

Oifig an Cheannaire Oibríochtaí,

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

Office of the Head of Operations,

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4th June 2019

Deputy Jackie Cahill Dail Eireann, Leinster House, Kildare Street, Dublin 2.

e-mail: jackie.cahill@oireachtas.ie

Dear Deputy Cahill,

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 21630/19

To ask the Minister for Health the grants or other funding available for a sensory room in newly built houses for children with non-verbal autism; and if he will make a statement on the matter.

HSE Response

Funding

The HSE National Service Plan 2019 provides for a significant level of funding, at circa €1.9 billion, to deliver essential frontline services for people with a disability. These core services span a spectrum of essential interventions ranging from Clinical Therapeutic Supports, Rehabilitative Training, Day Services, Home Care Supports as well as Respite and Residential provision.

All funded service providers, are required to deliver safe and effective services within a defined budget allocation. The HSE must also ensure that it prioritises available resources on the basis of meeting the health and social needs of people with a disability. Engagement is ongoing between the HSE nationally, the Community Healthcare Organisations (CHO) and the agencies we fund. The HSE works in partnership with these agencies to ensure the best level of service possible, is provided to people with a disability including children with non verbal autism and their families, within the resources available.

The manner in which funding is allocated/distributed allows for a distinction between broad categories of funding such as services for older people, primary care, mental health and disabilities. Disability services are provided based on the needs of an individual rather than by the age of the individual or the actual type of disability or service required. Therefore, while we can provide details on funding allocated to Services and Service Providers, there is no information collected specifically on sensory rooms in newly built houses for children with non-verbal autism.

It is important to note that there are approximately199 individual Service Arrangements in place between the HSE and voluntary groups who have a specific focus on Autism and Autism Spectrum Disorders. These include Grant Aid agreements, that is a grant below a threshold of €250K per annum



and S39 Services arrangements with funding being provided in the main by the Disability Sector. Some funding is being provided by Mental Health and Primary Care. In addition some agencies have received funding from the National Lottery. However many more agencies provide Autism Spectrum Disorder services and supports to people and families without distinction between general and specific support services being provided.

National Lottery

The HSE is allocated National Lottery Funding for distribution to community based groups and voluntary organisations under the Respite Care Grant Scheme and the National Lottery Grant Scheme. Groups and organisations involved in the provision of Health and Personal Social Services can apply for once off funding of between €500 and €10,000 for suitable projects. Completed applications can be obtained on the HSE Website (see link below) and can be returned to the local HSE Community Healthcare Organisation

https://www.hse.ie/services/national-lottery-grants/national-lottery-grants.html

The website gives full details on how to apply for funding, what forms/information is required and where to send the completed application forms.

It is important to note the following information.

- The funding is once off funding.
- Applications must be submitted to the correct Community Healthcare Office (CHO area)
- Organisations who are outside the area but provide services in the CHO area may also submit applications.
- Applications can't be considered that have major on-going revenue implications. These
 include the employment of staff, capital funding and running costs.
- Applications must be for once off projects that can be completed within the year of application (excluding respite)
- Applications can't be considered for projects which are already covered by HSE funding.
- Projects that already have service level agreements or grant aid agreements with the HSE cannot be considered

Funding Limits:

There is an upper limit of funding awarded to an individual organisation. The HSE decides on the limit based on the number of valid applications received.

On receipt of more than one application from an individual organisation, the local CHO area applies the upper limit of funding. Organisations therefore may have to prioritise their intended project. That intended project may also be the equipment required for the provision of a sensory room.

The HSE has provided funding for the opening of centres including newly built houses which are providing residential, emergency residential and respite services. While there is no specific system for the allocation of grants for sensory rooms ,any capital funding allocated to service providers for developing new residential / respite facilities would include provision for any necessary refurbishment, equipment etc. Service providers must include any refurbishment / equipment costs in their business case for funding.

Respite Services. (newly built houses)

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).
- 11 of the 12 new, purpose designed Respite Centres have opened with the remaining centre due to open in Q2 2019 resulting in an additional 6,455 bed nights delivered to 763 people in 2018.

Residential Services and Emergency Places

Residential services make up the largest part of the Disability funding disbursed by the HSE - €1.1b of the total budget of €1.8 billion in 2018, or 61%.

Approximately 90 service providers provide residential services to over 8,000 individuals throughout the country. The bulk of these are provided by the 50 highest funded agencies (comprising both Section 38 & Section 39 organisations) – some 6,300 places, or 75%. The HSE itself provides 1,300 or 16% of the places.

The emerging residential need in the absence of residential development funding over the past number of years is acknowledged by the HSE as a challenge for all services providing support to clients with a disability. It must also be acknowledged that given the introduction of the National Standards for Residential Services for Children and Adults with Disabilities, every new development must now be approved by the Health Information and Quality Authority (HIQA). All centres providing residential (including respite) services to children and adults with disabilities now need to be registered with HIQA by law and will be visited by HIQA inspectors to ensure they are providing an appropriate standard of care.

The HSE National Service Plan 2019 has provided for €15m investment (90 Emergency Residential places) in respect of the provision of planned responses under this category.

A total of 8,568 places will be provided in 2019, representing an increase of 39 on the expected outturn for 2018. The service will seek to maximise current residential and respite capacity to ensure an appropriate response to emerging needs during the year. Emergency cases will continue to be addressed on an individual prioritised basis.

Currently, there are approximately 979 people with a disability that have been profiled as having a residential placement requirement. Each CHO continues to actively manage and mitigate high levels of clinical risk with regard to service users with high levels of acuity/ safeguarding risks, through lower-cost non-residential interventions such as in-home and Residential Respite, active case-management & inter-agency cooperation.

A particular challenge in 2019 will be to maximise the capacity of the service to respond to residential care needs. A total of 8,568 places will be provided in 2019, representing an increase of 39 on the expected outturn for 2018. The service will seek to maximise current residential and respite capacity to ensure an appropriate response to emerging needs during the year. Emergency cases will continue to be addressed on an individual prioritised basis.

Yours sincerely,

Dr. Cathal Morgan, Head of Operations,

Disability Services, Social Care Division

