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Na Seirbhísí Míchumais/An Rannán Cúram Sóisialta,
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Deputy David Cullinane,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: david.cullinane@oireachtas.ie

Dear Deputy Cullinane,

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 29905/22

To ask the Minister for Health the estimated revenue and capital cost of moving 100 persons under the age of 65 years out of nursing homes into assisted community homes.

HSE Response

The HSE is working to support people aged under 65 living in nursing homes to move to homes of their choosing in the community, 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.

In this regard, the HSE established a dedicated funding stream as part of the National Service Plan to enable people under the age of 65yrs to transition to their own home with support. This initiative is in line with the Programme for Government and the UNCRPD, as well as Time to Move On Policy and the Ombudsman's Report into the placement of persons under 65 years of age in nursing homes.

In 2021, a budget of €3 million was secured to enable 18 people under 65 living in nursing homes to move to homes of their choosing in the community. 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 this subsequently informs the transition plan and support for the person. 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 nine Community Healthcare Areas (CHOs) and each Area is working within this budget. There was no additional funding for capital or project overhead costs included.

It is difficult to cost moving 100 persons under the age of 65 years out of nursing homes into assisted community homes as 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).

However, in 2022, in accordance with the National Service Plan, €5.5m in funding has been provided to support a further 63 people with disabilities (<65yrs) inappropriately placed in nursing homes to transition to more appropriate placements in the community and progress implementation of the



recommendations of the Ombudsman Report in line with the HSE Action Plan, which includes working with acute services to prevent inappropriate discharges to nursing homes. This equates to €87,302 per person for direct care support hours. Therefore an indicative cost for 100 people would be approximately €8,730,200 for direct care support hours.

Costs

Revenue Funding

The additional revenue funding required for each person moving to the community from a nursing home setting is currently estimated to be in the region of at least €70,000 per person. This cost is estimated based at the highest cost band based on current day service profiling tool, to recognise that each person needs to be appropriately supported with a meaningful day service in line with current policy (New Directions) once they leave the residential setting.

The cost to support 100 people to move would be approximately €7,000,000 (taking an average cost of €70,000 per person).

Capital Funding:

Delivering appropriate housing for the people transitioning from the congregated settings is achieved through a number of different options depending on support and housing needs. This may be:

- Social Housing Options (under the DHPLG/Housing Authorities), either revenue or capital funded
- HSE Capital funded housing projects

Based on the cost of the housing projects delivered to date under the HSE Capital funding stream, it is estimated that a capital cost in the region of €160,000 per person is required to support the transition to community. There is no provision in this figure for the increase in the cost of building materials currently being experienced across the construction sector, which is identified as a 20% price rise.

The average cost per person is the benchmark currently being used as this will accommodate a range of options/solutions some of which are less expensive or can be met through revenue funding options (i.e. rental arrangement with HAP payment) and others that are significantly higher cost i.e. for people requiring more specialised housing.

Caveats

- The costs per person provided are an average. There are significantly large variations depending on the support needs of the individuals and the capacity of the service providers to reconfigure and release resources.
- The true cost of moving people with disabilities under the age of 65 years out of nursing homes into assisted community homes, is still being explored as these people have significant supports and appropriate accommodation needs. The cost required per person is expected to increase over time as the number of people with disabilities remaining in Nursing Homes decreases, the complexity of support needs for those people is greater. In addition to this, there are also a significant number of under 65 year old people with disabilities living in nursing homes for older people, as noted in the Ombudsman Report “Wasted Lives” which do not feature in the Time To Move statistics.

In addition, the HSE welcomes the recent publication of the Department of Health’s “*Disability Capacity Review to 2032 -A Review of Disability Social Care Demand and Capacity Requirements up to 2032*”. The Capacity Review provides detailed evidence of the extent of demographic and unmet need and provides detailed estimates of service and expenditure requirements for:

- residential care
- adult day services
- personal assistance and home support
- multidisciplinary therapies
- respite, and other community services and supports.



The Capacity Review emphasises the importance of a planned approach to meeting current and future requirements and the critical need for a multi-annual current and capital funding programme to secure effective and timely delivery, at the most reasonable cost. The HSE strongly welcomes this recommendation and agrees that detailed forward planning underpinned by multi-annual investment is required to ensure that services become available where and when they are needed.

Implementation Steering Committee

The HSE has also established an Integrated Steering Group (ISC), chaired by the Chief Operations officer, with membership drawn from Acute, Older Persons, Disability and Primary Care, along with Clinical Leads and a number of people with lived experience. The work of the ISC will oversee the implementation of the recommendations set out in the Ombudsman's report and provide a level of assurance regarding the health, safety and dignity of residents, aged under 65 years, living in residential care settings and ensure the efficient transition to alternative care settings, where appropriate.

Service Reform Fund Project

The HSE has appointed a Project Lead under the Service Reform Fund to undertake a mapping exercise of the current population to establish a database of people under the age of 65 in nursing homes. This will support identification of those inappropriately placed, to enable a determination of the supports required. This project is funded up to mid-2022.

A key outcome of NSP 2021 & 2022 and the SRF project will be to gather and collate information 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).

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.

Yours sincerely



Bernard O'Regan
Head of Operations - Disability Services,
Community Operations