



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Oifig an Cheannaire Oibríochtaí,
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23rd April 2019

Deputy Louise O'Reilly,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
e-mail: louise.oreilly@oireachtas.ie

Dear Deputy O'Reilly,

The Health Service Executive has been requested to reply directly to you in the context of the following parliamentary question, which was submitted to this department for response.

PQ 16473/19

To ask the Minister for Health the number of respite care hours provided for the first quarter of 2018 compared to the first quarter of 2019 by CHO and LHO in tabular form.

HSE Response

The HSE and its funded Agencies provide respite care to children and adults with disabilities. Respite can occur in a variety of settings for various lengths of time, depending on the needs of the individual service user, the family and according to available resources. Models of respite can be Centre based; In-Home; Home-to-Home and Family Support, etc. As a vital part of the continuum of services for families, respite potentially helps prevent out-of-home full-time residential placements, preserves the family unit, and supports family stability with the service users at the centre.

The HSE is very much aware of the importance of respite service provision for the families of both children and adults with disabilities and the impact the absence of respite service provision can have on other services being delivered.

Data for the first Quarter 2019 is currently being gathered and validated and will not be available until June however to assist, please see the following table, which provides the entire data available for 2018.

CHO	No. of overnights (with or without day respite) accessed by people with a disability	No of day only respite sessions accessed by people with a disability	No of people with a disability in receipt of respite services
	2018	2018	2018
National Total	156,725	35,866	6,255
CHO 1	9,368	4,682	384
CHO 2	37,143	5,963	905
CHO 3	14,507	5,411	572
CHO 4	22,025	2,883	933
CHO 5	11,414	1,565	560
CHO 6	10,306	2,925	383
CHO 7	18,933	6,444	881
CHO 8	16,359	997	857
CHO 9	16,669	4,996	780

Unmet Need and growing demand

The provision of residential respite services has come under increasing pressure in the past couple of years due to a number of impacting factors such as,

- an increase in the number of children and adults who are seeking access to respite as a reflection of general population increase;
- increasing levels of complexity across the sector due to better and improved health care;
- an increase in the age of people with a disability resulting in people presenting with “changing needs”.

In addition, a significant number of respite beds have been utilised for long term residential placements due to the presenting complexity of the individual with a disability and also due to home circumstances, therefore, the numbers of people with disabilities in receipt of residential respite services and the corresponding number of respite nights has reduced when compared to previous activity.

A further impact to the delivery of respite has been in response to the regulation of service provision as set by the Health Information and Quality Authority regulatory and policy context. HIQA has established and set the way in which residential/respite services is provided requiring the Agencies comply with regulatory standards in order to meet regulation. Standards specify a requirement for personal and appropriate space impacting on the capacity and Statement of Purpose for a Designated Centre. This has had a direct impact on capacity where respite beds are no longer allowed within a residential setting e.g. vacated by residents who go home at weekends or for holidays, can no longer be used for respite. Implementation of the national policy on congregated settings (Time to Move on from Congregated Settings Policy) is also affecting capacity.

Targeted actions to improve supply

In 2018, the Minister for Health announced an additional €10 million for the HSE, specifically to enhance respite care in the disability sector. In accordance with the National Service Plan for 2018, the HSE committed to providing:

- An additional respite house in each of the nine CHO areas which will support 450 individuals in a full year and 251 in 2018 (€5m).

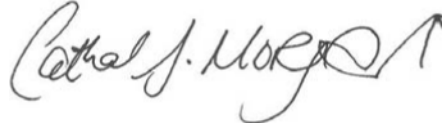
- Three additional respite houses in the greater Dublin areas (CHOs 7, 8 and 9) to support a further 225 individuals in a full year and 143 in 2018 (€3m).
- Alternative models of respite to support 250 individuals with disability (€2m).

The funding provided for the equivalent of 12 new houses, 1 in each CHO, and 3 in the Greater Dublin area.

Ten new or additional centre-based respite centres have opened to date with two additional Centres due to open in the next few weeks, resulting in an additional 6,455 bed nights delivered to 763 people.

Alternative respite is working well locally, with good examples of summer camps, evening and Saturday clubs having taken place, benefiting hundreds of adults and children. Community-Based, alternative respite projects delivered 15,144 'in home' Respite Hours, to 400 users and 1,296 Saturday/Evening/Holiday Club 'sessions' to 1,500 people.

Yours sincerely,



**Dr. Cathal Morgan,
Head of Operations - Disability Services,
Community Operations**