

National Ability Supports System

(NASS) Data Dictionary

24 March 2022

Version 1.1

Item name	Туре	Format	Length	Description	Details	Related Data Element
1. Main service provider	List	Code	6	Name of service	Mandatory field. Record the name of the main service provider. This is auto populated on NASS based on the service provider account that you are logged onto.	
2. Person responsible	Free text	Varchar	100	Person responsible for recording and reviewing the service user's information	Record the name of the person responsible for recording and reviewing the service user's information, or the contact person for any queries relating to the information recorded. This is a free text field.	
3. Area of service:	List	Code	8	CHO area of the main service provider	Mandatory field. Community Healthcare Organisation (CHO). Auto-populates in NASS.	See reference data
4. Area providing funding:	List	Code	8	CHO area providing funding for the service	Mandatory field. Community Healthcare Organisation (CHO). The CHO are of service may be different to the CHO area providing funding.	See reference data
5. Service user (client) number	Free text	Varchar	20	Service provider record number	Where applicable, record the number that a service provider uses to identify the service user. This may be an internal number used to identify the service user.	
6. IHI	Free text	Number	25	Individual Health Identifier number	An Individual Health Identifier (IHI) is a number that identifies each person who has used, or may use, a health or social care service in Ireland. Each individual will be assigned their own personal number which is unique to them. An IHI (number) has been created and assigned for Irish residents who have used, or may use, the health and social care services within Ireland. For more information on the IHI project and its progress visit www.ehealthireland.ie/IHI	
7. Referral date:	Date	Date	10	Date service user was first referred to the current main service provider	Mandatory field. Record the date on which the service user was first referred to the current main service provider. If the exact referral date is unknown, enter the year of referral and 1st January for day and month (01/01).	

8. NIDD/NPSDD PIN	Free text	Varchar	20	PIN allocated to the service users previously registered on the NIDD or NPSDD	Only applicable for records migrated from National Intellectual Disability Database (NIDD) or National Physical and Sensory Disability Database (NPSDD) to the National Ability Supports System (NASS).	
NASS Id:	Free text	Varchar	20	National Ability Supports System (NASS) service user unique identification number	Mandatory field. Generated by the NASS system, autopopulates.	
9. Date of death:	Date	Date	10	If a service user is known to have died, date of death is recorded	Services are closed and the record should be deactivated. Deceased service users' data is included in reporting up until time of death including the year of death.	
10. Forename	Free text	Varchar	100	Service user details	Mandatory field.	
11. Surname	Free text	Varchar	100	Service user details	Mandatory field.	
12. County	List	Code	4	Service user details	Mandatory field.	See reference data
13. Address Search	Reference	Text	n/a	Service user details	Mandatory field. Address Search in LINK	Health Atlas www.healthatlasireland.ie/
14. Address1	Free text	Varchar	200	Service user details	Mandatory field. The fields below are used to record the full residential address where the service user lives most nights of the week. (Most refers to 4 or more nights per week, on	
15. Address2	Free text	Varchar	200	Service user details	average).	
16. Address 3	Free text	Varchar	200	Service user details	-	
17. Eircode	Free text	Varchar	10	Service user details	Irish post code. Eircode of the residential address where the service user lives most nights of the week.	

18. CHO	List	Code	8	Service user details	Mandatory field. Recorded CHO area of the residential address where the service user lives most nights of the week.	See reference data
19. LHO	List	Code	4	Service user details	Mandatory field. Recorded Local Health Office (LHO) of the residential address where the service user lives most nights of the week.	See reference data
20. Electoral division	Number	Number	10	Service user details	Recorded for the residential address where the service user lives most nights of the week.	
21. Small area	Free text	Varchar	150	Service user details	Recorded for the residential address where the service user lives most nights of the week. Small areas are areas of population generally comprising between 80 and 120 dwellings.	
22. Email	Free text	Varchar	100	Service user details	Recorded if available/provided.	
23. Phone no 1	Free text	Varchar	20	Service user details	Mandatory field. Service users contact number, either mobile or landline.	
24. Phone no 2	Free text	Varchar	20	Service user details	Recorded if available/provided.	
25. Sex	List	Code	4	Service user details	Mandatory field. Recorded sex assigned at birth of the service user, not gender. This data item is needed for analysis of patterns of service use; sex and age; sex and patterns of disability, and access to services.	See reference data
26. Date of Birth	Date	Date	10	Service user details	Mandatory field. Record the day, month, and year on which the service user was born. Age is needed for analysis of service use and requirement. Date of birth is also used to check for duplicate records. If the exact date of birth is unknown but age is known, enter the 1st of January (01/01) for day and month and the known year of birth.	
27. Year of Birth	Number	Number	4	Service user details	In the unlikely event that the full date of birth is unknown, record the year the service user was born.	
28. Employment status	List	Code	4	Service user details	Mandatory field. A classification of principal economic status, which classifies usual situation with regard to employment.	See reference data
29. Employment status (other)	Free text	Varchar	200	Service user details	If the service user's employment status is 'Other' (8), record a description of their employment status.	
30. Ethnic/cultural background	List	Code	4	Service user details	Mandatory field. Self-identified.	See reference data

31. Living with	List	Code	4	Service user details	Mandatory field. Record the service user's living arrangements, (i.e., who they are living with) most nights of the week. (Most refers to an average of 4 or more nights per week).	See reference data
32. Type of living accommodation	List	Code	4	Service user details	Mandatory field. Record the type of accommodation in which the person resides most nights of the week. (Most refers to an average of 4 or more nights per week).	See reference data
33. Have you a primary carer?	List	Code	4	Service user details	Record if the service user has a primary carer. A primary carer is someone who has been identified as providing regular and sustained care and assistance to an individual. Primary carers include family members, friends, or neighbours (also referred to as 'informal carers'). It is acknowledged that the roles of parent and carer, particularly in the case of children, are difficult to distinguish. Parents may consider themselves to be a primary carer to their child if they provide more care to their child than would be typical of the care provided to a child of the same age without a disability. Primary carers include those who are unpaid for this role and those who receive a pension or benefit for their caring role. The care should be ongoing, or likely to be ongoing, for at least 6 months. Where two people provide shared care (for example both parents), for the purposes of NASS, characteristics are only requested for one of these carers. Primary carers do not include paid, or volunteer carers organised by formal services - this includes host families or foster families where the family is paid to care for the service user.	See reference data
34. Do they live with you?	List	Code	4	Service user details	Mandatory field if service user has primary carer. Record whether the primary carer lives with the service user.	See reference data
35. Relationship of primary carer	List	Code	4	Service user details	Mandatory field if service user has primary carer. Record the relationship of the primary carer to the service user.	See reference data
36. Age group of primary carer	List	Code	4	Service user details	Mandatory field if service user has primary carer. Record the age group of the primary carer. This information about the age group of the carer contributes to a profile of informal caring relationships. In particular, knowing the age group of	See reference data

					carers enables more effective planning with respect to carers	
					of certain ages (for example children and older people).	
37. Name	Free text	Varchar	200	Nominated	Mandatory field if service user has nominated person(s)	
(Nominated person				person	Record the following information for individuals who are	
1)					nominated by the service user (also known as next of kin). A	
					nominated person should be entered for any service user	
					aged less than 16 years and ideally should be completed for	
					those with an intellectual disability.	
37.1 Name	Free text	Varchar	200	Nominated	Mandatory field if service user has nominated person(s)	
(Nominated person 2)				person		
38. Address	Free text	Varchar	200	Nominated	Mandatory field if service user has nominated person(s)	
(Nominated person				person	Record the following information for individuals who are	
1)					nominated by the service user (also known as next of kin). A	
					nominated person should be entered for any service user	
					aged less than 16 years and ideally should be completed for	
					those with an intellectual disability.	
38.1 Address	Free text	Varchar	200	Nominated	Mandatory field if service user has nominated person(s)	
(Nominated person 2)				person		
39. County	List	Code	4	Nominated	Mandatory field if service user has nominated person(s)	See reference data
				person		
39.1 County	List	Code	4	Nominated	Mandatory field if service user has nominated person(s)	See reference data
40. Address Search	Reference	Text	n/a	person Nominated	Mandatory field. Address Search	Health Atlas
40. Address Search	Reference	TEXL	II/ a	person	Manuatory Held. Address Search	www.healthatlasireland.ie/
41. Address 1	Free text	Varchar	200	Nominated person	Mandatory field if service user has nominated person(s)	
41.1 Address 1	Free text	Varchar	200	Nominated	Mandatory field if service user has nominated person(s)	
				person		
42. Address 2	Free text	Varchar	200	Nominated	Mandatory field if service user has nominated person(s)	
				person		
42.1 Address 2	Free text	Varchar	200	Nominated	Mandatory field if service user has nominated person(s)	
				person		

43. Address 3	Free text	Varchar	200	Nominated person	Mandatory field if service user has nominated person(s)	
43.1 Address 3	Free text	Varchar	200	Nominated person	Mandatory field if service user has nominated person(s)	
44. Eircode	Free text	Varchar	200	Nominated person	Recorded if available/provided	
44.1 Eircode	Free text	Varchar	200	Nominated person	Recorded if available/provided	
45. Email	Free text	Varchar	200	Nominated person	Recorded if available/provided	
45.1 Email	Free text	Varchar	200	Nominated person	Recorded if available/provided	
46. Phone no 1	Free text	Varchar	20	Nominated person	Mandatory field if service user has nominated person(s)	
46.1 Phone no 1	Free text	Varchar	20	Nominated person	Mandatory field if service user has nominated person(s)	
47. Phone no 2	Free text	Varchar	20	Nominated person	Recorded if available/provided	
47.1 Phone no 2	Free text	Varchar	20	Nominated person	Recorded if available/provided	
48. Relationship to service user:	List	Code	4	Nominated person	Mandatory field if service user has nominated person(s)	See reference data
48.1 Relationship to service user:	List	Code	4	Nominated person	Mandatory field if service user has nominated person(s)	See reference data
49. Best Time to contact	Free text	Varchar	200	Nominated person	Recorded if available/provided	
49.1 Best Time to contact	Free text	Varchar	200	Nominated person	Recorded if available/provided	
50a. Primary disability type	List	Code	4	Service user details	Mandatory field. Recorded one primary and all secondary disability types (where applicable), that give rise to the use of, or requirement for, disability-funded services.	See reference data
50b. Secondary disability type	List	Code	1	Service user details	Only if secondary applies - Mandatory field	See reference data

51. Degree of intellectual disability	List	Code	4	Service user details	Mandatory field if primary or secondary disability is Intellectual	See reference data
52. Diagnosis	List	Code	10	Service user details	Record specific International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD 10) condition(s) with which the service user has been diagnosed. https://icd.who.int/browse10/2019/en	See International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD 10)
53. Diagnosis category	Reference	Code		Service user details	The diagnosis category (ICD 10 range) auto-populates based on the diagnosis (ICD 10 code) recorded at Q52/52.1/52.2/52.3.	
54. Source of diagnosis	List	Code	4	Service user details	Mandatory field if diagnosis is being populated. NASS does not require documentation to support diagnosis entered.	See reference data
55.1 - 55.5 Date of diagnosis	Date	Date	10	Service user details	Retired Field in 2021	
56.1 - 56.5 Is this condition active	List	Code	3	Service user details	Retired Field in 2021	
57. Service Provider	List	Code	4	Service Provider details	Mandatory field. Service provider who is providing the current service.	See reference data
58. Service Type	List	Code	4	Service Provider details	Mandatory field. Six service types are recorded on NASS: Residential/Day/Day respite/Respite overnight/Supports for daily living/Specialist supports	See reference data
59. Service	List	Code	4	Service Provider details	Mandatory field. List of services in each service type available in this section	See reference data
60. Location	Free text	Varchar	100	Service Provider details	Record the location where the service is provided. Include details at unit/house level. If a service is delivered online/phone, this information can be captured in the location field. (Not mandatory).	
61. Level of Support (day, day respite, supports for daily living)	List	Code	4	Service Provider details	Mandatory field. Different options available depending on the service type.	See reference data
61. Level of Support (residential, overnight respite)	List	Code	4	Service Provider details	Mandatory field. Different options available depending on the service type.	See reference data

62. Start Date	Date	Date	10	Service Provider details	Mandatory field. Record the date on which the current service commenced.	
63. End Date	Date	Date	10	Service Provider details	Record the date on which the service ended (when applicable).	
64. Nights Per Week	List	Code	4	Service Provider details	Record the number of nights per week a residential service has been received.	See reference data
65. Days Per Week	List	Code	4	Service Provider details	Record the number of days per week a day service has been attended.	See reference data
66. Weeks Per Year	Number	Number	4	Service Provider details	Record the number of weeks per year a day service has been attended.	
67. Number of Day Sessions	Number	Number	4	Service Provider details	Mandatory field. Record the number of day respite sessions (between the associated end and start date which are in the same calendar year).	
68. Number of Overnights	Number	Number	4	Service Provider details	Mandatory field. Record the number of nights of overnight respite (between the associated end and start date which are in the same calendar year).	
69. Frequency	List	Code	4	Service Provider details	Record the frequency of specialist support sessions.	See reference data
70. Hours Per Week	Number	Number	4	Service Provider details	Mandatory field. Record the number of hours per week that a supports for daily living service is received.	
71. Does this service require enhancement within the next 12 months?	List	Code	4	Service Provider details	Mandatory field. Record whether the service requires an enhancement, for example, additional nights per week or support may be required. Can also record that service delivery has been impacted by Covid.	See reference data
72. Service Type (Unmet need)	List	Code	4	Service Provider details	Mandatory where they are applicable. Six service types are recorded on NASS: Residential/Day/Day respite/Respite overnight/Supports for daily living/Specialist supports	See reference data
73. Service (Unmet need)	List	Code	4	Service Provider details	Mandatory where they are applicable. List of services in each service type available in this section.	See reference data
74. Level of Support (Unmet need) (day, day respite, supports for daily living)	List	Code	4	Service Provider details	Mandatory where they are applicable. Different options available depending on the service type. Not required for specialist supports.	See reference data

74. Level of Support (Unmet need) (residential, overnight respite)	List	Code	4	Service Provider details	Mandatory where they are applicable. Different options available depending on the service type. Not required for specialist supports.	
75. Year (Unmet need)	List	Code	2	Service Provider details	Mandatory where they are applicable. Record the year in which the service is required. This can be the current year or up to five years into the future.	
76. Has this requirement been formally assessed? (Unmet need)	List	Code	4	Service Provider details	Mandatory where they are applicable. Record whether the service requirement has been formally assessed. Whether the service requirement has been formally assessed or not is a useful indictor of the urgency of the need for this service. Over time, this data can provide information on length of time waiting for a service.	See reference data
77. Current/unmet need	List	Code	1	Service user details	Record if an assistive product is used currently or record it as an unmet need (required in the next five years).	See reference data
78. Assistive product class	List	Code	3	Assistive products details	Once an assistive product item has been entered at Q80, the associated class (Q78) and sub-class (Q79) codes from the NSAI list will be recorded automatically. Auto-populated based on NSAI (National Standard Authority of Ireland) Assistive products for persons with disability – Classification and terminology (ISO 9999:2016)	
79. Assistive product sub-class	List	Code	3	Assistive products details	Once an assistive product item has been entered at Q80, the associated class (Q78) and sub-class (Q79) codes from the NSAI list will be recorded automatically. Auto-populated based on NSAI (National Standard Authority of Ireland) Assistive products for persons with disability – Classification and terminology (ISO 9999:2016)	
80. Assistive product - item	List	Text	155	Assistive products details	NSAI text description of assistive product, once selected the reference codes for the item are recorded at Q 78 and Q79. www.iso.org/standard/60547.html	See NSAI (National Standard Authority of Ireland) ISO 9999:2016 document

81. Responses provided by:	List	Code	4	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record whether the service user has answered these questions themselves, or whether someone has answered on their behalf. If answering by proxy, it should be a family member or guardian who lives closely with them. The outcomes section should be completed by service users aged 16+ except those whose primary disability type is recorded as intellectual.	See reference data
82.1 Concentrating on doing something for 10 mins?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.2 Learning a new task?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.3 Standing for long periods?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.4 Walking long distances?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data

82.5 Washing your whole body?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.6 Getting dressed?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.7 Dealing with strangers?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.8 Maintaining a friendship?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.9 Household responsibilities?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data

82.10 Day-to-day work or school?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.11 Joining in community activities?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.12 Emotional effect of disability?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
82.13 Overall interference with life?	List	Code	1	Outcomes - World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)	Mandatory field. Record the level of difficulty experienced by the service user within the last 30 days for all questions	See reference data
83. Creation or Review date	Date	Date	10	Review of service user's NASS record	Mandatory field. If the service user is new to NASS and is having information recorded for the first time, record the date on which the form is completed. If the service user already has a NASS record and is having their information updated, record the date on which the review took place.	See reference data

84. Person Responsible	Free text	Varchar	40	Review of service user's NASS record	Mandatory field. Record the name of the individual who has responsibility for recording and reviewing the service user's information, or the contact person for any queries relating to the information recorded.	See reference data
85. Has the service user been involved in the completion of this form?	List	Code	4	Review of service user's NASS record	Mandatory field. Record whether the service user was present when their information was being collected.	See reference data
86. Have others been involved in the completion of this form?	List	Code	4	Review of service user's NASS record	Mandatory field. Record if people other than the service user were involved in the completion of the form, (either with, or on behalf of, the service user).	See reference data
87. If yes, what is their relationship to the service user?	List	Code	4	Review of service user's NASS record	Mandatory field. If the answer to Q86 is Yes, (i.e., others were involved in completing the form), record their relationship to the service user.	See reference data
88. Does this person have a written person-centered plan?	List	Code	4	Review of service user's NASS record	Mandatory field. Record whether there has been a conversation with the service user (and their family, where appropriate), about how they wish to live their life and what steps could be taken to facilitate this plan.	See reference data
89. CHO managing the transfer	List	Code	8	Transfer out	Records may be transferred between service providers and CHO areas. If the main service provider is no longer providing services to a service user and it is known that he/she is moving to another service, the 'Transfer out' option should be selected. The 'CHO managing the transfer' is the CHO area in which the former main service provider is located and auto populates as part of the transfer process. HSE staff in the CHO area are then responsible for reassigning the record to the new main service provider.	
90. New main service provider (formerly 'Receiving service provider')	List	Code	4	Transfer out	If it is known which service provider is now the main service provider from which the service user is receiving services, details of the new main service provider should be recorded.	

91. New CHO, if	List	Code	8	Transfer out	If the new main service provider is not known but the service	
changing					user is moving to a different CHO area, the new CHO area	
(formerly 'Receiving					should be recorded.	
CHO')						
92. Transfer out date	Date	Date	10	Transfer out	Mandatory field. Date the record was transferred.	
93. Receiving CHO	List	Code	8	Transfer to CHO	Record the CHO area to which the record will be transferred.	
94. Transfer date				Transfer to CHO	Date the record was transferred.	
95. Receiving service	List	Code	4	Transfer to	Record the new main service provider to which the service	
provider				service provider	user record is transferred.	
96. Received date	Date	Date	10	Transfer to	Record the date on which the record was transferred to the	
				service provider	new main service provider.	
97. Reason for	List	Code	4	Deactivate	Mandatory field. If a service user is no longer receiving or	See reference data
deactivation					requiring a service but may re-enter service, please	
					deactivate the record and record the reason why.	
98. Reason for	List	Code	4	Delete	Mandatory field. A record may be deleted if it has been	
deletion					inappropriately registered.	
Record Comment	Free text	Varchar	400	Record	Optional field to allow a comment to be added to the record.	
				validation checks	May be used to explain an unusual situation that has resulted	
					in validations appearing on the record.	

Reference Data

Field	FieldLabel	ListName (NASS)	Coding	Description
	1. Main service			
SU_Main_SP	provider	Service Provider		
				CHO 1 Donegal LHO, Sligo/Leitrim/West Cavan LHO,
SU_Service_CHO	3. Area of service:	СНО	Area 1	Cavan/Monaghan LHO
	4. Area providing			
SU_Funding_CHO	funding		Area 2	CHO 2 Galway LHO, Roscommon LHO, Mayo LHO

SU_CHO	18. CHO		Area 3 Area 4 Area 5 Area 6 Area 7 Area 8 Area 9 XX ZZ 99	CHO 3 Clare LHO, Limerick LHO, North Tipperary/East Limerick LHO CHO 4 Kerry LHO, North Cork LHO, North Lee LHO, South Lee LHO, West Cork LHO CHO 5 South Tipperary LHO, Carlow/Kilkenny LHO, Waterford LHO, Wexford LHO CHO 6 Wicklow LHO, Dun Laoghaire LHO, Dublin Southeast LHO CHO 7 Kildare/West Wicklow LHO, Dublin West LHO, Dublin South City LHO, Dublin Southwest LHO CHO 8 Laois/Offaly LHO, Longford Westmeath LHO, Louth LHO Meath LHO CHO 9 Dublin North LHO, Dublin North Central LHO, Dublin Northwest LHO. Outside Ireland Ireland Unknown Unknown	
SU_County	12. County	County	С	Cork	
NOK1_County	39. County		CE	Clare	
NOK2_County	39. County	CN Cavan			
			CW	Carlow	
			D	Dublin	
			DL	Donegal	
			G	Galway	
			KE	Kildare	
			KK	Kilkenny	
			KY	Kerry	
			L	Limerick	
			LD	Longford	
			LH	Louth	
			LM	Leitrim	
			LS	Laois	
			МН	Meath	
			MN	Monaghan	

1			МО	Mayo
			OY	Offaly
			RN	Roscommon
			SO	Sligo
			Т	Tipperary
			W	Waterford
			WH	Westmeath
			ww	Wicklow
			WX	Wexford
			ZZ	Ireland unknown
			XX	Outside Ireland
SU_LHO	19. LHO	LHO	DSC	Dublin South City
			DSW	Dublin Southwest
			DS	Dun Laoghaire
			DNC	Dublin North Central
			ND	Dublin North
			KWW	Kildare/West Wicklow
			WW	Wicklow
			NWD	Dublin Northwest
			DW	Dublin West
			DSE	Dublin Southeast
			ZZ	Ireland Unknown
			CSL	South Lee
			CNL	North Lee
			XX	Outside Ireland
			СК	Carlow/Kilkenny
			LO	Laois/Offaly
			LW	Longford/Westmeath
			LH	Louth
			MH	Meath
			WX	Wexford

		CE	Clare
		WC	West Cork
		NC	North Cork
		KY	Kerry
		LK	Limerick
		NTEL	Tipp/East Limerick
		ST	Tipperary South
		WD	Waterford
		G	Galway
		SL	Sligo/Leitrim/West Cavan
		MO	Mayo
		RN	Roscommon
		CM	Cavan/Monaghan
		DL	Donegal
		99	Unknown
25. Sex	Sex	1	Male
		2	Female
		99	Unknown
28. Employment status	NASS employment status	1	In paid employment (including part-time)
		2	Unemployed
		3	Training/day programme
		4	Student/pupil
		5	Housewife/husband
		6	Retired
		7	Unable to work due to a disability
		8	Other
		99	Not known
	28. Employment	28. Employment NASS status employment	WC NC KY LK NTEL ST WD G SL MO RN CM DL 99

background	culture background	2 3 4 5 6	Irish Traveller Any other white background Black African Any other black background
	background	4 5 6	Black African Any other black background
		5	Any other black background
		6	
			Asian Chinese
		7	Any other Asian background
		8	Do not wish to answer this question
		99	Not known
31. Living with	NASS living	1	Alone
	arrangement	2	Wife/husband/partner and no children
		3	Wife/husband/partner and children
		4	One parent
		5	Both parents
		6	Parent(s) and sibling(s)
		7	Daughter(s)/son(s)
		8	Sibling(s)
		9	Other relative(s)
		10	Non-relative(s)
		11	In a residential setting
		12	Foster family
		99	Not known
		1	Private accommodation (owner occupied)
accommodation	_	2	Rented on open market
	accommodation	3	Rented from county council/public authority/service provider
		4	Residential setting
		5	Unstable accommodation
		99	Not known
	31. Living with 32. Type of living accommodation	arrangement 32. Type of living NASS type of	arrangement 2 3 4 5 6 7 8 9 10 11 12 99 32. Type of living accommodation NASS type of living accommodation 3 4 5

SU_P_Carer	33. Have you a	NASS have your	1	Yes
	primary carer?	primary carer	0	No
			88	Not applicable
			99	Not known
SU_P_Carer_Live	34. Do they live	NASS, do they	1	Yes
	with you?	live with you	0	No
			88	Not applicable
			99	Not known
SU_P_Carer_Relationship	35. Relationship	NASS	1	Wife/husband/partner
	of primary carer	relationship of	2	Parent
		primary carer	3	Foster parent
			4	Daughter/son
			5	Sibling
			6	Other relative
			7	Non-relative
			88	Not applicable
			99	Not known
SU_P_Carer_Age_Group	36. Age group of	NASS age group	1	17 years of one or under
30_i _carei_Age_Group	primary carers	of primary carers	2	17 years of age or under Between 18 and 49 years of age
	primary carers	or primary carers	3	
			4	Between 50 and 59 years of age
				Between 60 and 69 years of age
			5	Between 70 and 79 years of age
			6	80 years of age or over
			88	Not applicable
			99	Not known
	48. Relationship			
NOK1_Relation_To_User	to service user		1	Wife/husband/partner

NOK2_Relation_To_User	48. Relationship to service user		2	Parent
		NASS	3	Foster parent
		relationship to	4	Daughter/son
		client	5	Sibling
			6	Other relative
			7	Non-relative
	50h D	NASS disability		
Disability_Type	50b. Primary disability type	type	1	Intellectual
disability_type_id	50a. Secondary disability type(s)		2	Autism Spectrum Disorder (ASD)
			3	DeafBlind - dual sensory
			4	Developmental delay (under 10 years only)
			5	Hearing loss/deafness
			6	Neurological
			7	Physical
			8	Specific learning disorder (other than intellectual)
			9	Speech and/or language
			10	Visual
			11	Mental health
			12	Not verified
			13	No disability
Disability_Degree_ID	51. Degree of	NASS degree of	1	Borderline
3,2 3,2 3,2	intellectual	intellectual	2	Mild
	disability	disability	3	Moderate
			4	Severe
			5	Profound
			6	Not verified
			88	Not applicable

				See separate structured (hierarchical) list
Diagnosis1 Diagnosis5	52. Diagnosis	NASS diagnosis		https://icd.who.int/browse10/2019/en
	54. Source of	NASS source of		
Source_Of_Diagnosis	diagnosis	diagnosis	1	Hospital specialist
			2	GP
			3	Multidisciplinary team
			4	Psychiatrist
			5	Other healthcare professional
	77. Current	NASS record		
AP_Current_Status1 AP_Current_Status20	Unmet need	unmet need	1	Current
			2	Unmet need
AP1 ItemAP20 Item	80. Assistive product - item		String	See separate structured (hierarchical) list
74 1_Remiiii/4 20_Rem	product item			See separate structured (merarement) list
	81. Responses	Responses		
W_Responses_By	provided by:	provided by	1	Self
			2	Proxy
	82.1	WHODAS		
	Concentrating on	responses		
	doing something		0	
W_Concentrate	for 10 mins?			None
	82.10 Day-to-day		1	
W_Day_to_Day_WS	work or school?			Mild
	82.11 Joining in community		2	
W_Community	activities?			Moderate
	82.12 Emotional			
	effect of		3	
W_Emotional	disability?			Severe

W_Overall	82.13 Overall interference with life?		4	Extreme
W_Learning	82.2 Learning a new task?		5	Not applicable
W_Standing	82.3 Standing for long periods?		-	-
W_Walking_Long	82.4 Walking long distances?			
W_Washing	82.5 Washing your whole body?			
W_Dressing	82.6 Getting dressed?			
W_Strangers	82.7 Dealing with strangers?			
W_Friendship	82.8 Maintaining a friendship?			
W_Household_Resp	82.9 Household responsibilities?			
SU Last Review Date	83. Creation/Review date			
	83. Creation/Review			
Review_Date Person_Responsible	date 84. Person Responsible			
r ersori_kesporisible	пезропзые			
Review_SU_Involved	85. Has the service user been	Has service user involved	0	Yes No
	involved in the completion of this form?	completion of form	99	Not known

Review_Other_Involved	86. Have others been involved in the completion of this form?	Has other involved completion of form	1 0 99	Yes No Not known	
Review_Relation_SU	87. if yes, what is their relationship to the service user?	Service user relationship	1 2 3 4 5 6 7 8 88	Wife/husband/partner Parent Foster parent Daughter/Son Sibling Other relative Non-relative Professional/case worker Not applicable	
Review_Person_Plan	88. Does this person have a written person-centered plan?	Does person have written person centered plan	1 0 99	Yes No Not known	
Deactivation_Reason	97. Reason for deactivation	NASS deactivation reason	2 3 4	Emigration No longer eligible following review Not reviewed	
Deletion_Reason	98. Reason for deletion	NASS deletion reason	1	Inappropriately registered	
Service_Provider	57. Service Provider	NASS service provider		See separate list	

		NASS service	1	
Service_Type	58. Service Type	type		Residential
Unmet_Service_Type	72. Service Type		2	Day
			3	Respite day
			4	Respite overnight
			5	Supports for daily living
			6	Specialist supports
Consider	FO Coming	NASS service	Posidontial	Residential
Service	59. Service 73. Service	INASS SELVICE	Residential	
Unmet_Service	73. Service		1	Residential house in community – 1 to 4 residents Community group home – 5 to 9 residents in one home or cluster
			2	[c]
			2	Residential centre/on campus - congregated setting 10 people or
			3	more [c]
			4	Nursing home
			5	Specialist facility – dementia
			6	Specialist facility – challenging behavior
			7	Specialist facility – neurological
			8	Specialist facility - physical
			9	Specialist facility –mental health comorbidity
			10	Psychiatric hospital
			11	Other hospital
			12	Hospice
			13	Home sharing - shared living family
			Day	Day
			1	Day Programme
			7	Supported employment
			9	Rehabilitative training
			10	Neuro-rehabilitative training programme
			11	Vocational training
			12	Mainstream early childhood education and care
			13	Special early childhood education and care

ı					
19	Mainstream primary/secondary school				
20	Special primary/secondary school				
21	Special class or unit in mainstream primary/secondary school				
22	Third level education				
23	Home tutor				
Respite day	Respite day				
1	Centre based respite - day (includes clubs and camps)				
2	Own home respite - day (includes evenings)				
3	Home sharing short breaks family - day				
4	Home sharing contract family - day				
Respite					
overnight	Respite overnight				
1	House in the community/Centre based respite -overnight				
2	Own home respite - overnight				
	Holiday respite-overnight (Residential/centre based/summer				
3	camp)				
4	Holiday Respite-overnight (Hotel/B&B/Hostel)				
5	Home sharing short breaks family -overnight				
6	Home sharing contract family - overnight				
7	Nursing home respite				
Supports for					
daily living	Supports for daily living				
1	Personal assistant				
2	Home support (including Supported Self-Directed Living Support)				
3	Community support				
4	Participation in voluntary work				
5	Peer support				
6	Advocacy				
7	Transport services				
8	Guide dog/assistance dog				
9	Supported Self-Directed Living support - sleepover cover at night				
10	Supported Self-Directed Living support - awake cover at night				

Specia	
Suppo	·
	Assistive technology/ Client technical service
2	Behaviour therapy
3	Case manager
4	Key worker
5	Complementary therapy
6	Creative therapy
7	Dietetics
8	Orthotics/ Prosthetics
9	Chiropody
10	Dentistry/ Orthodontics
11	Palliative care
12	Nursing
13	Occupational therapy
14	Play therapy
15	Physiotherapy
16	Psychiatry
17	Clinical psychology
18	Counselling psychology
19	Educational psychology
20	Neuro psychology
21	Resource teacher
22	Special Needs Assistant (SNA)
23	Social work
24	Speech and language therapy
25	Vision communication - IT/AT & alternative formats
26	Vision rehabilitation services
27	Neurorehabilitation services
28	Aural communication - IT/AT & alternative formats
29	Aural rehabilitation services
30	Animal-assisted therapy

			31	Children's Disability Network Team (CDNT)
Service_Level_Support	61. Level of Support (day, day respite, supports for daily living)	NASS level of support	Day - Day, Respite Day and Supports for daily living	Day - Day, Respite Day, and Supports for daily living
74. Level of Support (day, day respite, supports for daily living) 1	1 2	Staff to service user ratio is 1 to 10+ Between 1 to 6 & 1 to 9		
			3	Between 1 to 4 & 1 to 5
			4	1 to 3
			5	1 to 2
			6	1 to 1
			7	Greater than 1 to 1
			88	Not applicable
Service_Level_Support	61. Level of Support (residential, overnight respite)	Level of support second	Overnight - Residential, Respite overnight	Overnight - Residential, Respite overnight
	74. Level of Support (residential,			
Unmet_Level_Support	overnight respite)	_	1	Minimum
			2	Low
			3	Medium/moderate
			4	High
			5	Intensive 1 to 1
			6	Intensive greater than 1 to 1
			88	Not applicable

	64. Nights Per				
Service_Nights_p_Week	Week	Nights per week	1	4 nights	
			2	5 nights	
			3	7 nights	
	65. Days Per				
Service_Days_p_Week	Week	Days per week	0	0	
			0.5	0.5	
			1	1	
			1.5	1.5	
			2	2	
			2.5	2.5	
			3	3	
			3.5	3.5	
			4	4	
			4.5	4.5	
			5	5	
			5.5	5.5	
			6	6	
			6.5	6.5	
			7	7	
			1		
Service_Frequency	69. Frequency	Specialist	0	None	
		support	1	Once a year	
		frequency	2	Once in 6 months	
			3	Once in 3 months	
			4	Once in 2 months	
			5	Once in a month	
			6	Once in 2 weeks	
			7	Once a week	
			8	Twice a week	
			9	More than twice a week	

			10	As required
enhancement	71. Does this service require	Enhancement required	1	Yes
	enhancement		2	Yes- Increased service user to staff ratio
	within the next 12		3	Yes- Additional support hours/days/nights required
	months?		4	Yes- Increased service user to staff ratio and additional support hours/days/nights required.
			5	Yes- Child to adult services
			6	Yes- Covid-19 impacted service
			0	No
			99	Not known
Unmet_Assessed	76. Has this requirement been formally assessed?	NASS requirement formally assessed	1	Yes
			0	No
			99	Not known