



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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9th December 2019

Deputy Thomas Byrne,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
e-mail: thomas.byrne@oireachtas.ie

Dear Deputy Byrne,

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 48711/19

To ask the Minister for Health the terms and conditions for a person that is entitled to respite care.

HSE Response - Respite care

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. Respite is not always centre-based and can be provided in a number of ways, e.g. Centre based; In-Home; Home-to-Home; 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.

In recent years, there have been positive changes in accessibility standards in Ireland that now present a greater range of choice and options for people with disabilities seeking a respite break which is positively supported by Government policy and funded via the HSE.

Consequently, there has been a shift in best practice approaches, moving away from congregated, health service settings to integrated services that provide people with greater options, alongside the supports they need to maintain independence. This shift is reflected in current HSE policy under 'Time to Move on from Congregated Settings: A Strategy for Community Inclusion' and Sláintecare, and it aims to facilitate the choices and preferences of people with disabilities.

Allocation of respite services 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.

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. The need for increased respite is acknowledged and the HSE continues

to work with agencies to explore various ways of responding to this need in line with the budget available.

Further information on respite care and how to access respite care can be obtained via the following link:

<https://www.hse.ie/eng/services/list/3/carerssupport/>

Carer's Support Grant

Additional assistance is available in the form of the Carer's Support Grant. This is an annual payment made to carers by the Department of Employment Affairs and Social Protection (DEASP). The scheme name was changed from the Respite Care Grant in 2016 to better reflect how the Grant is used. Carers can use the grant in whatever way they wish.

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)

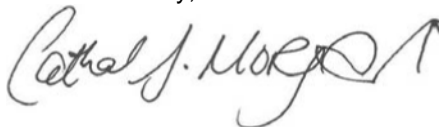
The funding provided for the equivalent of 12 new houses, 1 in each CHO, and 3 in the Greater Dublin area. Twelve new or additional centre-based respite centres have opened to date, resulting in an additional 6,455 bed nights delivered to 763 people.

Community-Based, alternative respite projects, including Summer Camps, evening and Saturday clubs, also took place in 2018, delivering 15,144 ‘in home’ Respite Hours, to 400 users and 1,296 Saturday/Evening/Holiday Club ‘sessions’ to 1,500 people.

The HSE is fully committed to maintaining the same level of service this year as in 2018. The programme to deliver on the €10 million additional funding will continue in 2019 and remains a high priority for the HSE.

The HSE also welcomes the announcement of an additional €25 million allocation to Disability Services in Budget 2020 and is currently agreeing the National Service Plan which will set out the detail of the level of service and supports that will be provided in 2020.

Yours sincerely,



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