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29th July, 2025

Mr. Thomas Gould, T.D.,
Dáil Éireann,
Dublin 2

PQ ref 38863/25

"To ask the Minister for Health to outline the total number of respite hours provided to families in Cork over each of the past 12 months; the total number that has been provided each month since March 2021, in tabular form; and if she will make a statement on the matter."

Dear Deputy Gould,

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.

Please see below figures for the total number of respite hours provided to people in Cork on the public health nursing caseload:

Jun 2025	May 2025	Apr 2025	Mar 2025	Feb 2025	Jan 2025	Dec 2024	Nov 2024	Oct 2024	Sep 2024	Aug 2024	Jul 2024
8,880	7,872	11,928	11,568	9,216	9,864	11,304	12,144	13,896	10,896	10,416	12,408

Jun 2024	May 2024	Apr 2024	Mar 2024	Feb 2024	Jan 2024	Dec 2023	Nov 2023	Oct 2023	Sep 2023	Aug 2023	Jul 2023
15,408	17,592	16,272	15,504	13,224	10,752	10,176	11,448	12,576	11,424	9,072	13,800

Jun 2023	May 2023	Apr 2023	Mar 2023	Feb 2023	Jan 2023	Dec 2022	Nov 2022	Oct 2022	Sep 2022	Aug 2022	Jul 2022
10,512	9,864	11,928	10,656	10,464	7,774	8,136	8,520	10,680	7,416	6,936	7,368

Jun 2022	May 2022	Apr 2022	Mar 2022	Feb 2022	Jan 2022
6,312	12,360	10,752	8,484	7,008	5,712

Unfortunately, figures are not available prior to January 2022.

Please note there are no emergency respite beds in private nursing homes managed and operated by the Public Health Nursing service.

Respite by its very nature is a planned service provided to the clients on the Public Health Nursing caseload in need of same. Respite beds in private nursing homes are booked months in advance by the Public Health Nursing service. These respite beds are in constant demand and vacant beds are very rare. Where a respite bed is cancelled (usually at short notice), the bed is offered to the next person on the respite cancellation list.

There are three potential avenues for the Public Health Nursing service to refer clients for respite. This depends on geographic location and service availability.



1. Mainstream HSE respite via Community Nursing Units (Community Hospitals). Access to respite in these locations is nominal and is arranged by an individual's Public Health Nurse/Community Nurse in consultation with the Director of Nursing in the Community Nursing Unit. The Public Health Nursing service manages the schedule for respite beds in consultation with the Director of Nursing.
2. The majority of respite is mainstream HSE respite via the Central Respite Office. The Public Health Nurse assesses the client and sends a referral form to the Central Respite Office with proposed dates and proposed locations as per the client and family wishes. Respite is then booked, when available and arranged by the Central Respite Office. The Public Health Nurse has no role in arranging or managing the scheduling for these respite beds.
3. Emergency Respite Cash Grant - where the Public Health Nursing service is unable to provide a respite bed at short notice to a client/family in need of emergency respite care, the family applies for an emergency cash grant (for a two week period) through the Public Health Nursing service. Following completion of the Emergency Cash Grant request form by the family and sanctioning by the Director of Public Health Nursing, the family make enquiries to a nursing home of their choice for this emergency respite bed.

If I can be of any further assistance please do not hesitate to contact me.

Yours sincerely,

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