Joint Committee on Health
Meeting 30th May 2018

Opening Statement

Mr. Pat Healy
National Director Community Strategy & Planning HSE
Chairperson and Members, thank you for the invitation to attend today’s meeting to discuss the Regulation & Future Planning for Homecare Provision.

I would like to introduce my colleague who is with me today.

- Mr. Michael Fitzgerald, Assistant National Director for Older Person’s Services, Community Strategy & Planning HSE.

I have provided a briefing note with my opening statement which outlines the current position and the actions being taken by the HSE to improve the current service model and to support the work of the Department of Health in relation to the planned legislation and regulation of this service. In this context the focus of my opening statement will be on some of the key issues involved.

**Current service provision**

The HSE National Service Plan 2018 provides for just over 17m home support hours to be delivered to 50,500 people at any one time within a budget of €408m. This includes the support provided through winter measures, for 1,170 people to a value of €18.2m, requiring discharge from acute hospital care. In addition a further initiative saw 324 people being provided with Home Support services in the context of the recent adverse weather (€5m Value full year).

Home support services for older people, funded by the HSE, are provided either by directly employed home helps or by voluntary and private providers, who have formal arrangements with the HSE to deliver the services. The type of support that is provided includes personal care and, where appropriate, essential household duties relating to the person’s needs to maintain them in their own homes and communities.

With the approval of the Department of Health, the HSE has moved to a single funded Home Support service from 1st January 2018 combining home help and Home Care Package Services into a single service – the Home Support Service for Older People.
For service users, the public and the Health System. The services will be easier to access and for the public to understand. Through the streamlining of the application processes, there will be a requirement to make only one application and decision for home support services for older people. Service users will also be facilitated to move to changed levels of service, as their assessed needs change, without the need for an additional application process.

Intensive Home Care Packages are funded separately, within a budget of €9m, and are being delivered to approximately 235 people at any time, the majority with a diagnosis of dementia who have extremely complex needs and require bespoke combinations of services, based on their specific care plans. Without such supports these people would have to be admitted to long stay residential care.

There has been a significant investment of €112m in Home Support for older persons over the past 3 years. However, demand for such services continues to grow, as the population of those aged over 65 years increases, and as a result, as of the 31st March 2018, there were 6,458 people assessed and approved for home supports (new or additional) who were waitlisted for services. The vast majority of these people are residing at home.

Legislating for a Scheme & Regulation of Services

The Department of Health is currently engaged in a detailed process to determine what type of home support scheme is best suited for Ireland. This process will consider the future design of a scheme as well as the licensing or regulation requirements for these types of services. The HSE welcomes this development and supports the introduction of future legislation in this area. The demand for Home Support and its importance as an alternative service to long stay care, has grown considerably over the past number of years. Similarly, the type of Home Support that is now required to meet the needs of the population is a more person-centered personal care model, rather than the more traditional home help service of earlier years centered around household duties. The development of this new service model grounded in the National Standards for Better Safer
Healthcare and sufficiently flexible to meet the more complex needs of an aging population brings with it challenges of ensuring that all providers are in a position to deliver a quality service and one in which the workforce are trained and competent to undertake the required duties.

Standards of care supported by appropriate regulation is therefore necessary to ensure that such quality care is provided and maintained and that governance and oversight is at a level to deliver this service safely and to the satisfaction of the recipients. The regulation needs to ensure that providers can quality assure services to demonstrate they meet the service users individual needs across a range of headings e.g.:

- the training and qualifications of staff undertaking the home support duties
- the policies of the providers to deal with person centered care
- the safeguarding of recipients of care
- the reliability of provision and the suitability of the service itself

The absence of a legislative based Scheme in the area of home support has been challenging, given that currently the qualifying criteria for such services can only be based on the needs of the person. There is no legal basis underpinning the scheme, means testing, or take account of other circumstances, when deciding upon its provision. In the development of such legislation it will be important to ensure that there is equitable access and a firm funding basis to a new home support scheme, while also ensuring that the requirements to have a timely and flexible approach to address the recipient’s needs, is maintained. In legislating for home support, cognisance must be taken of other legislation, already enacted, particularly the Nursing Homes Support Scheme, so that there are no ‘unintended consequences’ that could arise and that people are clear as to which Scheme applies to their particular needs.

**HSE Directly Provided Services**

THE HSE employs over 6300 home support staff in all areas outside of the Dublin/Wicklow area (CHO6, CHO 9 & parts of CHO 7) and County Clare. Over recent
years the HSE working with staff and their trade union representatives under the auspices of the WRC have implemented a comprehensive modernisation and improvement programme to better meet the needs of service users and the staff delivering the services. The detail of these arrangement are outlined in the briefing note provided.

**Section 39 Grant Aided Not for Profit /Voluntary Service Providers**

Section 39 grant aided providers of home support services have traditionally provided supports with household tasks however, the majority have evolved over the years to deliver personal care as well as essential household duties in line with the changing needs of older people. These providers are independent operators and employ staff directly. The HSE has been working closely with the voluntary sector to develop and consolidate the sector which will ensure that appropriate, sustainable and well governed models of service are implemented, which meet the needs of service users.

**Tender for Home Support**

Over the years as service provision has expanded, including the emergence of private providers, the HSE has developed appropriate specification and standards for delivery of services with an increased focus on person centred care and support grounded in the National Standards for Safer Better Healthcare (NSSBH). As part of this process the HSE has engaged in a formal tendering process for home care services which are renewed periodically. These arrangements, as well as ensuring value for money have also assisted in preparing the sector for future regulation of services and for the anticipated implementation of a national statutory scheme for home support in due course.

The HSE has recently commenced a tender process for home support services to replace the 2016 Tender arrangements. The documents have been published on the Government’s tender website (www.etenders.gov.ie). As the specific details for the tender process are only available to those who express an interest in participating in the tender process and given this is a “live” tender process I am
not in a position to go into specific detail in relation to it. However I have provided an overview of the overall tender process and arrangements in the briefing note submitted.

The Tender 2018 will provide for the introduction of a consumer directed approach to the delivery of home support as an additional mechanism of service delivery. This approach will facilitate clients to choose to have more say in the days and times of service delivery. Clients will have the opportunity to contact a number of approved providers and to consider the service on offer. To ensure quality of care the providers must be part of the approved provider listing set up following the tender process and the provider must not charge rates in excess of the agreed tender rates. Furthermore, the provider and the client must have regard for any specific requirements identified in the HSE assessment of need.

**Home Support Forum**

In 2016 the HSE established a forum involving representatives of the not for profit sector (National Community Care Cetwork – NCCN), the “for profit” sector (Home & Community Care Ireland – HCCI) and the HSE to discuss home support service issues and to inform the sector of future developments. This forum has been a useful mechanism over the past 2 years for sharing of opinions and addressing concerns.

**Audit**

The HSE is also recruiting staff to create Audit Teams across the 9 CHOs. These teams will have the skill-set to audit service provision and ensure that the Tender service specifications as required of successful providers are being implemented. An audit team is being appointed in each CHO with an initial focus on external providers and thereafter will support HSE direct service provision to improve quality standards.
**DOH Capacity Review**

The DOH Capacity review identified that demographic changes over the period to 2031 will see the over 65 population increase by 59% and the over 85 population increase by over 95% in that timescale. The scale of these demographic changes linked to the Slaintecare recommended shift to community based services indicate the scale of service developments required for home support will be in the range of 70% to 120% increase by 2031. Meeting these service development targets will require forward planning to ensure the availability of the workforce required to deliver the quantum of service, the training requirements of the workforce to deliver on the service standards; as well as the funding mechanism required to support it in the context of a new Scheme.

Finally, there is a need to ensure that the oversight requirements necessary for such a comprehensive shift of service to the community is achieved safely and with the necessary additional supports in primary care and other services to do so.

This concludes my opening statement.

**Thank You.**