Design of a governance model for the implementation of a National Disability Strategy in Portugal

27 - 28 June 2007
Summary of results of the previous seminar

Session 1
1. Two key foundations for a National Disability Strategy (NDS)
   1. Quality of Life
   2. Principles of Case Management
2. A dual focus on the Structures/Organisations and the Individual
3. The key importance of ‘Coordination’
4. Developing specialised vs. mainstream services
5. Specialised services and professionals as mediators for PwD in the mainstream
6. Mainstreaming must acknowledge diversity and more vulnerable people
Responsibilities of the State

1. To provide choice in service use
2. To guarantee social benefits
3. To legislate and enforce non discrimination
4. To guarantee education opportunities
5. To organize rehabilitation services in order to facilitate the choice
6. To provide accessible housing, home support and equipments
7. To promote disability awareness and social inclusion
8. To provide regular and accessible services
9. To provide financial support to carers
10. To provide flexible solutions
11. To design tax benefits
12. To guarantee support services in order to permit pauses
13. To regulate training system
14. To guarantee services provision
15. To guarantee accessible information and services
16. To listen to the people with disabilities families and stakeholders
17. To pay proper fees
18. To provide clear frameworks
19. To respect services autonomy
- To expect initiative and commitment from people and families
- To expect an effective use of resources
- To assess disability
- To evaluate outcomes
- To regulate services and support schemes
- To get financial resources
- To expect accountability
- To decide how to allocate resources
- To design macro politics
Protection vs. Activation

**Properly targeted and sustainable Social Protection**
- For those genuinely unable to work
  - Equity in social participation
  - Lifelong Security
- Fundamental Responsibility of a Democratic State
  - Social Cohesion
- Support for Families
  - Cost effective care
- Compensation for costs of disability

**Responsive and flexible Labour Market Activation**
- An Empowerment Approach
  - Enhanced responsibility and control for individual
  - Improved Self esteem and sense of identity
- Greater social inclusion
- Enhanced human capital
- Reduced public expenditure
- Decreased social stigma
- QOL Impact
- Labour market diversity
Risks of Social Protection

- Burgeoning cost to the State (Pensions crisis)
- Creates dependency
- Negative stereotypes and stigma
- Inflexible poverty traps
- Excludes people who might otherwise be eligible for ALMs

Risks of Labour Market Activation

- Focus on cost reduction
- Decrease in the availability of needed services
- Negative impact on those from whom income support is removed
- Increase in the unemployment rate within the jurisdiction
- Potential impact on lower wage rates
Conclusions:

- Reform of Social Protection systems is not the main priority within the Portugal
- Not mutually exclusive
- Diminished social protection would have serious consequences in Portugal
- Current low level of income protection
- Nevertheless, a modernised social protection approach could be designed
  - How is eligibility determined
  - Bringing benefits into the labour market with you
  - Retaining eligibility for a number of years
  - Family supported
### Priority Policy Measures and Mechanisms

#### Prioritisation of Policy Measures and Mechanisms in Portugal

<table>
<thead>
<tr>
<th>Measure</th>
<th>#</th>
<th>Health</th>
<th>Social Services</th>
<th>Employment</th>
<th>Education</th>
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</table>
Measures & Mechanisms with Highest Cross Sectoral Priority

- Quality Standards
- Accessible Infrastructure
- Assistive Technology
- Community based service provision
- Reasonable Accommodation
- Disability Training for mainstream professionals
  - (Education)
- Personal Assistant Schemes
  - (Social Services)
- Centre of Excellence in Universal Design
  - (Sports, Leisure & Culture)
- Support to families and carers
  - (Social Services)
Measures & Mechanisms with Highest Sectoral Priority

- Specialist Professional Higher Education
  - (Education)
- Early identification and intervention
  - (Health)
- Public Awareness Campaigns
  - (Employment, Education & Sports)
- Direct funding - Personal Budgets
  - (Social Services)
- Prevention and risk management
  - (Employment)
- Person centered services
- Upgrade specialist disability services
- Mainstream policies and services
- Independent Living Fund
- Partnership between State & NGO sectors
- Representative Organisations of PWD
Importance Ratings for Coordinating Mechanisms

- Single National Department: Low Priority (0-2)
- Cross Sectoral Plan + Coordinating Agency: Medium Priority (3)
- Multi-Sectoral Approach + Common Goals: High Priority (4-5)
- One Stop Shop with Cross Sectoral Scope: Low Priority (0-2)
- Brokerage Agency for allocating multi-sectoral funds: Medium Priority (3)
- Case Management + Individual Planning: High Priority (4-5)
- Independent Assessment of Need based on ICF: High Priority (4-5)
Mechanisms for Further Consideration

- Cross Sectoral National Disability Strategy and Coordinating Agency
- Case Management and Individual Planning
- Independent Assessment of Need based on the ICF
- One Stop Shop with Cross Sectoral Scope
Cross Sectoral Approach to Rehabilitation

Finance

- Tax Benefits to PwD and Carers
- Place responsibilities on employers

Financing –
- Active employment programmes
- Workplace adaptations
- Scientific /Technological Activities
- Artistic and Cultural Activities

Subsidies and Grant to employers and job seekers
Cross Sectoral Approach to Rehabilitation

- Employment
  - Matching qualifications to market needs
  - Educational and Professional Qualifications
  - Investment in an Employability Strategy
  - Positive Discrimination
  - Adapting workplaces
  - Occupational Training and Re-training
  - Support services for employers
  - Supported Employment
  - Health and Safety Campaign
Cross Sectoral Approach to Rehabilitation

- **Health**
  - Continuum of Health Provision
    - Injury – Rehabilitation – Return to Work
  - National Centres for Physical Rehabilitation
  - Rehabilitation resources in general hospitals
  - Accessibility of health centres
  - Public Health – Prevention and Early Intervention
  - Assistive Technologies
  - Health and Social Care Provision
  - Training of Personal Assistants
Cross Sectoral Approach to Rehabilitation

- **Social Affairs**
  - Easily Accessible Social Services
  - Operating between Labour and Finance
  - Guarantee Quality of Life and Independence
  - Support for Families and Carers
  - Information and Counselling
  - Coordinating passive and active measures
  - Human resources training
  - Case management
Cross Sectoral Approach to Rehabilitation

Education

- Inclusive Education
- Special Resource Centres to support regular education
- Rehabilitation resources available in regular schools
- Professional Education and Ceretification
- Education for Carers
- Teacher Training
- Life long Education for PwD
- Multi-disciplinary Working
Cross Sectoral Approach to Rehabilitation

Equality

- Agency to coordinate cross-sectoral measures
- Targeted mental health equality initiatives
- Monitoring and evaluation of impact
- Joint actions with Education, Employment and Social Affairs
- Family-Work Balance for Carers
- Diversity management campaign
- Equality of Opportunities Campaign
- Promote Rehabilitation, Quality of Life and Social Participation
- Is this this a necessary Department of Government?
Cross Sectoral Approach to Rehabilitation

Sports and Culture
- Partnership with Education
- Awareness Campaign
- Promote knowledge of disability
- Support Network for sports professionals
- Assistive Technology in sports
- Accessibility of cultural events
- Clubs and Disability
- (Adapted physical activities)
Session 2
National Case Studies
The Irish National Disability Strategy
1. Commission on the Status of People with Disabilities 1993

2. Consultation process 1993-1996


4. Building towards Equality 1998

5. The First Disability Act 2002
1. Equality:
   - Formal Response
   - Opportunity
   - Representation
   - Affirmative Action

2. Participation:
   - User Centred Planning & Implementation

3. Independence

4. Choice of Quality Services
1. Education Act (1998)
6. Mainstreaming Services
   1. Individual Assessment of Need (Health & Personal Social Services)
   2. Sectoral Plans
   3. Center of Excellence for Universal Design
   4. Adaptation of the built environment

2. Enhanced Advocacy Services

3. Multi-Annual Funding
Disability Act 2005 - Implementation

- Part 3: Access to Buildings and Services, Sectoral Plans
- Part 4: Genetic Testing
- Part 5: Public Service Employment
- Part 6: Centre for Excellence in Universal Design
- Part 7: Miscellaneous
Disability Act 2005- Part 2

- Part 2- to commence by June 2007 for children 0-5
- DOHC consultation on standards for the Independent assessment of need in Feb 2007
- Crucial link with NCSE- implementation of EPSEN

Section 2 of the 2005 Act define “disability”, in relation to a person, as:

“a substantial restriction in the capacity of the person to carry on a profession, business or occupation in the State or to participate in social or cultural life in the State by reason of an enduring physical, sensory, mental health or intellectual impairment.”
The Disability Act 2005 - a central element of the National Disability Strategy

1. An independent assessment of individual needs
   1. A related service statement
   2. Independent redress and enforcement;

2. Access to public buildings, services and information;

3. Sectoral Plans for six key Departments which will ensure that access for people with disabilities will become an integral part of service planning and provision;

4. An obligation on public bodies to be pro-active in employing people with disabilities;

5. Restricting the use of information from genetic testing for employment, mortgage and insurance purposes;

6. A Centre for Excellence in Universal Design.
Citizens Information Bill 2006

- Published in October 2006 – progressing through legislature
- Citizens Information Board Strategic Plan also published
- Section 4 gives the Citizens Information Board new functions
  - to develop and support the provision of advocacy services for people with disabilities
  - to provide a Personal Advocacy Service for people with disabilities
  - to support greater accessibility and awareness of social services and integrated information
UK Disability Strategy
UK Disability Strategy


2. Disability Rights Commission

3. Disability Discrimination Act 2005 - Products & Services


5. Improving Life Chances of Disabled People
   Independent Living
   Support for Families of Young Disabled Children
   Transition to Adulthood
   Supports & Incentives for getting & staying in employment
Independent Living, Choice, Empowerment & Freedom

- Personalise responses to need
- Enable people to have choice and be empowered over responses to need
- Individualised budgets
- CIL Involvement – Practical Support
Independent Living, Choice, Empowerment & Freedom
Support disabled people to help themselves

1. Independent Advocacy
2. Access to Advice & Information
3. Updated Lifetime Homes Standards – Accommodation Needs
4. Transport Needs – Local Authority Accountability
5. Office for Disability Issues – Annual Report to PM
6. Cross Department responsibility
2. Early Years & Family Support

The early years are critical

1. Targeting Poverty
2. Individualised Budgets
3. Access to All Mainstream Family Supports
4. Timely Access to Equipment
5. Childcare
6. Key Worker
3. Transition to Adulthood

Individual Planning, Continuum of Provision, Transparent & Appropriate Opportunities and Choices

1. Individualised Budgets
2. User led advice, Information & Advocacy
3. Overlapping Adult-Child Services
4. Accessible Mainstream Information Services
5. Effective Person Centered Processes
6. Accessible Mainstream Advice & Guidance Services
4. Employment

Significant progress but more to do

1. Pathways to Work – National Implementation
2. Effective Early Intervention
   1. Work-focused rehabilitation
   2. Early assessment
3. Improving Employability
   1. Access to Lifelong learning & Relevant Skills
   2. Improved Access to Work
4. Ongoing personalised support
   1. Menu driven approach
   2. Case Management
5. Key Role for Employers
Exercise: Develop responsibility matrix (1)

- Participants are divided into 4 stakeholder groups
  - Civil servants
  - Representative organization of People with Disabilities
  - Representative organization of families/carers
  - Network of disability service providers
Considering your own role (rights/responsibilities) and the roles of the other actors - in each of the following areas

- The choice of services
- The design of services
- The evaluation of services
- The allocation of resources
- Lifestyle choices
- Specifying support requirements
- Choosing where to live
- Choosing to work or not
- Feel free to consider other options
Session 3
National Disability Strategy
Roles, Responsibilities and Financing
Coordination Mechanisms in Ireland
Coordinating the Sectoral Plans

Department of Health and Children
• Implementation of Part 2 of the Disability Act (Assessment of Need, Service Statements and Redress)
• Multi Annual Investment Programme

Department of Social and Family Affairs
• Transfer of income maintenance payments from the HSE
• Employment and Activation Model
• Service Delivery Modernisation Programme

Department of Transport
• Comprehensive Programme of accessible transport with set targets
• “Transport for All” and mainstreaming accessibility across all modes of transport
Coordinating the Sectoral Plans

Department of the Environment, Heritage and Local Government
• Accessibility audit of the built environment and infrastructure
• Accessibility implementation plan for each Local Authority
• Development of a National Housing Strategy

Department of Communications, Marine and Natural Resources
• Role and responsibilities of the Independent Broadcasting Commission of Ireland
• Role and responsibilities of the Independent Commission for Energy Regulation

Department of Enterprise, Trade and Employment
• Comprehensive Employment strategy for persons with disabilities
• Implementation of the FÁS Vocational Training Strategy
Part 3 of the Disability Act, 2005, provides for the preparation of Sectoral Plans by six Departments, including the:

- Minister for Enterprise, Trade and Employment,
- Minister for Social and Family Affairs,
- Minister for Health and Children.
Cross-Departmental Co-ordination Protocols

- Support persons of working age to take up work, training and/or educational or development opportunities;

- The removal of disincentives and financial barriers to work experienced by people with disabilities;

- National Coordinating Committee relating to services provided by the HSE and FÁS;

- Joint bridging programmes between health funded day services and FÁS training and employment services.

- Interdepartmental co-ordinating and monitoring structures

- Bi-annual meetings between senior officials and other stakeholders
Cross-Departmental Co-ordination DM Perspective

- Within the context of person centred planning provide appropriate health supports for people in supported employment

- Co-operation with other agencies to encourage and support people towards work and employment

- Ensure income supports and associated benefits do not create financial barriers
Enterprise, Trade and Employment

Over 80% of people with a disability have acquired their disability in adult life. Accordingly, it is essential that a comprehensive employment strategy should not only relate to work participation for those currently outside the workforce. **It must also address job retention following the onset of disability while working.**
Coordinating DM in the Sectoral Plans

Enterprise, Trade and Employment

- Necessary baseline information:

  - Engagement strategies
  - Participation rates
  - Retention rates
  - Certification rates
  - Standards
  - Outcomes
  - Value for money
Coordinating DM in the Sectoral Plans

The revised Workplace Safety Code –

- Launched by the Minister for Labour Affairs in June 2006

- Prevention of accidents
- Respect for safety procedures
- Compliance with best safety practices
- Provision of direct medical care for injured workers
- Follow-up and back to work supports
Coordinating DM in the Sectoral Plans

- Health & Safety Authority (2007)
  - Guidelines on safe workplaces and work practices in inclusive workplaces
  - Workplace and Wellbeing Strategy

- FÁS Employee Retention Grant Scheme (ERGS)
  - €2500 for assessment & €12500 for re-training, redeployment and modifications
  - Review in conjunction with Department of Social & Family Affairs
Department of Health and Children

- Developing a strategic integrated approach to rehabilitation services within the context of the Multi-Annual Investment Programme with a view to supporting people back into employment, as appropriate, through early intervention and enhanced service provision.
Coordinating DM in the Sectoral Plans

Department of Social and Family Affairs

- Tackle and remove benefits traps within income and related supports.

- Develop proactive strategies to support pathways into work for those who can

- Promote continuation in employment of workers who acquire a disability
Coordinating DM in the Sectoral Plans

- Department of Social and Family Affairs

- Employment Activation
  - Early Intervention
  - Segmentation
  - Intermediation
  - Support
  - Outcome monitoring
Department of Social and Family Affairs

- More intensive engagement and case management of people on disability or illness payments.

- Primary focus is on the customer and at the first point of engagement.
Coordinating DM in the Sectoral Plans

Department of Social and Family Affairs

- Medical Assessment:
  - Introduce new case management system
  - The development early intervention systems for categories of disability recipients
  - Linking eligibility assessment to activation
Coordination Exercise 1

- Cross Sectoral Plan and Coordinating Agency
  - Under which Department of Government should this be located?
  - At which level(s) should it operate?
    - National
    - Regional
    - Local
  - What roles and responsibilities should it have?
    - Monitoring
    - Regulating
    - Enforcing
    - Promoting
    - Financing
    - Research
  - How should powers and competences be allocated between the agency and other Ministries and Actors?
## Coordination Exercise 2

<table>
<thead>
<tr>
<th>Case management and Individual Planning</th>
<th>Under which Ministry?</th>
<th>Involving which Sectors?</th>
<th>At which Level(s) should it operate?</th>
<th>How should it be organized to work across Sectors?</th>
</tr>
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<tbody>
<tr>
<td>Independent Assessment of Need Based on the ICF</td>
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<td>One Stop Shop with Cross Sectoral Scope</td>
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Session 4
Monitoring and Evaluation
Monitoring the National Disability Strategy

- National Stakeholders Monitoring Group- chaired by Dept. of An Taoiseach, vice chaired by Chair of NDA

- Key senior officials from government departments, and umbrella bodies representing disability organisations

- Each dept must have provision for monitoring:- examples
  - DSFA- Disability Consultative Forum
  - Dept Enterprise Trade and Employment Consultative Forum
Monitoring the National Disability Strategy

- National Disability Authority
  - Standards
  - Policy development
  - Implementation of Public Sector Quota
  - Monitoring Sectoral Plans
  - Research
  - Statistics
Evaluation and Planning –
The National Disability Databases
Health Research Board objectives:

- Standardised data form completed each year
- Ensure information accurate and comprehensive
- Provides relevant and up-to-date info
- Encourage regional use
- Use by researchers, policy makers and disability service-planners
- Promote disability in Ireland and throughout the world
1995

Planning and development of services to persons with intellectual disability at local and regional levels.

Decision-making in relation to the planning, funding, and management of services for people with an intellectual disability
The NPSDD was established in 2002 to serve as a planning tool for HB’s in identifying service needs and gaps within the services.

Worked on NPSDD in 2003/2004, coded (interview) around 300 people for a number of service providers.
CLIENT DETAILS

- Personal Identification Number
- Name, Address, Telephone Number
- Next of Kin Details
- Date of Birth / Gender
- Health Board Region / Community Services Area
- Type of living accommodation
- Living arrangements

- Underlined - not sent to the Department of Health and Children
- Diagnostic category giving rise to disability
- Use of current services and future service needs
- Medical card / Long Term Illness Card
- Data Protection Act 1988,
- Freedom of Information Act, 1997,
- Clients accessing health board services
- Voluntary agencies, non-statutory agencies and support groups – contacted first by them to get permission
- Master List cannot and will not be used by the health board or any other agency for any purpose other than that stated
- Without consent
Eligibility

- Criterion 1 - have a persistent physical or sensory disability arising from disease, disorder or trauma
- Criterion 2 - in the case of dual disability, where the predominant disability is physical or sensory
- Criterion 3 - less than 66 years of age
- For respondents less than 18 years of age, consent should be obtained from their parents or legal guardians
- Age 7-17 years - parents or legal guardians in the interview
- Or unable to give consent for him/herself
Confidentiality

- Personal Identification Numbers (PINs)
- No identifying information sent to DHC
- **Key-Workers** - data-collectors
- familiar with the client’s circumstances
- contact letters – phone calls
5 different types of information collected:

- Client Details
- Specialised Health and Personal Social Service Usage and Requirements
- Technical Aids and Appliances,
- Details of Disability,
- Administration Details.
In June 2004 there were 19,677 active records
Some HB’s (regions) slower
Not everyone with PSD wants to be coded - is voluntary
will not provide any definitive epidemiological statement on the number of people with a particular type of disability
The most frequently reported type of disability was ‘physical disability only’ (82.6%, 16,246 people), second to this was ‘hearing loss/deafness only’ at 6.8% (1,347)
PHYSICAL AND SENSORY DISABILITY DATABASE FORM 2004/2005
## ADMINISTRATION DETAILS 1

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<tbody>
<tr>
<td>i</td>
<td>Agency returning data form (See Agency Coding List)</td>
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<tr>
<td>ii</td>
<td>Person administering Data Form ____________________________</td>
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<tr>
<td>iii</td>
<td>Is this person the client’s key-worker? (Y/N) ___</td>
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<tr>
<td>iii</td>
<td>If no, name key-worker ________________________________</td>
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<tr>
<td>iv</td>
<td>Health Board Region providing Funding (App. A)</td>
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<td>(Office Use Only)</td>
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<td>v</td>
<td>Health Board Region (of residence) (App. A)</td>
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<tr>
<td>vi</td>
<td>Community Care Area (of residence) (App. B)</td>
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<td>vii</td>
<td>District Electoral Division</td>
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<tr>
<td>viii</td>
<td>Present Service Location</td>
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<td>ix</td>
<td>Convenien Service Location</td>
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<td>x</td>
<td>Is this person on the Intellectual Disability Database? (Y/N/D) ___</td>
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<tr>
<td>xi</td>
<td>Preferred Correspondence Format (App. C) ___</td>
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<tr>
<td>xii</td>
<td>Preferred Language for Correspondence?: (Irish/English) ___</td>
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<tr>
<td>xiii</td>
<td>Preferred method of update?: (Telephone/Personal Visit) ___</td>
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</table>
A. CLIENT DETAILS

1. Personal Identification Number: ___________________ 1 1 1 1 1 1 1 1 1 1 1
2. Surname: ____________________________
3. First name: ____________________________
4. Middle Name: ____________________________
5. Previous Surname: ____________________________
6a. Telephone 1: ____________________________
6b. Telephone 1 (H/W/M): __________
6c. Telephone 2: ____________________________
6d. Telephone 2 (H/W/M): __________
6e. Fax: ____________________________
6f. Email: ____________________________
7. Address (Line 1): ____________________________
8. Address (Line 2): ____________________________
9. Address (Line 3): ____________________________
10. Address (Line 4): ____________________________
11. Address County (App. D): ____________________________
12. Date of Birth: ____________________________
13. Year of Birth: ____________________________
14. Gender (Male / Female): ____________________________
15. Type of Living Accommodation (App. E): ____________________________
16. Living Arrangements (App. F): ____________________________

Next of Kin Details (Q17-25) optional if client is over 18 years of age
17. NK Surname: ____________________________
18. NK First Name: ____________________________
19. NK Address 1 (Line 1): ____________________________
20. NK Address 2 (Line 2): ____________________________
21. NK Address 3 (Line 3): ____________________________
22. NK Address 4 (Line 4): ____________________________
23. NK Address County: ____________________________
24. NK Telephone No.: ____________________________
25. Relationship of Next of Kin: ____________________________
26. Have a primary carer? (Y/N) ____________________________
   (If no, put a line through 27a-27c)
27a. If yes, do they live with you? (Y/N) ____________________________
27b. Relationship of primary carer (App. G) ____________________________
27c. Age Group of Primary Carer (App. H) ____________________________
B. BARRIERS AND CHALLENGES

28. Have any of the following represented a barrier to your participation in age appropriate life activities over the past 12 Months?

28a. The Physical Environment (e.g. difficulties accessing buildings, public footpaths, personal accommodation).

28b. Services and Support (e.g. difficulties accessing Personal Assistant, Home Help, Physiotherapy).

28c. Access to Information (e.g. about entitlements/services or nature of condition).

28d. People’s Attitudes.

28e. Transport (e.g. difficulty gaining accessible transport).


28g. Income.

28h. Climate / Weather.

29. Do you feel that personal characteristics, other than your disability (e.g. Age, Gender, Race, Religion) also affected your participation?
C. PARTICIPATION  
Section C consists of 2 parts: Part (A) and Part (B)

30. (A) To what extent has your participation in the following areas been restricted over the past 12 months?

30a. Education and Training

30b. Employment or Job Seeking

30c. Community Life (e.g. civic/political activity, volunteering, neighbourhood watch, residents assoc)

30d. Family Life

30e. Socialising (e.g. meeting friends)

30f. Shopping

30g. Living with dignity

30h. Leisure/Cultural Activities

30i. Sports or Physical Recreation

30j. Religion

30k. GENERAL HEALTH SERVICES

30k(i). Hospital Services

30k(ii). Mental Health Services

30k(iii). Community Based Health Services (e.g. GPS, nurses, dentists)

30k(iv). Other: 

(B) Where you have experienced restrictions, to what extent did it bother you?

Not Applicable  Not At All  Mildly  Moderately  Severely  Completely

AND  Not At All  A Little  A Lot

5
# D1 Therapeutic Intervention and Rehabilitation Services

<table>
<thead>
<tr>
<th>Currently Receiving</th>
<th>Agency/Agencies Providing Service</th>
<th>Required</th>
<th>Year Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Yes/No)</td>
<td>(See Agency Coding List)</td>
<td>(See Required Coding Box)</td>
<td></td>
</tr>
<tr>
<td>33. Speech/Language Therapist</td>
<td>33a. I ______ I .................</td>
<td>33b. I ______ I .................</td>
<td>33c. I ______</td>
</tr>
<tr>
<td>34. Chiropractor</td>
<td>34a. I ______ I .................</td>
<td>34b. I ______ I .................</td>
<td>34c. I ______</td>
</tr>
<tr>
<td>38. Continence Advisor</td>
<td>38a. I ______ I .................</td>
<td>38b. I ______ I .................</td>
<td>38c. I ______</td>
</tr>
<tr>
<td>41. Counsellor</td>
<td>41a. I ______ I .................</td>
<td>41b. I ______ I .................</td>
<td>41c. I ______</td>
</tr>
<tr>
<td>42. Play Therapist</td>
<td>42a. I ______ I .................</td>
<td>42b. I ______ I .................</td>
<td>42c. I ______</td>
</tr>
<tr>
<td>44. Complementary Therapy</td>
<td>44a. I ______ I .................</td>
<td>44b. I ______ I .................</td>
<td>44c. I ______</td>
</tr>
<tr>
<td>46. Mobility/Rehabilitation worker for the blind</td>
<td>46a. I ______ I .................</td>
<td>46b. I ______ I .................</td>
<td>46c. I ______</td>
</tr>
<tr>
<td>50. Tinnitus Retraining</td>
<td>50a. I ______ I .................</td>
<td>50b. I ______ I .................</td>
<td>50c. I ______</td>
</tr>
</tbody>
</table>

**Required Coding Box:** 1. Not required 2. Assessment required 3. Required: Assessed and on Waiting List 4. Required: Assessed but unable to take up 5. Assessed as requiring enhanced service 6. Assessment required for enhanced service.
<table>
<thead>
<tr>
<th></th>
<th>D2 PERSONAL ASSISTANCE AND SUPPORT SERVICES</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>51</td>
<td>Personal Assistant</td>
<td>Yes</td>
<td>51a.</td>
<td></td>
<td></td>
<td></td>
<td>51d.</td>
</tr>
<tr>
<td>52</td>
<td>Home Help</td>
<td>Yes</td>
<td>52a.</td>
<td></td>
<td></td>
<td></td>
<td>52d.</td>
</tr>
<tr>
<td>53</td>
<td>Homecare Assistant</td>
<td>Yes</td>
<td>53a.</td>
<td></td>
<td></td>
<td></td>
<td>53d.</td>
</tr>
<tr>
<td>54</td>
<td>Twilight Nurse</td>
<td>Yes</td>
<td>54a.</td>
<td></td>
<td></td>
<td></td>
<td>54d.</td>
</tr>
<tr>
<td>55</td>
<td>Driving Instructor (Adapted Car)</td>
<td>Yes</td>
<td>55a.</td>
<td></td>
<td></td>
<td></td>
<td>55d.</td>
</tr>
<tr>
<td>56</td>
<td>Communication Assistant</td>
<td>Yes</td>
<td>56a.</td>
<td></td>
<td></td>
<td></td>
<td>56d.</td>
</tr>
<tr>
<td>57</td>
<td>Peer Support</td>
<td>Yes</td>
<td>57a.</td>
<td></td>
<td></td>
<td></td>
<td>57d.</td>
</tr>
<tr>
<td>58</td>
<td>Sign Language Interpreter</td>
<td>Yes</td>
<td>58a.</td>
<td></td>
<td></td>
<td></td>
<td>58d.</td>
</tr>
<tr>
<td>59</td>
<td>Speed Text</td>
<td>Yes</td>
<td>59a.</td>
<td></td>
<td></td>
<td></td>
<td>59d.</td>
</tr>
<tr>
<td>60</td>
<td>Lip Speaking</td>
<td>Yes</td>
<td>60a.</td>
<td></td>
<td></td>
<td></td>
<td>60d.</td>
</tr>
<tr>
<td>61</td>
<td>Sign Language Tuition</td>
<td>Yes</td>
<td>61a.</td>
<td></td>
<td></td>
<td></td>
<td>61d.</td>
</tr>
<tr>
<td>63</td>
<td>Personal Reader</td>
<td>Yes</td>
<td>63a.</td>
<td></td>
<td></td>
<td></td>
<td>63d.</td>
</tr>
<tr>
<td>64</td>
<td>Tape (Library Support)</td>
<td>Yes</td>
<td>64a.</td>
<td></td>
<td></td>
<td></td>
<td>64d.</td>
</tr>
<tr>
<td>65</td>
<td>Braille (Library Support)</td>
<td>Yes</td>
<td>65a.</td>
<td></td>
<td></td>
<td></td>
<td>65d.</td>
</tr>
<tr>
<td>66</td>
<td>Large Print (Library Support)</td>
<td>Yes</td>
<td>66a.</td>
<td></td>
<td></td>
<td></td>
<td>66d.</td>
</tr>
<tr>
<td>67</td>
<td>Sighted Guide</td>
<td>Yes</td>
<td>67a.</td>
<td></td>
<td></td>
<td></td>
<td>67d.</td>
</tr>
</tbody>
</table>

**Required Coding Box:**
1. Not required
2. Assessment required
3. Required: Assessed and on Waiting List
4. Required: Assessed but unable to take up
5. Assessed as requiring enhanced service
6. Assessment required for enhanced service.
<table>
<thead>
<tr>
<th>D3</th>
<th>RESPITE SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>68</td>
<td>Planned Residential Respite with high support</td>
</tr>
<tr>
<td>69</td>
<td>Planned Residential Respite with low support</td>
</tr>
<tr>
<td>70</td>
<td>Planned home-based respite</td>
</tr>
<tr>
<td>/1</td>
<td>Summer Camps (Residential)</td>
</tr>
<tr>
<td>72</td>
<td>Summer Camps (Day)</td>
</tr>
<tr>
<td>73</td>
<td>Breakaway and Befriending Schemes</td>
</tr>
<tr>
<td>74</td>
<td>Holiday respite placement</td>
</tr>
</tbody>
</table>

**Were the following respite services used in the past 12 months?**

<table>
<thead>
<tr>
<th>(Yes/No)</th>
<th>Approximate number of days used in the past 12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>75</td>
<td>Emergency residential respite with low support</td>
</tr>
<tr>
<td>76</td>
<td>Emergency residential respite with high support</td>
</tr>
<tr>
<td>77</td>
<td>Emergency home-based respite</td>
</tr>
</tbody>
</table>

**Required Coding Box:**
1. Not required
2. Assessment required
3. Required: Assessed and on Waiting List
4. Required: Assessed but unable to take up
5. Assessed as requiring enhanced service
6. Assessment required for enhanced service.
### D4. DAY SERVICES (ACTIVITIES)

<table>
<thead>
<tr>
<th>Current Day Services (Activities) (App. I)</th>
<th>Agency (See Agency Code List)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8a.</td>
<td>__</td>
</tr>
<tr>
<td>79.</td>
<td>__</td>
</tr>
<tr>
<td>80.</td>
<td>__</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Required Day Services (Activities) (App. I)</th>
<th>Year Required</th>
<th>Reason for Duplication</th>
</tr>
</thead>
<tbody>
<tr>
<td>81.</td>
<td>__</td>
<td>__</td>
</tr>
<tr>
<td>82.</td>
<td>__</td>
<td>__</td>
</tr>
<tr>
<td>83.</td>
<td>__</td>
<td>__</td>
</tr>
</tbody>
</table>

#### Contingency Day Services (Activities) (App. I)

| 84. | __ | __ |
| 85. | __ | __ |

**Reason for Duplication:** Why is this service in both the current and required sections?

1. Not Applicable
2. Different location required
3. More frequent service required
4. Move to different agency
5. Other

### D5. RESIDENTIAL SERVICE

<table>
<thead>
<tr>
<th>Current Residential Service (App. J)</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>86.</td>
<td>__</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Required Residential Service (App. K)</th>
<th>Year Required</th>
<th>Reason for Duplication</th>
</tr>
</thead>
<tbody>
<tr>
<td>87.</td>
<td>__</td>
<td>__</td>
</tr>
<tr>
<td>87b.</td>
<td>__</td>
<td></td>
</tr>
</tbody>
</table>

#### Contingency Residential Services (Activities) (App. K)

| 88. | __ | __ | __ | __ |
### E. Technical Aids and Appliances

<table>
<thead>
<tr>
<th>Current Technical Aids and Appliances</th>
<th>Required Technical Aids and Appliances</th>
<th>Assessed (Y/N)</th>
<th>Year to be Assessed</th>
</tr>
</thead>
<tbody>
<tr>
<td>(See Technical Aids and Appliances Coding list)</td>
<td>(See Technical Aids and Appliances Coding list)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>89.</td>
<td>96.</td>
<td>95a.</td>
<td>96b.</td>
</tr>
<tr>
<td>90.</td>
<td>97.</td>
<td>97a.</td>
<td>97b.</td>
</tr>
<tr>
<td>91.</td>
<td>98.</td>
<td>98a.</td>
<td>98b.</td>
</tr>
<tr>
<td>93.</td>
<td>100.</td>
<td>100a.</td>
<td>100b.</td>
</tr>
<tr>
<td>94.</td>
<td>101.</td>
<td>101a.</td>
<td>101b.</td>
</tr>
<tr>
<td>95.</td>
<td>102.</td>
<td>102a.</td>
<td>102b.</td>
</tr>
</tbody>
</table>

### F. Details of Disability

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

104. Diagnostic category 1 | ___ ___ ___ ___ |

105. Diagnostic category 2 | ___ ___ ___ ___ |

106. Medical Card (Yes/No) | ___ |

107. Long term illness card (Yes/No) | ___ |

Diagnostic Category 1 should be filled with the main diagnostic category giving rise to the physical or sensory disability that results in the use or requirement of services listed.
G : WHODAS II

This section asks about **difficulties due to your physical/sensory disability**. Think back over the last 30 days and answer these questions, thinking about how much difficulty you had doing the following activities. For each question, please provide only one response.

108. In the last 30 days, how much difficulty did you have in doing the following activities

<table>
<thead>
<tr>
<th>Question</th>
<th>None</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
<th>Extremes/ Cannot do</th>
</tr>
</thead>
<tbody>
<tr>
<td>108a. Concentrating on doing something for ten minutes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108b. Learning a new task (e.g., learning how to get to a new place?)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108c. Standing for long periods such as 30 minutes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108d. Walking a long distance such as a kilometre (or equivalent)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108e. Washing your whole body?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108f. Getting dressed?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108g. Dealing with people you do not know?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108h. Maintaining a friendship?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108i. Taking care of your household responsibilities?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108j. Your day-to-day work/school?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108k. How much of a problem did you have in joining in community activities (e.g., festivities, religious or other activities) in the same way as anyone else can?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108l. How much have you been emotionally affected by your physical/sensory disability?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**G: WHODAS II CONTINUED**

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>108m</td>
<td>Overall how much did these difficulties interfere with your life?</td>
<td>Not at all</td>
<td>Mildly</td>
<td>Moderately</td>
<td>Severely</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108n</td>
<td>Overall, in the past 30 days, how many days were these difficulties present?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108o</td>
<td>In the past 30 days, for how many days were you totally unable to carry out your usual activities or work because of your physical/sensory disability?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>108p</td>
<td>In the past 30 days, not counting the days that you were totally unable, for how many days did you cut back or reduce your usual activities or work because of your physical/sensory disability?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ADMINISTRATION DETAILS 2**

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>xiv</td>
<td>Date Consent Given</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>xv</td>
<td>Date of Completion/Update</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>xvi</td>
<td>Planned Review Date</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>xvii</td>
<td>Date of Removal</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>xviii</td>
<td>Reason for Removal (App L)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

87
Preliminary Results

5191 Respondents completed the MAP (June 2006)

- Physical 72.8%
- Hearing Loss/Deafness 4.1%
- Visual 3.1%
- Primary Speech & Language 0.4%
- Multiple Disabilities 19.6%
Participation Areas

- Education and training
- Employment or job seeking
- Community life
- Family life
- Socialising
- Shopping
- Living with dignity
- Leisure/cultural activities
- Sports or physical recreation
- Religion
Some relevant MAP results in Civic, Cultural and Social Participation:

- Proportion of respondents bothered by participation restriction

- Community Life 24.5%
- Family Life 38.3%
- Socialising 42.1%
- Shopping 41.5%
- Leisure/Cultural Activities 40.0%
- Sports or Physical Recreation 41.8%
NPSDD Measure of Activity and Participation (MAP)

- Barriers to Participation identified by Respondents

- Climate/Weather 45.0%
- Physical Environment 44.9%
- Income 36.4%
- Transport 29.1%
- Access to Information 27.1%
- People’s Attitudes 24.2%
- Laws, Official Regulations & Entitlements 23.4%
- Services & Supports 21.8%
NPSDD Measure of Activity and Participation (MAP)

An Illustration of the use of the MAP to draw conclusions about services

<table>
<thead>
<tr>
<th>Participation and use of personal assistance services</th>
<th>% of people who stated that they did not experience participation restriction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Those currently accessing PA services</td>
</tr>
<tr>
<td>Community Life</td>
<td>41.0</td>
</tr>
<tr>
<td>Socialising</td>
<td>34.2</td>
</tr>
<tr>
<td>Shopping</td>
<td>32.1</td>
</tr>
</tbody>
</table>
For each of the following strategic elements specify:

- What indicators should be used to measure effectiveness?
- What methods of measurement should be used?
- What targets should be set for 2025

Elements:

- Performance of the Coordinating Agency
- Performance of the One Stop Shop
- Impact of the Individual Assessment of Need
- Impact of the Case Management Approach
- Impact of Quality Standards