



National Lead for Palliative Care

Strategy and Planning
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Ceannasaí Náisúnta um Chúram Mhaolaitheach

Straitéis agus Pleanáil
Oispidéal Pobail Chonocán Chairmeil
Páirc Braemor, Baile an Teampaill, Baile Átha Cliath, D14 A5R2
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Jackie Cahill TD
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.

9th June 2021

PQ No. 25293/21: To ask the Minister for Health if the delivery of care to palliative care in-patients is to be given by homecare teams in future; if this is considered best practice; if so, the source of the practice being defined as best practice policy by the HSE and or his Department; and if he will make a statement on the matter.

Dear Deputy,

The Minister has requested the HSE to respond directly to you. I wish to apologise for the delay in responding, which is a direct result of the recent cyber-attack on the HSE. My response is as follows:-

The delivery of palliative care in Ireland is guided by a number of key documents including national policy (2001), HSE frameworks (2009 and 2017) and the Clinical Programme Palliative Care Model of Care (2018).

Palliative care is delivered within four settings and is provided in acute hospitals, specialist palliative care in-patient units (hospices), day care settings and where people live, either at home or in residential care. A person can be cared for in just one setting or if needed in all four settings during the course of their illness. The location of care is determined by the timing of the referral to palliative care, a needs assessment, the person's wishes and/or the complexity of care required.

In the average year there are approximately 3,500 new patient admissions to palliative care inpatient units while there are just under 10,000 new referrals to community/homecare. Some of these patients will access both services.

One of the aims of Sláintecare is to ensure that those who need care can access it as close to home as possible; this includes access to specialist palliative care in-patient (hospice) beds. There are currently 13 palliative care units in the country – two opened earlier this year, a further unit will open later in the year in the Southeast, and there are three new units in the planning stage. Plans are also underway to redevelop/extend the bed capacity of four existing units.

The palliative care inpatient unit is, and will remain, the cornerstone of care in the community. It acts as the hub for the delivery of homecare and for the development of

clinical excellence in the region. Hospices also play an important role in avoiding hospital admission for symptom management and/or end-of-life care.

Successive strategic documents recommend the on-going development of services across all four settings in order to ensure that no matter where a person is cared for they will receive a quality, safe, integrated and responsive service that meets their needs and supports their family.

I trust this answers your question but please do not hesitate to contact me should you require anything further.

Regards,

A handwritten signature in black ink that reads "Sheilagh Reaper-Reynolds". The signature is written in a cursive, flowing style.

Sheilagh Reaper-Reynolds
Strategy and Planning Lead for Palliative Care