



Age Action
Dept. Health Pre-Budget 2020 Submission

Age Action

10 Grattan Crescent

Inchicore, Dublin 8

01-475 6989

www.ageaction.ie



Rialtas na hÉireann
Government of Ireland



*The Scheme to Support National Organisations is funded by the Government of Ireland
through the Department of Rural and Community Development*

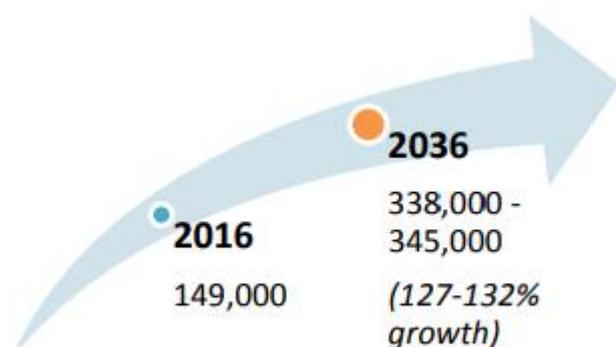
Recommendations:

1. Increase the **home supports** budget in 2020 by 25% to begin to meet unmet need [Cost: €110 million].
2. Remove **the medical card prescription charge** of €1.50 per item, for **over 70s medical card holders**. [Cost €36 million] and reduce medication charges for **over 70s GP Visit Card holders** as per the review of medication charges under the Sláintecare eligibility and entitlement programme.
3. Ensure **full funding of key Sláintecare commitments**: Year 1 targets for expanding entitlements and system capacity (removal of hospital charges, reductions in medication charges for all medical card holders and 50% reduction in Drug Payment Scheme thresholds for single headed households). [Cost €395.6 million].

State of Ageing

People currently aged 65 can now expect to live into their 80s, with two-thirds of these years lived disability free¹. However, as people live longer, their risk of disability also increases. It is estimated that 72.3 per cent of the population aged 85 and over will have a disability.² The numbers of older people, and the proportion of the total population they comprise, continues to grow rapidly. The number of people over the age of 65 is increasing by over 20,000 persons a year. In addition to this, the proportion of people over the age of 85 is projected to double in the next 20 years.³

Figure 1 Population Growth Projections aged 80 years and over 2016-2036



Source: Oireachtas Library & Research Service | Spotlight Home Care for Older People - Seven Policy Challenges. 2018.

The specific demographic challenges of the growth in older cohorts is stark for the period up to 2030, with the over 65 cohort increasing by 59 per cent and the over 85 group by over 95 per cent.

¹ Department of Health. (2018). *Health in Ireland Key Trends 2018*. Dublin. Government of Ireland. <https://health.gov.ie/wp-content/uploads/2018/01/Key-Trends.pdf>

² http://www.cso.ie/en/media/csoie/newsevents/documents/census2016summaryresultspart2/Chapter_9_Health_disability_and_caring.pdf

³ Department of Health. (2018). *Health in Ireland Key Trends 2018*. Dublin. Government of Ireland. <https://health.gov.ie/wp-content/uploads/2018/01/Key-Trends.pdf>

1. Enabling Older People to Age In Place

1. 1 Tackling inadequate home supports service

Home Supports Service In Crisis

Age Action knows that the home supports service is an invaluable element of our health service which helps older people maintain their independence and delay or avoid hospital stays. It is also an integral component of Sláintecare in its objective of delivering integrated care in the community based on need, not on ability to pay.

It is stated Government policy to enable and support people to stay in their homes, yet in reality many older people are prevented from ageing well in their place of choice - their own home - or are unable to leave hospital to return home as they cannot access home supports.⁴ Age Action is mindful that the current model of resource allocation whereby local budgets, rather than individual need, dictate access to home supports, is dysfunctional and leads to inequitable outcomes. We are also concerned at the lack of consistency at CHO level in the assessment, measurement and prioritisation of the need for home supports. This variance across the country results in inequitable outcomes for older people resulting purely from where they happen to live.

This inconsistency in approach to measurement, allocation, prioritisation and funding of home supports stands in marked contrast to the statutory, transparent Fair Deal scheme where a legislative framework offers equitable access to those in need regardless of where they are located throughout Ireland.

There are frequent reports on the deficits in the home supports service and how this has a severe impact on older people in need of the service. The widely reported challenges around home supports include:

- Unquantified unmet need
- Lack of a statutory entitlement to access supports
- Wide variation in service provision
- Unregulated services with varying approaches to assessment at individual CHO level results in inequities of access and outcomes for older people⁵
- Reduction in service levels: the average home care package is now 6 hours a week, not 10 hours as previously⁶ estimated

⁴ Goal 3 of the National Positive Ageing Strategy is to enable people to age with confidence, security and dignity in their own homes and communities for as long as possible https://health.gov.ie/wp-content/uploads/2014/03/National_Positive_Ageing_Strategy_English.pdf

Workstream 1 of the Sláintecare 2019 Action Plan states that programmes will design integrated services to provide care and support at, or near, home where appropriate and to ensure hospital stays are minimised - <https://health.gov.ie/wp-content/uploads/2019/03/Sl%C3%A1intecare-Action-Plan-2019.pdf>

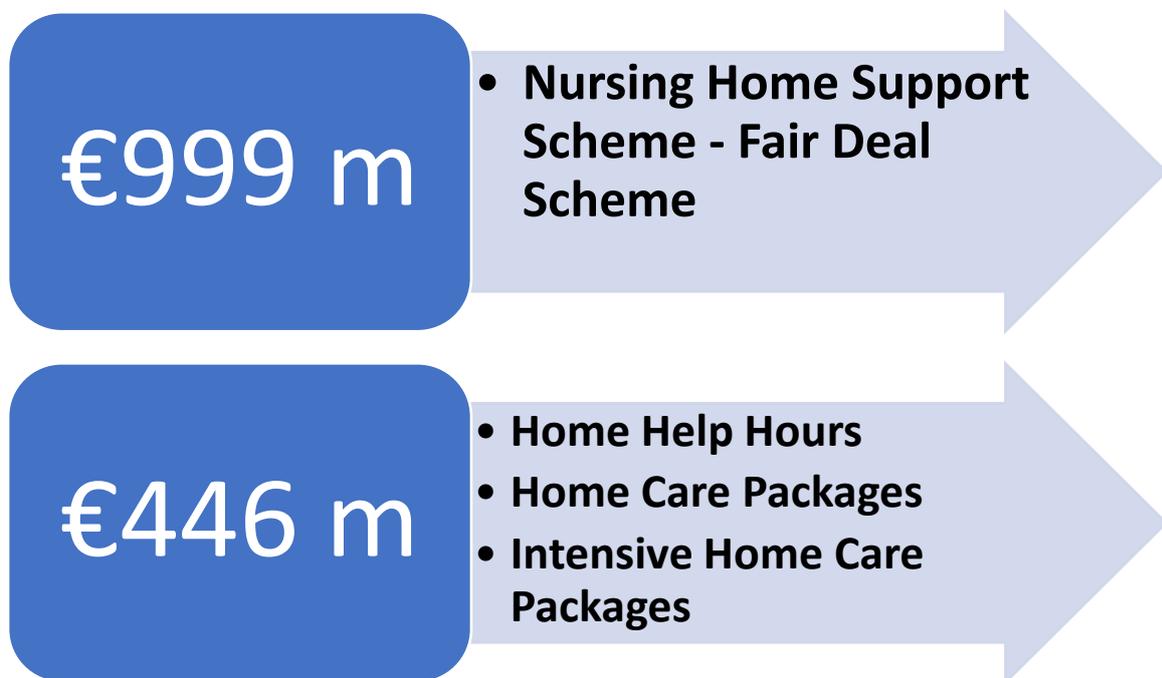
⁵ Care Alliance Ireland (2018) *Public Provision of Home Care in Ireland – Update October 2018*. Available at [http://www.carealliance.ie/userfiles/file/Briefing%20Paper%202%20Web\(1\).pdf](http://www.carealliance.ie/userfiles/file/Briefing%20Paper%202%20Web(1).pdf)

⁶ Care Alliance Ireland (2018) *Public Provision of Home Care in Ireland – Update October 2018*. Available at [http://www.carealliance.ie/userfiles/file/Briefing%20Paper%202%20Web\(1\).pdf](http://www.carealliance.ie/userfiles/file/Briefing%20Paper%202%20Web(1).pdf)

- Decreased quality of service outcomes - less hours are being spread more thinly per client with an increase in the provision of short 30 minute slots of care which result in poorer outcomes for service users.

Age Action notes the disparity in budget allocation between the Nursing Home Support Scheme and the Home Supports Service, see figure 2 below. We know that an immediate increase in funding for home supports is needed in the period while Ireland moves to a statutory Home Care Scheme underpinned with robust eligibility legislation and quality standards. The difference in funding brings into sharp focus the urgent need to develop and deliver a sustainable funding model for the home care statutory scheme to enable older people to remain in their own homes where many want to be cared for.

Figure 2: Public spend Nursing Home Support Scheme and Home Supports Service 2019



Future Capacity Demands On Home Supports Service

Recent reports signal the increasing demand that the ageing population will place on home support services. The ESRI noted that the demand for home care packages is “projected to increase by between 44-66 per cent by 2030” and that the “demand for Home Help hours is projected to increase by between 38-54 per cent by 2030”.⁷ The Health Service Capacity

⁷ Wren, M A et al. (2017). *Projections of demand for healthcare in Ireland 2015 to 2030 first report from the Hippocrates model*. Available at <https://www.esri.ie/publications/projections-of-demand-for-healthcare-in-ireland-2015-2030-first-report-from-the-hippocrates-model/>

Review report also flags the increase in capacity needed, stating that a 120% increase will be required in home support services if this projected demand is to be met.⁸

The findings from these significant reports have serious implications for the planning of health and social care services for older people. While Age Action welcomes the commitment by the Department of Health to deliver the complex task of an equitable and sustainable statutory Home Care Scheme by 2021, it will take years to achieve a functioning equitable scheme. Statistics show that in the interim the Irish health system is failing those older people who have been assessed as 'in need' but who are not able to access the service. The number of people in this position is on a clear upward trajectory. As of May 2019 the numbers waiting to access home supports stood at 6,819, an increase of 1,977 on May 2018. Meeting this immediate need must be a Government priority before beginning to implement a new statutory scheme.

Unmet Need For Home Supports Service

While we acknowledge the commitment of the HSE 2019 Service Plan to provide 18.2 million hours to 53,000 people during the year, the fact is that unmet need still exists with older people currently going without the necessary supports. The level of unmet need for home supports is at crisis level. We also know however, that the figure of 7,217 assessed as needing a service at the end of June 2019 does not include those older people who have not yet been assessed according to latest figures released by the HSE. We welcome the Department of Health's recent decision to commission work to ascertain how home supports are being assessed, measured, allocated and prioritised in each CHO (expected by the end of Q4 2019), as knowing the level of unmet need is vital to the development of the statutory home support scheme which is currently in design phase. Age Action also urges the speedy roll out of the Single Assessment Tool (SAT) across all CHOs. The SAT is a vital building block to ensure consistency and important data capturing, which will inform future health planning across the social care spectrum.⁹

It is estimated that approximately 6.5% of the population aged over 65 years (637,567) receive home help in Ireland, which compares poorly with the OECD estimate of approximately 10% of this age cohort needing the service. With the well publicised rise in the over 65 cohort projected to continue, planning to meet this need must be prioritized.

The stories of older people ready for discharge from acute hospitals, who are forced to stay in expensive acute settings, losing their confidence, mobility and muscle tone, unable to

⁸ Department of Health and PA Consulting (2018). *Review of Health Demand and Capacity Requirements in Ireland to 2031*. Available at <https://health.gov.ie/wp-content/uploads/2018/01/Health-Service-Capacity-Review-2018-Executive-Report.pdf>

This report states that the required capacity for Home Care Packages will need to increase by 70% from 15,600 monthly to 26,600. The report also states that an additional 7.2 million Home Help Hours will be needed by 2031.

⁹ The SAT is an assessment tool, with an IT system, to enable improved outcomes for older persons, it will ensure that assessment, care planning and policy decision-making are consistently carried, are effective, co-ordinated, and provide maximum value for money, meeting international best practice standards.

access home supports, is a regular feature in the news cycle. Delayed discharges, which result for a variety of complex reasons, are a fact of life in Irish public hospitals.

Lack of access to home supports has a very significant impact on hospital bed days lost, with older people unable to leave hospital although clinically discharged, as they cannot access the step-down care needed to allow them to return home safely and regain their mobility and independence.

The *Independent Expert Review of Delayed Discharges 2018* states that 90% of the 8,125 delayed discharges in the year 2017-2018 were people aged 65 years or over, with a similar percentage for the previous year.¹⁰ Lack of home support services clearly stops people medically fit for discharge from leaving hospital, preventing them from achieving their wish to age in place in their own home.

Unmet need in home care was calculated, by the 2017 Oireachtas report *The Future of Healthcare*, as costing between €120 million and €205 million respectively (using two estimated levels of unmet need at 26% and 50%) over the first five years of Sláintecare.¹¹ Wave 4 of TILDA showed that 16% of people over 75 years and 14% of the 65 to 74 year old cohort report unmet need in the community.¹²

Investment In Home Supports Service Needed Now

While the increase in funding for home supports to €446 million in 2019 was welcome, it is not enough to meet need and demand, as at any given time over 6000 people are waiting assessment. Home support is a critical component of a modern, equitable health system. Age Action believes that a universal home care scheme is a public good and is a collective social responsibility of Government. The new statutory home supports care scheme must be prioritised and delivered as early as possible in 2021 and offer universal entitlement, underpinned by rights and entitlement, based on need funded by a robust, equitable and sustainable funding mode.

Recommendation:

- Increase the **home supports** budget in 2020 by 25% to begin to meet unmet need [Cost: €110 million].

¹⁰ Department of Health. (2018). *Irish Expert Review of Delayed Discharges*. Dublin. <https://health.gov.ie/wp-content/uploads/2018/11/Delayed-Discharges-Report-November-2018.pdf>

¹¹ Government of Ireland. (2017). *Houses of the Oireachtas Committee on the Future of Healthcare Sláintecare Report*. Dublin. <https://webarchive.oireachtas.ie/parliament/media/committees/futureofhealthcare/oireachtas-committee-on-the-future-of-healthcare-slaintecare-report-300517.pdf>

¹² TILDA. (2018). *Wellbeing and Health in Ireland Over 50s 2009-2016*. Dublin. <https://tilda.tcd.ie/publications/reports/pdf/w4-key-findings-report/TILDA-Wave4-Key-Findings-report.pdf>

1.2 Reducing the cost of medication for older people

Prescription Charges for Over 70s Full Medical Card Holders

As people age, multi-morbidity becomes more prevalent. This results in an increase in the amount of medication prescribed to treat chronic conditions. Polypharmacy, where there are five or more items of medication prescribed, causes financial stress for older people with medical cards as they must pay a charge for each item prescribed. In June 2019 there were 449,823 people aged over 65 years who qualify for a medical card on grounds of low income.¹³ For many of these the only income they have is the State pension.

A recent study from March 2019 found that 82.6% of medical card holders aged over 75 years were prescribed five or more items of medication each month.¹⁴ This research analysed data from the HSE Primary Care Reimbursement Service on prescribing patterns for medical card holders.

While acknowledging the recent decreases in the prescription charge for this cohort, down from €2 per item to €1.50 in Budget 2019 as part of the Sláintecare commitment to provide affordable health care for all, Age Action understands that this will be a phased process. Age Action is aware that the review, just completed within the Department of Health, which examined medication and hospital charges under the Sláintecare Action Plan 2019 will propose recommendations to increase affordability of medication.

Out of pocket health expenses for over 70s GP Visit Card Holders

For older people experiencing multiple morbidity and who live with chronic illnesses, being over the means-tested asset and income limit for a full medical card results in significant extra health costs.¹⁵ This group is entitled to a 'GP Visit Over 70s' card which means free GP visits but they must meet the costs of all other health related expenses including blood tests, chiropody, therapies, hearing aids and dentures. They must also pay for the cost of their medication, up to the current monthly threshold of €124 in the Drugs Payment Scheme.

While it is impossible to calculate an average expenditure on prescriptions for older people, Age Action is aware that there is a cohort of older people, whose income puts them just over the means test for the full medical card who struggle with out-of-pocket health expenses. Many older people on modest incomes cite the high cost of prescribed medication in particular as a financial burden which eats into their disposable income.

¹³ <https://www.sspcrs.ie/analytics/saw.dll?PortalPages>

¹⁴ Tatum T, Curry P, Dunne B, Walsh K, Bennett K (2019). 'Polypharmacy rates among patients over 45 years'. Available at *Irish Medical Journal* Vol 112, (No 3).

¹⁵ In June 2019 the age breakdown of older people who have the GP Visit card over 70 was 56,061 aged between 70 and 74 years and 62,642 aged 75+. Available at <https://www.sspcrs.ie/analytics/saw.dll?PortalPages>.

Research from the Longitudinal Study on Ageing (TILDA) states that 31% of over 65s have five or more prescriptions, rising to 37% in the over 75s.¹⁶ Older people are therefore more likely to require multiple prescriptions. In an attempt to save money, older people may not take essential medication such as blood pressure tablets as prescribed. According to Professor Charles Normand, this has been responsible for 200 to 300 strokes every year and a similar number of heart attacks.¹⁷ Age Action remains concerned at the cost barrier of prescription costs for vulnerable older people. Callers to Age Action's Helpline have told us that they forgo meals or other essentials to save money to pay for medication.

Recommendations:

- Remove **the medical card prescription charge** of €1.50 per item for **over 70s full medical card holders**. [Cost €36 million]
- Reduce medication charges for **over 70s GP Visit Card holders** as per the Sláintecare 2019 implementation plan review of medication charges under the eligibility and entitlement programme for future budgetary consideration.

1.3 Resourcing Sláintecare to improve access, entitlement and affordability of health care

Age Action is a member of the Health Reform Alliance whose organisations share a common belief that strategic reform is needed to create a more equitable health and social care system. The Sláintecare Óireachtas report on the Future of Healthcare published in May 2017, provides cross party commitment to deliver on a universal health and social care system where everyone in Ireland will be entitled to high-quality, affordable services based on need rather than ability to pay. Age Action welcomes the launch of the Sláintecare 2019 Action Plan which sets out how reform will be delivered and progressed. We are particularly mindful of the commitment to deliver both the Social Care Strategy¹⁸ and in particular the statutory Home Care Scheme by 2021.

Budget 2020 must support the ongoing efforts to make this vision of universalism in Sláintecare a reality. Without adequate resourcing and strong political leadership, there is a significant risk that the commitments to create an integrated, accessible and affordable system of care will not be delivered. In particular, the transitional fund is the much needed once-off investment over the first six years to support investment in areas such as infrastructure, capital projects, e-health, training and new services.

¹⁶ https://tilda.tcd.ie/publications/reports/pdf/Report_Polypharmacy.pdf

¹⁷ <https://www.irishtimes.com/news/health/prescription-charge-causing-hundreds-of-heart-attacks-1.2451782>

¹⁸ The 10 Year Social Care Strategy is an action under Work Stream 1.3 of the Sláintecare Action Plan 2019 Service Redesign Framework Programme. It will set out the roadmap for triple aim outcomes - health & social care outcomes, patient/caregiver/citizen experience, and value for money.

Recommendations:

- Commit **sufficient resources in 2020 to ensure that Sláintecare is adequately resourced** to deliver the essential reforms via **full funding of Year 1 targets** for expanding entitlements and system capacity to include €25 million for the removal of hospital in-patient charges (€75 per night, maximum €750 annually), reductions in the prescription charges for all medical card holders and a 50% reduction in the Drug Payment Scheme thresholds for single headed households. [Cost €395.6 million].

About Age Action

Age Action supports and advocates for equality and human rights for all older people. Everything we do is based on a recognition of the diversity of identity and situation among older people and a concern for equality for all older people. In addressing ageing, our work includes a concern to influence perspectives on and responses to ageing. This pursuit of equality and human rights is underpinned by our work to promote ageing in place, life-long learning, and health and wellbeing for older people, empowering them to live as active citizens.

Our work is driven by an organisation that is professional in its operations and lives out its values of dignity, participation, diversity, social justice, and professionalism.

Age Action is calling on the Government to plan sufficiently for an ageing population to ensure that people remain active, engaged, and valued in their communities for as long as feasible, with choice and control over their lives, regardless of their age. By implementing progressive policies across all Government departments, including social protection, health and housing, the State can improve quality of life for older people ageing in their community while providing value for money for the Exchequer.

For further information please contact:

Celine Clarke

Head of Advocacy and Communications, Age Action

10 Grattan Crescent, Inchicore, Dublin 8

T: 01-475 6989; E: celine.clarke@ageaction.ie