

Cúram Sóisialta

Older Persons Services

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FSS Bhaile Átha Cliath Theas agus Cill Mhantáin Bloc B, Lárionad Cathrach, An tSráid Mhór, Bré, Co. Chill Mhantáin, A98 X329.

28th July 2025

John Brady TD Dáil Éireann Leinster House Kildare Street Dublin 2 D02 XR20

PQ 41316/25: To ask the Minister for Health the reason the rehabilitation unit in Leopardstown Park Hospital, Dublin is closing; who has directed this closure; and if she will make a statement on the matter. John Brady TD

Dear Deputy Brady,

Further to your query above. I understand you have also written directly to Leopardstown Park Hospital (LPH) directly and received a response from their interim CEO.

Following a recent Regulatory inspection, Leopardstown Park Hospital was advised by the Health Information and Quality Authority (HIQA) that a separate and distinct governance structure, including a dedicated Person in Charge (PIC), would be required for the continued operation of the Rehabilitation Unit. The Rehabilitation Unit consists of 7 female-only rehab beds.

This marked a significant shift from the long-standing arrangement whereby governance and staffing resources were shared across the wider Designated Centre. In response, LPH formally sought clarification from the Authority regarding the feasibility of maintaining shared clinical and governance arrangements. They were advised that shared resources including nursing, clinical, and management staff could no longer be utilised within the Rehab Unit.

It is important to note that this requirement had not previously been raised by HIQA in earlier inspections or correspondence. Given the scale of the operational and staffing changes required to meet this new model, particularly in the context of current national healthcare workforce challenges, the matter was escalated to the Hospitals' Board of Directors and the HSE.

Following a full and careful review, and in consultation with the Senior Management Team, the Board made the decision to cease new admissions to the Rehabilitation Unit. This decision was not made lightly and was taken with deep regret, given Leopardstown Park Hospital's longstanding and proud commitment to the provision of rehabilitation services. However, it was determined to be the most responsible course of action in order to ensure patient safety, regulatory compliance, and the overall sustainability of services within the hospital. All patients currently receiving care within the Rehab Unit have continued to receive their full care plans as planned and scheduled, with no compromise to the quality or continuity of their care. Interim oversight arrangements are in place, including the assignment of a dedicated additional Clinical Nurse Manager to oversee daily operations, reporting directly to the Director of Nursing. Governance responsibility remains with the current Person in Charge of the Designated Centre. The team at LPH remain fully committed to supporting those impacted by this transition and continue to work closely with the Health Service Executive and other relevant stakeholders to explore how best to align our services with the needs of the community and evolving regulatory expectations/obligations.

I wish to advise you that while Leopardstown Park Hospital is funded by the HSE, as a Section 38 Provider as a State Body, it's Board are independent in their role as appointed by the Minister for Health, to provide clear strategic and operational governance for the service in conjunction with the HSE. In terms of the ongoing financial challenges and obligations under the HSE's Employment Control Framework, the Board and the HSE must consider the overall financial sustainability of the service in its totality and therefore a focus on LPH's key/core obligations in terms of extended nursing care is essential. LPH currently has 91 beds in this regard which are in high demand. The continued operation of the 7 Rehab beds, within an inappropriate ageing environment with the associated significant additional costs related to additional Regulatory requirements, as outlined above, would in fact place the overall services at the Hospital in financial jeopardy. Cognisance of the activity levels associated with these 7 beds was also taken into consideration by the Board in discussion with the HSE while arriving at its decision, a decision which is supported by the HSE given the generally low level of demand for these specific services at the LPH while appropriate service options are available elsewhere.

The overall strategic plan for this service is to focus on the construction of a new Residential Care Centre which will deliver 125 residential care beds before 2029, which is in line with the strategic plan for the core model of this service. The Board of LPH are working closely with the HSE and the LPH Trust in this regard and I can confirm a design plan has been agreed for which a planning application has already been submitted to the relevant planning authority.

I hope this information is of assistance to you.

Yours sincerely

John O Donovan Head of Service – Older Persons