



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
Complex, National Technology Park,
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4th November 2025

Deputy Catherine Ardagh,
Dáil Éireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: catherine.ardagh@oireachtas.ie

PQ: 56859/25

To ask the Minister for Children; Disability and Equality to provide a breakdown of staff vacancies across respite and children's disability services; the way in which these vacancies are impacting the delivery of after-school and weekend supports; and if she will make a statement on the matter.

Dear Deputy Ardagh,

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

The HSE and its funded Agencies provide respite care to children and adults with disabilities. Respite can occur in a variety of settings for various lengths of time, depending on the needs of the individual service user and their family or carer, and according to available resources. Respite is not always centre-based and can be provided in a number of ways, e.g. Centre based; In-Home; Home-to-Home; Family Support, etc. As a vital part of the continuum of services for families, respite potentially helps prevent out-of-home full-time residential placements, preserves the family unit and supports family stability.

The provision of residential respite services has come under increasing pressure in the past number of years due to a number of impacting factors such as:

- an increase in the number of children and adults who are seeking access to respite as a reflection of general population increase;
- increasing levels of complexity across the sector due to better and improved health care;
- an increase in some cases in the age profile of people with a disability resulting in people presenting with “changing needs”;
- a significant number of respite places have been utilised on longer-term basis due to the presenting complexity of the individual with a disability and also due to home circumstances, which prevents availability of the service to other disabled persons who would normally avail of that respite.
- the regulation of service provision as set by HIQA, which requires Service Providers to comply with regulatory standards in order to meet regulation. Standards specify a requirement for personal and appropriate space which impacts on the capacity and Statement of Purpose for a Designated Centre. This has had a direct impact on capacity where respite beds are no longer allowed within a residential setting e.g. vacated by residents who go home at weekends or for holidays, can no longer be used for respite.
- Implementation of the national policy on congregated settings (Time to Move on from Congregated Settings Policy) determines capacity.

Respite is a key priority area for the HSE for people with disabilities and their families and we have seen significant investment in respite services, which has impacted positively on the level of service delivered in successive years.



In 2024, we delivered 160,952 overnights and 64,162 day only sessions to around 6,975 people with a disability. A comparison of 2023 and 2024 activity data, shows an increase of 9,351 respite overnights, representing a growth rate of 6.2% and additional Day-Only Sessions of 19,721 and a growth rate of 43.4%.

At the end of Quarter 2 2025, we delivered 82,609 overnight sessions and 33,966 day only respite sessions to 7,460 people with disabilities. (Please note that the figures are adjusted for non return of data).

Staff vacancies across respite and children's disability services

The HSE captures the employment levels in the HSE and Section 38 organisations, and reports monthly on employment levels through the monthly census reporting. The data for the monthly census report is gathered by employment returns made for the HSE and Section 38 organisations. This gives the overall WTE employed. This is further subdivided into care group level (Acute, Mental Health, Primary Care, Disabilities & Older People) and sub reported at regional level.

The Strategic Workforce Planning and Intelligence Unit has overarching responsibility for the production of employment monitoring reports/Health Service Personnel Census (HSPC) and National Absence Report and Staff Turnover Report.

Information pertaining to current staffing levels in the health service and per group area, including Disability Services, can be obtained at the following web link:

<https://www.hse.ie/eng/staff/resources/our-workforce/workforce-reporting/social-care.html>

It is important to note that the reports provided by the HSE Strategic Workforce Planning & Intelligence Unit refer to staff numbers in the HSE and in S38 organisations and do not include staff employed in S39 organisations. (The majority of specialised disability provision, including respites services, (80%) is delivered through non-statutory sector service providers funded by the HSE using allocated budget funding).

The end of September 2025, workforce report indicates that there are 22,158 WTEs employed in Disability Services (HSE and S38 agencies). This is increased from 18,273 WTE at the end of December 2019.

It is not possible to extrapolate how many staff are working in respite service provision.

While there is no national vacancy report, it is reported that the absence rate in Disability services at the end of September 2025 was 6.10%.

Please see workforce reports which are available at:

[Disabilities Workforce Reports - HSE.ie](#)

With regard to the impact that staff vacancies have on the provision of services, so far in 2025, in accordance with the National Service Plan, the HSE has already in the first half of the year delivered 33,966 day respite sessions, which is 2.9% ahead of the NSP target, and 10% ahead of same period last year. These day respite sessions include alternative respite provision such as in-home respite support hours, home sharing short breaks and group-based targeted services such as summer camps and evening sessions.

The HSE does report discreetly on Children's Disability Network Teams workforce and vacancy rates for the HSE, Section 38 and Section 39 lead agencies. The latest report (April 2025) on vacancy rates can be found at:

<https://www.hse.ie/eng/services/list/4/disability/progressing-disability/pds-programme/documents/national-childrens-disability-network-team-workforce-report-june-2025.pdf>

There has been +415 WTE in Children's Disability Network Teams and a reduction in vacancy rate from 29% to 18% between the periods of October 2023 and April 2025.

While there is still unmet need in children and families accessing Children's Disability Network Teams, there has been an improvement in the number of children on case load and a reduction in the number of children on waiting lists

The CDNTs are currently providing services and supports for 44,440 children and strategies and supports for on average 1,110 waitlisted children with urgent needs where staffing resources allow.



Between Jan 1st 2025 and September 30th 2025:

- Although 7,905 new children were referred to CDNTs, CDNT waiting list has been reduced by 21% from 12,920 to 10,099 children
- Open CDNT caseload has increased by 4% from 42,836 to 44,440

Future Planning

There is significant unmet need currently and the projected changes in the size and age profile of the disability population will add to unmet need over the coming decade.

With regard to centre based respite, the Disability Capacity Review informs of up to €10 million in additional provision per year is required (20% additional quantum – 26,200 approx. additional overnights per year).

The Action Plan for Disability Services 2024 – 2026, prepared by the Department of Children, Equality, Disability, Integration and Youth, details the mix of overnight and alternative respite that will be provided in the short term, and will aim to maximise the impact and reach of these services.

It is proposed to increase the level of respite provision by around a third, through a mix of:

- Provision of alternative respite options including in-home respite, after-school and day respite programmes, host families, summer programmes;
- Using existing overnight residential capacity to the maximum extent;
- Providing additional overnight respite capacity where this is needed.

In NSP 2025, additional allocation has been provided to increase the occupancy of existing respite capacity, where feasible, and alternative respite provision, including in-home respite support hours and group-based targeted measures such as summer camps and evening provision.

HSE Disability Services has been engaging with Department of Children, Disability, and Equality (DCDE) in relation to their draft Programme for Government Delivery Plan. This includes implementation of the Action Plan for Disability Services 2024-26, and resourcing and delivering on its targets as well as developing a new Vision for specialist disability supports and services for 2030 and a revised Capacity Review.

Specifically, in relation to respite service, the HSE is working in conjunction with DCDE to develop a working paper to examine provision to date, demand, and challenges to inform future respite provision. This will include a HSE Audit of the capacity & provision of respite services across all Health Regions.

Yours Sincerely,

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