

Home Care Coalition

Pre-Budget
Submission
& General
Election ask
2025

—



[#HomeCareCrisis](https://twitter.com/HomeCareCrisis)

Table of Contents

- 1** Executive Summary

- 3** Why are we calling for an increase of €327m to provide viable and sustainable Home Support Services into 2025?

- 4** Key Statistical Evidence on why we are calling for an increase of €327m to provide viable and sustainable Home Support Services into 2025

- 6** Case Study

- 7** Background

- 9** In focus: The Challenge of Staff Recruitment, Retention and Pay in the Home Care Sector

- 12** Budget 2025

- 14** About the Home Care Coalition

- 15** The Work of the Home Care Coalition



Executive Summary

The Home Care Coalition is a group of 25 charities, not-for-profit organisations and campaigners including organisations who work with older people, people with disabilities and people with long-term illnesses, organisations working directly with carers, and groups working in the primary care sector.

The Coalition was established with the aim of ensuring the implementation of an adequately resourced, rights-based, and person-centred, statutory home care scheme, with equality of access and availability to home support services across the country and the new Health Regions.





In Budget 2025 the Home Care Coalition calls for increased funding of €327m to provide viable and sustainable Home Support Services into 2025.

As we approach the next General Election, the Coalition also calls on all political parties and candidates to commit to:

Implementing a rights-based statutory home support scheme which is sufficiently and sustainably staffed and funded, and accessible to all who need it across the country and the new Health Regions, within the lifetime of the next Government.

A

In 2023 the overall home care budget allocation was €723 million¹, which was increased by just €2.8m to €725.8m² in Budget 2024. Factoring in the Economic and Social Research Institute's projected increase of 31.8%,³ representing the increased demand for home support through the new statutory home support scheme, the overall home care budget for 2025 would require a further €231 million, bringing the total to **€957 million**.

B

Immediate action is needed to address the staffing crisis in the home care and disability sectors which is threatening their viability, including a formal agreement to address the disparity of pay and conditions for Section 39 funded organisations, address inflation and the significant resource implications of the new Statutory Home Support Regulations including additional compliance costs. The Coalition estimate this would add a minimum of 10% to the cost. A further uplift of 10% requires an additional **€95.7 million**.

C

The home care budget investment for 2025 requires **€1.05 billion** in total (a+b=c), an increase of €326.7m on 2024.

1 <https://www.oireachtas.ie/en/debates/debate/dail/2023-06-21/speech/25/>

2 <https://www.oireachtas.ie/en/debates/question/2023-11-09/304/>

3 <https://www.esri.ie/system/files/publications/RS122.pdf> see table E1 pg x

Why are we calling for an increase of €327m to provide viable and sustainable Home Support Services into 2025?

The crisis in the recruitment and retention of home support workers and the level of unmet need is having a detrimental effect on older people, people with disabilities and older people with disabilities.

The population is ageing, and the number of people with disabilities and disabling conditions is increasing, giving rise to an increased need for home support services.

The Sláintecare vision promises to provide new models of care that allow people to stay healthy in their homes and communities for as long as possible, and avoiding the premature transition into long-term residential care.⁴

The funding and delivery of home support services must be human rights compliant and support people to have choice and control over their lives under Article 19 of the United Nations Convention on the Rights of Persons with Disabilities, UN CRPD⁵ and the Madrid International Plan of Action on Ageing, MIPAA.

There are real and tangible risks to people if we don't invest - more people will be waiting for an assessment of needs without vital home care supports, many will have insufficient levels of support and will be more likely accessing acute hospital services.

There are also risks to organisations if we don't invest - ability to deliver quality person-centred services will continue to be impacted and smaller to medium not-for-profit agencies with a historic independent living ethos will be forced to leave the home support sector and closures may follow.

4 [slaintecare-implementation-strategy-final.pdf \(hse.ie\)](#)

5 [Article 19 - Living independently and being included in the community | United Nations Enable](#)

“The staff who provide my service are all wonderful people: thoughtful, efficient, reliable, deeply caring, kind and compassionate, who greatly enhance my independence and quality of life and show me the utmost respect.”

In addition, as we approach the next General Election, the Coalition is calling for all political parties and candidates to commit to:

Implementing a rights-based statutory home support scheme which is sufficiently and sustainably staffed and funded, and accessible to all who need it across the country and the new Health Regions, within the lifetime of the next Government.

Why are we calling for this?



Significant work has been undertaken to advance a statutory home support scheme in recent years, but progress has been extremely slow. We require **new momentum**, **firm commitments** and a **fixed timeline** for the introduction of the scheme.

Successive Governments and policy documents (including Sláintecare) have committed to place home support on a statutory basis.

The home support service has faced significant challenges for many years in relation to lengthy waiting lists; insufficient funding; staff recruitment, retention and disparity of pay; lack of regulation, quality control and oversight; overreliance on private providers; gaps in continuity and uniformity of care; and lack of sufficient, uniform and accessible data.

Unmet need for home support results in delayed discharges at acute level, increasing the risk of infection and dependency on hospital and long-term care, as well as lower quality of life.

Reform of the service was delayed throughout the COVID-19 pandemic. As our population gets older, it is vital that home support is placed on a statutory basis and appropriately resourced to meet increased demand going forward.

Key Statistical Evidence on why we are calling for an increase of €327m to provide viable and sustainable Home Support Services into 2025

As of May 2024, **5,671 people were on the waiting list for Home Support**,⁶ mainly due to a lack of home support workers. This figure does not include those with unmet need who have yet to be assessed.

According to research by ESRI, Ireland has the second highest unmet level of need for home care out of 11 European countries.⁷

The Health Service Capacity Review states that “Capacity requirement for home care is set to experience significant growth to 2031, with an additional 11,000 (70%) Home Care Packages, 130 (70%) Intensive Home Care Packages, and 7.2 million (69%) Home Help Hours anticipated”.⁸

Findings of the Disability Capacity Review to 2032 showed high levels of current and future demographic and unmet need. The subsequent Action Plan for Disability Services 2024-2026⁹ (published in December 2023) details the need for:

110,000 additional home support hours per year by the end of 2026

A policy review of Home Support Services under the lens of the UNCRPD (to be completed in 2024)

It should be noted, however, that Personal Assistance Services and Home Support Services have an allocation of merely 4.4% of the Disability Budget within DCEDIY.

Census 2022 evidence shows a rising number of people having a long-lasting condition or disability, accounting for 1,109,557 people or 22% of the population. The proportion of people experiencing a long-lasting condition or difficulty to **any extent** generally increased with age. This ranged from 4% of people aged 0-4 years to 76% among people aged over 85. The percentage of each age group which experienced a long-lasting condition or difficulty to a **great extent** increased sharply after the age of 74. Among those aged 85 and over, just under half (48%) experienced a long-lasting condition or difficulty to a great extent.

⁶ <https://www.irishexaminer.com/news/munster/arid-41387146.html>

⁷ [Ireland's level of unmet need for childcare and home care is among the highest in Europe | ESRI](https://www.esri.ie/newsroom/ireland-s-level-of-unmet-need-for-childcare-and-home-care-is-among-the-highest-in-europe)

⁸ <https://www.gov.ie/pdf/?file=https://assets.gov.ie/10132/7c2a2299ca924852b3002e9700253bd9.pdf#page=null>

⁹ <https://www.gov.ie/en/publication/70871-disability-action-plan-2024-2026/>

Case Study

Marie is a full-time carer for her daughter who is in her thirties. Marie used to be a nurse and gradually had to take time away from her career as her daughter got older and required further care. She tried job-sharing and working part-time but that required Marie to pay for outside care for her daughter. Finally, she realised she had to put her life on hold to care for her full-time as she could not afford to keep working while paying for someone to look after her.

Marie was not granted any carer's allowance, home care hours provided by the state were cut and the hours of care that were allocated could not be met due to the current staff shortage. Marie has had to give up any semblance of a personal life. She has gladly taken on the role of a sole caregiver to her daughter but she also didn't have a choice. The state has only very recently recognised the work of family caregivers but Marie has gone most of her life unacknowledged and without thanks.

Because of the Government's failure in providing adequate care, people across Ireland including Marie experience

“A loss of one's own life to care for another”.

There are the finer details also of the medical card not covering certain prescriptions or the complete lack of night staff from Friday lunchtime to Monday morning. Public Health nurses are also no longer allowed to provide incontinence products to their patients. Marie has looked after every aspect of her child's life, even helping her to learn how to communicate again after she faced a serious illness.

And as Marie grows older, she now fears for her daughter's future. She is worried about her own health and asks the same question as any parent with a child who has needs; “What will happen to her if I'm gone?”

Background

The Home Care Coalition acknowledges that funding for the Home Support Scheme has increased significantly in recent years. Home care support spending has risen from €495m in 2020 to €725.8m in 2024. However, Budget 2024 only increased funding to the scheme by €2.8m, to meet inflationary costs.

Despite the funding increases, the HSE targets for delivery of home support services were reduced midway through 2023.

These targets were not reinstated in 2024. The 2024 target for the number of hours to be delivered in 2024 (22m hours) remained the same as the **reduced** target for 2023¹⁰ and was lower than the targets for both 2022 and 2021.

In addition, the HSE service plan did not contain the action outlined in previous years to “maintain at a minimum of 40% the proportion of public/private home support provision”. Currently, the proportion of public (HSE) provision of home support is 37%¹¹

The data also indicates other challenges in 2023, despite several targets almost being reached. Fewer home support hours were delivered from intensive home care packages in 2023 than in 2022. Fewer people were in receipt of intensive home care packages in 2023 than in any year 2019-2022.



¹⁰ In 2023, the original target of 23.9m hours was reduced to 22m midway through the year. 22.1m hours were delivered in 2023.

¹¹ https://www.oireachtas.ie/en/debates/debate/joint_committee_on_health/2024-06-19/2/

Despite the work of the Strategic Workforce Advisory Group in the Department of Health, there are fewer home care workers employed by the HSE in June 2024 (3,755) than there were a year and a half ago in December 2022 (3,782).¹²

These difficulties are of significant concern in the context of Government commitments to deliver a statutory home support scheme and increasing demand.

The ESRI's report on the Demand for the Statutory Home Support Scheme projects '12.5 per cent of all over-65s living at home in Ireland'¹³ could be accessing home support through a new statutory scheme. In the research into the new statutory home support scheme, funding for home support for people with disabilities was not taken into account, citing a lack of data¹⁴ in this area and neither was the additional cost of disability¹⁵ for people under or over 65 years factored into the research into potential co-payments. This means that future demand for home support is not being fully accounted for.



12 <https://www.hse.ie/eng/staff/resources/our-workforce/workforce-reporting/health-services-employment-report-june-2024.pdf>

13 <https://www.esri.ie/system/files/publications/RS122.pdf>

14 ESRI Research Feb 2022 Home Support Services In Ireland: Exchequer And Distributional Impacts Of Funding Options, Claire Keane, Sean Lyons, Mark Regan, Brendan Walsh, Pages iii, 5. And ESRI Working Paper No. 747, Page 3. Personal assistance services for disabled people in Ireland: "they meet the criteria for supports but we don't have the resources to provide the services"

15 [Indecon The Cost of Disability in Ireland Report .pdf \(www.gov.ie\)](https://www.gov.ie/en/publications-and-resources/publication/12222-the-cost-of-disability-in-ireland/)

In focus: The Challenge of Staff Recruitment, Retention and Pay in the Home Care Sector

The home care sector provides essential support to older people and people with disabilities who wish to remain living independently in their own homes. Home care workers assist individuals with personal care, household tasks, medication management, social activities, and other aspects of daily living. The sector also contributes to the economy by creating employment opportunities, reducing hospital admissions and long-term care costs, and enhancing the quality of life of the individual and their families.

What's the issue?

These essential services are under threat as the home care sector faces significant challenges in recruitment and retention of staff to deliver these vital services.

The primary factor impacting on recruitment and retention is the differential between pay and benefits being offered by the HSE and section 38 funded organisations compared with what section 39 home care providers are able to offer. In addition, funding for section 39 organisations has not kept pace with the increasing cost of care provision.

The recruitment and retention crisis is impacting on service providers' ability to maintain current service delivery levels which can lead to deterioration of the health and well-being of home care service users, also increasing the risk of falls and injuries, social isolation, and loss of independence. The inability to recruit staff is also having an impact on providers' capacity to commence new services, resulting in service users remaining in clinical settings for longer than required.

Home care providers have seen a major increase in the number of committed and dedicated home care staff who are leaving their current roles to take up similar roles in state funded organisations such as the HSE and section 38 organisations, simply because of the better pay and conditions available. Many of these staff would prefer to remain with their current employers but they can't financially afford to stay, and section 39 funded organisations aren't funded enough to retain them.

This has ramifications beyond workers simply undertaking the same role for a different organisation. The crisis is having a direct impact on the sustainability and efficiency of the sector, as recruitment and retention costs are high, and staff gaps and absences create disruptions and delays in service delivery. This is increasing the pressure on other parts of the health and social care system, such as hospitals, nursing homes, and family carers, who are struggling to support the unmet needs of service users.

What's causing this issue?

Since the introduction of the authorisation scheme (which obliges home care providers to meet legal requirements on paying workers' travel time, and at minimum, the living wage), the cost of delivering home support has increased dramatically, mainly due to increased labour costs. However, the HSE funding provided to section 39 organisations through the scheme has not been sufficiently increased to meet these costs.

Increases in the minimum wage, effective from January 1st 2024, along with a series of additional changes in rapid succession such as increases to employer PRSI, modifications to statutory sick pay, the introduction of pension auto-enrolment, substantial increases in the salary thresholds for work permits, and enhanced protective leave entitlements, are all imposing huge pressures on employers - including providers of home support services.

These additional costs come on top of a fixed price model which already insufficiently funded the true costs of travel time, and which also failed to address the significant cost of mileage for home care workers.

This insufficient funding not only impacts home care workers, but risks further embedding a postcode lottery for home care service users. The failure to fund the real costs of travel time and the refusal, to date, to fund the actual mileage expenses incurred for the delivery of home support, means providers must carefully assess the distance and time variables of accepting a client allocation or they risk embedding a loss-making service into its service delivery. This will profoundly impact the ability of providers to offer services to clients in remote rural areas or high-density urban areas during peak travel times.

Independent studies, such as the Grant Thornton review in 2023, have indicated that the true cost of care is not being met by current funding levels. The continued cost increases associated with the introduction of new legislation and standards will render the price of providing one hour of care in excess of €40 per hour.



How can this issue be resolved?



There is an urgent need to increase the rates paid to home care providers through the HSE Home Support Authorisation Scheme to match the increasing cost of delivering home support, and to end pay disparities across not-for-profit care providers.

We are calling on the Department of Health and the HSE to verify and fund the true cost of care, forecast and budget for future additional costs incurred by increased regulation, and address the challenge of attracting and retaining skilled employees in section 39 organisations.

Resolving the issue of recruitment and retention of staff will take more than addressing pay and funding alone; but it is an issue which **cannot** be resolved without addressing these areas.

Investing in section 39, not-for-profit home care for the long term is more sustainable than investing in for-profit organisations. The not-for-profit home care organisations are a vital cog in the health service. If we are to remain an essential part of the home care offering to citizens into the future, the Department of Health and the HSE needs to address the chronic under-funding of the sector as a matter of urgency.

“

“My care worker is retiring shortly, and I am really worried that they won’t be able to replace her, and I won’t get any service.”

Budget 2025

The Home Care Coalition is calling for Budget 2025 to deliver a sustainable home support service which provides quality care to service users, and pay parity among home care workers, ahead of the introduction of the statutory scheme. There are several strands to the requirement for funding increases in Budget 2025 to the home support service which will bring significant resource implications to service providers from the new regulations:



To deliver additional hours of support in line with the health and social care needs of the growing population of people¹⁶ with disabilities and older people including changing needs over time.



To provide a fair rate of pay for home care workers, including remuneration for time spent travelling between service-users' homes, to enable recruitment and retention.



To standardise rates of pay and benefits across HSE and Section 39 funded home care workers (in line with TASC recommendations)¹⁷ to ensure the viability and sustainability of the not-for-profit providers.



To increase operational funding to fully deliver on the recommendations of the Strategic Workforce Advisory Group,¹⁸ including (for example):



A national campaign to raise the profile and promote the training opportunities available for a career as a Health Care Assistants and Home Support Workers.



European level recruitment events.



Development of a medium-term (3-5 year) recruitment plan to give further effect to the recommendation on increasing direct provision of home support.



ICT solutions to be implemented to improve the efficiency of provision.

¹⁶ Health, Disability, Caring and Volunteering - CSO - Central Statistics Office

¹⁷ https://www.tasc.ie/assets/files/pdf/the_wheel_tasc_report_f_v_080623.pdf

¹⁸ gov.ie - Report of the Strategic Workforce Advisory Group on Home Carers and Nursing Home Health Care Assistants (www.gov.ie)

In March 2021, the ESRI projected potential demand once the statutory home scheme is in place. Using 2019 figures, they found 53,652 people using public home support, but if waiting list demand was met, plus allowing for people moving from private to public provision once a scheme is in place, the total demand the model comes to 70,700, which is an increase of 31.8%.¹⁹

To increase pay and conditions, pay for travel, address inflation, etc. adds another percentage to costs. The Coalition estimate this would add a minimum of 10% to the cost.

Based on the €725.8 million Budget allocation for 2024, an increase in demand of 31.8% (ESRI scenario) would require a further €238 million, bringing the total to €963.8 million.

A further uplift of 10% for inflation, higher pay, travel, etc. would bring this up by a further €95.7 million to €1.06 billion.

As the unit cost per hour of home care is increasing, an increase in funding in Budget 2025 may not represent an increase in hours provided but simply maintenance of the current scheme.

Therefore, we must see clear commitments to both increased hours of support being provided, and increased funding for the service, in this year's Budget.

“

“I don't have enough staff to provide me with my full hours of allocation and I'm afraid it's only going to get worse.”

About the Home Care Coalition

Purpose

The Home Care Coalition is a group of charities, not-for-profit organisations and campaigners including organisations who work with older people, people with disabilities and long-term illnesses, organisations working directly with carers, and groups working in the primary care sector. The Coalition was established with the aim of ensuring the implementation of an adequately resourced, rights-based, and person-centered, statutory home care scheme, with equality of access and availability to home support services across the country.

The Coalition is Chaired by an independent chairperson, who is currently Maurice O'Connell.

ALONE contributes an ongoing secretariat to the Coalition who arranges meeting links, provides minutes of each meeting, and chairs the Coalition subgroups.

Organisations can be considered for membership of the Coalition by emailing their interest to the Chair or the Secretariat of the Coalition.

Members of the Home Care Coalition 2024



The Work of the Home Care Coalition

-  Sharing information among members, engaging with officials in the Department of Health, HSE and other relevant public bodies, engaging with elected officials and representatives.
-  Contributing to Coalition activities such as collective submissions to Government Departments, press releases and publications, as representatives of their service users and/or membership base.
-  Sharing information about ongoing experiences of the home support scheme and blockages that may be occurring, to inform activities both collectively and as individual organisations.
-  Sharing items to be considered for further action by the Coalition or its subgroups, or for the Coalition to raise with the Department of Health.
-  Informing ourselves, as individual organisations and as a collective, about items relating to regulations, legislation, financing, and other elements of the forthcoming statutory home support scheme.
-  Two subgroups were formed by the Coalition in 2022 to consider two issues considered pressing by the membership. These subgroups consider **Campaigning** and **Financing of the Statutory Home Support Scheme**. The subgroups support the Coalition by carrying out work relating to these topics and making recommendations to the Coalition.

