56 respite beds for 30,000 dementia patients

11% of nursing homes provide dedicated dementia care units

Catherine Shanahan

A population of 30,000 living with dementia in the community has access to just 66 respite beds in nursing homes specifically designed to cater for the illness, a study has found.

The figure is stark against a backdrop of another 50,000 people acting as carers. In fact, just 11% of Irish nursing homes provide dedicated dementia care units and the majority that do have double the number of patients considered best practice by international norms.

The lack of dementia-specific care units (SCUs), at a time when an estimated 49,000 people are living with the condition, is particularly acute in the public sector — just one third of SCUs are run by the HSE or the voluntary sector.

Even more worrying for those who cannot afford private care is that fewer nurses in the public sector have specialised training to deal with dementia — just one third compared to 56% in private nursing homes.

That is all according to the first national survey mapping the provision of specialist long-term care for people with dementia, not least the large swathes of the population with no nearby specialised units, particularly in Leinster — Wicklow, Westmeath, Offaly, Carlow, and Kilkenny being the worst affected. The paucity of dedicated dementia units means less than 5% of those living with the condition in long-term care are in SCUs.

The report, ‘An Irish National Survey of Dementia in Long-term Residential Care’, published by the Dementia Services Information and Development Centre and the School of Social Work and Social Policy at Trinity College Dublin, found just 54 of 469 nursing homes have dementia-dedicated units. This compares to 33% in countries such as Netherlands.

It found patient privacy was not well-catered for in public homes — just 12% of HSE homes offered private bedrooms compared to 67% in private care. The HSE also operated a more restrictive admissions policy, with a higher requirement for independent mobility. The research found not all nursing homes were complying with the Hiqa requirement that new admissions have medically diagnosed dementia.

Trinity associate professor Suzanne Cahill, lead author of the report, said SCUs were “a rare feature in the Irish long-term care landscape” but that unless funding models change substantially to incentivise private providers, the choices available to those in need of long-term care would remain limited.

Tadhg Daly, chief executive of Nursing Homes Ireland (NHI), said the HSE’s one-size-fits-all payment model was “a disincentive to develop”; nursing homes are paid a fee per patient by the State regardless of dependency level. NHI has made a submission to the Government as part of its review of the Fair Deal, the nursing home support scheme, asking that this model be changed to reflect the complexity of care involved.

Gerry Martin, chief executive of the Alzheimer Society of Ireland, said the research showed “serious inequities” across the country in terms of access to SCUs. He said it was “wholly inadequate” that in some areas, people are waiting up to two years. Munster has the shortest waiting times and Cork the highest number of SCUs, at 13.

Fianna Fáil health spokesman Billy Kelleher said the shortage of SCUs was forcing dementia patients to seek care in hospitals in “a setting which is completely inappropriate for their needs”.

A free resource manual for family caregivers can be downloaded at dementia.ie.