

Leas Stuirtheóir Náisúnta, Seirbhísí Dhaoine Scothaosta, Athrú is Nuálaíocht,

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Deputy Michael Healy-Rae Dáil Eireann, Leinster House, Kildare Street, Dublin 2.

Dear Deputy Healy-Rae,

The Health Service Executive (HSE) 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 23777_22

To ask the Minister for Health if his Department classify Alzheimer's as an official disability this would then allow people to attain the rights and entitlements that being declared a disabled person would allow them to have; and if he will make a statement on the matter.

64,142 people in Ireland are living with dementia. That number is expected to rise to 150,131 within twenty years. The health and social care system will need to respond with more flexible and personcentred services and supports that address the needs of the growing number of people with dementia.

The National Dementia Strategy (NDS), published by the Department of Health (2014) guides the national response to Dementia. It sets out a framework for the development of dementia supports and services in Ireland. The aim of the Strategy is to improve dementia care so that people with dementia can live well for as long as possible, can ultimately die with comfort and dignity, and can have services and supports delivered in the best possible way. The Strategy emphasises that most people with dementia live in their own communities and can continue to live well and to participate in those communities. The Strategy contains a set of priority areas and actions.

Age is the main risk factor for dementia, and the majority of people with the condition are aged over 65 years. The NDS states that dementia policy, service delivery and development should be guided by the principles of chronic disease management as set out in the Department of Health's Policy Framework for the Management of Chronic Diseases. These include:

- A national focus on population-directed health promotion;
- The development of structured, planned care for patients with long-term chronic conditions;
- The use of information systems and registers to plan and evaluate care for individuals with chronic disease:
- The development of a model of shared care that is integrated across organisational boundaries;

- Planning care that is delivered in the appropriate setting;
- Using multidisciplinary teams in the provision of care;
- Providing a monitoring and evaluation framework for chronic disease programmes.

This NDS identifies a number of additional principles which should similarly underpin all approaches to care and support for those with dementia. The Strategy seeks to translate these principles into practice through the refocusing of current service delivery to address the needs of people with dementia and their carers in a way that is responsive and flexible. Recognising that a social and clinical response is required and that dementia cuts across many areas of provision, the Strategy also emphasises the need for a 'whole community response' to dementia, with health and social care services as only one part of the package of supports that people with dementia need.

The NDS also outlines that the Department of Social Protection provides a range of payments and supports that people with dementia might qualify for, including State pensions and illness and disability payments, such as Illness Benefit, Disability Allowance or the Invalidity Pension. Workplace supports and payments to facilitate participation by people with disabilities in the labour force include the Partial Capacity Benefit and the Wage Subsidy scheme.

Regards.

Janette Dwver

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