

Oifig an Cheannaire Oibríochtaí,

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

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22nd December 2021

Deputy Violet Anne Wynne, Dail Eireann, Leinster House, Kildare Street, Dublin 2.

E-mail: violet-anne.wynne@oireachtas.ie

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 61609/21

To ask the Minister for Health the funding that has and will be made available through Budget 2022 to prevent young persons from entering nursing homes; the preventative measures that will be taken by his Department; and if he will make a statement on the matter..

PQ 61610/21

To ask the Minister for Health if unspent allocations for the decongregation of disabled persons and transfer of under 65s from nursing homes for 2021 will accrue, be ring-fenced and be added to the designated Budget 2022 allocation; if this dedicated funding rolls over into the next budgetary year; and if he will make a statement on the matter.

HSE Response

A project commenced in 2021 to support 18 people under NSP 2021 to move from Nursing Home Care to the Community. A budget of €3 million was secured for this, which equates to €166,000 per person for direct care support hours. This project is being delivered by the Community Healthcare Areas (CHOs) and each Area is working within this budget. There was no additional funding for capital or project overhead costs included.

The National Placement Oversight and Review Team (NPORT) are supporting a number of CHO Areas conducting reviews and assessments to inform person centred care and transition plans.

To support people aged under 65 living in nursing homes to move to homes of their choosing in the community, the HSE will be working in collaboration with service providers, the person and their families, where this is the wish of the person. As each individual's situation and circumstances are unique to them, a person by person approach is being taken. Supports will be based on each individual's needs.

Each CHO is leading the transition of at least two people based on the allocations in the National Service Plan, 2021. The support needs of each person are assessed and as mentioned above, this subsequently informs the transition plan and support for the person. CHOs are on track to meet the target for 2022 and a summary report will be compiled at that stage to inform further developments in this area.



The HSE has appointed a Project Lead under the Service Reform Fund to undertake a mapping exercise of the current population of people under the age of 65 in nursing homes to determine the level of need and funding, both for supports and housing, and to develop the pathway to appropriate support arrangements. This work will be concluded in mid-2022.

It is important to note that this is a pilot project and a key outcome will be to determine the overall requirements and costs associated with the transitioning of people from nursing homes: revenue, once off and ongoing, pay and non-pay and the minor capital and capital costs. It is expected that there will be a range in funding required to support each person which will be influenced by:

- level and type of support needed,
- the current funding arrangements (potential for de-bundling),
- planned post- transition arrangement (alternative community residential service, personalised budget, return to existing family home etc).

The additional care options and true cost of decongregation for the people in nursing homes is still being explored as in many cases these are the cohort of residents that remain in these settings due to the requirement for significant nursing supports and appropriate accommodation.

Measures to prevent young persons from entering nursing homes will continue to be provided through the use of support services such as respite, home support and personal assistance services.

Decongregation

Time to Move On from Congregated Settings is progressing and continues to demonstrate very positive results for service users who have transitioned to living in homes in community settings. Overall, the population in congregated settings is 50% lower than those identified in the original report; 16 Centres have been fully de-congregated and now there are less than 1,800 people remaining in congregated settings:

- A total of 945 people had completed their transition to the community by 01/01/2020
- 6 centres have closed completely and now support residents entirely in the community
- There are 19 centres that now have less than 10 people remaining in the setting/campus.
- There are 1,494 residents (76%) now living in units with no more than nine other people and of this 343 residents (18%) are living in units with no more than three others.
- There are only 13 campus's with more than 50 residents remaining compared to 24 settings in 2012.
- In 2012 the largest campus was home to 227 residents and the largest residential building was home to 112 people. Currently, the largest campus has 145 residents and the largest residential building has 28 residents.

Pointedly, the COVID 19 pandemic has highlighted the stark reality of the risk to health that living in a congregated setting can present for the residents. The vast majority of people with disabilities living in the residential services now live in small group homes with no more than nine others.

The target for de-congregation for 2020 was set at 132, and 126 people had transitioned from congregated settings to homes in the Community by year end.

The target for de-congregation for 2021 was set at 144. A total of 79 people transitioned from congregated settings to homes in the Community up to end Q3 2021. We understand from conversations with the CHO Areas and Service Providers that there are a significant number of people planned to transition in Quarter 4 and we are hopeful of meeting the NSP target by year end. Work remains on-going to address the key challenges arising in relation to the procurement of appropriate housing in a buoyant housing market, and the undertaking of necessary works to ensure HIQA compliance – which must be secured before any new facility can become operational.

With regard to the question concerning funding and unspent allocations, the HSE awaits the publication of the 2022 HSE Service Plan. The funding allocation was received recurring in 2021 and will recur automatically from 2022 onwards.

It is important to note however, that any unused 2021 funding will be a Time Related Saving (TRS) in 2021 and TRS cannot roll forward to 2022.



It is likely that the HSE will spend all of the allocated funding for the 'transfer of under 65s from nursing homes by year end, based on the activity data. However, of the €4.1m funding for decongregation, the HSE has now allocated €2.9m to the CHO Areas.

While we understand from conversations with the CHO Areas and Service Providers that there are a significant number of people planned to transition in Quarter 4 and we are hopeful of meeting the NSP target of 144 transitions by year end, work remains on-going to address the key challenges arising in relation to the procurement of appropriate housing in a buoyant housing market.

Bernard O Regar

Bernard O'Regan

Head of Operations - Disability Services,

Community Operations

