

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

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20<sup>th</sup> December 2021

Deputy Violet Anne Wynne, Dail Eireann, Leinster House, Kildare Street, Dublin 2. E-mail: <u>violet-anne.wynne@oireachtas.ie</u>

Dear Deputy Wynne,

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 61597/21

To ask the Minister for Health the reason the Neurorehabiliation Strategy 2011 steering group has not met in to date 2021; his views on the negative impact the lack of communication and coordination will have on advancing the strategy; when the next meeting is scheduled; and if he will make a statement on the matter.

## PQ 61605/21

To ask the Minister for Health if he will fully implement the commitments of the Neurorehabilitation Strategy as per Article 26 of the United Nations Convention on the Rights of Persons with Disabilities and to combat the level of unmet need for adults and children in the State; if he will consider multi-annual funding and resource framework in order to improve access and tackle waiting lists; and if he will make a statement on the matter.

## PQ 61606/21

To ask the Minister for Health the status of the National Neurorehabilitation Strategy 2011; what aspects of it have been implemented a decade down the line; when the outstanding items will be implemented; and if he will make a statement on the matter.

## **HSE Response**

Neuro-rehabilitation services play a critical role in supporting recovery and/or maximising ability of those with neurological conditions. We know from our own mapping exercises, that there is a dearth of neuro-rehabilitation services at both inpatient and community levels.

The plan to address this is described within the implementation framework for the Neuro-Rehabilitation Strategy. It outlines a 10-step approach which will see each CHO introducing local implementation teams to oversee and guide the implementation process. It also describes a managed clinical rehabilitation network demonstrator project which is currently progressing through the development of post-acute and community neuro-rehabilitation services across CHO 6 & 7, with full year funding of €2.29m available for 2021.



The learning from the demonstrator project will inform the implementation of the Neuro-rehabilitation Strategy across each CHO and implementation of strategy will roll-out from 2022. This funding included the establishment of 10 additional in-patient beds in Peamount, which are now fully operational.

Key Messages:

- The introduction of the first Managed Clinical Rehabilitation Network in Ireland is hoped to be the exemplar for the national roll-out of the Neuro-rehabilitation Strategy.
- The project, funded by the SláinteCare Redesign Fund, involves the commissioning of 10 new beds at Peamount Healthcare and introducing Multi-disciplinary teams for CHO 6 & CHO 7, serving patients with complex presentations who do not require inpatient facilities and those who need to transition from hospital to home.
- These new beds introduce some 3,500 additional specialist rehab bed days per annum into the system.
- With average length of stay of approximately 90 days, this means that 40 patients per annum will have their rehabilitation needs met in an appropriate setting outside of acute hospitals.
- The beds are expected to reduce the NRH waiting list by over 30%, and take direct referrals from AMNCH, SJH, SVUH, Beaumont & the Mater for patients with neurological conditions. The multidisciplinary teams will take referrals from hospitals and the NRH and ensure improved inpatient flow and reduced length of stay in the acute setting.

What we want to achieve through this demonstration pilot site MCRN:

- Person centred coordinated approach to patient care.
- Development of appropriately resourced interdisciplinary inpatient, outpatient and home and community based specialist rehabilitation teams supported by education and training.
- Introduction of the three-tier model of complexity-of-need.
- Reduction in Waiting times for assessment and access to inpatient & community rehabilitation services.
- Improved patient outcomes and experience.
- Standardised pathway for people who require neuro rehabilitation.
- Enhanced communication between inpatient and community services to support the delivery of the right care, in the right place, at the right time.
- Build up a supporting infrastructure for the demonstration project to deliver neuro rehabilitation to patients as required across the continuum of care.
- Develop a model of care that can be rolled out nationally.

The learning from this will inform the roll out of the strategy nationally.

Implementation of the strategy will lead to improved patient experience and improved patient outcomes for all with neurological conditions.

We can confirm that the National Steering Group met on three dates in 2020, the 26<sup>th</sup> February, 22<sup>nd</sup> October and 25<sup>th</sup> November. In 2021 the Programme Manager position was only filled for a period of six weeks. We are in the process of recruiting a replacement for this post and hope to have it filled in early January 2022. A meeting of the National Steering Group has been scheduled for 13<sup>th</sup> January 2022.

Yours sincerely

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Ms Deirdre Scully, Assistant National Director Change Planning and Delivery, Disability and Mental Health Services Community Operations