

Health Service Executive

Oifig an Cheannaire Oibríochtaí,

Na Seirbhísí Míchumais/An Rannán Cúram Sóisialta, 31-33 Sráid Chaitríona, Luimneach.

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5<sup>th</sup> July 2019

Deputy Michael Moynihan Dail Eireann, Leinster House, Kildare Street, Dublin 2. e-mail: <u>michael.moynihan@oireachtas.ie</u>

Dear Deputy Moynihan

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

## PQ 26218/19

To ask the Minister for Health the criteria used for respite care for persons with disabilities; if the age of the carer is taken into consideration; and if he will make a statement on the matter.

## PQ 26219/19

To ask the Minister for Health if his attention has been drawn to the number of persons with disabilities aged between 30 and 40 years of age and still being cared for by their parents; his plans for respite for such persons in view of the fact that their carers are much older now; and if he will make a statement on the matter.

## **HSE** Response

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.

Allocation of respite hours is based on the individual's needs and circumstances. HSE Service Managers work with service users and their families as well as the Service Providers of respite services to ensure the provision of a client focused service, establish priority need and ensure best practice and maximization of funding and other resources.

## **Ageing Demographics**

The HSE is aware that people with disabilities are living longer and adults with intellectual disabily have agerelated illnesses and conditions. In addition, more people with a disability have more complex needs. Of people reporting with a disability, the number of people aged 35 years and over with moderate, severe and profound intellectual disability has increased from 28.5% in 1974 to 49.3% in 2016 (NIDD, 2016). There are 10,679 people who will require alternative, additional or enhanced services in the period 2017-2021. Around



15% of over-60s with intellectual disabilities live with family members, usually with sibling or parents. Given the ages of those involved, most of these arrangements will not be sustainable.

This change in demographics, increased life expentancy and changing needs for those with both a physical and sensory disability, and an intellectual disability has led to a significant increase in the need for disability services across all settings. This includes day supports, residential and respite services, personal assistant and home support services.

Disability services focus on enabling people with disabilites to achieve their full potenital, living ordinary lives in ordinary places, as independently as possible while ensuring that the voices of service users and their families are heard, and that they are fully involved in planning and improving services to meet their needs.

The HSE will in the coming years face a significant financial challenge in meeting essential demand, particularly in relation to residential placements for people with an intellectual disability. In this regard, we are developing a strategic five year framework to support multi-annual planning for residential care services and community supports to include day, respite, personal assistant, home support services as well as therapeutic interventions taking account of national database projections and the need to develop sustainable models of service which achieve HIQA compliance within approved timeframes.

To meet the challenges from the increase in the number of people living with disability, the increase in age and life expectancy both of the person with the disability and their carer and the changing needs of people with a disability, collaborative working is required across the wider health and social care setting with the aim of improving access to services for all people with disability. It is important to recognise that the needs of people with a disability extend well beyond health service provision, and the health service will participate fully with other governmental departments and services in the development of cross-sectoral strategies to maximise access to services and supports for people with disabilities.

Disability services have a significant programme of reform which is informing new models of service provision. Transforming Lives sets out the recommendations of the Value for Money and Policy Review of Disability Services in Ireland, 2012. It provides the framework for the implementation of the recommendations of Time to Move on from Congregated Settings, 2011 in respect of residential centres to support the transition of people from institutional settings to community-based living. The New Directions programme is improving day services and aims to meet the needs of school leavers and young people graduating from rehabilitation training. Taken together, the implementation of these programmes will enable us to maximise the use of existing resources and develop sustainable models of service provision with positive outcomes for service users, delivering best value for money and moving towards an inclusive model of community-based services and supports.

Yours sincerely

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

