



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Oifig an Cheannaire Oibríochtaí,
Na Seirbhísí Míchumais/An Rannán Cúram Sóisialta,
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25th May 2020

Deputy Frankie Feighan,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
e-mail: frankie.feighan@oireachtas.ie

Dear Deputy Feighan,

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 4674/20

To ask the Minister for Health the estimated cost of increasing respite care service provision by 20%; and if he will make a statement on the matter.

HSE Response

Respite Care

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.

Cost of increasing respite care service provision by 20%

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 and disabilities in general. Disability services are provided based on the needs of an individual rather than by the actual type of disability or service required. Funding allocated to respite services is not routinely collated and aggregated into a statistical profile, however, in 2018 approximately €54million was spent on respite services, providing around 160,000 overnight respite and 36,000 day only respite sessions to 6,500 people with a disability. To increase this level of service provision by 20% would cost approximately €11million.



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á Forbairt

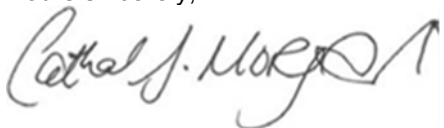
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COVID-19 Public Health Emergency

It should be noted that the calculation above is based on pre-COVID-19 estimations. In preparing for and responding to COVID-19 and to fully align with Public Health guidance as recommended via the NPHE, the HSE and its partner service providers put in place a range of measures, which included the prioritisation of vital residential and home support services whilst curtailing or closing certain services such as day services, respite services, and certain clinical supports in order to; a) prioritise essential public health services at CHO level and b) ensure continued delivery of the referenced residential and home supports provision. I should note that in the absence of regular access to some service and supports, CHOs and service providers have tried to maintain services that can be delivered safely; providing outreach and telecare solutions, using technology where possible; and using creative and innovative models of care to support service users, both adults and children.

Since the publication of the Governments 'Roadmap for Reopening Society & Business' as well as the 'Return to work safely' protocol, the HSE is finalising plans to re-establish vital non-covid supports and services. This includes very careful and detailed work on the part of the Disability Sector with national guidance and will result in directing how all funded agencies can deliver services on a medium to long-term basis. In effect this means that the HSE will soon set out its plans in terms of how we can safely begin to commence services, which will have to comply with guidance as set out by the National Public Health Emergency Team as well as Public Health specialists in the HSE.

Yours sincerely,



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



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