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**Date: 07/07/2022**

Deputy Alan Farrell TD

Dáil Éireann

Leinster House

Dublin 2

**PQ 34337/22**

**To ask the Minister for Health the steps that the HSE is undertaking for patients to access neurology supports once their initial appointment has occurred; and if he will make a statement on the matter**

Dear Deputy Farrell,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

**Response:**

The breadth of Neurological disorders is huge, and each condition has a variable presentation, progression, and care requirements in terms of ongoing supports following an initial appointment. Neurological centres and their staff nationally are skilled at ensuring following an initial appointment with a consultant Neurologist and their team, that a patient is signposted, referred to or linked in directly with the Neurological supports that a specific patient may require based on initial assessment.

The range of ongoing supports can vary from person to person, and their support requirements may change over their lifetime. Neurology teams will assess the individuals clinical presentation and initiate ongoing supports as required. This may involve ongoing review appointments with their Neurological team or referral to additional support services in the community, such as home care packages, exercise

programmes, primary care teams, ongoing care through GP services and so on. The National Clinical Programme for Neurology (NCPN) recognises in particular the significant ongoing support the Voluntary sector provide for patients with a Neurological diagnosis and in many cases the local voluntary organisation will have a close relationship with their neurological centre, working in tandem to support a patient.

The National Clinical Programme for Neurology (NCPN) recognises that geographical and service differences can be experienced by patients in terms of access to services and is working at bridging any geographical or service-based gaps that may exist. We recognise that this may take time and involve an integration of services across community and acutes services as well as the voluntary and private sector.

I trust this answers your question to your satisfaction.

Yours sincerely,



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**Emma Benton**

**General Manager**

**Acute Operations**