Oifig an Stiúrthóir Cúnta Náisiúnta,
Foireann Míchumais Náisiúnta, An Chéad
Urlár - Oifigí 13, 14, 15, Àras 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
Complex,National Technology Park,
Castletroy,Limerick.

8th October 2025

Deputy Martin Daly,
Dáil Éireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: martin.daly@oireachtas.ie

PQ: 53640/25

To ask the Minister for Children; Disability and Equality the number of residential places for people with a disability currently being provided as of 1 October 2025 or latest date available; and by CHO area in tabular form.

Dear Deputy Daly,

Thank you for your Parliamentary Question referenced above, which has 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 8,809 individuals throughout the country. The bulk of these are provided by the 50 highest funded agencies (comprising both Section 38 & Section 39 organisations) – some 6,381 places, or 72%. The HSE itself provides 1,074 or 12% of the places. While 1,331 places or 15% are provided by Private-for-Profit agencies. (This is the most recent data available - end of August 2025 data).

A number of new Priority 1 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.

The HSE developed a Residential Capacity Database to capture the number of residential placements / contract capacity per the service arrangement between the HSE areas and the service provider agencies.

Please see Table 1 below which provides information regarding the number of residential places available and the number of priority 1 residential places developed by Regional Healthcare Area (RHA). The most recent information available is the end of August 2025 and since the beginning of 2025, data is reported by RHA.

Table 1

RHAs	Residential Places Available to end August 2025	Priority 1 Emergency Places Developed to end August 2025
HSE Dublin & Midlands	1,749	32
HSE Dublin & North East	2,031	38
HSE Dublin & South East	1,524	25
HSE Mid-West	849	12
HSE South West	1,173	12
HSE West & North West	1,483	23
Grand Total	**8,809**	**142**

There is no centrally maintained waiting list for residential services. The local HSE CHO/RHA areas would be aware of the need and requirements in their respective areas and would work with the local Service Providers with a view to responding to the level of presenting needs within the resources available.

Disability Support Application Management Tool (DSMAT)

HSE Disability Services has introduced a system called the Disability Support Application Management Tool (DSMAT), which provides a list and detailed profiles of people (Adults & Children) who need additional funded supports in each CHO.

DSMAT captures detailed information on home and family circumstances and a detailed presentation profile of the individuals. This enables Community Healthcare Organisation (CHO) areas to record and manage requests for support and to ensure that the application process is equitable and transparent.

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.

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.

The National Housing Strategy 2022 to 2027 places responsibility for the provision of housing with the Department of Housing and it is the responsibility of the HSE to provide additional supports related to care needs. The HSE and Local Authorities are required to work together to map the need and to develop plans for delivering housing to people with disabilities.

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. 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 Priority 1 residential placements, giving greater flexibility and control when planning services. While very significant additional funding has been provided to the sector, pay awards in particular across HSE, Section 38s and 39s has absorbed a significant proportion of that additionality.

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

<u>Residential</u>

- 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 option

Yours Sincerely,

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Tom McGuirk,
General Manager, Disability Services, Access & Integration