Disability Support Services

Tier Three Service Specification

Out-of-family Residential Support Services for Children and Young People with a Disability

1. Introduction

This Tier Three service specification provides the overarching service specification for all out-of-family residential support services (the Services) for children funded by Disability Support Services (DSS).

This specification must be read in conjunction with the DSS Tier One Service Specification, which details requirements common to all services funded by DSS and the Tier Two specification ‘Community Residential Support Services’.

This Tier Three specification sets out service requirements which modify or are in addition to those contained in the Tier Two specification.

2. Service Definition

The Ministry of Health (the Ministry) purchases out-of-family residential services for children and young people with disabilities from seven to sixteen years of age who have continuous support needs and require out-of-family residential services that are long term in nature.

The Services include provision of 24-hour support at levels necessary for children and young people to have safe and satisfying home lives. This includes 24-hour responsibility for children or young people who may need to remain home during the day for any reason. Suitable support will be provided through a combination of services determined by the Needs Assessment and Service Coordination (NASC) organisation following an individual needs assessment.

2.1 Key Terms

2.1.1 The following are definitions of additional key terms used in this Tier Three service specification:

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1 Under certain guardianship arrangements as notified by the Ministry the age range may extend to 20 years. However, under typical circumstances young people will receive adult services from 17 years of age.
### Term | Definition
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**Biopsychosocial perspective** | A model that recognises the interaction between the Biological, Psychological and Social functioning domains. This model views all three domains as inseparable in their contribution to a Person’s wellbeing.

**Child / Children** | Means a person under the age of 14 years.

**CYFs** | Means the Ministry of Social Development Department of Child, Youth and Family services.

**CYPF Act** | Means the Children, Young Persons, and Their Families Act 1989.

**Out-of-family Care Agreement** | Means the formal record of the decisions reached and plans developed in a Family Group Conference for the child or young person and their family/whānau, including the assessed needs, the planned outcomes, the interventions and strategies to be used to implement the plan, and the timeline required to achieve the jointly agreed upon outcomes.

**People/Persons** | For the purposes of this specification the terms People or Person defined in the Tier Two specification may be read as interchangeable with ‘Child’ or ‘Young person’ as appropriate.

**Young person** | Means a person over the age of 14 years but under 17 years; but does not include any person who is or has been married.

### 3. **Service Objectives**

#### 3.1 **General**

**3.1.1** DSS acknowledges the important role of the family/whānau and foster carers in caring for children and young people with disabilities and accepts that children and young people are best supported within their own families and whānau. Therefore, DSS funded and contracted residential services are only part of a range of supports available to children and young people.

**3.1.2** In implementing this service specification, the Provider will give effect to the principles in the UN Convention on the Rights of the Child, the Children, Young Persons and their Families Act 1989, Vulnerable Children Act 2014, the Care of Children Act 2004, the New Zealand Disability Strategy. In particular, the Provider will ensure that:

a. The rights of children and young people are recognised and that they are not diminished by the presence of a disability

b. The best interests of the child or young person are the primary concern
c. The planning process for an out-of-family placement gives the child or young person an independent voice to represent their interests.

d. The planning of an out-of-family placement fully considers the maintenance of the child or young person’s involvement in education and other aspects of community life with as little disruption as possible.

3.1.3 The Provider will:

a. Satisfy the requirements of the conditions of section 396(3) of the CYPF Act 1989 and be approved by CYF\(^2\) to provide residential services to children and young people.

b. Protect and promote the rights of the child by ensuring that the child has an advocate or access to regular and structured child advocacy supports.

c. Enhance each child or young person’s participation, interdependence, and social functioning.

d. Promote integration of each child or young person into school and community life; in accordance with each child or young person’s Family Group Conference (FGC) approved Out-of-family Care Agreement\(^3\).

e. Actively support all efforts to reunify the family or to establish foster care.

3.1.4 The Ministry and CYF will establish each out-of-family placement following comprehensive inter-agency service coordination. The NASC will support the FGC Coordinator to develop an integrated package of supports for each child or young person who requires an out-of-family residential service.

3.2 Objectives applying to service delivery

3.2.1 In addition to the requirements of the Tier Two specification the Provider will:

a. Provide age appropriate residential services to support eligible children or young people to have positive experiences of full time care in home like environments that emulate, as closely as possible, the typical experiences of their peers who live in ordinary homes.

b. Enable a child or young person’s regular and quality contact with family / whānau, to enable them to maintain stable relationships with their family and whānau.

\(^2\) Refer to conditions of approval for child and family support services and community services under s396(3) and s403(1) of the Children, Young Persons and Their Families Act 1989.

\(^3\) Out-of-family Care Agreements are confirmed at a FGC and will be the basis from which a Provider develops an Individual Plan (IP)
c. Ensure that all children and young people have a say in decisions being made about them.

d. Work if requested with CYF and the designated NASC towards achieving the lifestyle outcomes described in each child and young person’s Out-of-family Care Agreement as follows:

- Return to the care of parents within an appropriate time-frame taking into account the circumstances of each child or young person and their family; or
- Permanent placement with extended family within an appropriate time-frame taking into account the circumstances of each child and young person; or
- Permanent placement with non-family Caregivers within an appropriate time-frame taking into account the circumstances of each child and young person; or
- Planned independence with appropriate support taking into account the circumstances of each child and young person.

4. **Service Performance Outcome Measures**

4.1 Performance Measures form part of the Results Based Accountability (RBA) Framework and specify the key service areas the Purchasing Agency and the Provider will monitor to help assess service delivery.

4.2 Performance measures and reporting requirements are detailed in Appendix 3 of the Outcome Agreement. It is anticipated the performance measures will evolve over time to reflect Ministry and Purchasing Agency priorities.

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<thead>
<tr>
<th>How much</th>
<th>How well</th>
<th>Better off</th>
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<tbody>
<tr>
<td>1. # of personal plans completed and signed off by the child or young person within three months of entry into the service</td>
<td>% of personal plans completed and signed off by the child or young person within three months of entry into the service</td>
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<td>2. # of personal plans reviewed and signed off by the child or young person at least once every 12 months</td>
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<td>3.</td>
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4. % of frontline staff who have obtained the Level 2 National/NZ Certificate in Health, Disability, and Aged Support

5. % staff turnover

6. #/% of children / young people who have active relationships with their whānau / family / guardians

7. % children / young people accessing education

5. **Eligibility**

Support services described in this specification are for children and young people with disabilities with Autism Spectrum Disorder, or intellectual, physical or sensory disability who have continuous support needs and require out-of-family residential services and who have been referred to the Provider for service by a NASC. It also covers services for children and young people experiencing mental illness when they also have an Autism Spectrum Disorder, or intellectual, physical or sensory disability if referred by a NASC.

6. **Service / Entry Criteria**

6.1 **Access**

a. Access to out-of-family residential services is determined by the NASC following an individual needs assessment process.

b. The Services will be available only to children and young people who have needs that would be best met in a residential service as determined by a FGC with statutory authority under the CYPF Act. The FGC will have demonstrated that every alternative support option has been unable to deliver positive outcomes for the child or young person; while also supporting their parents / family / whānau / carers to provide ongoing care and support.

c. For a child or young person to use residential services is an extreme step. Therefore, planning will only begin when family/whānau and the
relevant agencies reach consensus that all other options are less appropriate than out-of-family residential services and there are no alternative arrangements that can be established for the child or young person to live with either their parents, family / whānau or foster carers.

d. Each placement decision must be confirmed by an FGC to ensure that CYF and NASC staff have co-ordinated packages of services that represent best practice in line with each agency’s responsibilities.

e. The Ministry requires the referrer to complete the 'Ministry of Health Section 1415 application form’ and obtain pre-approval before referring any person for service. Pre-approval will only be granted when it has been demonstrated that all other possible options have been explored and that no other option is likely to deliver positive outcomes for the child or young person while also supporting their parents, family / whānau, or foster parents to provide ongoing care and support.

f. The Ministry expects that all possible steps will be taken to ensure that children or young people live in close proximity to their family / whānau.

6.1 Residential Support Subsidy

The Residential Support Subsidy does not apply to children and young people under this Tier Three service specification.

6.2 Access Exclusions

6.2.1 Refer to the Tier Two specification.

6.3 Lead funder

6.3.1 When the Ministry is the primary funder of support services for a child or young person it will usually assume the lead funder role. If the Ministry is acting as the primary funder, a NASC will coordinate access to the Services. However CYF will assume the lead funder role whenever care and/or protection issues are present or under investigation and in all cases where care and/or protection matters remain.

7. Service Components

7.1 When reading both the Tier Two and Tier Three specifications, in all instances where the Provider is required to ensure inclusion, involvement or approval (or similar requirement) of family/ whānau/ guardian/ advocate or others, the Provider must take into account any directions of CYF or the

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4 Some or all of the following: NASC, Ministry of Health, Ministry of Education and CYF (note that CYF is responsible for care and/or protection and youth justice services to all children and young people).

5 Child Young Persons and their Families Act 1989
courts which may legally restrict or limit in any way a person’s involvement in respect of the child or young person.

7.2 The Provider must check to ensure if there are any additional guardianship orders that have been issued by the court under Section 101 of the Children, Young Persons, and their Families Act 1989.

7.3 The requirement for the Provider to support the Person to make their own decisions does not interfere with a parent’s or legal guardian’s right to make decisions on matters affecting the child or young person. However, the Provider must ensure the views of the child or young person are respected appropriate to the child's level of maturity.

7.4 Personal Planning

7.4.1 In addition to the requirements of Tier Two specification the Provider will ensure:

a. Development of a Personal Plan with the child or young person in accordance with the requirements of the Out-of-family Care Agreement confirmed in the FGC6.

b. Development of the Personal Plan jointly with other relevant support service Providers and in close consultation with the child or young person and their family / whānau / guardian / advocate.

c. Development of a draft Personal Plan within six weeks of entry to the service. Each draft Personal Plan must be confirmed as final within three months of the person entering service. Copies of Personal Plans must be provided to the NASC within seven days of completion.

d. Review and update of the Personal Plan when the needs of the Person change, at the request of the Person or at least 6-monthly.

e. That staff work with the child or young person in the context of their naturally occurring support networks. These networks will include family / whānau, foster parents, staff / carers (including those from other support services), advocates, and friends.

7.4.2 A Personal Plan should cover all aspects of the child or young person’s support needs describing how agreed outcomes will be measured. The following items must be included in a Personal Plan:

a. Evidence of planning for maintenance of the child or young person's relationships with family / whānau, advocates and friends.

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6 Any Out-of-family Care Agreement prepared outside of a FGC would have no statutory authority and therefore cannot be the basis from which to develop a Personal Plan.
b. How implementation will comply with any special or general directions of CYF in respect of any child or young person who is in guardianship or is a ward of the state.

c. Monitoring and support to promote optimal developmental progression. This should be from a comprehensive Biopsychosocial perspective rather than solely considering developmental milestones.

d. Short description of the Person’s identified needs with approved support strategies.

7.5 **Transition planning**

7.5.1 As part of the planning process the Provider will develop a transition plan.

7.5.2 Transition planning for exit from the service will commence before the child or young person turns 16 and will be completed at least six months before the child or young person turns 17. Transition planning may be completed at a much earlier stage to achieve the lifestyle outcomes described in a child and young person’s Out-of-family Care Agreement. Transition plans will be reviewed at least every six months until the person exits the service.

7.5.3 Transition may involve:

   a. Return to the care of parents
   
   b. Permanent placement with extended family/whanau
   
   c. Planned independence with appropriate support
   
   d. Transfer to adult residential services.

7.5.4 The Provider, NASC and CYF staff will meet to develop a transition plan for each child or young person who will cease to be involved with CYF but who will have an ongoing need for disability support services.

7.5.5 Transition planning should take into account any temporary absences from the service including visits home or to family/whānau.

7.5.6 Transition planning should also cover:

   a. Any temporary absences from the service including visits home or to family/whānau
   
   b. Transitions from school to work.

7.6 **Primary Support Worker**

7.6.1 In addition to the requirements of Tier Two specification the Provider will ensure that:

   a. The identified Primary Support Worker takes overall responsibility for coordinating individual daily activities and providing written feedback to
the NASC outlining progress towards agreed outcomes at least every three months.

7.7 Supervision, assistance and support

7.7.1 In addition to the requirements of the Tier Two specification the Provider will ensure that:

a. Daily logs are kept on progress/intervention and activities of the child or young person including administration of any medication, and shared as appropriate with the relevant NASC personnel, family / whānau and guardians.

b. The child or young person’s daily programme reflects their Out-of-family Care Agreement and cultural needs.

c. The child / young person has access to a range of appropriate activities, at home and outside of home when they are not attending school or a structure day programme.

7.8 Access to community services

7.8.1 In addition to the requirements of Tier Two specification the Provider will ensure the children / young persons have:

a. Access to free dental care for school age children and young people.

b. Access to psychological support and relationship development education including, but not limited to: counselling, health education, and social skill development.

c. Access to transport and support is made available to attend church services or other religious meetings as requested.

d. Access to Transport to attend services as set out in clause 6.4 j and k in the Tier Two specification is provided.

e. The right of children and young people to receive an education is upheld.

7.9 Personal Financial Management

7.9.1 In addition to the requirements of the Tier Two specification the Provider will:

a. Establish a clear and auditable system for ensuring children or young people and their family / whānau or guardians contribute to the management of personal finances (as far as is possible);

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When implementing an Out-of-family Care Agreement with the approval of the child or young person’s legal guardian.
b. Ensure that this audit system is understood by the child or young person and/or their family / whānau / guardian or advocate and staff involved.

7.10 Communication

7.10.1 In addition to the requirements of the Tier Two specification the Provider will:

a. Be aware that disabled young people speak of their difficulty when interacting with the many different professionals in their lives. Therefore, it is important that the number of contacts with professionals is kept to a minimum and that each person's role is understood by the child or young person.

7.11 Involvement of the Child / Young Person and their Family / Whānau and Court Appointed Guardians

7.11.1 In addition to the requirements of the Tier Two specification the Provider will:

a. Ensure information is shared with family / whānau or foster parents, as appropriate, to enable them to be well prepared to support the child or young person when visiting or in preparation for family reunification.

b. Strengthen relationships and communicate effectively in crisis situations with: family, whānau, guardians, advocates, neighbours and other household members including staff.

7.12 Staffing

7.12.1 In addition to the requirements of the Tier Two specification the Provider will ensure that:

a. Staff recruitment and supervision emphasises the safety of the child or young person.

b. Staff rosters provide a high level of safety when staff members are carrying out intimate personal cares.

c. Staff are aware of the Provider’s policy and procedures if abuse of a child is evident or suspected.

d. Staff are safe when working with children with challenging behaviours.

e. There is evidence that the entire staff has been trained in children's rights and child advocacy.

f. All staff members will be appropriately trained in child and adolescent care, and will have access to specialist consultation and advice as needed.

g. There is 24-hour back up and that adequate relief is available for staff.
h. Staff training comprehensively focuses on the needs of each child or young person supported. Additionally training must include information about:

- Active Support\(^8\) strategies
- Attachment
- Care and/or protection awareness training
- Child and adolescent growth and development
- Children’s rights and children’s advocacy
- Confidentiality/privacy issues
- Cultural support strategies
- Disability awareness training specific to the child or young person
- Grief and loss
- Growth and development during puberty and sexual health
- Health promotion strategies including child and adolescent mental health
- Physical care e.g. using equipment such as hoists
- Social inclusion including facilitation of friendships and community participation
- Stress/family relationships
- Transition planning.

i. The Provider will actively encourage, promote and develop diversity of ethnicity at all levels within the workforce that reflects the ethnicity of the children and young people as closely as possible.

7.13 Home and settings

7.13.1 In addition to the requirements of the Tier Two specification the Provider will ensure that:

a. The location of the home allows access to community facilities such as marae, leisure activities and opportunities for socialisation.

b. Each child or young person has exclusive private use of a bedroom without exception.

c. Houses must not accommodate more than four residents unless the Ministry has granted an exemption from this requirement.

d. Groupings of housemates will reflect the assessed needs of each person and personal compatibility including the need for minimal environmental disturbances where appropriate.

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\(^8\) Active support is an approach designed to improve the quality of life of people with severe disabilities by enabling them to participate as fully as possible in daily activities (Sanderson, Jones and Brown 2002 in Tizard Learning Disability Review, 7, volume 1)
e. Accommodation will aim for stability and permanence of a home like environment in terms of the usual supports, routines, roles and responsibilities commonly found in New Zealand homes. These supports are expected to produce and sustain an environment that will be positive and affirming of children and young people by demonstrating age appropriate activities/outings and positive interactions.

f. The compatibility, including age and gender considerations, of children and young people who will be housemates.

g. Adequate meals are provided that meet generally accepted principles of good nutrition and cater to the needs of children or young people on special diets including dietary supplements and equipment for special requirements for eating / feeding.

7.14 Health, medicine and first aid

7.14.1 In addition to the requirements of the Tier Two specification the Provider will ensure that:

a. The child / young person is enrolled with a Public Health Organisation to access personal health care

b. Medical services and pharmaceutical supplies are available as required\(^9\).

7.15 Risk Management

7.15.1 In addition to the requirements of the Tier Two specification the Provider will ensure that:

a. Where there is a suspected case of child abuse, it is the Provider’s responsibility to notify a CYF social worker or member of the Police without delay. Any transfer to an alternative service Provider during an investigation into abuse will be coordinated by CYF as the agency with statutory authority for care and protection

b. There are documented policies/protocols in place for the following aspects of service delivery:

- Ensuring the safety of children and young people from any form of abuse. There will be times when responsibility transfers to another funded provider e.g. school or day programme. Such transfers must be clearly documented and agreed in advance.

- Compliance with applicable NZ Standards

\(^9\) The responsibility for purchasing medical services and pharmaceutical supplies will be confirmed prior to the entering into an Out-of-family Care Agreement. The Ministry May not hold funding or purchasing responsibility for this.
- Managing risk arising from inappropriate sharing of the residence e.g. compatibility, gender, aged, behaviour
- Providing staff with relevant training in child protection and the Provider’s policy / procedures for dealing with situations where child abuse is either observed or suspected.

7.16 **Supported Decision Making**

7.16.1 In addition to the requirements of the Tier Two specification the Provider will ensure that:

a. While children do not have the same recognised legal capacity as adults, the child / young person still has the right to express their views freely, and the Provider will give due weight to the child / young person’s views in accordance with the age and maturity of the child.

8 **Exit Criteria**

8.1 **Voluntary Exit**

8.1.1 Refer Tier Two specification.

8.2 **Death in Service**

8.2.1 Refer to the Tier Two specification.

8.2.2 In addition to the Tier two requirements the Provider will notify the NZ Police following on the death of any child or young person in the Services.

8.3 **Involuntary exit**

8.3.1 Refer to the Tier Two specification.

8.4 **Moving homes**

8.4.1 In addition to the requirements of the Tier Two specification the Provider will ensure that NASC, and where appropriate CYF staff, must be involved in decisions where a child or young person is changing Providers, service type or region and that the child or young person is not moved from their existing home unless:

- Requested by the child or young person, their family / whānau / guardian and or advocate (if appropriate), or
- Prior to being moved, the child or young person has been assessed by the NASC with the involvement of any appropriate specialist support services, and
• The review of an existing Out-of-family Care Agreement by a Family Group Conference recommends moving to a new house.

8.5 Admission to a Specialist Service

8.5.1 In addition to the requirements of the Tier Two specification the Provider will ensure that where a child or young person requires admission to a mental health setting or specialist Provider, the arrangement will involve input from a relevant specialist e.g. Psychiatrist, Behaviour Support team, or Physician and the relevant NASC must be involved to assess change in the child or young person’s disability needs even if an acute admission is necessary.

9 Guidelines, Policies and Legislation

9.1 Legislation

9.1.1 In addition to the requirements of the Tier Two specification the Provider will:

a. Have satisfied the requirements of section 396(3) of the CYPF Act, 1989 and have been approved by CYF\(^{10}\) to provide residential services to children and young people.

b. Ensure no agreement is made under Section 141 of the CYPF Act 1989 without a certificate issued by the Ministry of Health.

c. Ensure compliance with the Vulnerable Children’s Act 2014.

9.2 Policies

9.2.1 Refer to the Tier Two specification.

9.3 Guidelines, frameworks and research

9.3.1 In addition to the requirements of the Tier Two specification the Provider will ensure that:

a. Children or young people are involved in the on-going evaluation for the improvement of the service.

b. Consumer satisfaction surveys in relation to the service are conducted annually. These should seek feedback from the child / young person separately from the family / whānau.

9.3.2 CYF and the Ministry of Health have a memorandum of understanding (MoU) between them. The MoU relates to disabled children and young people who meet the eligibility criteria for health and disability services and

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\(^{10}\) Refer to standards of approval for child and family support services and community services under s396(3) and s403(1) of the Children, Young Persons and Their Families Act 1989.
who are subject to Part Two of the Children, Young Persons, and Their Families Act 1989 (the CYPF Act).

9.3.3 There is a guideline that supports the principles outlined in the MoU. It can be accessed on the following web-site:


10 Linkages

10.1 In addition to the requirements of the Tier Two specification the Provider will:

a. Work together and establish effective relationships with other child and adolescent support agencies to achieve the best outcomes for the child or young person.

b. Discuss, as appropriate, any concerns about an individual child’s safety with NASC and CYF.

c. Demonstrate and maintain effective linkages with the following key agencies or Providers where appropriate:

- District Health Board Community Adolescent and Family Services
- Community Liaison Teams
- CYF contracted Providers such as counsellors
- CYF Care and Protection Coordinator
- Disability Information Advisory Services (DIAS)
- Dual diagnosis services
- High and Complex Needs Unit
- Health and Disability Commission Advocates, the Human Rights Commission and the Office of the Children's Commissioner
- Māori primary and community care services
- Māori and Pacific organisations as appropriate
- Ministry of Education funded services including Schools and Special education Providers
- Other residential services for children and young people including respite Providers
- Sexuality education services
- Tertiary Education Commission funded services
- Transportation services e.g. Total Mobility, to recreational and/or day activities etc
- Youth law Tinorangatiratanga Taitamariki.

10.2 Documentary evidence of such linkages must be made available to the Ministry on request. Where children and young people are receiving services from other agencies, the service Provider will participate in
intersectoral collaboration and co-ordination initiatives with these agencies e.g. specialist services.

10.3 Equipment Services

10.3.1 Refer to the Tier Two specification.

10.4 Behaviour Support

10.4.1 Refer to the Tier Two specification.

11 Excluded from purchase price

11.1 The purchase of items listed below is not the responsibility of the Ministry, and the Provider is required to ensure that responsibility for provision of these for the child / young person is documented in the Out-of-family Care Agreement:

a. Personal supply of appropriate clothing
b. Adequate personal pocket money
c. Personal items, such as toiletries, haircuts, minor stationery, non-prescription medicines
d. Fees and purchase of equipment for out-of-school recreational activities
e. Access to family
f. Transport to school or day services
g. School fees, school resources e.g. test books, school stationery, school trips, school camps, school sporting equipment and clothing
h. Telecommunications costs.

12 Complaints Resolution

12.1 In addition to the requirements of the Tier Two specification the Provider will ensure that:

a. There is a forum (facilitated by an advocate or external person) to resolve any complaints and to provide an opportunity for a person to air any grievances or issues involving the services provided to the child / young person.

13 Purchase Units
13.1 Purchase Units are defined in the joint DHB and Ministry of Health’s Nationwide Service Framework Purchase Unit Data Dictionary published on [http://nsfl.health.govt.nz/purchase-units](http://nsfl.health.govt.nz/purchase-units)

13.2 The following Purchase Unit applies to this Service.

<table>
<thead>
<tr>
<th>Purchase Unit Code</th>
<th>Purchase Unit Description</th>
<th>Purchase Unit definition</th>
<th>Unit of Measure</th>
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<tr>
<td>DSS1041</td>
<td>Out of Family Residential Services for Children and Young People</td>
<td>Community residential services, for children and young people with disabilities with: an Autism Spectrum Disorder, or intellectual, physical or sensory disability, from 7 to 16 years of age. Under certain guardianship arrangements as notified by the Ministry the age range may extend to 20 years. However, under typical circumstances young people will receive adult services from 17 years of age who have continuous support needs and require out-of-family residential services that are long term in nature.</td>
<td>Occupied bed day</td>
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**Unit of Measure Definition**

**Occupied bed day:** Total number of beds that are occupied each day over a designated period. For reporting purposes, count beds occupied as at 12 midnight of each day. Leave days, when the bed is not occupied at midnight are not counted. Counting formula is discharge date less admission date less leave days.

14 Reporting Requirements

14.1 Full Reporting Requirements are included in Appendix 3 of the Outcome Agreement.

14.2 Any delays in providing reports should be notified to your Contract Manager.