



Active Retirement Ireland appreciates the opportunity to make a submission on the vital issue of long-term residential care in Ireland. While the focus of Active Retirement Ireland is on the 96% of older people who do not require long-term residential care, the focus of successive administrations on funding long-term residential care at the expense of community care solutions has necessitated our taking a stance on this issue.

We have consistently advocated a whole-of-government approach to ageing in Ireland, hoping to influence policy for better and more equitable provision of services and supports for all as we age. Older people want to age in place – and successive governments have accepted this narrative. Unfortunately, policy implementation to date means the choice to remain in their own homes and in communities is not an option for many older people.

COVID-19 has shone a light on deficits in our care system and has shown where gaps exist and where they have been exacerbated by the pandemic.

The priority for our state must be to provide older people with their preference, and their fundamental right, to remain at home and in their communities for as long as possible; and where this is no longer viable, to provide a person-centred model of care. As such, Active Retirement Ireland has the following policy recommendations.

1. Rights-Based Approach to Care

Recommendation: A rights-based approach to care in Ireland requires action to fund and legislate for the right to care as the means to attaining the best possible physical and mental health outcomes for older people.

With an increasing number of people living longer, Government policy on the provision of long-term care is central to ensuring care is accessible, high-quality, efficient and secure - even in crisis situations.

Funding must be allocated to fundamentally change the nature of care in Ireland to a rights-based approach.

2. Valuing Care and Carers

Recommendation: The circumstances of all deaths in residential care settings during COVID-19 should be independently reviewed to ascertain the true human cost of the pandemic.

The COVID-19 crisis has shown that care is severely undervalued in Ireland. The pandemic has shown the gaps in care provision and the weaknesses within a sector divided between public and for-profit facilities.

Policy decisions in response to the pandemic actively left the most vulnerable older people in harm's way and failed to protect frontline workers, especially in private nursing homes.

An independent review the deaths in residential care settings during COVID-19 is required to inform future policy and to aid the development of an emergency plan for future crises affecting older people in Ireland.

3. Oversight

Recommendation: To strengthen the sector and provide an equitable standard of care, an independent review is needed of oversight and governance, of all facilities within the nursing homes sector.

As of 8 June, there were 5,232 cases of COVID-19 in nursing homes, and 933 deaths. Despite concerns raised by the sector in March, nursing home cases and deaths continue to account for the majority of all COVID-19 cases and fatalities in Ireland.

Long-term care in Ireland covers both home care and nursing homes, with an additional focus on “step-down” needs and facilities. Within each mode of care, care is provided by statutory, voluntary and private entities, but with no effective oversight from a national Government agency.

The nursing home experience must be standardised as much as possible in Ireland, with effective and continuous oversight to ensure that this experience is as equitable and person-centred as possible.

4 Options for Care in Ireland

Recommendation: To re-evaluate and reassess the choice of care available for older people leading to a “continuum of care” approach that allows and encourages ageing in place.

Ireland lacks an integrated system of long-term care. The voice of the older person is absent from planning and review of both long-term residential care and home care. The system of long-term care, effectively unchanged in essence for two centuries in Ireland remains not only custodial in nature, but also haphazard in practice. The absence of a continuum of care between home supports and nursing homes has resulted in people left without adequate care or forced into long-term residential care despite the ability to remain in their communities with minimal interventions.

The cost implications of this custodial model of care are exponentially higher than effective and timely home care interventions.

The development of a new statutory home care scheme should provide a basis for equitable access to home supports across the country.

Conclusion

We must acknowledge the failings in our system of care that COVID-19 has highlighted, and work towards an approach for a new era of ageing in Ireland that puts the older person at the centre of a continuum of care that accommodates their needs and abilities.

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