and safety of their services and outcomes for people using them.

2.13.2. Where national metrics do not exist, service providers develop or adopt performance indicators and benchmarks in accordance with best available evidence to monitor and evaluate the quality and safety of the services provided and outcomes.

2.13.3. Service providers use a variety of outcome measures to evaluate the effectiveness of their services including:

- Outcomes for people using the services
- People's perspectives on their outcomes
- People's experience of the services
- Feedback from staff

2.13.4. Information from monitoring and evaluation is used to improve services and to inform organisational learning.

2.13.5. Services are monitored and evaluated annually and action is taken to bring about improvements in work practices and to achieve better outcomes for people using the services and supports

2.13.6. Services publicly report information about the quality of services delivered and quality improvement programmes, annually.

2.13.7. Service providers provide requested information to relevant agencies, including national statutory bodies in line with relevant legislation and good practice.

What it means for you as a person using the service when this standard is met:

- The service provider regularly checks how well it is doing in providing high quality, person-centred services and supports

- The service provider uses the findings from these checks to identify the areas it needs to work on and makes improvements in those areas
- The service provider publicly reports on the quality of its services and supports and what it is doing to improve these
- The service provider provides information about its activities and outcomes to State agencies who monitor the quality of the service

3. Theme 3: Safe Services and Supports

Service providers should promote the safety of people using their services through the assessment of risk, learning from adverse events and the implementation of policies and procedures designed to protect people with disabilities.

People with disabilities should make decisions about the services and supports they receive and should feel safe and secure when using them. They have the right to choose to take appropriate risks.

Service providers should protect people from abuse and follow policy and procedure in reporting any concerns of abuse to the relevant authorities.

Safe services and supports are open, transparent and accountable. Learning from adverse events should be shared internally with staff.

Standard 3.1

Each person is protected from abuse and their safety and welfare is promoted, while using services and supports.

Features of a service meeting this standard are likely to include:

3.1.1. There are policies and supporting procedures for ensuring that each person is protected from all forms of abuse, while using services and supports.

3.1.2. People using services are protected by practices that promote their safety in relation to:

- recruitment, selection, training, assignment and supervision of staff and volunteers
- the provision of intimate and personal support to people who require it
- the duty of each staff member to report any past or current concerns for the safety of the people using the service or in any other setting
- knowing who they can go to if they have concerns about safety
- having private access to advocacy services or an advocate of their choice

3.1.3. Risk assessment and management policies and procedures are in place which enable staff to support people to manage situations where they may be vulnerable. The approach to risk management supports responsible risk taking and informed decision making, as a means to enhancing the quality of life, competence, social skills and independence of people using the service.

3.1.4. Each person is assisted and supported to develop the knowledge, self-awareness, understanding and skills needed for self-care and protection, including self-advocacy, in line their needs and wishes.

3.1.5. All information and advice given to people to care for and protect themselves is sensitive towards their individual needs and circumstances.

3.1.6. Staff work in partnership with each person and their family/representative where appropriate, to promote the person's safety and well being, in accordance with their wishes.

3.1.7. All allegations of abuse are dealt with in an effective and timely manner, in accordance with policies and procedures that describe:

- how people are to be supported and facilitated to take their concerns directly to an external agency should they so wish
- how the service provider responds to concerns and/or allegations of abuse
- the reporting of concerns and/or allegations of abuse to statutory agencies including the HSE, and where appropriate, An Garda Síochána.

3.1.8. Where a concern arises for a person's safety, the service provider takes all reasonable and proportionate interim measures to protect them pending the outcome of any assessment or investigation into the matter.

3.1.9. Where there is an allegation of abuse or ill-treatment, this is reported in accordance with legislation, and any national and/or HSE policies, as appropriate.

3.1.10. Where there is a concern that a person may have been abused or ill-treated while using services and supports, the person is offered counselling and support. Where appropriate, and in accordance with the wishes of the person, their representative, family and professionals are involved in their support and treatment.

3.1.11. There are clearly defined procedures, understood by all, for the resolution of allegations of abuse in a timely fashion. These procedures prioritise the safety of people with disabilities, take account of their need for early resolution of such matters, and ensure that those against whom such allegations are made are treated fairly.

3.1.12. There is a designated person to act as a liaison with outside agencies and a resource person to staff members, carers or volunteers who have protection concerns. The designated person is responsible for reporting allegations or suspicions of abuse to the HSE or to An Garda Síochána in accordance with national guidance.

3.1.13. There are policies and supporting procedures for ensuring that people are protected from financial abuse, where staff support people with their financial affairs.

3.1.14. People do not contribute to any communal fund without their informed consent.

What it means for you as a person using the service when this standard is met:

- The service provider takes the necessary steps to protect you from different types of abuse when you are using their services and supports

- Any concerns of abuse that you may have will be listened to by the people who are providing your service. You will be supported and your concern will be responded to and addressed fairly and in a timely manner
- If you have experienced any type of abuse, you will be helped, if you wish to get support services
- The service provider ensures that you are safe while using their services and supports, without being over-protected
- Staff working in your service receive training so that they know how to support people using the service and protect them from abuse

Standard 3.2

Each person receives services and supports that promote positive behaviour and emotional well-being.

Features of a service meeting this standard are likely to include:

3.2.1. The service has a written policy on the provision of behavioural support to people using the service that is based on the principles of positive behaviour support and details how specialist and therapeutic interventions are implemented.

3.2.2. People are supported to express their feelings appropriately and to deal with issues that impact on their emotional wellbeing in a way that best suits their needs.

3.2.3. Communications are clear, appropriate and positive and help people to understand their own behaviour and to behave in a manner that is respectful of the rights of others and supports their development.

3.2.4. People are supported to access mental health services, where appropriate.

3.2.5. Specialist and/or therapeutic supports are implemented in accordance with national policy and guidelines and with the informed consent of each person, or persons acting on their behalf and reviewed as part of the personal planning process.

3.2.6. Each person is consulted with and given an explanation regarding the effects of inappropriate behaviour and what is expected of them, in a manner consistent with their ability and capacity.

3.2.7. Where a person has behaviour support needs, an assessment is carried out which outlines the needs and characteristics of the person and the contexts in which behaviour is likely to arise, in order to draw up a positive behaviour support plan.

3.2.8. Each person with behaviour support needs has a positive behaviour support plan. The plan includes ideas for adapting the environment, teaching skills and focused interventions which are designed to prevent challenging behaviour or reduce the likelihood of its occurrence. The plan also includes non-aversive reactive strategies. The plan is monitored and evaluated regularly.

3.2.9. Staff consult with former carers, parents and family members, with the informed consent of each person, in order to develop the behaviour support plan.

3.2.10. Staff are:

- trained in the provision of positive behaviour support to people with disabilities
- trained to deal with issues of disrupted attachment, neglect and abuse and how this can impact on the behaviour of people with disabilities
- trained to understand and to respond non-aversively to behaviour and verbal and non-verbal communication that may indicate an issue of concern
- given all relevant information required to assist them in supporting people to manage their behaviour

3.2.11. Staff have access to specialist advice and appropriate support when working with people who present with behaviour that is difficult to manage. Such support includes:

- interventions designed to promote effective communication
- guidelines for appropriate responses to particular situations
- access to advice/consultation outside of normal working hours
- staff debriefing following involvement in a difficult incident

3.2.12. The service regularly monitors and audits its approach to behaviour support, as outlined in the service's policy.

What it means for you as a person using the service when this standard is met:

- Staff are trained in the provision of positive behaviour support
- You are supported to access mental health services, if you need to
- If your behaviour makes it difficult for you to benefit from the services and supports, specialist support is provided to understand and if possible, to help you to change your behaviour

Standard 3.3
Adverse events and incidents are managed and reviewed in a timely manner and outcomes inform practice at all levels.

Features of a service meeting this standard are likely to include:

3.3.1. There are policies and procedures for the management, review and evaluation of adverse events and incidents.

3.3.2. Adverse events and incidents are notified to the HSE in the required format and within the specified timeframe in accordance with their requirements.

3.3.3. The service provider ensures the prompt and effective dissemination of the recommendations and learning from the management and review of adverse events and incidents.

3.3.4. The learning from the evaluation of all adverse events and incident reviews is communicated in the service. The lessons learned are used to inform the development of best practice and improve service provision.

What it means for you as a person using the service when this standard is met:

- If something goes wrong while you are using a service, the service provider will investigate what happened and make changes to reduce the risk of the same thing happening again

4. Theme 4: Leadership, Governance and Management

Effective governance in services and supports for people with disabilities is accomplished by directing and managing activities using good business practices, objectivity, accountability and integrity.

In an effective governance structure, overall accountability for the delivery of services and supports is clearly defined and there are clear lines of accountability at individual, team and service levels so that all people working in the service are aware of their responsibilities and who they are accountable to.

The statement of purpose for the service provider promotes transparency and responsiveness by accurately describing its aims and objectives, the services and supports provided, including how and where they are provided. Governance systems ensure the delivery of high-quality, person-centred services and supports through the ongoing audit and monitoring of performance.

Effective leadership and management ensure that a service provider fulfils its statement of purpose and achieves its objectives. The deployment of necessary resources through informed decisions and actions facilitates the delivery of high quality, person-centred services and supports to people with disabilities.

The effectiveness of services and supports sourced externally is monitored through formalised agreements. The safety of services and supports is assured by monitoring compliance with legislation and acting on national policy, standards and recommendations.

Standard 4.1

The service provider develops and promotes a culture of quality, person-centredness, community inclusion and active citizenship throughout the service.

Features of a service meeting this standard are likely to include:

4.1.1. The service provider actively develops and promotes a culture of quality, person-centredness, community inclusion and active citizenship through the:

- mission statement
- service design
- code of governance (which includes a code of conduct and management of conflict of interest)
- allocation of resources
- training provided
- development and evaluation processes
- policies and practices

4.1.2. A clear commitment to promote and strengthen a culture of quality, person-centredness, community inclusion and active citizenship is demonstrated by leaders at all levels.

4.1.3. The service provider facilitates leaders at all levels in maintaining and improving their skills, knowledge and competencies to fulfil their roles and responsibilities in delivering high quality, person-centred services and supports.

4.1.4. There are regular reviews to identify areas for improvement in the culture of the service and which incorporate feedback from all relevant stakeholders including people who use the service and the workforce.

What it means for you as a person using the service when this standard is met:

- The service provider supports a culture which responds to your individual needs and supports community inclusion
- The service provider is continually looking at how it can provide a better service to you

- The service provider helps members of its workforce to develop their leadership skills so that they can deliver high-quality, person-centred services and supports
- Feedback from people who use the service is used to provide an insight into the culture of the service as it is experienced by those who use it

Standard 4.2

The service provider performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each person and promote their welfare.

Features of a service meeting this standard are likely to include:

4.2.1. Staff demonstrate a knowledge of legislation, regulations, policies and standards for the support and welfare of people with disabilities appropriate to their role, and this is reflected in all aspects of their practice.

4.2.2. Appropriate action is taken on requirements made by regulatory bodies to comply with regulations.

4.2.3. Appropriate action is taken on recommendations made following an investigation into the services and supports delivered by the service provider.

4.2.4. New and existing legislation and national policy is reviewed on a regular basis to determine what is relevant to the service provider, how it impacts on practice and to address any gaps in compliance.

What it means for you as a person using the service when this standard is met:

- You can be confident that the service provider is aware of all the relevant Irish and European legislation it has to follow
- If new laws are put in place, the service provider will meet the requirements of this legislation as soon as possible
- The service provider works to improve the quality and safety of its service by taking into account any recommendations and guidance that apply to its service, which are issued by regulatory bodies

Standard 4.3

The service provider has effective leadership, governance and management arrangements in place and clear lines of accountability.

Features of a service meeting this standard are likely to include:

4.3.1. The service provider has clearly defined accessible governance arrangements and structures that set out lines of authority and accountability, stipulate individual accountability, and specify roles and responsibilities.

4.3.2. The service provider is governed in a manner that supports the active participation of people using the services and supports.

4.3.3. The service provider is registered in accordance with the requirements of the HSE.

4.3.4. The registered provider, the person in charge and all other persons involved in the management of the services and supports are fit persons.

4.3.5. There is an internal management structure appropriate to the size, ethos, and purpose and function of the service provider.

4.3.6. Leadership is demonstrated by management at all levels and there is a commitment to continuous improvements in the services and supports provided.

4.3.7. Leaders demonstrate that they understand the needs of people with disabilities using their services. They direct sufficient resources to provide high quality, person-centred services.

4.3.8. Strategic and operational plans for the service provider set clear objectives and plans for the delivery of high quality, person-centred services and supports with a focus on improved outcomes for people with disabilities. Strategic and operational plans are implemented.

4.3.9. There are management arrangements in place to achieve planned service objectives effectively and efficiently.

4.3.10. Information governance arrangements are in place to ensure that the service provider complies with legislation and regulations, uses information ethically and uses best available evidence to protect personal information and to support the provision of services and supports.

4.3.11. The service provider is monitored and evaluated annually against strategic objectives and action is taken to bring about improvements in work

practices and to achieve better outcomes for people using the services and supports.

4.3.12. Regular audits are carried out to assess, evaluate and improve the provision of services and supports in a systematic way in order to achieve better outcomes for people using the services and supports.

4.3.13. There is an established risk management framework and supporting structures in place for the identification, assessment and management of risk.

4.3.14. There are systems in place to effectively manage risk, including a designated person(s) to contact in an emergency.

4.3.15. Records are maintained to monitor complaints, concerns and adverse events. Details are taken of any investigations and related actions, to help ensure complaints, concerns and adverse events are addressed appropriately, trends are detected and learning takes place.

What it means for you as a person using the service when this standard is met:

- You can expect that everyone working in the service has a clear understanding of who they report to within the service
- The people managing your services and supports ensure that arrangements are in place to consult with the people using them and support them to contribute to the running of those services and supports
- There is an identified person who has overall responsibility for the quality and safety of the services and supports that you are using
- The person who has overall responsibility for the service is suitably qualified and has the appropriate experience for the job
- Your service provider has clear plans that set out how it will deliver its services and supports
- The people managing your service make sure that the staff it employs are able to do their job well
- The service provider is constantly looking for ways to improve the services and supports they provide
- Comments and complaints from people who use services and supports are listened to and acted on in a timely manner

Standard 4.4

The service provider has a publicly available statement of purpose that accurately and clearly describes the services and supports provided.

Features of a service meeting this standard are likely to include:

4.4.1. There is a statement of purpose for the service which clearly describes the services and supports provided by the service provider.

4.4.2. The statement of purpose for the service details:

- the aims, objectives and ethos of the service
- the models of service delivery and aligned resources necessary to deliver high quality, person-centred and reliable services and supports that are responsive to individual choices, needs and abilities
- the range of services and supports and any specialised facilities provided
- the terms and conditions of the agreement for the provision of services and supports
- a list of key policies that inform practice in the service
- the location or locations of service delivery.

4.4.3. The statement of purpose reflects the day-to-day operation of the service and it is reviewed regularly and updated when necessary.

4.4.4. The statement of purpose is publicly available and communicated to all stakeholders, including people who use the service, in a format that is accessible and that can be easily understood by them.

4.4.5. The review and evaluation of the statement of purpose is incorporated in the service's governance arrangements to provide assurance that services are being delivered within the scope of the statement of purpose.

What it means for you as a person using the service when this standard is met:

- The service provider provides information on the services and supports it provides, including the different types of services and supports

provided and where they are provided, in a format that is accessible to you

- The service provider only provides the services and supports that it knows it can deliver effectively and safely

Standard 4.5

The service provider has appropriate service level agreements, contracts and/or other similar arrangements in place with the funding body or bodies.

Features of a service meeting this standard are likely to include:

4.5.1. Formal service level agreements, contracts or similar arrangements clearly define the relationship, role and responsibilities of both service provider and funding body.

4.5.2. The service level agreement, contract or other similar arrangement specifies clearly the nature, quality, quantity and outcome of the service to be delivered by the service provider and what level of funding is being provided.

4.5.3. The service level agreement, contract or other similar arrangements defines the reporting, monitoring, review and oversight arrangements in place between the service provider and the funding body including expectations as regards compliance with relevant legislation, national policy, and relevant quality standards, systems and measures.

What it means for you as a person using the service when this standard is met:

- Your service provider has a formal agreement or contract with the organisation which funds it, which requires the service provider to comply with relevant legislation, national policy and relevant standards and guidelines

5. Theme 5: Responsive Workforce

Each staff member has a key role to play in delivering high-quality, person-centred services and supports to people with disabilities. Service providers organise and manage their workforce to ensure that staff have the required skills, experience and competencies to respond to the needs of the people using their services and supports.

Safe recruitment practices ensure that staff have the required qualities, skills, competencies and experience to undertake duties associated with their roles and responsibilities. All staff receive support and supervision to ensure that they perform their job to the best of their ability. The performance of staff is appraised at regular specified intervals.

Staff are registered with their professional body, where relevant to assure the public that they are competent to deliver high quality, person-centred services to people with disabilities.

Providing services and supports to people with disabilities can be complex and demanding for the staff involved. The service provider should protect its workforce from the risk of work-related stress, bullying and harassment and should listen and respond to their views.

As aspects of service provision change and develop over time, the service supports staff to continuously update and maintain their knowledge and skills. The training needs of the workforce are monitored on an ongoing basis and identified training needs are addressed to ensure the delivery of high quality, person-centred services for people with disabilities.

All staff receive specific training in the protection of vulnerable people to ensure that they are well equipped with the knowledge and skills to recognise the signs of abuse and/or neglect and the action(s) required to protect them from significant harm.

Standard 5.1

Safe and effective recruitment practices are in place to recruit staff.

Features of a service meeting this standard are likely to include:

5.1.1. Staff are recruited in compliance with employment and equality legislation, and recruitment and selection processes are informed by evidence-based human resource practices.

5.1.2. The service provider identifies the skills, competencies and personal attributes required of staff and recruits accordingly, including people who have a community inclusion and participation focus or profile, and who have the flexibility to provide supports to people in the evenings and at weekends (outside of standard 9am to 5pm arrangements).

5.1.3. Each person is consulted on the skills and expertise required by staff who support them and contributes to the development of their job descriptions, where appropriate.

5.1.4. Garda Síochána vetting is carried out on staff and volunteers with direct access to people using services and supports. References are checked before they start working.

5.1.5. All staff have written job descriptions and a copy of their terms and conditions of employment prior to taking up a post.

5.1.6. Job descriptions for staff who provide services and supports state that staff are required to establish and maintain relationships with people with disabilities that are based on respect and equality and that promote their independence.

5.1.7. A contemporaneous, accurate and secure personnel file is kept for all staff.

5.1.8. Orientation and induction training is provided to all staff when they start working in the service. The induction programme includes a focus on:

- communication
- safety of people who use services
- positive risk-taking
- disability awareness

- person-centredness and what it means for day-to-day practice within the service
- informed decision making and self-determination
- community inclusion and active citizenship

5.1.9. There is a written code of conduct for all staff, developed in conjunction with people who use services and supports. All staff also adhere to the codes of conduct of their own professional body / association and /or professional regulatory body.

What it means for you as a person using the service when this standard is met:

- Your service provider makes sure that it recruits people with the necessary qualifications, skills, abilities and experience to provide high quality, person-centred and safe services
- Your service provider makes sure that, where it is necessary, professionals are registered with their professional body
- Your service provider protects the people who use their services by asking the Garda Vetting Unit to formally check the backgrounds of people they recruit
- Staff have clear job descriptions and understand what their role is in providing your services and supports
- Your service provider ensures all new staff receive induction training, so that they can do their job well

Standard 5.2

Staff have the required competencies to manage and deliver high quality, person-centred and reliable services and supports.

Features of a service meeting this standard are likely to include:

5.2.1. At all times there are sufficient numbers of staff with the necessary experience and competencies to meet the needs of people, while using services and supports, as set out in their personal plan.

5.2.2. At all times there are sufficient staff available to ensure the safety of people with disabilities. Contingency plans are in place in the event of a shortfall in staffing levels.

5.2.3. Continuity of staffing and the maintenance of relationships are promoted through:

- strategies for the retention of staff
- ensuring sufficient staffing levels to avoid excessive use of casual, short-term, temporary and agency workers

5.2.4. Staff have the necessary skills to provide services and supports to people with disabilities and are registered with the relevant professional regulatory body in compliance with legislation. Staff maintain professional competence.

5.2.5. Key workers have the skills required to:

- facilitate person-centred planning
- plan and co-ordinate individual services and supports
- communicate and liaise effectively with other organisations and professionals.

5.2.6. The service provider has competent managers with appropriate qualifications and sufficient practice and management experience to manage the services and supports and meet its stated purpose, aims and objectives.

What it means for you as a person using the service when this standard is met:

- There are always enough staff to meet your needs and ensure that you are safe when you are using services and supports

- The service provider works to ensure that there is continuity in the staff who provide services and supports to you
- Managers, key workers and other staff have the skills they need to ensure that you receive high-quality, person-centred and reliable services and supports

Standard 5.3

Staff are supported and supervised to carry out their duties to deliver high-quality, person centred and reliable services and supports.

Features of a service meeting this standard are likely to include:

5.3.1. Staff understand their roles and responsibilities, have clear accountability and reporting lines, and are aware of policies and procedures to be followed at all times.

5.3.2. Staff are supported to effectively exercise their personal, professional and collective accountability for the provision of high quality, person-centred and reliable services and supports.

5.3.3. There are procedures to protect staff by minimising the risk of violence, bullying and harassment by other members of staff or persons using the services and supports.

5.3.4. Staff are provided with access to support and advice. Staff receive regular supervision and support by appropriately qualified and experienced staff.

5.3.5. Each individual staff member's performance is formally appraised, at least annually by appropriate personnel.

5.3.6. A written record is kept of each supervision, support and performance appraisal and a copy is given to the member of staff. The record is signed by the supervisor and staff member at the end of each supervision, support and performance appraisal session and is available for inspection.

5.3.7. Staff are facilitated to make protected disclosures about the effectiveness and safety of the service in line with legislative requirements, where appropriate.

5.3.8. Staff are provided with training and development opportunities that equip them with the necessary skills required to meet the needs of people with disabilities.

5.3.9. Accredited management training is provided to all new managers who manage front-line staff.

5.3.10. Managers who supervise staff are provided with training in supervision theory and practice.

What it means for you as a person using the service when this standard is met:

- Staff have clear job descriptions and understand what their role is in providing your services and supports
- The people who work in the service are supported by those in charge of the service to provide high quality, person-centred services and supports
- There are procedures in place to protect staff from bullying and harassment
- Everybody working in a service knows how to get support and advice when they need it so they can deliver a high quality person-centred service
- The service provider keeps written records of staff being supervised and supported and of their performance being reviewed
- Everyone working in the service is supported to raise concerns about the quality and safety of the service

Standard 5.4

Training is provided to staff to improve outcomes for people using services and supports.

Features of a service meeting this standard are likely to include:

5.4.1. All staff are trained to support people in a person-centred way and to facilitate them to achieve their goals.

5.4.2. A training needs analysis is periodically undertaken with all staff and relevant training is provided as part of a continuous professional development programme.

5.4.3. There is a training and development programme to ensure that staff maintain competence in all relevant areas. This programme has a specific focus on:

- person-centredness, choice and self-determination
- positive risk-taking
- community inclusion, active citizenship and meaningful social roles

and is tailored to specific members of the workforce in order to ensure the delivery of high quality person-centred services and supports.

5.4.4. All staff receive ongoing training in the prevention, detection and reporting of abuse and their requirement to report abuse, as outlined in legislation and national policies.

5.4.5. The service provider ensures that staff participate in mandatory health and safety education and training programmes.

What it means for you as a person using the service when this standard is met:

- Everybody providing your services and supports regularly receives the necessary training to keep their skills and knowledge up to date and provide you with high quality person-centred services and supports
- Staff working in your service receive training so that they know how to protect people using services and supports from abuse and what to do if they find out that someone is being abused

6. Theme 6: Use of Resources

The effective management and use of available financial and human resources is fundamental to delivering high quality, person-centred and reliable services and supports that meet the needs of people with disabilities.

A well-run service uses resources effectively and seeks opportunities to provide improved services and supports, which achieve better outcomes for people using them. Resource decisions take account of the needs of people and the levels of demand on the service. Staff who make decisions on the use of resources are accountable for the decisions made and ensure these decisions are well informed.

Standard 6.1

The use of available resources is planned and managed to provide high quality, person-centred and reliable services and supports.

Features of a service meeting this standard are likely to include:

6.1.1. The service provider demonstrates an understanding of the levels of need within the service to inform the planning and allocation of resources.

6.1.2. There are clear plans that take account of the funding and resources available to ensure the provision of high quality, person-centred and reliable services and supports, which are in line with the service provider's statement of purpose.

6.1.3. Resources are effectively deployed to meet the needs and aspirations of the people using services and supports.

6.1.4. The service provider demonstrates transparent and effective decision making when planning, procuring and managing the use of resources.

What it means for you as a person using the service when this standard is met:

- You can be confident that the service is making the best use of its available resources, including the people who work in the service, when providing services and supports to you

7. Theme 7: Use of Information

Quality information and effective information systems are central to improving the quality of services and supports for people with disabilities. Quality information, which is accurate, complete, legible, relevant, reliable, timely and valid, is an important resource for service providers in planning, managing, delivering and monitoring services.

To effectively use the multiple sources of information available, service providers have systems, including information and communications technology, to ensure the collection and reporting of quality information within the context of effective arrangements for information governance.

Information governance refers to the systems and processes that service providers have in place to manage information to support their immediate and future regulatory, legal, risk, environmental and operational requirements. An information governance framework enables service providers to ensure all information including personal information is handled securely, efficiently, effectively and in line with legislation. This supports the delivery of high quality, person-centred and reliable services and supports to people with disabilities.

Standard 7.1 Information is used to plan and deliver high quality, person-centred and reliable services and supports.

Features of a service meeting this standard are likely to include:

7.1.1. There is a robust and secure system for managing information to support the delivery of high quality, person-centred and reliable services and supports.

7.1.2. Information is collated, managed and shared to support effective decision-making, in compliance with legislation.

7.1.3. A system is in place to gather information about the quality and safety of services and supports, including outcomes for people using them. This information is used to inform decision making and to drive continuous improvements in service provision.

7.1.4. People are informed by the service on the recording and intended use of all personal information.

7.1.5. People have access to their personal information in line with legislation and best practice.

What it means for you as a person using the service when this standard is met:

- The service provider will collect information from you and others to help it improve the quality of its services and supports
- The service provider uses relevant quality information to check the quality and safety of the services and supports provided to you
- You can request a copy of any information held about you by your service provider

Standard 7.2

Information governance arrangements ensure secure record-keeping and file-management systems are in place to deliver high quality, person-centred and reliable services and supports.

Features of a service meeting this standard are likely to include:

7.2.1. Information governance arrangements are in place to ensure that the service provider complies with legislation, uses information ethically, and uses best available evidence to protect personal information and support the provision of high quality, person-centred and reliable services and supports.

7.2.2. Records required for the effective and efficient running of services and supports are up to date, of high quality and accurate at all times.

7.2.3. The service provider holds a register (electronic or hard copy) in line with statutory requirements which details the relevant information in respect of each person using services and supports.

7.2.4. Each person has a contemporaneous file that includes all records relating to their services and supports.

7.2.5. There is a policy for the retention and destruction of records in compliance with the Data Protection Acts, 1988 and 2003.

7.2.6. The privacy of each person's personal information is protected and respected, and any personal information is treated as confidential and held in accordance with legislative, regulatory and best practice requirements.

What it means for you as a person using the service when this standard is met:

- Personal information about you is kept safe and secure
- People working in your service will record information about you accurately
- The service provider will keep your personal records safe and up to date

11 Glossary of Terms

This glossary details key terms and a description of their meaning within the context of this document.

Abuse: Any act, or failure to act, which results in a breach of a vulnerable person's human rights, civil liberties, physical and mental integrity, dignity or general wellbeing, whether intended or through negligence, including sexual relationships or financial transactions to which the person does not or cannot validly consent, or which are deliberately exploitative. Abuse may take a variety of forms:

- physical abuse, including corporal punishment, incarceration (including being locked in one's home or not allowed out) over- or misuse of medication, medical experimentation or involvement in invasive research without consent, and unlawful detention of psychiatric patients;
- sexual abuse and exploitation, including rape, sexual aggression, indecent assault, indecent exposure, forced involvement in pornography and prostitution;
- psychological threats and harm, usually consisting of verbal abuse, constraints, isolation, rejection, intimidation, harassment, humiliation or threats of punishment or abandonment, emotional blackmail, arbitrariness, denial of adult status and infantilising people with disabilities, and the denial of individuality, sexuality, education and training, leisure and sport;
- interventions which violate the integrity of the person, including certain educational, therapeutic and behavioural programmes;
- financial abuse including fraud and theft of personal belongings, money or property;
- neglect, abandonment and deprivation, whether physical or emotional, in particular an often cumulative lack of healthcare or negligent risk taking, of food or of other daily necessities, including in the context of educational or behavioural programmes;

- institutional violence with regard to the place, the level of hygiene, the space, the rigidity of the system, the programme, the visits, the holidays.⁴

Accessible format: The presentation of print and online information in plain English in a manner suited to people with disabilities, including large print, audio, easy-to-read and Braille.

Accountability: Being answerable to another person or organisation for decisions, behaviour and any consequences.

Adverse event: An incident which results in physical and/or emotional harm to a person using a service.

Advocacy: A process of empowerment of the person which takes many forms. It includes taking action to help say what they want, secure their rights, represent their interests or obtain the services they need; it can be undertaken by people themselves, by their friends and relations, by peers and those who have had similar experiences, and/or by independent trained volunteers and professionals.

Advocate: A person, preferably nominated by the person using the service, who is independent of any aspect of the service and of any of the statutory agencies involved in purchasing or providing the service, and who acts on behalf of, and in the interests of the person using the service who feels unable to represent herself or himself when dealing with professionals. The advocate helps the person to express herself or himself.

Assessment: A process by which a person's needs are evaluated and determined so that they can be addressed.

Assistive technology: A term used to refer to practical tools that can support functional needs of people who experience difficulties linked to disability or ageing. The most widely used definition of Assistive Technology today is probably the definition of 'Assistive Products' used by the International Standards Organisation (ISO): Any product (including devices, equipment, instruments and software), especially produced or generally available, used by or for persons with disability: for participation; to protect, support, train, measure or substitute for body functions/structures and activities; or to prevent impairments, activity limitations or participation restrictions.

⁴ As defined in the Council of Europe, Resolution Res AP (2005) on safeguarding adults and children with disabilities against abuse: France 2005

Audit: The assessment of performance against any standards and criteria (clinical and non-clinical) in a health or social care service.

Autonomy: Freedom to determine one's own actions and behaviour.

Best available evidence: The consistent and systematic identification, analysis and selection of data and information to evaluate options and make decisions in relation to a specific question.

Bridging programme to vocational training: A training programme that is designed to support people with disabilities to test, acquire and strengthen their readiness to progress to and benefit from vocational training.

Capacity: Capacity means the ability to understand the nature and consequences of a decision in the context of available choices at the time the decision is to be made. A person lacks the capacity to make a decision if he or she is unable to understand the information relevant to the decision, unable to retain that information, unable to use or weigh that information as part of the process of making the decision, or unable to communicate his or her decision.

Code of conduct: A description of the values, principles and expected behaviours of individuals and teams working within a service.

Code of governance: A description of the roles and responsibilities of those governing the service including an oversight role with clear lines of accountability in respect of safety and quality of services provided.

Competence: The knowledge, skills, abilities, behaviours, expertise, personal qualities and values required to be able to perform a particular task and activity.

Complaint: An expression of dissatisfaction with any aspect of a service.

Complaints procedure: A set of clearly defined steps for the resolution of complaints.

Concern: A safety or quality issue regarding any aspect of service provision, raised by a person using a service, a service provider, member of the workforce or general public.

Confidentiality: The right of individuals to keep information about themselves from being disclosed.

Contract: Written agreement between two or more parties that sets out the terms and conditions, and rights and responsibilities of those parties.

Culture: The shared attitudes, beliefs and values that define a group or groups of people and shape and influence perceptions and behaviours.

Dignity: The right to be treated with respect, courtesy and consideration.

Disability: A substantial restriction in the capacity of the person to carry on a profession, business or occupation or to participate in social or cultural life by reason of an enduring physical, sensory, mental health or intellectual impairment.

Effective: A measure of the extent to which a specific service or support when delivered, does what it is intended to do for a specified population.

Efficient: Use of resources to achieve optimal results with minimal waste.

Evaluation: A formal process to determine the extent to which the planned or desired outcomes of an intervention are achieved.

Evidence: Data and information used to make decisions. Evidence can be derived from research, experiential learning, indicator data and evaluations.

Fit person: For the purposes of these interim standards, being a fit person means that the service provider has the skills, knowledge and good character to safely and effectively provide services and supports to people with disabilities.

Garda Síochána vetting: The practice whereby employers obtain information from An Garda Síochána as to whether or not a prospective or existing employee or volunteer has a criminal conviction.

General Practitioner (GP): A doctor who has completed a recognised training programme in general practice and provides personal and continuing health care to individuals and families in the community.

Governance: The function of determining the organisation's direction, setting objectives and developing policy to guide the organisation in achieving its objectives and stated purpose. Effective governance arrangements recognise the interdependencies between corporate and clinical governance and integrate them to deliver safe and effective services and supports to people with disabilities.

Harm: Impairment of structure or function of the body and/or any detrimental effect arising from this, including disease, injury, suffering, disability and death and may be physical, social or psychological.

Health: The state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.

Healthcare: Services received by individuals or communities to promote, maintain, monitor or restore health.

Healthcare professional: A person who exercises skill or judgment in diagnosing, treating or caring for individuals, and preserving or improving the health of individuals.

Incident: An event or circumstance which could have resulted, or did result, in unnecessary harm to an individual.

Information governance: The arrangements that service providers have in place to manage information to support their immediate and future regulatory, legal, risk, environmental and operational requirements.

Informed consent: Voluntary authorisation by a person using a service with full comprehension of the risks and benefits involved for any medical treatment or intervention, provision of personal care and supports, participation in research projects and provision of the person's personalised information to a third party.

Key worker: The key worker is the member of the staff in the service who carries particular responsibility for the person with a disability, liaises directly with them, coordinates their services and supports, and acts as a resource person.

Monitoring: Systematic process of gathering, analysis of information and tracking change over time for the purpose of improving the quality and safety of health and social care.

Multi-disciplinary: An approach to the planning and delivery of care by a team of health and social care professionals who work together to provide integrated care.

Personal plan: A plan developed through a person-centred process, which supports and enables a person to make informed choices about what they want to do in the future and the supports they need to achieve a good quality of life and realise their goals. The person-centred planning process should ensure that the individual services and supports provided to the person are responsive to his or her individual needs and wishes and focus on outcomes for the person, based on their goals as set out in the personal plan.

Person-centredness: Person-centredness is a set of beliefs, attitudes and expectations about the right and capacity of a person with a disability to live their life in accordance with their aspirations, needs and abilities. Person-centred services respect the strengths, abilities and resourcefulness of all individuals and their place in the community and society. When services and supports are person-centred, the service provider truly listens to and respects the choices that the individual makes and tailors services and supports around those choices. The service provider uses creativity and flexibility to support the person to achieve his or her chosen goals. This may involve adapting existing supports and services to meet the individual's needs and/or facilitating choices that are not limited to the options that can be offered within any one service provider's range of services. A person-centred approach means having high expectations for the individual and helping the individual to manage challenges and risk.

Person in charge: The person whose name is entered on the register as being in charge of or managing the service.

Policy: A written operational statement of intended outcomes to guide staff actions in particular circumstances.

Positive behaviour support: Positive behaviour support (PBS) is behaviour analysis applied in support of people with challenging behaviour. It involves a behaviour support plan, which contains a range of plans for helping a person to overcome challenging behaviour, including ideas for improving the person's quality of life, adapting environments to create a greater fit with the needs and characteristics of the person, teaching skills for relaxation, effective communication and problem solving, non-aversive focused interventions and strategies for responding to behaviour. Together these recommendations make up a behaviour support plan. The ideas are based on a comprehensive understanding of the needs and characteristics of the person (e.g. cognitive abilities, communication skills, life story, health, motivation) and a detailed understanding of the contexts (people, environment, times, activities) in which behaviours arise.

Procedure: A written set of instructions that describe the approved steps to be taken to fulfil a policy.

Protected disclosure: A protected disclosure provides legal safeguards for people who want to report serious concerns they have about standards of safety or quality in Irish health and social care services. If a reported concern qualifies as a protected disclosure, the person making the protected disclosure is afforded certain legal protections under the Health Act 2007.

Protection: Process of protecting individuals identified as either suffering, or likely to suffer, significant harm as a result of abuse or neglect.

Quality: Quality is meeting the assessed needs and expectations by ensuring the provision of safe, efficient and effective management and processes.

Quality information: Data that has been processed or analysed to produce something useful and is accurate, valid, reliable, timely, relevant, legible and complete.

Record: A record includes any memorandum, book, plan, map, drawing, diagram, pictorial or graphic work or other document, any photograph, film or recording (whether of sound or images or both), any form in which data are held, any other form (including machine-readable form) or thing in which information is held or stored manually, mechanically or electronically and anything that is a part or a copy, in any form, of any of the foregoing or is a combination of two or more of the foregoing.

Regulation: A governmental order having the force of law.

Reliable: A reliable service consistently performs its intended function in the required time under normal circumstances.

Representative: This is the person, preferably nominated by the individual, who acts on their behalf in situations where the individual lacks capacity to make decisions. This person will often be a family member and could also be a friend, advocate or legal advisor. The role of this person is to ascertain, as far as possible, the individual's wishes and to act in every instance in the individual's best interests.

Risk: The likelihood of an adverse event or outcome.

Risk management: The systematic identification, evaluation and management of risk. It is a continuous process with the aim of reducing risk to an organisation and individuals.

Service level agreement: Is part of the contract between the service provider and the funding body where the level and scope of the service is formally defined.

Service provider: Person(s) or organisations that provide services. This includes staff and management that are employed, self-employed, visiting, temporary, volunteers, contracted or anyone who is responsible or accountable to the organisation when providing a service to people with disabilities.

Service statement: A statement which specifies the services and supports which will be provided to an individual by or on behalf of the HSE and the period of time within which such services and supports will be provided.

Staff: The people who work in, for or with the service provider. This includes individuals that are employed, self-employed, temporary, volunteers, contracted or anyone who is responsible or accountable to the organisation when providing services and supports to people with disabilities.

Stakeholder: A person, group or organisation that affects or can be affected by the actions of, or has an interest in, the services provided.

Standards and features: A standard is a measure by which quality is judged. The standard statements set out what is expected in terms of the services and supports provided to the person. The features are the supporting statements that indicate how a service may be judged to meet the standard.

Statement of purpose: Describes the aims and objectives of the service including how resources are aligned to deliver these objectives. It also describes in detail the range, availability and scope of services and supports provided by the overall service.

Timely: Refers to action taken within a timeframe which meets the welfare and protection needs of any particular person with a disability and his/her circumstances.

Vetting: The process of investigating an individual thoroughly in order to ensure that they are suitable for a job. This process also includes checking references provided by the individual.

Welfare: Welfare encompasses all aspects of a person's wellbeing to include physical, social, emotional, religious, moral and intellectual welfare.

Workforce: All people working in a service.

Appendix 1: Membership of the Standards Sub-group established under the National Implementation Group for New Directions

Fidelma Murphy (Chair), Enable Ireland, representative of Not for Profit Business Association

Arlette Howell, Health Service Executive

Barbara Kellett, RehabCare, representative of Not for Profit Business Association

Sarah Kelly, KARE, representative of National Federation of Voluntary Bodies

Brian Miller, Health Service Executive

Ruth O'Reilly, National Disability Authority

Donie O'Shea, National Disability Authority

Pat Reen, Prosper Fingal, representative of National Federation of Voluntary Bodies

Alison Ryan, Disability Federation of Ireland

Mary Smyth, Irish Wheelchair Association, representative of Not for Profit Business Association