

Oifig an Cheannaire Oibríochtaí.

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

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26th June 2023

Deputy Peadar Tóibín, Dail Eireann, Leinster House, Kildare Street, Dublin 2.

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Dear Deputy Tóibín,

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: 28496/23

To ask the Minister for Children; Equality; Disability; Integration and Youth if he will address three specific matters raised in correspondence (details supplied)

Details supplied; On the general matter of hours in the "pending" Homecare / Care plan category issue. Can the minister explain . a) why, when hours are approved for a person with a disability, some of those hours are held in the "pending" category. b) What are the standard national and local processes through which pending hours can be moved to actual hours so that they can be delivered for the benefit of a relevant person. c) Are there differences between regions on how such hours are moved from pending to actual approval.

HSE Response

The HSE provides a range of assisted living services including Personal Assistant and Home Support Services to support individuals to maximise their capacity to live full and independent lives.

PA and Home Support Services are provided either directly by the HSE or through a range of voluntary service providers. The majority of specialised disability provision (80%) is delivered through non-statutory sector service providers.

Services are accessed through an application process or through referrals from public health nurses or other community based staff. Individuals' needs are evaluated against the criteria for prioritisation for the particular services and then decisions are made in relation to the allocation of resources. Resource allocation is determined by the needs of the individual, compliance with prioritisation criteria, and the level of resources available. As with every service there is not a limitless resource available for the provision of home support services and while the resources available are substantial they are finite. In this context, services are discretionary and the number of hours granted is determined by other support services already provided to the person/family.

In the normal course of service delivery, there will be ongoing reviews throughout the year to ensure that if needs change the service provided will address this change within available resources. An individual's PA or



Home Support hours may be adjusted following a service review where service demand can result in one individual's service being reduced in order to address priority needs of other people with disabilities within that community.

Currently, each CHO has a process to manage applications and referrals for PA and Home Support Services. While many individuals are adequately provided for by their current level of support, it is also the case that many would benefit from more support hours if they were available.

Home Support Service

The Home Support service provides domestic and or personal care inputs at regular intervals on a weekly basis. Temporary relief is offered to the carer by providing a trained reliable care attendant to look after the needs of the person with the disability. The service provides support to the parents to enable them to spend quality time with the other siblings in the family. It also supports the individual with the disability in terms of their care plan, with particular attention on the personal needs of the individual. Home supports can be an alternative to residential care, where support to individuals in daily living can avoid the need for full time residential services.

Whilst there is currently no centrally maintained list of people awaiting these services, each Community Health Organisation Area would be aware of the presenting needs within each of the geographic areas. Following referral and assessment, available resources are allocated to clients with highest level of need.

The terminology "pending category" is not in use nationally by the HSE in a formal manner.

Some Community Healthcare Area (CHOs) may use the term 'pending' for homecare hours that have been approved through referral team meetings and which cannot be filled immediately.

Home Support hours approved are forwarded to agencies for the provision of those services.

Once approved homecare hours can be filled by either HSE or agency staff, their status moves from 'pending' to 'actual'.

While every effort is made to provide home support hours, Home Support/ Care providers are currently experiencing extreme staffing shortages problems and consequently may not have the staff to deliver home support hours in full.

Services are reviewed on an ongoing basis and provided on the basis of greatest presenting need and associated risk factors.

The need for increased services is acknowledged and the HSE continues to work with agencies to explore various ways of responding to this need in line with the budget available.

Disability Support Application Management Tool (DSMAT)

The HSE Disability Services has introduced a system called the Disability Support Application Management Tool (DSMAT), which enables Community Healthcare Organisation (CHO) areas to record and manage requests for support and to ensure that the application process is equitable and transparent. The DSMAT provides a consistent listing process for each CHO Area by presenting a detailed profile of the individuals (Adults & Children) who require funded supports outside of the current service quantum.

It captures detailed information on home and family circumstances and a detailed presentation profile of the individuals, including specialised profiles of behavioural intensity, key diagnoses, and complex support needs due to the extent and intensity of intellectual and/or physical & sensory disability.

It is important to note that in the absence of a statutory, legislative framework providing entitlement to services, the DSMAT is not a chronological waiting list. Rather, it is a support to the CHO area to feed into its decision making process around prioritisation of services subject to budgetary constraints. This means that services are allocated on the basis of greatest presenting need and associated risk factors.



The most recent information available, which is a demand profile, outside of current service quantum, shows that there are 1,997 applications for Non-Residential Services, such as PA, Home Support and Respite Services.

Future Planning

With regard to additional PA and Home Support Services, the Department of Health's 2021 Disability Capacity Review advises that up to €15 million per year by 2032 – equivalent to 600,000 additional hours - is needed to meet the requirements for Personal Assistants and Home Support.

Each CHO continues to actively manage applications for support from service users with high levels of acuity/ safeguarding risks, through active case-management and inter-agency cooperation.

Yours sincerely,
Bernal O'Regan

Mr Bernard O'Regan,

Head of Operations - Disability Services,

Community Operations

