



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Oifig an Cheannaire Athchóirithe,
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20th July 2017

Deputy James Browne,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
e-mail: james.browne@oireachtas.ie

Dear Deputy Browne,

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 33831/17

To ask the Minister for Health if a model of care for specialist rehab unit has been agreed with regard to the development of high dependency rehab services for service users with severe illness and complex needs; if a cohort of population for specialist rehab unit has been identified; and if he will provide details of both.

HSE Response

National Neuro-Rehabilitation Strategy

The HSE and the Department of Health have long appreciated the need to review the situation with regard to access to specialist rehabilitation services. Significant steps toward a resolution were taken with the publication in 2011 of the *National Policy and Strategy for the Provision of Neuro-rehabilitation Services in Ireland 2011-2015*, and the development of the Rehabilitation Medicine Programme within the Clinical Strategy and Programmes Division of the HSE.

The National Neuro-Rehabilitation Strategy made a number of recommendations for services for people with rehabilitation needs that covered a range of types of provision including: clinical, therapeutic, social, vocational and community supports. The Neuro-rehabilitation Strategy advocates for all adults that require neuro rehabilitation.

Following development of the report, the health service as part of its commitment to ensure the optimal care pathway for different Clinical needs, established the Rehabilitation Medicine Programme. Since its establishment, it has been concerned with shaping future specialist rehabilitation services for adults with disability resulting from neurological injury and limb absence across acute, post-acute and primary care settings. The Programme's overall objective is to extend access to specialist rehabilitation services for people with acquired disability so that their ability can be maximised and dependency reduced. The HSE are working in partnership with the voluntary organisations in order to achieve the optimum outcomes for individuals.

The Rehabilitation Medicine Programme has developed a Model of Care that advocates a framework where adults are managed by specialist rehabilitation clinicians who are connected and supported by the

governance structures of a managed clinical rehabilitation network (MCRN). The National Rehabilitation Hospital has been the national hub for specialist rehabilitation for many years and will link formally with proposed new rehabilitation teams in regional centres within each hospital group area and community based neuro-rehabilitation teams within the new Community Healthcare Organisations (CHO's).

Outside of the Clinical Programme, the health service Social Care Division-Disability Services has a role in certain key aspects of Neuro-Rehabilitation Services, primarily the provision of community based therapy services, and personal social services, often funded through partner service providing agencies in the non statutory sector. Close links will be maintained with the Rehabilitation Medicine Clinical Programme to ensure that there is no duplication of effort and that all initiatives receive optimal support.

In order to establish a clear picture of where services are being currently delivered and where the demands are for these services, the HSE has committed to undertake a mapping and gapping exercise to ascertain this information. This will look at all neurorehabilitation services across the continuum of care including those provided by the voluntary sector.

The HSE Social Care Division and the Rehabilitation Medicine Programme (RMP) under the auspices of the HSE Clinical Strategy and Programme Division will work in tandem to form an action plan based on this information.

The governance and implementation of this action plan will be monitored by the formation of a National Steering Group made up of stakeholders representing all interested parties, including the voluntary sector. Moving forward further investment in rehabilitation services at acute hospital, post-acute and community level is required to meet the on-going needs of clients.

The Neurological Alliance of Ireland, which is the national umbrella body representing the Not for Profit organisations working with people with neurological conditions and their families have been and continue to be partners throughout this process.

Demonstration Project

As outlined in the Social Care Operational Plan 2017 the HSE will be commencing a demonstration project to establish collaborative care pathways for people with complex neuro rehabilitation care and support/accommodation needs involving the NRH, Peamount hospital and the Royal Hospital Donnybrook. The aim of this project is to test the feasibility of having a Managed Clinical Rehabilitation Network (MCRN) between these hospitals and the referring hospitals mainly St Vincent's Hospital within CHO area 6 and Tallaght & St James Hospital within CHO area 7 and the respective community rehabilitation teams.

While there is a requirement to develop services across all service delivery sites, this Demonstration Project is based on developing both post-acute rehabilitation services and community based neuro rehabilitation services in particular. A review of existing services which have potential for reconfiguration to provide post-acute specialist rehabilitation services show that currently there are 2 facilities in the greater Dublin area which have input from a Consultant in Rehabilitation Medicine and potential for developing rehabilitation services, these are the Royal Hospital in Donnybrook and Peamount Hospital. Consideration needs to be given to both pathways into and out of these services to support them to function within a network model and maximise efficiency and effectiveness. This is hugely important for the Demonstration Project to show the full benefit of a Managed Clinical Rehabilitation Network.

Yours sincerely,



**Marion Meany,
Head of Reform,
Disability Services, Social Care Division**