

Disability Support Services

Tier Two Service Specification

Facility Based Respite

1. Introduction

This Tier Two Service Specification specifies Facility Based Respite Services for eligible people who are funded by Disability Support Services (DSS). It should be read in conjunction with the DSS Tier One Service Specification, which details requirements common to all services funded by DSS.

The Tier Three Facility Based Respite Service Specification details additional requirements for Providers delivering Facility Based Respite to eligible people aged 16 and younger.

2. Service Definition

Facility Based Respite is short term relief support provided in a residential setting for eligible People. Its purpose is to provide a break for the Person's Carer/s in order to sustain their longer term support for the Person to live in the community.

Respite may be either planned or unplanned:

- planned respite is provided for specific periods as agreed with the Carer/s and the Person.
- unplanned respite is provided in times of crises, for example, when Carer/s are in urgent and immediate need of respite due to a family emergency, crisis or unforeseen event.

Facility Based Respite has two main components:

1. The supports should replicate the 'out of family' experiences of people who do not have disabilities and who commonly stay with school friends, extended family, relatives, friends etc. Respite should be a positive, stimulating and worthwhile experience for People while providing their Carers with temporary relief from care-giving.
2. Respite contributes to Carers' support networks, building trust and supporting Carers with their role of supporting People.

2.1 Key Terms

The following are definitions of key terms used in this service specification:

Term	Definition
Behaviour Support	<p>Behaviour support is a continuous process of positive support for managing challenging behaviour. This process adopts the principle that a Person's freedom should be restricted only for safety reasons.</p> <p>There may be times when providers require specialist advice to assist in the management of challenging, complex or intrusive behaviours. The Ministry contracts a Specialist Behaviour Support Service that is accessed through a NASC referral.</p>
Needs Assessment and Service Coordination (NASC)	<p>NASC services are funded by the Ministry of Health. Their role is to assess a Person's disability related support needs, and then to allocate and/or coordinate funding or services to meet these needs.</p>
Personal Plan	<p>This plan records the desired outcomes the Person wants to achieve with both their funded and unfunded supports.</p>
People/Person	<p>A disabled person(s) who is/are eligible to access Facility Based Respite under this service specification.</p>
Carer/s	<p>The full time Carer/s is the person/s providing support to the disabled person in their normal family environment or home. This can include family/whanau or guardians.</p>

3. Service Objectives

The aim of Facility Based Respite is to:

- enable Carers to have temporary relief from their care-giving duties
- sustain Carers' support of People to remain living at home.
- enhance Carers support networks
- ensure People enjoy a positive, meaningful and stimulating experience that replicates the 'out of family' experiences of people who do not have disabilities

4. Service Performance Measures

Performance Measures form part of the Results Based Accountability (RBA) Framework. The Performance Measures in the table below represent key service areas the Purchasing Agency and the Provider will monitor to help assess service delivery. Full Reporting Requirements regarding these measures are detailed in Appendix 3 of the Outcome Agreement. It is anticipated the Performance Measures will evolve over time to reflect Purchasing Agency and Provider priorities.

The 'How much', 'How well' and 'Better off' headings relate to different types of RBA performance measures.

Measures below are detailed in the Data Dictionary, which defines what the Ministry means by certain key phrases.

	How much	How well	Better off
1.	# of bed days available		
2.	# of bed days used	% of bed days used	
3.	# of personal plans	% personal plans completed with input from the Person and/or Carer/s	#/% of Carer/s who reported that they had support as agreed in the Person's personal plan
4.		% of personal plans reviewed and signed-off at least once every 12 months	
5.	# referrals received	% referrals accepted	
6.	# Carer/s providing input into service operations and development	% Carer/s providing input into service operations and development	
7.	# of satisfaction surveys sent	% of satisfaction surveys returned	#/% of Carer/s who reported satisfaction with the Person's

	How much	How well	Better off
			placement
8.	# of complaints that have been received	% of complaints that have been resolved (i.e. a corrective action plan has been implemented)	
9.	# staff with an agreed training plan in place	% of staff assessed as completed training plan	

5. People Using Respite

5.1 Access/Entry Criteria

To access Facility Based Respite, People must be allocated funded Facility Based Respite by their NASC.

The Person and/or their Carer/s will select the Facility Based Respite Provider of their choice. The length of stay in the facility will be agreed with the Person and will form the basis of the Personal Plan prior to entry.

5.2 Exclusions

People who are receiving long-term residential care or rehabilitation are ineligible from receiving respite.

6. Service Components

6.1 Personal Plans

The Provider will have in place a Personal Plan for each Person using the service. This Plan will be written with the Person and their Carer/s at the beginning of the placement and reviewed annually. The plan will cover:

- length of stay
- arrangements for attending respite and for return home
- arrangements for school attendance while at respite, including transport arrangements to and from school where required
- medication requirements
- communication tools to ensure the Person can be understood by staff, and can understand staff

- activities that integrate the goals of the person and their Carer/s
- behaviour supports including individual behaviour support strategies that may assist staff dealing with the person
- other specific supports required and the appropriate methods of managing these in the respite service
- dietary needs, likes and dislikes, allergies etc.
- management of personal equipment brought to the service
- risk management plans for the Person

6.2 Behaviour Support

The Provider will:

- ensure that any behaviour support specified in a Person's Personal Plan is appropriately implemented
- operate a policy of using positive behaviour support for managing challenging behaviour which adopts the principle that a person's freedom should be restricted only for safety reasons. Policies should ensure restraint procedures will be based on the Standards New Zealand document 'Restraint Minimisation and Safe Practice NZS8141: 2008'
- work cooperatively with and support the contracted Specialist Behaviour Support Service or Dual Diagnosis/Assessment Treatment & Rehabilitation Services to implement any Behavioural Support or Treatment Plan in place for the Person
- participate in training provided by the Specialist Behaviour Support Service

6.3 Residential supports

The Provider will ensure the residential environment is supportive and affirming of People, and provides appropriate activities/outings and positive interactions.

The Provider is responsible for:

- providing a 'home-like' environment where People will be encouraged to bring personal belongings that enable them to adapt and feel comfortable in the facility
- ensuring secure, physically safe internal and external environments that meet the Person's particular mobility and safety requirements

- ensuring People will have an identified key worker who will take overall responsibility for the welfare of the Person while in respite and feed-back to the Carer/s where appropriate at the end of the placement
- keeping daily reports on progress/interventions/incidents and activities of the Person, including administration of any medication
- ensuring timely and appropriate advice/information about the Person's respite is discussed with the Carer/s. Any personal information shared about respite will be given with the Person's consent
- providing domestic supports similar to those that are provided in a Person's home, such as meals, laundry, and personal care
- providing each Person with their own bedroom, unless it is the Person's clear choice and preference not to have their own bedroom
- transport to access community facilities, socialisation and leisure activities as part of a Person's Personal Plan.

7. Key Inputs

7.1 Staffing

The Provider is responsible for ensuring competent staff deliver 24-hour Facility Based Respite. The Provider will have sufficient experienced staff to provide a level of service relative to the Person's assessed needs which may include but is not limited to: communication requirements, behaviour support, risk management, disability-specific needs, personal cares and social functioning.

The Provider is responsible for developing and implementing a training plan for all staff. The training plan will ensure staff are trained to deliver effective Facility Based Respite. This training may include but is not limited to:

- disability awareness
- implementing Personal Plans including how to recognise and manage risks to People's safety or possible abuse
- explaining the Providers policy for implementing Personal Plans (including preventing and managing safety and abuse)
- physical care e.g. using equipment such as hoists etc
- adopting effective communication strategies when dealing with People and their Carer/s
- Behaviour Support, including interactions that will enhance the Person's self-esteem and independence.

The Provider will respond to the cultural needs of People using their services by actively recruiting, encouraging, promoting and developing Maori, Pacific and other ethnically diverse staff to be employed at all levels of the service, reflecting the ethnicities of People using the service.

8. Completing the Respite

If the Carer/s has not arranged for the individual's return home at the agreed completion of the respite, period the Provider should notify the Person's NASC.

The Provider is responsible for ensuring relevant information about the respite stay of the Person is communicated to the Carer/s upon completion of the respite period.

9. Linkages

The Provider will develop co-operative relationships with NASCs to ensure that the timely access to respite services can happen. Any concerns about the Person's safety must be discussed and advised on by the NASC.

Other linkages to support the Person include:

- schools and special education providers where appropriate
- day and/or recreational activities
- the Specialist Behaviour Support Service where appropriate
- relevant ethnic and cultural groups
- Disabled Persons' Organisations
- advocacy services
- Disability Information Advisory Services (DIAS)
- transportation services to recreational and/or day activities etc.

10. Items Excluded from Facility Based Respite

People are responsible for the provision of any items listed below. These items may be partially funded by other funders including the Ministry of Health under other contracts, and include but are not limited to:

- clothing and personal toiletries, other than ordinary household supplies
- medication
- continence supplies
- doctors' visits

- dental care
- opticians
- specialist services and assessments
- Environmental Support Services equipment for individual use
- telephone toll charges
- hairdressers.

The Provider is not responsible for the provision of the above items. These items are excluded from the contract rate.

11. Quality Requirements

11.1 Risk Management

In addition to the requirements in the Tier One Service Specification, the Provider's Risk Management Plan shall address the following:

- staff recruitment and supervision that emphasises the safety of People
- staff rosters ensuring adequate supervision, particularly when staff are carrying out personal care of the Person
- the compatibility of the Person with others who will be resident at the same time
- the safety of people and staff when working with People with challenging behaviours
- dealing with challenging behaviours – when and how to access specialist Behaviour Support services and when to access NASC for reassessment/review
- documented processes to inform Carer/s of incidents, crises and areas of concern
- documented processes to inform key stakeholders affected by incidents, crises or areas of concern (such as Carer/s, neighbours, other People using respite, and staff)
- management of relationships with the immediate neighbouring community.

11.2 Person/ Carer/s input

In addition to requirements of the Tier One Service Specification, People and Carer/s may provide input into service operations and development. These may include, but are not limited to, input into:

- policies and procedures
- service planning and development
- staff selection/appointment
- provider quality monitoring
- development of the Personal Plan
- advisory boards, including representation on advisory type boards
- activities such as social and recreational activities
- culturally specific involvement in service planning and review processes.

11.3 Safety and Efficiency

The Provider will provide a safe environment for people using the service, their Carer/s, other people and staff in the service.

The Provider will have documented policies/protocols for the following aspects of service delivery:

- ensuring the safety of the Person, including implementing and checking that the Personal plans are implemented
- ensuring the safety of staff, including safety from allegations of abuse, this is particularly important for staff involved in personal care
- managing challenging behaviour in the least restrictive way possible
- administering medication
- ensuring placements are carefully planned to avoid potential risk arising from inappropriate sharing of the accommodation.

12. Purchase Units

Purchase Units are defined in Ministry of Health's Nationwide Service Framework Purchase Unit Data Dictionary. The following table is a summary list of the tier two Respite Services Purchase Unit Codes associated with this Service.

Purchase Unit Code	Purchase Unit Description	Measure	Purchase Measure definition
DSS213A1	Respite beds	Bed days	Respite is provided to eligible People who have continuous disability related support needs who require short term and intermittent 24 hour residential support.

13. Reporting Requirements

Full Reporting Requirements (including any Provider specific reporting requirements) are included in Appendix 3 of the Outcome Agreement.