



Oifig an Stiúrthóir Cúnta Náisiúnta,
Foireann Míchumais Náisiúnta, An Chéad
Urlár - Oifigí 13, 14, 15, Áras Phlásóg na Rós,
Coimpléasc Gnó na hOllscoile, Páirc
Náisiúnta Teicneolaíochta, Caladh an
Treoigh, Luimneach

Office of the Assistant National
Director, National Disability Team,
First Floor- Offices 13, 14, 15,
Roselawn House, University Business
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19th June 2025

Deputy Mark Wall,
Dáil Éireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: mark.wall@oireachtas.ie

PQ: 24609/25

To ask the Minister for Children; Disability and Equality to confirm the number of publicly provided residential care places for children available in each year from 2020 to 2024, and the number available in 2025, in tabular form; the additional number of regulated places added in each year, either public or private; the plans for adding new public places in 2025; the additional funding in place for 2025 to provide new places; and if she will make a statement on the matter.

PQ: 24610/25

To ask the Minister for Children; Disability and Equality the estimated average capital cost and current expenditure operating cost respectively of providing each new publicly provided residential care place for children; to provide a breakdown of staffing costs; and if she will make a statement on the matter.

HSE Response

Thank you for your Parliamentary Questions referenced above, which have been forwarded to me for direct reply.

Residential services make up the largest part of the Disability funding disbursed by the HSE – almost 60% of the total budget – and approximately 90 service providers provide residential services to 8,722 individuals throughout the country. The bulk of these are provided by the 50 highest funded agencies (comprising both Section 38 & Section 39 organisations) – some 6,371 places, or 73%. The HSE itself provides 1,058 or 12% of the places. While 1,271 places or 14% are provided by Private-for-Profit agencies .(End of April 2025 data)

The HSE developed a Residential Capacity Database to capture the number of residential placements / contract capacity per the service arrangement between the previous nine CHO areas, now 6 Regional Healthcare Areas (RHAs) and the service provider agencies.

Please see the table below which provides information on the number of residential places at the end of December each year from the end of 2020 up to the end of April 2025.

Table 1: Residential Places at year end 2020 to End April 2025 (publicly funded)

Year	End 2021	End 2022	End 2023	End 2024	End of April 2025
Residential places	8,146	8,283	8,400	8,660	8,722



With regard to the number of residential places for children, of the 8,648 places in 2024, 239 of these were childrens' residential places and of the 8,722 places at the end of April 2025, 245 of these are childrens' residential places.

The children/adults split on the Residential Database is still under review and, therefore, the final status as @ end-2023 and prior years is not available.

In addition, there are no childrens' residential services directly delivered by the HSE.

A number of new emergency residential places have been added to the residential base, which results in a capacity increase. However, it should also be noted that Residential Capacity will also reduce during the year as a result of the loss of places in congregated settings due to deaths, which cannot be re-utilised. This is in keeping with Government policy, which is to move away from institutionalised settings (i.e. Time to Move On from Congregate Settings) where the State is actively implementing a policy that will have a bed reduction impact. In addition, "in-year" capacity (bed) levels will also be impacted negatively as a result of regulatory requirements; that is, where an inspection outcome leads to capacity being reduced.

Service Plan 2025

In accordance with NSP 2025, Specialist Disability Services is committed to developing 70 new Priority 1 residential placements. At end of April 2025, 58 new Priority 1 residential places were developed.

Regulated Places.

With regard to regulated places, all residential disability services/places must be registered with the Health Information and Quality Authority and assessed to ensure compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, and the Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 (as amended).

The Health Information and Quality Authority (HIQA) is an independent statutory body established to promote safety and quality in the provision of health and social care services for the benefit of the health and welfare of the public. HIQA has responsibility for regulating social care. The Chief Inspector of Social Services within HIQA is responsible for registering, inspecting and monitoring residential services for older people and people with a disability, and children's special care units.

HIQA's Disability Overview Report 2021 reports that there were 1401 designated centres with 9,039 registered residential places for people with a disability.

Please see:

<https://www.hiqa.ie/sites/default/files/2022-08/DCD-overview-report-2021.pdf>

According to a HIQA report, at the end of 2022, there were 1,342 centres for people with a disability, with 8,405 registered places.

Please see:

<https://www.hiqa.ie/sites/default/files/2023-09/Disability-Overview-Report-2022.pdf>

HIQA's report 10 Years of Regulating Designated Centres for People with Disabilities reports that at the end of 2023, there were 1,574 centres offering 9,147 places for people with disabilities.

Please see:

<https://www.hiqa.ie/sites/default/files/2024-11/DCD-10-year-overview-report.pdf>

By the end of 2024, there were 1,655 designated centres for people with disabilities, which is a net increase of 81 centres compared with 2023. These centres provided 9,246 residential places which was a net increase of 99 on the previous year. Of these, 1,490 centres were for adults, 129 were for children specifically and 36 were for a mix of both adults and children. The mixed centres were usually either respite centres where adults and children were accommodated at different times or centres where the residents were transitioning to adulthood and wished to remain living together.



Please see:

<https://www.hiqa.ie/sites/default/files/2025-06/HIQA-Annual-Report-2024.pdf>

It is important to note that there may not be full occupancy in the Centres due to various reasons including but not limited to :

- a) Complexity of some recipients leading to reduced capacity;;
- b) Beds used for emergency residential for residents who are awaiting full time accommodation;
- c) Beds not always occupied due to complexity/compatibility of individuals;
- d) Risk of peer to peer behaviours may result in a reduction in capacity;
- e) HIQA Compliance issues e.g. Fire Doors;
- f) Ongoing negotiation with staff/Unions regarding rosters (sleep-over issues).

Costs

The cost of any particular project is directly related to the scale and scope of said project. The design, build and/or purchase and refurbishment of a building that meets all regulatory requirements is also market dependent.

Disability residential care placements are provided in a variety of settings by a variety of providers; S38 and S.39 organisations, for profit providers and out of state providers. The cost of a residential care placement varies significantly depending on the needs of each child, the needs of the other service users in the residential setting, the layout of the settings and the service hours provided as part of the residential care placement.

In the absence of specific details, it is not possible to provide a cost for any particular project, however approximately we can say:

The Design and Build and/or Purchase and Refurbishment of a minimum 4-bedroom residence with ancillary requirements per Health and Safety requirements and HIQA registration has an indicative estimate of €670k to €980k per facility.

With regard to the cost of providing a new (emergency placement/ non Tusla) residential care place for children, based on YTD April 2025 data, annual current expenditure operating cost of a publicly provided residential places for a child can vary from €200k to in excess of €1m, noting this is based on the cost of places that commenced year to date.

Future Planning

The demand for full-time residential placements within designated centres is extremely high and is reflective of the absence of multi-year development funding that has not been in place since 2007/2008.

The Department of Health's 2021 Disability Capacity Review has projected a need for a minimum of an additional 1,900 residential places by 2032 under a minimum projection and an extra 3,900 in order to return to levels of provision prior to the beginning of the 2008 recession.

Action Plan for Disability Services 2023-2026

The Action Plan for Disability Services 2024-2026, sets out a three year programme designed to tackle the deficits highlighted in the *Disability Capacity Review to 2032*, which identified the demand for specialist community-based disability services arising from demographic change, and considerable levels of unmet need.

Specifically, the Disability Capacity Review projected a need for a minimum of an additional 1,900 residential places by 2032 under a minimum projection and an extra 3,900 in order to return to levels of provision prior to the beginning of the 2008 recession. Moreover, the central projection of the Capacity Review suggests that adults with intellectual disabilities requiring specialist services will increase by a sixth between 2018 and 2032, with fastest growth for young adults (up a third by 2032) and over 55s (up a quarter). These projections include an average of approximately 90 new residential places that will be needed each year from 2020 to 2032 to accommodate changes in the size and age structure of the disability population.



The Action Plan is designed to provide additional funding for developments that will help build capacity within services, so that the benefits of these funding increases will be felt directly by the service user. This will also help the HSE in dealing with some of the key cost-drivers in service delivery, such as high-cost emergency residential placements, giving greater flexibility and control when planning services.

The headline service improvements which are planned over the 2024-26 period are:

Residential

- Around 900 additional residential care places to tackle unmet needs and ensure supply keeps pace with demographic change;
- 500 new community-based residential care places to replace disability care in large institutional and campus-based settings, with a view to ending that form of provision by 2030;
- Continued expansion of respite services, including alternative residential options

Yours Sincerely,

Gerry Tully,
Assistant National Director, Adult Disability Services, Access & Integration