

Intellectual Disability Database Bulletin 2017

CHO Area 9: Dublin North, Dublin North Central, Dublin North West

Research. Evidence. Action.

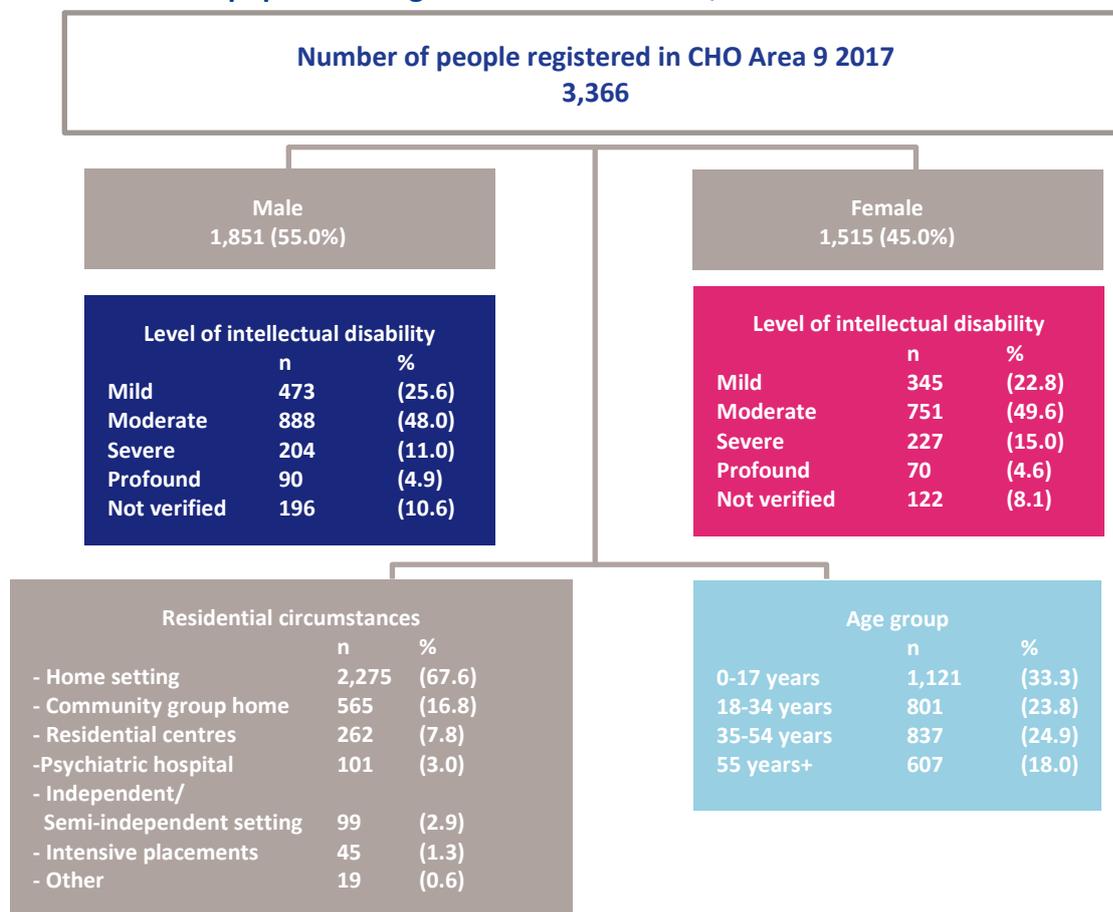
Demographic profile

There were 3,366 people registered on the National Intellectual Disability Database (NIDD) in CHO Area 9 in December 2017. One third (1,121, 33.3%) of the persons in CHO Area 9 were aged less than 18 years, 801 (23.8%) were aged between 18 and 34 years, 837 (24.9%) were aged between 35 and 54 years and 607 (18.0%) were aged 55 years and over (Figure 1). The implications of Ireland’s ageing population profile of people with intellectual disabilities are discussed in the annual report of the National Intellectual Disability Database Committee 2017.

The majority of those registered, 2,230 people (66.3%), were in the moderate, severe, or profound range of intellectual disability. A further 818 people (24.3%) were classified as having a mild intellectual disability, and 318 people (9.4%) had not had their level of intellectual disability established.

In addition to the 3,366 registrations described above, the NIDD also contains records relating to 40 people of average ability and 53 people with a borderline intellectual disability; however these were not included in this analysis.

Figure 1 Profile of the population registered in CHO Area 9, NIDD 2017



Living arrangements in 2017

- 2,275 people (67.6%) lived at home with parents, relatives or foster parents.
- 565 people (16.8%) lived in community group homes.
- 262 people (7.8%) lived in residential centres.
- 101 people (3.0%) lived in psychiatric hospitals.
- 99 people (2.9%) lived independently or semi-independently.
- 45 people (1.3%) lived in intensive placements.
- 13 people (0.4%) lived in other residential services.
- 6 people (0.2%) lived in nursing homes.

Service Provision in 2017

Table 1 summarises service provision within CHO Area 9 and displays the equivalent national figures. In 2017 within CHO Area 9 there were:

- 3,347 people with intellectual disability receiving services, which represents 99.4% the total population registered within CHO Area 9.
- 13 people (0.4%) who did not receive a service in 2017 and were on a waiting list.
- 6 people (0.2%) who were without services in 2017 and had no identified requirements for services in the period 2018-2022.

Table 1 Summary of service provision in CHO Area 9, NIDD 2017

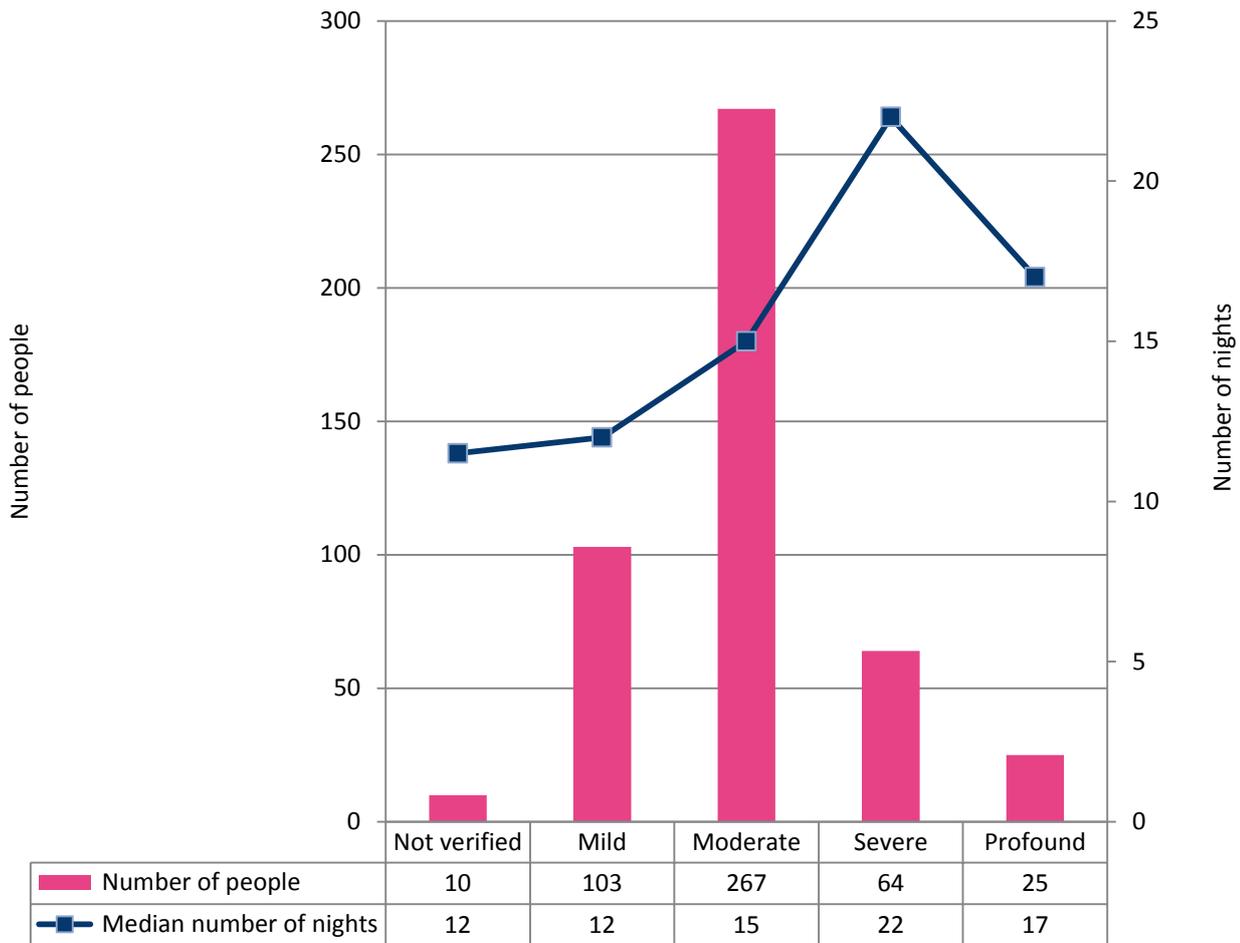
	CHO Area 9		National	
	n	%	n	%
Attending services on a day basis	2,358	70.1	20,404	71.9
Receiving 5-or 7-day residential services	886	26.3	7,391	26.0
Resident in a psychiatric hospital	101	3.0	139	0.5
Receiving residential support services only	~	~	24	0.1
Receiving no service-on waiting list	13	0.4	259	0.9
No identified service requirements	6	0.2	171	0.6
Total	3,366	100	28,388	100

To protect against the indirect identification of people, values in cells containing less than 5 cases have been suppressed and denoted with the symbol ~

Day services were provided to 3,343 people in 2017. The most common day service types were activation centres (925, 27.7%), special schools (580 people, 17.3%) and mainstream schools (317 people, 9.5%). A total of 3,158 (93.8%) people registered in CHO Area 9 availed of multidisciplinary support services such as medical services and psychiatry.

Figure 2 shows the relationship between level of disability and the median number of respite nights received in 2017. In total 10,549 respite nights were provided to 469 people by CHO Area 9 in 2017. As might be expected, people with moderate/severe/profound levels of intellectual disability received more respite nights than those with a mild level of intellectual disability.

Figure 2 CHO Area 9: Number of people in receipt of respite nights and median number of respite nights provided, by level of intellectual disability, NIDD 2017



Service needs 2018-2022

Summary of unmet need

The term ‘unmet need’ refers to a range of situations: people who are not receiving any service; those who are without a major service type such as a full-time residential service or a day service; and those who are without required residential support services. The number of new full-time residential, day, and residential support service places required, within

CHO Area 9 and nationally, to meet the needs of those who were without a service in 2017 is shown in Table 2. Almost all of these places are required immediately. It should be noted that the number of new day places required does not include people who require their day place to be changed or enhanced, for example, those who are leaving education and require a training or employment service. This service need is considered separately below.

Table 2 Number of new places required to meet need in CHO Area 9 2018-2022, NIDD 2017

	CHO Area 9	National	CHO Area 9 as a % of National
Full-time residential	345	2,179	15.8
Day	7	185	3.8
Residential support	222	2,365	9.4

Summary of service change requirements

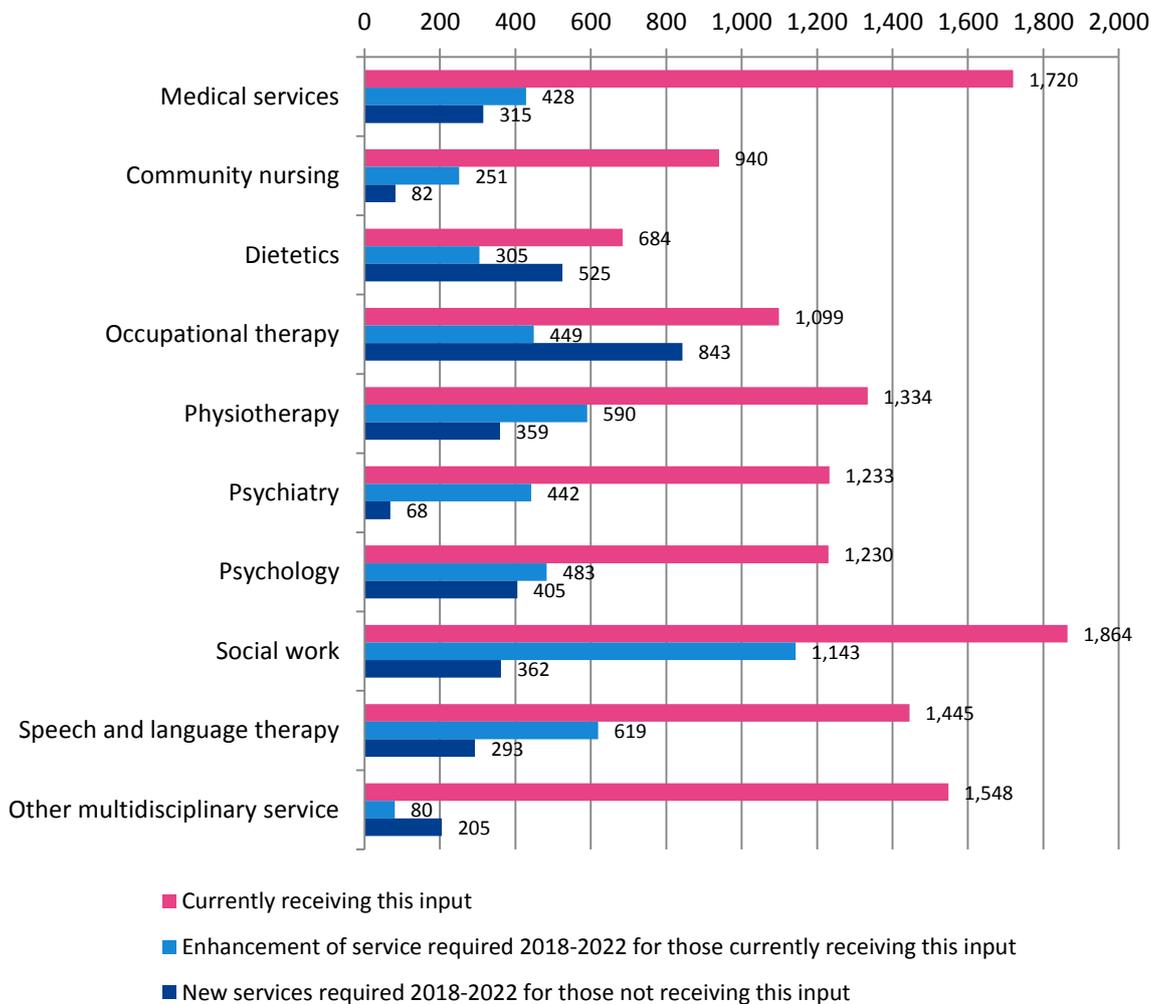
Of the 3,347 people who received services in CHO Area 9 in 2017, 964 people have recorded a requirement for a change or enhancement to their existing service in the period 2018-2022. To address this demand, 863 day places (of which 574 are health-funded places), 80 full-time residential places, and 111 residential support places will need to be changed or enhanced. The number of changes required (1,054) exceeds the number of people (964) as some people require changes to more than one type of service.

Multidisciplinary support services

The multidisciplinary support services for which there is the greatest need in the period 2018 to 2022 are (Figure 3):

- Social work – 362 people require this service for the first time and 1,143 people require an enhanced service.
- Occupational therapy – 843 people require this service for the first time and 449 require an enhanced service.

Figure 3 Multidisciplinary support services received in 2017 and required in the period 2018-2022, by people registered on the NIDD in CHO Area 9, NIDD 2017



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