

22 APR 2010



2 April, 2010

Noel Mulvihill,
Assistant National Director for Older Persons,
Office of the Assistant National Director for Older Persons,
Swords Business Campus,
Balheary Road,
Swords,
Co. Dublin.

Re: Nursing Homes Support Scheme – National Rehabilitation Hospital

Dear Noel,

I refer to your letter and enclosure of the 8th April 2010 to Ms. Geraldine Fitzpatrick, and our subsequent meeting on the 15th April concerning the above matter.

I understand that, since our meeting, you have issued a Memorandum regarding the scope of the Nursing Homes Support Scheme. In order to avoid any potential confusion regarding interpretation of the Memorandum, I would like to take this opportunity to outline Government policy in relation to the scope of the Nursing Homes Support Scheme.

Scope of the Nursing Homes Support Scheme

The scope of the Nursing Homes Support Scheme was an issue to which the Government gave conscious consideration when deliberating on proposals for the scheme. Firstly, it decided that the scheme should extend to long-term residential care in private nursing homes and in public facilities which are predominantly for the care of older people (hereafter referred to as "public nursing homes"). Secondly, it further decided that the scheme should contain no age limit and should apply to anyone ordinarily resident in the State who is assessed as needing long-term residential care in a public or private nursing home. Finally, the Government decision explicitly excluded disability and mental health facilities from the scope of the scheme.

This decision by Government is reflected in the budget for the scheme which takes account of the demand for long-term residential care amongst the over 65 population and amongst the small number of people under 65 with similar care needs (sometimes referred to as the 'young chronic sick'). In other words, it takes account of the current population in need of long-term residential care and traditionally funded from within the services for older people budget. The estimated numbers of adults with specific

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long-term disability or mental health needs were not included in the costings for the scheme.

Based on the information provided by the National Rehabilitation Hospital, it would appear that the patients referred to in the letter of the 23rd March require disability services rather than long-term residential care services in a nursing home. Indeed, the letter acknowledges that the patients in question were traditionally funded from the disability sector and have "complex care needs due to disability as opposed to elder care needs". The letter also states that the client group should ideally have access to units more suited and specialised to meet their needs such as the Royal Hospital, Donnybrook or Cheshire Ireland. By contrast, it notes that placement in a nursing home setting is often distressing for the client group and their families. Elderly nursing home residents, in turn, can be upset and disturbed by behavioural difficulties in a young person with a diagnosis such as brain injury.

Apart from the care setting, the services which fall within the scope of the Nursing Homes Support Scheme do not appear suitable to meet the needs of the client group in question. The scheme only covers "long-term residential care" which includes nursing and personal care, basic aids and appliances, bed and board and laundry facilities. By contrast, the patients referred to in the letter of the 23rd March 2010 appear to need rehabilitative care. The correspondence refers to their potential "to make further rehabilitative gains" and their requirements for therapies, behavioural programmes and communication devices.

Finally, it should be noted that any person who considers that they require "long-term residential care" is free to apply for the Nursing Homes Support Scheme. If they are assessed as needing long-term residential care, they can choose any public or private nursing home subject to availability and suitability to meet their care needs. However, the Department would be deeply concerned at any policy which would encourage or require people to move from long-term placements within public mental health or disability facilities to placements in private nursing homes supported by the Nursing Homes Support Scheme. Such a policy would be contrary to the spirit of the legislation which encompassed a commitment that no-one should lose their existing conditions as public patients or be made worse off. It would also raise questions regarding the on-going duty of care and follow up which may be owed by the HSE to such vulnerable individuals in moving them from public facilities to private nursing homes. The HSE may wish to take legal advice regarding this issue.

I trust that the above clarification is helpful. I hope to write to you again in the near future outlining possible options for the placement of patients such as the ones described in the National Rehabilitation Hospital's letter.

Yours sincerely,



Noel Usher,
Director,
Office for Older People.