

# 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.

21st May 2024

Deputy Pauline Tully, Dail Eireann, Leinster House, Kildare Street, Dublin 2. E-mail: <u>pauline.tully@oireachtas.ie</u>

Dear Deputy Tully,

The Health Service Executive has been requested to reply directly to you in the context of the following parliamentary question, which was submitted to this department for response.

### PQ: 19215/24

To ask the Minister for Children; Equality; Disability; Integration and Youth to detail the community-based supports that are available to people who have acquired a disability due to stroke, heart attack or accident; the measures he is taking to increase these community-based supports for people with an acquired disability; and if he will make a statement on the matter.

#### **HSE Response**

The HSE provides and funds a range of community services and supports to enable each individual with a disability, including an acquired disability to achieve his or her full potential and maximise independence, including living as independently as possible. Services are provided in a variety of community and residential settings in partnership with service users, their families and carers and a range of statutory, non-statutory, voluntary and community groups. Services are provided either directly by the HSE or through a range of voluntary service providers. Voluntary agencies provide the majority of services in partnership with and on behalf of the Health Service Executive.

Disability services are provided based on the presenting needs of an individual rather than by the diagnosis of the individual or the actual type and cause of disability or service required. Services are provided following individual assessment according to the person's individual requirements and care needs. Services provided include Residential and Respite Services, Day Services, PA and Home Support Services, and Therapeutic Supports.

In addition, other services provided by the HSE are Aids and Appliances via primary care and Home Support Services for Older People (including Home Care Packages)

### **Personal Assistant and Home Support Services**

The HSE provides a range of assisted living services including Personal Assistant and Home Support Services to support individuals to maximise their capacity to live full and independent lives.

PA and Home Support Services are provided either directly by the HSE or through a range of voluntary service providers. The majority of specialised disability provision (80%) is delivered through non-statutory sector service providers.

Services are accessed through an application process or through referrals from public health nurses or other community based staff. Individuals' needs are evaluated against the criteria for prioritisation for the particular services and then decisions are made in relation to the allocation of resources. Resource allocation is determined by the needs of the individual, compliance with prioritisation criteria, and the level of resources available. As with every service there is not a limitless resource available for the provision of home support services and while the resources available are substantial they are finite. In this context, services are discretionary and the number of hours granted is determined by other support services already provided to the person/family.

While there is no centrally maintained waiting list for PA and Home Support services, the local HSE CHO areas are aware of the needs in their respective areas and work with the local Service Providers to respond within the resources available.

The HSE is committed to protecting the level of Personal Assistant (PA) and Home Support Services available to persons with disabilities. The HSE has consistently, year on year, increased the number of hours of PA and Home Support Services delivered to people with a disability.

### **Day Services**

With regard to disability services, "New Directions" is the HSE's approach to supporting adults with disabilities including those with acquired injury, who use day services in Ireland.

New Directions sets out twelve supports that should be available to people with disabilities using 'day services'. It proposes that 'day services' should take the form of individualised outcome-focussed supports to allow adults using those services to live a life of their choosing in accordance with their own wishes, needs and aspirations.

Each day centre provides its own programme and the type of support may differ from centre to centre. However, activities and support offered include, but are not limited to, day programmes which are essentially a support

and therapeutic service designed to meet the needs of people through individual plans. The environment is designed to maximise the functional levels of service users. Day programmes provide a range of skills and activities such as independent living skills, personal development, education classes, social and recreational activities, and health-related and therapy supports. Day activation is essentially a programme that does not include work activity.

Currently almost 19,000 people are in receipt of disability Day Service supports at 1,041 locations around the country. These supports are provided by approximately 95 service provider agencies.

### **Respite Services**

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 the age of people with a disability resulting in people presenting with "changing needs";



- a significant number of respite beds 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 bed to other respite users;
- 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) is also affecting capacity.

There has been increased investment in Respite Service over the last number of years that includes additional allocation in successive National Service Plans to develop and enhance respite provision.

The HSE is very much aware of the importance of respite service provision for the families of both children and adults with disabilities and the impact the absence of respite service provision can have on people's lives. 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 in the last few years. In this regard, the HSE continues to work with agencies to explore various ways of responding to this need in line with the budget available.

There is no centrally maintained waiting list for respite services. The local HSE CHO 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.

### **Community Funded Schemes**

The Community Funded Schemes is a collective name for all of the many products, supports, supplies, appliances and aids that are provided through community services. There is an extensive range of assistive technology products and services provided to hundreds of thousands of individuals living with a wide variety of different medical conditions, under the CFS.

The HSE currently spends in excess of €250m per annum on these products and services. The scale of the programme is extensive and many thousands of items are provided from community based services across the country. Every PHN, continence advisor, clinical nurse specialist, occupational therapist, physiotherapist, dietician, speech and language therapist, podiatrist and orthotist, who prescribes an appliance, a sip feed, a prosthetic, oxygen or one of the many thousands of items used to support service users in the community, has a role to play in delivery of these extensive services.

The budget for CFS sits within the Primary Care function of the CHO's. Based on satisfying the eligibility criteria, people living with disabilities are like other people living with a broad range of medical conditions, eligible for Medical/surgical aids and appliances that facilitate and/or maintain mobility and/or functional independence. The HSE provides assistive devices to thousands of people with disabilities to enable them to maintain their health, optimise functional ability and to facilitate care in their primary care setting.

There are a variety of aids and appliances provided through community funded schemes and these products play a key role in assisting and supporting service users to maintain every day functioning. Supply of aids and appliances usually involves a qualified health care professional assessing an individual's needs and making a clinical recommendation on the supports required to enhance their daily living. Decisions relating to the approval of aids and appliances are based on a number of criteria including clinical need, demand, General Medical Service's eligibility, compassionate grounds, Long Term Illness eligibility, priority listing, resource availability or a combination of these criteria.

The Aids and Appliances Service Improvement Group have published a national list of aids and appliances and prescribing criteria on the HSE website. This sets out clear prescribing criteria to assist prescribers in evidence based decision making. This is available from the following webpage:

https://www.hse.ie/eng/services/list/2/primarycare/community-funded-schemes/aids-and-appliances/

## Organisations

There are many organisations funded by the HSE which provide services to people effected by an acquired brain injury such as a stroke or accident and their families. These organisations and services are mainly funded through Primary Care, Mental Health, Health and Wellbeing and Social Inclusion.

While the main bulk of support provided to stroke survivors is through Older Persons Services, there is a wide variety of resources available such as the volunteer Stroke scheme.

The National Clinical programmes (Stroke programme) provides a comprehensive overview of services provided to stroke survivors. Further information is available at:

https://www.hse.ie/eng/about/who/cspd/ncps/stroke/

In addition, the Irish Heart Foundation- the National Heart and Stroke Charity, is in receipt of funding from the HSE via Health and Wellbeing Services. This organisation is a source of valuable information and support to people are living with the effects of a heart or stroke injury and it supports numerous Stroke Support Groups throughout the country.

# Acquired Brain Injury Ireland (ABII)

The HSE funds a variety of organisations who provide supports to people with disabilities. This includes Acquired Brain Injury Ireland (ABII) which is a Section 39 voluntary organisation set up in June 2000 in response to the need for services for people with an Acquired Brain Injury (ABI).

ABII aims to enable people with ABI to live an independent life in the community, by providing and maintaining a supportive living environment.

ABII works in partnership with the HSE to provide a range of flexible and tailor made services for people with acquired brain injury, in direct response to local identified needs. Services provided by ABII nationwide include:

- Fourteen Assisted Living Services;
- Home & Community Rehabilitation / Outreach Services;
- Day Resource Services;
- Family Support Services / Home Liaison / Social Work;
- Psychological Services; and
- Acquired Brain Injury Awareness Information, Training and Education Programmes.

In addition, ABII is also known as the Peter Bradley Foundation which is the registered Provider for 15 residential centres around the country.

### Headway Ireland (HI)

Headway is a not-for-profit Irish charity that provides rehabilitation services to adults (18+) who are affected by brain injury such as a stroke.

Headway was founded in 1985 as a support group by families and interested professionals to address the needs of people with brain injuries, their carers and families. The charity now has centres in Dublin, Cork, Kerry and Limerick along with an Information and Education service in the South East.

Headway provides services to more than 1,342 people annually. Services include a Lo-call National Information and Support Helpline, Day Rehabilitative Services, Group Work, Individual Client Work, Rehabilitative Training Services, Psychological Services, and a Community Integration Service providing one-to-one support.

Headway's objectives are:

- to provide a range of rehabilitative services for people with an acquired brain injury.
- to provide information and support for families and carers of people with an acquired brain injury.
- to raise awareness and provide information about acquired brain injury.

Other organisations who provide services to persons who have had a disability as a result of cardiac arrest, stroke or accident include the Irish Wheelchair Association and Enable Ireland.

Yours Sincerely,

0 Regar Bernard

Bernard O'Regan Assistant National Director National Disability Team