HRB Bulletin
National Ability Supports System (NASS)

Overview of people engaging with disability services, 2022

Claire Casey, Sarah Fanagan, Michael O’Sullivan, Nicola Caffrey, and Ena Lynn
National Ability Supports System (NASS)
Overview of people engaging with disability services, 2022
Claire Casey, Sarah Fanagan, Michael O’Sullivan, Nicola Caffrey, and Ena Lynn
Acknowledgements

The authors wish to acknowledge the continuing commitment and cooperation of the following groups which are involved in the ongoing maintenance of the National Ability Supports System (NASS):

- The NASS Committee

- The National Health Information Systems Unit of the Health Research Board (HRB), in particular Mary O’Gorman, Tiina Lynch, and Sarah Craig

- The Disability Services Unit of the Department of Health/Department of Children, Equality, Disability, Integration and Youth

- The Health Service Executive (HSE), in particular the NASS personnel and National Disability Operations Team

- Service providers

- The representative bodies for the providers of services to people with disabilities, specifically the National Federation of Voluntary Bodies, the Disability Federation of Ireland, and the Not for Profit Association, and

- The parents and families of people with a disability and their representative bodies, as well as all service users throughout Ireland.
Overview

This bulletin is based on validated data extracted from the National Ability Supports System (NASS) at the end of December 2022. NASS is a national database that records information about Health Service Executive (HSE) disability-funded services that are received or identified as required by a service provider as a result of an intellectual disability; developmental delay; physical, sensory, neurological,¹ learning, and speech and/or language disabilities; or autism.

The purpose of NASS is to gather information in order to aid the planning, development, and organisation of HSE disability-funded services.² A person is eligible to be registered on NASS if they receive or require (either currently or within the next 5 years) a HSE disability-funded service as identified by their service provider.

There are some 18-year-olds who have moved to adult services while others remain in children’s services until they finish secondary school. In this bulletin, ‘children’ includes service users aged 18 years and under who are engaging with children’s disability services, and ‘adults’ refers to those engaging with adult disability services.

It is important to note that the data returned for children by the newly established Children’s Disability Network Teams (CDNTs) are less complete than the data provided by service providers for adults accessing HSE disability-funded services. Overall, a significant increase in the number of children registered on NASS was achieved in 2022, but the data are incomplete for most of these children.

Overall, the records of 73,927 people are included in this bulletin, as they were confirmed as being up to date by their main service provider or were newly registered on NASS in 2022. Of these, 45,068 are children and 28,859 are adults.

¹ A neurological disability can include epilepsy, spina bifida, Alzheimer’s disease, multiple sclerosis, acquired brain injury, and Parkinson’s disease. This term applies to impairments of the nervous system.
² ‘HSE disability-funded’ refers to the budget the HSE uses to fund services for people with disabilities. In 2022, the overall budget for disability services was €2.4 billion. See https://www.gov.ie/en/press-release/59a35-minister-anne-rabbitte-announces-disability-services-budget-for-2023/
Profile of children engaging with children’s disability services

There were 45,068 children aged 18 years and under who were registered on NASS as engaging with children’s disability services in 2022:

• The majority (70%) were male.

• The average (mean) age was 9 years.

• A disability type was recorded for almost two-thirds of children (64%; 29,019). Of the children who had a recorded disability type, autism was the most commonly recorded (39%; 11,416), followed by intellectual disability (ID) (24%; 6,992), and physical disability (6%; 1,667).

Profile of adults engaging with adult disability services

There were 28,859 adults aged 18 years and over who were registered on NASS as accessing or requiring an adult disability service in 2022:

• More male (15,521; 54%) than female (13,338; 46%) adults were registered on NASS in 2022.

• A similar number and proportion of adults was reported in each of the three age groups:
  - 18–34 years: 9,664 (34%)
  - 35–54 years: 10,084 (35%), and
  - 55 years and over: 9,111 (32%).

• The most frequently reported primary disability type was ID (63%; 18,195), followed by neurological disability (17%; 4,975), and physical disability (7%; 1,874).

• Forty-five percent (13,084) of adults registered on NASS reported having a primary carer; almost all of these adults live with their primary carer (92%; 11,977). Age was recorded for more than three-quarters (78%; 10,180) of primary carers, of whom 40% (4,039) were aged 60 years and over.
Services

Please note the limitations to this data as outlined in section 1.2. Information on residential services, respite (day and overnight) services, and supports for daily living is presented for the full cohort of people registered with NASS. Information on specialist supports for children is incomplete; therefore, these data are only presented for adults.

Current service provision

The following outlines 2022 data for current service provision.

- A total of 7,486 people were recorded as living in a residential setting.
  - Of these, 7,396 were adults and 90 were children.
  - For the first time since information from NASS was first reported in 2019, a residential house in the community with four or fewer residents was the most commonly accessed residential service (3,007; 40%), which reflects a shift away from congered residential settings.
  - Ninety percent (6,733) of those living in a residential setting had an ID.

- A total of 3,516 people were in receipt of a home support service.
  - Of these, 2,839 were adults and 677 were children.
  - Fifty-one percent (1,807) of people who have a home support service have a primary disability of ID, and 42% (1,464) have a physical and/or sensory disability.

- In 2022, 18,183 adults accessed at least one day service.
  - Day programme: 16,360 adults (90%)
  - Rehabilitative training: 1,866 adults (10%), and
  - Neuro-rehabilitative training: 194 adults (1%).

- In total, 1,055 people accessed day respite places.
  - Of these, 620 were adults and 435 were children.
  - Of the day respite places accessed, 748 were centre-based respite places, 240 were home sharing places and 110 had day respite in their own home.
• Overnight respite was provided to 3,196 people.
  ◦ Of these, 2,612 were adults and 584 were children.
  ◦ A total of 84,785 nights were accessed, with individuals accessing a median of 16 nights.

• In 2022, 43,759 children registered on NASS were assessed and found to require the support of a multidisciplinary CDNT.

• Nearly three-fifths of adults (58%; 16,675) received one or more specialist support services.
  ◦ In total, 10,607 (58%) adults with an ID received one or more specialist support services. The most commonly accessed services were social work (4,519), speech and language therapy (3,684), and psychiatry (3,579).
  ◦ Sixty-three percent (5,583) of adults with a physical and/or sensory disability received one or more specialist support services. The most commonly accessed services were key worker (2,006), physiotherapy (1,371), and vision rehabilitation (1,111).

New services required for 2022–2027

The following outlines data regarding new services required for 2022–2027, as identified by service providers.

• A total of 1,743 people require a residential service.
  ◦ Of these, 1,709 are adults and 34 are children.
  ◦ Ninety-one percent (1,581) of residential services required are for a place in a house in the community with four or fewer residents.
  ◦ More than three-quarters of adults requiring a residential service (78%; 1,326) have a primary carer, and of those primary carers, almost one-half (46%; 614) were aged 60 years and over.

• Service providers identified 471 people as requiring a home support service.
  ◦ Of these, 412 are adults and 59 are children.
  ◦ Almost two-thirds (63%; 298) have an ID and 26% (120) have a physical and sensory disability.
  ◦ Sixty-two percent (293) are aged 35 years and over, more than one-quarter (26%; 121) are aged 18–34 years, and 12% (57) are aged under 18 years.
In total, 1,349 people require overnight respite.

- Of these, 1,069 are adults and 280 are children.
- More than three-quarters (78%; 1,052) have an ID, 11% (149) have a physical and/or sensory disability, and 10% (136) are Autistic.

**New services required for 2022–2027 (identified for adults only)**

The following outlines data regarding new services required for 2022–2027 that are identified for adults only.

- A total of 395 adults require either a day programme, rehabilitative training, or neuro-rehabilitative training.
  - The majority (86%; 340) require a day programme, of whom three-quarters (75%; 255) have an ID and just over one-third (36%; 124) are aged 18–24 years.

- Nearly one-tenth (9%; 2,646) of adults require a specialist support.
  - The specialist supports most commonly required are speech and language therapy (564), physiotherapy (525), and occupational therapy (516).
1 Background

This bulletin is based on validated data extracted from the National Ability Supports System (NASS) at the end of December 2022. NASS is a national database that records information about current Health Service Executive (HSE) disability-funded services and services required in the next 5 years. Disability-funded services can be required as a result of an intellectual disability (ID); developmental delay, physical, sensory, neurological, learning, and speech and/or language disabilities; or autism. Mental health is only recorded on NASS where an individual is in receipt of a HSE disability-funded service.

The purpose of NASS is to gather information from service providers in order to aid the planning, development, and organisation of HSE disability-funded services. A person is eligible to be registered on NASS if they receive or require (either currently or within the next 5 years) a HSE disability-funded service as identified by their service provider.

There are some 18 year olds who have moved to adult services while others remain in children’s services until they finish secondary school. In this bulletin, ‘children’ includes service users aged 18 years or under who are engaging with children’s disability services, and ‘adults’ refers to those engaging with adult disability services.

Overall, the records of 73,927 people are included in this bulletin, as they were confirmed as being up to date by their main service provider or were newly registered on NASS in 2022. Of these, 45,068 are children and 28,859 are adults.
1.1 Data collection

Information on NASS is captured under four headings:

- Service user details
- Primary carer details
- Disability type and diagnosis, and
- Services.

A primary disability should be recorded by the service provider for every person on NASS. There is also an option for reporting additional disability type(s). A primary disability refers to the disability which most restricts a person’s ability to take part in daily life and/or the disability that gives rise to using/need of the most disability-funded services.

Within the Services heading, NASS captures 77 service options across 6 service types:

- Residential setting
- Day services
- Day respite
- Overnight respite
- Supports for daily living (for example, home support, a personal assistant, or community support), and
- Specialist supports (for example, physiotherapy, speech and/or language therapy, or occupational therapy).

Service providers record information about current services funded through the HSE disability budget and services identified as being currently required or that will be required within the next 5 years.
1.2 Limitations of the data

It is important to note that the data returned for children by the newly established Children’s Disability Network Teams (CDNTs) are less complete than the data provided by service providers for adults accessing HSE disability-funded services. An explanation of why this occurred is provided in Section 5 ‘CDNT project’. Overall, a significant increase in the number of children registered on NASS was achieved in 2022. However, the data are largely incomplete for most of these children. Work is ongoing with our partners in the HSE to improve the completeness of these data.

The coverage of some services on NASS can be compared with the HSE key performance indicators (KPIs) for 2022. The comparisons in Table 1 are based on the coverage of services on NASS compared with the HSE national target for service delivery in 2022. The percentage of data returned for these services is an indication of the proportion of data returned to NASS rather than of service delivery. Work is ongoing with the HSE and service providers to improve the return of data for services where the coverage on NASS is less than expected; for example, in the case of home support and personal assistant (PA) services.

<table>
<thead>
<tr>
<th>Service Description</th>
<th>2022 HSE KPI</th>
<th>NASS 2022</th>
<th>Percentage of data returned</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential places</td>
<td>8,228</td>
<td>7,486</td>
<td>91%</td>
</tr>
<tr>
<td>People in day services</td>
<td>18,500</td>
<td>16,360</td>
<td>88%</td>
</tr>
<tr>
<td>People in rehabilitative training</td>
<td>2,290</td>
<td>1,866</td>
<td>82%</td>
</tr>
<tr>
<td>Overnight respite nights</td>
<td>95,552</td>
<td>84,785</td>
<td>92%</td>
</tr>
<tr>
<td>People in receipt of home support services</td>
<td>7,326</td>
<td>3,399</td>
<td>46%</td>
</tr>
<tr>
<td>People accessing a PA</td>
<td>2,796</td>
<td>1,455</td>
<td>52%</td>
</tr>
</tbody>
</table>

The percentage of data returned for these services is an indication of the data returned to NASS, rather than of service delivery.
2 Profile of children engaging with children’s disability services

2.1 Number of children registered on NASS in 2022

There were 45,068 children aged 18 years and under registered on NASS in 2022. These NASS records include existing records which were reviewed and confirmed as being up to date for 2022, and new records which were included as part of the CDNT project.

Table 2 shows the number of children receiving their main service or support in each Community Healthcare Organisation (CHO) area.

Table 2 Number of children registered for children’s disability services on NASS by CHO area of service, 2022

<table>
<thead>
<tr>
<th>CHO Area</th>
<th>NASS 2022 registrations</th>
<th>Share of NASS registrations</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHO 1 - Donegal, Sligo, Leitrim, Cavan, Monaghan</td>
<td>1,635</td>
<td>3.6</td>
</tr>
<tr>
<td>CHO 2 - Galway, Roscommon, Mayo</td>
<td>4,012</td>
<td>8.9</td>
</tr>
<tr>
<td>CHO 3 - Clare, Limerick, North Tipperary</td>
<td>6,085</td>
<td>13.5</td>
</tr>
<tr>
<td>CHO 4 - Kerry, Cork</td>
<td>8,061</td>
<td>17.9</td>
</tr>
<tr>
<td>CHO 5 - South Tipperary, Carlow, Kilkenny, Waterford, Wexford</td>
<td>4,570</td>
<td>10.1</td>
</tr>
<tr>
<td>CHO 6 - Wicklow, Dun Laoghaire, Dublin South East</td>
<td>1,422</td>
<td>3.2</td>
</tr>
<tr>
<td>CHO 7 - Kildare, West Wicklow, Dublin West, Dublin South City, Dublin South West</td>
<td>7,068</td>
<td>15.7</td>
</tr>
<tr>
<td>CHO 8 - Laois, Offaly, Longford, Westmeath, Louth, Meath</td>
<td>5,932</td>
<td>13.2</td>
</tr>
<tr>
<td>CHO 9 - Dublin North, Dublin North Central, Dublin North West</td>
<td>6,283</td>
<td>13.9</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>45,068</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
Overall, CHO 4 had the most children registered (8,061, 18%), followed by CHO 7 with 7,068 (16%) children registered.

A breakdown of the number of children registered on NASS by their county of residence is shown in Table 3. As expected, counties with large general populations had the most children registered on NASS, such as Dublin (11,857; 26%), Cork (6,839; 15%), and Limerick (3,350; 7%).

### Table 3 Number and distribution of children registered for children’s disability services on NASS by county of residence, 2022

<table>
<thead>
<tr>
<th>County</th>
<th>NASS 2022 registrations</th>
<th>Share of NASS registrations</th>
<th>Number of residents aged 18 years and under in Census 2022</th>
<th>Proportion of residents aged 18 years and under registered on NASS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carlow</td>
<td>632</td>
<td>1.4</td>
<td>15,808</td>
<td>4.0</td>
</tr>
<tr>
<td>Cavan</td>
<td>399</td>
<td>0.9</td>
<td>22,477</td>
<td>1.8</td>
</tr>
<tr>
<td>Clare</td>
<td>1,354</td>
<td>3.0</td>
<td>32,270</td>
<td>4.2</td>
</tr>
<tr>
<td>Cork</td>
<td>6,839</td>
<td>15.2</td>
<td>144,220</td>
<td>4.7</td>
</tr>
<tr>
<td>Donegal</td>
<td>426</td>
<td>0.9</td>
<td>43,657</td>
<td>1.0</td>
</tr>
<tr>
<td>Dublin</td>
<td>11,857</td>
<td>26.3</td>
<td>338,041</td>
<td>3.5</td>
</tr>
<tr>
<td>Galway</td>
<td>2,354</td>
<td>5.2</td>
<td>68,298</td>
<td>3.4</td>
</tr>
<tr>
<td>Kerry</td>
<td>1,207</td>
<td>2.7</td>
<td>36,922</td>
<td>3.3</td>
</tr>
<tr>
<td>Kildare</td>
<td>1,876</td>
<td>4.2</td>
<td>67,857</td>
<td>2.8</td>
</tr>
<tr>
<td>Kilkenny</td>
<td>534</td>
<td>1.2</td>
<td>27,017</td>
<td>2.0</td>
</tr>
<tr>
<td>Laois</td>
<td>705</td>
<td>1.6</td>
<td>25,915</td>
<td>2.7</td>
</tr>
<tr>
<td>Leitrim</td>
<td>283</td>
<td>0.6</td>
<td>9,128</td>
<td>3.1</td>
</tr>
<tr>
<td>Limerick</td>
<td>3,350</td>
<td>7.4</td>
<td>50,261</td>
<td>6.7</td>
</tr>
<tr>
<td>Longford</td>
<td>151</td>
<td>0.3</td>
<td>12,391</td>
<td>1.2</td>
</tr>
<tr>
<td>Louth</td>
<td>1,029</td>
<td>2.3</td>
<td>37,298</td>
<td>2.8</td>
</tr>
<tr>
<td>Mayo</td>
<td>885</td>
<td>2.0</td>
<td>33,660</td>
<td>2.6</td>
</tr>
<tr>
<td>Meath</td>
<td>2,145</td>
<td>4.8</td>
<td>63,291</td>
<td>3.4</td>
</tr>
<tr>
<td>Monaghan</td>
<td>185</td>
<td>0.4</td>
<td>17,977</td>
<td>1.0</td>
</tr>
<tr>
<td>Offaly</td>
<td>1,187</td>
<td>2.6</td>
<td>21,968</td>
<td>5.4</td>
</tr>
<tr>
<td>Roscommon</td>
<td>795</td>
<td>1.8</td>
<td>17,979</td>
<td>4.4</td>
</tr>
<tr>
<td>Sligo</td>
<td>441</td>
<td>1.0</td>
<td>17,073</td>
<td>2.6</td>
</tr>
<tr>
<td>Tipperary</td>
<td>2,496</td>
<td>5.5</td>
<td>42,617</td>
<td>5.9</td>
</tr>
<tr>
<td>Waterford</td>
<td>1,159</td>
<td>2.6</td>
<td>31,524</td>
<td>3.7</td>
</tr>
<tr>
<td>Westmeath</td>
<td>701</td>
<td>1.6</td>
<td>25,081</td>
<td>2.8</td>
</tr>
<tr>
<td>Wexford</td>
<td>1,228</td>
<td>2.7</td>
<td>41,640</td>
<td>2.9</td>
</tr>
<tr>
<td>Wicklow</td>
<td>850</td>
<td>1.9</td>
<td>40,949</td>
<td>2.1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>45,068</strong></td>
<td><strong>100</strong></td>
<td><strong>1,285,319</strong></td>
<td><strong>3.5</strong></td>
</tr>
</tbody>
</table>
2.2 Demographic profile

Sex was recorded for 43,964 (98%) children, of whom 30,767 (70%) were male and 13,197 (30%) were female.

The majority of both males and females were in the 5–14-year-old age group (Figure 1).

---

**Figure 1** Percentage of children registered for children’s disability services on NASS by age group and sex, 2022

<table>
<thead>
<tr>
<th>Age group of children</th>
<th>Percentage registered</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–4 years</td>
<td>11.1</td>
</tr>
<tr>
<td>5–9 years</td>
<td>25.0</td>
</tr>
<tr>
<td>10–14 years</td>
<td>22.1</td>
</tr>
<tr>
<td>15–18 years</td>
<td>10.0</td>
</tr>
</tbody>
</table>

Male | Female | Male | Female
---|---|---|---
5.3|9.9|9.2|4.9
The histogram in Figure 2 shows the distribution of ages, from 0 to 18 years, across the children registered on NASS, with the average (mean) age being 9 years.

**Figure 2 Ages of children registered on NASS for children’s disability services, 2022**
2.3 Reported disabilities

A primary disability type was recorded for almost two-thirds of children (64%; 29,019), this includes 5,833 children whose primary disability type was recorded as ‘not verified’. The remaining children (36%; 16,050) do not have a primary disability type recorded on NASS, as either no information was provided by their service provider, insufficient information was provided, or they were still awaiting an official diagnosis of a disability.

Of the 29,019 children who had a primary disability type recorded, autism was the most commonly recorded (11,416; 39%), followed by intellectual disability (6,992; 24%), and physical disability (1,667; 6%) (Table 4).

---

### Children

#### Primary disability

<table>
<thead>
<tr>
<th>Disability</th>
<th>Gender Male</th>
<th>Gender Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism</td>
<td>75%</td>
<td>25%</td>
</tr>
<tr>
<td>Intellectual disability</td>
<td>66%</td>
<td>34%</td>
</tr>
<tr>
<td>Physical disability</td>
<td>61%</td>
<td>39%</td>
</tr>
</tbody>
</table>

---

3. Not verified – Where the type of disability has not been verified for an individual by an appropriate healthcare professional.
Table 4 Primary disability among children registered for children’s disability services on NASS by sex, 2022

<table>
<thead>
<tr>
<th>Primary disability</th>
<th>Male</th>
<th>Female</th>
<th>Data on sex not provided</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>n</td>
</tr>
<tr>
<td>Autism</td>
<td>8,446</td>
<td>74.0</td>
<td>2,761</td>
<td>11,416</td>
</tr>
<tr>
<td>Intellectual</td>
<td>4,594</td>
<td>65.7</td>
<td>2,385</td>
<td>6,992</td>
</tr>
<tr>
<td>Physical</td>
<td>1,022</td>
<td>61.3</td>
<td>645</td>
<td>1,667</td>
</tr>
<tr>
<td>Developmental delay (children aged under 10 years only)</td>
<td>681</td>
<td>69.1</td>
<td>297</td>
<td>985</td>
</tr>
<tr>
<td>Neurological</td>
<td>505</td>
<td>59.5</td>
<td>343</td>
<td>849</td>
</tr>
<tr>
<td>Visual</td>
<td>327</td>
<td>54.1</td>
<td>277</td>
<td>604</td>
</tr>
<tr>
<td>Speech and/or language</td>
<td>252</td>
<td>74.8</td>
<td>84</td>
<td>337</td>
</tr>
<tr>
<td>Hearing loss and/or deafness</td>
<td>82</td>
<td>55.8</td>
<td>64</td>
<td>147</td>
</tr>
<tr>
<td>Specific learning difficulty (other than intellectual)</td>
<td>81</td>
<td>59.6</td>
<td>55</td>
<td>136</td>
</tr>
<tr>
<td>DeafBlind (dual sensory)</td>
<td>30</td>
<td>65.2</td>
<td>7</td>
<td>46</td>
</tr>
<tr>
<td>Mental health*</td>
<td>6</td>
<td>85.7</td>
<td>~</td>
<td>~</td>
</tr>
<tr>
<td>Not verified**</td>
<td>4,170</td>
<td>71.5</td>
<td>1,661</td>
<td>5,833</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>20,196</strong></td>
<td><strong>69.6</strong></td>
<td><strong>8,580</strong></td>
<td><strong>29,019</strong></td>
</tr>
</tbody>
</table>

* All those with a primary disability of mental health had a secondary disability type eligible for HSE disability-funded services.

** Not verified – Where the type of disability has not been verified for an individual by an appropriate healthcare professional.

~ In order to protect against the risk of indirect identification of individuals, values of less than 5, or where individuals may be identified, have been suppressed.
2.4 Additional disabilities

A total of 5,026 (17%) children had at least one additional disability along with their primary disability recorded (Table 5). The most commonly reported additional disability was a speech and/or language disability (1,841; 6%), followed by a physical disability (1,496; 5%), and autism (1,110; 4%).

Table 5 Additional disabilities among children registered on NASS for children’s disability services by primary disability, 2022

<table>
<thead>
<tr>
<th>Additional disability</th>
<th>Intellectual disability</th>
<th>Autism</th>
<th>Physical and/or sensory*</th>
<th>Other**</th>
<th>Total population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>6,992</td>
<td>100</td>
<td>11,416</td>
<td>100</td>
<td>29,019</td>
</tr>
<tr>
<td>Speech and/or language</td>
<td>1,254</td>
<td>17.9</td>
<td>255</td>
<td>2.2</td>
<td>1,841</td>
</tr>
<tr>
<td>Physical</td>
<td>1,066</td>
<td>15.2</td>
<td>115</td>
<td>1.0</td>
<td>1,496</td>
</tr>
<tr>
<td>Autism</td>
<td>967</td>
<td>13.8</td>
<td>0</td>
<td>0.0</td>
<td>1,110</td>
</tr>
<tr>
<td>Visual</td>
<td>313</td>
<td>4.5</td>
<td>17</td>
<td>0.1</td>
<td>412</td>
</tr>
<tr>
<td>Hearing loss and/or deafness</td>
<td>289</td>
<td>4.1</td>
<td>13</td>
<td>0.1</td>
<td>339</td>
</tr>
<tr>
<td>Neurological</td>
<td>113</td>
<td>1.6</td>
<td>48</td>
<td>0.4</td>
<td>429</td>
</tr>
<tr>
<td>Developmental delay (children aged under 10 years only)</td>
<td>37</td>
<td>0.5</td>
<td>111</td>
<td>1.0</td>
<td>215</td>
</tr>
<tr>
<td>Specific learning difficulty (other than intellectual)</td>
<td>24</td>
<td>0.3</td>
<td>111</td>
<td>1.0</td>
<td>168</td>
</tr>
<tr>
<td>Mental Health</td>
<td>12</td>
<td>0.2</td>
<td>45</td>
<td>0.4</td>
<td>62</td>
</tr>
<tr>
<td>DeafBlind (dual sensory)</td>
<td>7</td>
<td>0.1</td>
<td>-</td>
<td>-</td>
<td>12</td>
</tr>
<tr>
<td>Intellectual</td>
<td>0</td>
<td>0.0</td>
<td>521</td>
<td>4.6</td>
<td>617</td>
</tr>
<tr>
<td>Not verified</td>
<td>-</td>
<td>-</td>
<td>10</td>
<td>0.1</td>
<td>23</td>
</tr>
<tr>
<td>No additional disability</td>
<td>4,337</td>
<td>62.0</td>
<td>10,281</td>
<td>90.1</td>
<td>24,013</td>
</tr>
</tbody>
</table>

* Physical and/or sensory includes: DeafBlind (dual sensory), hearing loss and/or deafness, neurological, physical, speech and/or language, and visual.
** Other includes: Developmental delay (children aged under 10 years only), specific learning difficulty (other than intellectual), mental health, and not verified.
- In order to protect against the risk of indirect identification of individuals, values less than 5 have been suppressed.
  Note that more than one additional disability may be recorded for a person and, as a result, total percentages may sum to more than 100%.
3 Profile of adults engaging in adult disability services

3.1 Number of adults registered on NASS in 2022

There were 28,859 adults (aged 18 years and over) recorded as accessing or requiring a HSE disability-funded service in 2022.

The breakdown of registrations by CHO area of service is listed in Table 6. CHO 4 had the highest number of registrations (4,336; 15%), followed by CHO 9 (3,826; 13%) and CHO 8 (3,516; 12%).

Table 6 Number of adults registered for adult disability services on NASS by CHO area of service, 2022

<table>
<thead>
<tr>
<th>CHO area of service</th>
<th>NASS 2022 registrations</th>
<th>Share of NASS registrations</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHO 1 - Donegal, Sligo, Leitrim, Cavan, Monaghan</td>
<td>3,411</td>
<td>11.8</td>
</tr>
<tr>
<td>CHO 2 - Galway, Roscommon, Mayo</td>
<td>3,227</td>
<td>11.2</td>
</tr>
<tr>
<td>CHO 3 - Clare, Limerick, North Tipperary</td>
<td>2,652</td>
<td>9.2</td>
</tr>
<tr>
<td>CHO 4 - Kerry, Cork</td>
<td>4,336</td>
<td>15.0</td>
</tr>
<tr>
<td>CHO 5 - South Tipperary, Carlow, Kilkenny, Waterford, Wexford</td>
<td>3,127</td>
<td>10.8</td>
</tr>
<tr>
<td>CHO 6 - Wicklow, Dun Laoghaire, Dublin South East</td>
<td>1,584</td>
<td>5.5</td>
</tr>
<tr>
<td>CHO 7 - Kildare, West Wicklow, Dublin West, Dublin South City,</td>
<td>3,179</td>
<td>11.0</td>
</tr>
<tr>
<td>Dublin South West</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHO 8 - Laois, Offaly, Longford, Westmeath, Louth, Meath</td>
<td>3,516</td>
<td>12.2</td>
</tr>
<tr>
<td>CHO 9 - Dublin North, Dublin North Central, Dublin North West</td>
<td>3,826</td>
<td>13.3</td>
</tr>
<tr>
<td>Outside Ireland</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>28,859</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

*In order to protect against the risk of indirect identification of individuals, values less than 5 have been suppressed.*
The prevalence of the adult population accessing disability services in Ireland per 1,000 of the general population aged 18 years and over was 7.3 (population data are based on the 2022 Census). Figure 3 shows the prevalence of adults accessing a disability service across Ireland by county of residence. Sligo (14.3 per 1,000 of the adult population) had the highest prevalence, while Dublin (5.8 per 1,000 of the adult population) had the lowest.

Figure 3 Adults accessing disability services per 1,000 of the general population aged 18 years and older, by county of residence, NASS 2022

Key:
- 5.8–8.0 NASS registrations per 1,000 population
- 8.1–9.9 NASS registrations per 1,000 population
- 10.0–14.3 NASS registrations per 1,000 population

4 Central Statistics Office (2023) Census 2022 Summary Results. www.cso.ie
3.2 Demographic profile

More male (15,521; 54%) than female (13,338; 46%) adults were recorded on NASS as attending an adult disability service in 2022.

There was a similar sex distribution across the three age groups of 18–34 years, 35–54 years, and 55 years and over (Figure 4).

Figure 4 Number of adults registered in adult disability services on NASS by age group and sex, 2022
3.3 Occupational status

Information on occupational status was available for 85% (24,439) of the 28,859 people accessing or requiring an adult HSE disability-funded service in 2022, of whom:

- Over one-third (34%; 8,383) were in a training/day programme.
- Over one-third (34%; 2,328) were unable to work due to a disability.
- Over one-tenth (11%; 2,787) were in paid employment. Almost half (47%; 1,321) were in supported employment, which includes supported employment as part of training/day programmes.
- One-tenth (10%; 2,397) were unemployed.
- The remaining 11% were retired (7%; 1,588), students (3%; 774), or engaged in home duties (1%; 295).

3.4 Ethnicity or cultural background

Where ethnicity or cultural background information was known (20,978; 73% of the total), 95% (19,910) of adults were Irish. A total of 3% (619) were from any other white background, 1% (162) were Irish Travellers, and 1% (287) were either Black African, any other Black background, Asian–Chinese, or any other Asian background.

3.5 Living arrangements

Information on living arrangements was available for 95% (27,500) of the 28,859 adults accessing or requiring an adult HSE disability-funded service in 2022, of whom:

- Three-fifths (60%; 16,611) were residing with family members.
- Over one-quarter (28%; 7,569) were living in a residential service setting.
- Over one-tenth (11%; 2,920) were living alone.
- The remaining 1% (400) were living with non-relatives.

---

5 Totals do not add up to 24,439 due to some overlap between training/day programmes and supported employment.
3.6 Reported disabilities

The most frequently reported primary disability type was ID (18,195; 63%), followed by neurological disability (4,975; 17%), and physical disability (1,874; 7%) (Table 7).

Of those with a primary disability of ID, two-thirds (66%; 11,743) had a moderate, severe, or profound ID (Figure 5).

Figure 5 Degree of ID in adults registered in adult disability services on NASS whose primary disability was ID, 2022

Note: Degree of intellectual disability was missing for 5 individuals whose primary disability was intellectual.
Table 7 Primary disability among adults registered in adult disability services on NASS by sex, 2022

<table>
<thead>
<tr>
<th>Primary disability</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Intellectual</td>
<td>10,138</td>
<td>55.7</td>
<td>8,057</td>
</tr>
<tr>
<td>Neurological</td>
<td>2,234</td>
<td>44.9</td>
<td>2,741</td>
</tr>
<tr>
<td>Physical</td>
<td>853</td>
<td>45.5</td>
<td>1,021</td>
</tr>
<tr>
<td>Autism</td>
<td>1,084</td>
<td>77.3</td>
<td>318</td>
</tr>
<tr>
<td>Visual</td>
<td>684</td>
<td>50.7</td>
<td>665</td>
</tr>
<tr>
<td>Hearing loss and/or deafness</td>
<td>279</td>
<td>45.5</td>
<td>334</td>
</tr>
<tr>
<td>Mental health*</td>
<td>170</td>
<td>58.0</td>
<td>123</td>
</tr>
<tr>
<td>Specific learning difficulty (other than intellectual)</td>
<td>26</td>
<td>53.1</td>
<td>23</td>
</tr>
<tr>
<td>DeafBlind (dual sensory)</td>
<td>18</td>
<td>50.0</td>
<td>18</td>
</tr>
<tr>
<td>Speech and/or language</td>
<td>9</td>
<td>81.8</td>
<td>-</td>
</tr>
<tr>
<td>Not verified**</td>
<td>24</td>
<td>44.4</td>
<td>30</td>
</tr>
<tr>
<td>Not known</td>
<td>0</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>15,519</td>
<td>53.8</td>
<td>13,340</td>
</tr>
</tbody>
</table>

* All those with a primary disability of mental health had a secondary disability type eligible for HSE disability-funded services.

** Not verified – Where the type of disability has not been verified for an individual by an appropriate healthcare professional.

~ In order to protect against the risk of indirect identification of individuals, values less than 5, or where individuals may be identified, have been suppressed.
3.7 Additional disabilities

Almost two-fifths of adults (38%; 10,911) with any type of primary disability had an additional disability recorded. The most commonly recorded additional disability type was physical disability (4,628; 16%), followed by a speech and/or language disability (2,873; 10%) and autism (1,518; 5%). The breakdown of additional disability types by primary disability is shown in Table 8.

Table 8 Additional disabilities among adults registered in adult disability services on NASS by primary disability, 2022

<table>
<thead>
<tr>
<th>Additional disability</th>
<th>Intellectual disability</th>
<th>Physical and/or Sensory*</th>
<th>Autism</th>
<th>Other**</th>
<th>Total population</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Total population</td>
<td>18,195</td>
<td>100</td>
<td>8,858</td>
<td>100</td>
<td>1,402</td>
</tr>
<tr>
<td>Physical</td>
<td>3,132</td>
<td>17.2</td>
<td>1,438</td>
<td>16.2</td>
<td>31</td>
</tr>
<tr>
<td>Speech and/or language</td>
<td>2,562</td>
<td>14.1</td>
<td>248</td>
<td>2.8</td>
<td>55</td>
</tr>
<tr>
<td>Autism</td>
<td>1,459</td>
<td>8.0</td>
<td>43</td>
<td>0.5</td>
<td>0</td>
</tr>
<tr>
<td>Visual</td>
<td>1,194</td>
<td>6.6</td>
<td>232</td>
<td>2.6</td>
<td>18</td>
</tr>
<tr>
<td>Mental health</td>
<td>823</td>
<td>4.5</td>
<td>224</td>
<td>2.5</td>
<td>132</td>
</tr>
<tr>
<td>Hearing loss and/or deafness</td>
<td>862</td>
<td>4.7</td>
<td>112</td>
<td>1.3</td>
<td>15</td>
</tr>
<tr>
<td>Intellectual</td>
<td>0</td>
<td>0.0</td>
<td>267</td>
<td>3.0</td>
<td>497</td>
</tr>
<tr>
<td>Neurological</td>
<td>562</td>
<td>3.1</td>
<td>174</td>
<td>2.0</td>
<td>44</td>
</tr>
<tr>
<td>Specific learning difficulty (other than intellectual)</td>
<td>92</td>
<td>0.5</td>
<td>44</td>
<td>0.5</td>
<td>45</td>
</tr>
<tr>
<td>DeafBlind (dual sensory)</td>
<td>32</td>
<td>0.2</td>
<td>13</td>
<td>0.1</td>
<td>0</td>
</tr>
<tr>
<td>Not verified</td>
<td>37</td>
<td>0.2</td>
<td>36</td>
<td>0.4</td>
<td>5</td>
</tr>
<tr>
<td>No additional disability</td>
<td>10,647</td>
<td>58.5</td>
<td>6,368</td>
<td>71.9</td>
<td>673</td>
</tr>
</tbody>
</table>

* Physical and/or sensory includes DeafBlind (dual sensory), hearing loss and/or deafness, neurological, physical, speech and/or language, and visual.
** Other includes specific learning difficulty (other than intellectual), mental health, and not verified.
- In order to protect against the risk of indirect identification of individuals, values less than 5 have been suppressed.
  Note that more than one additional disability may be recorded for a person and, as a result, total percentages may sum up to more than 100%.
  Note that primary disability type is missing for eight individuals.
3.8 Primary carer

Of those registered on NASS who do not live in a residential setting (21,288; 74%), more than three-fifths (62%; 13,084) reported having a primary carer; almost all of these individuals live with their primary carer (92%; 11,977).

The majority (73%; 9,527) of primary carers were parents, 11% (1,409) were a wife/husband/partner, and 10% (1,358) were siblings. Age was recorded for more than three-quarters (78%; 10,180) of primary carers, 40% (4,039) of whom were aged 60 years and over. Of the primary carers aged 60 years and over, 2,468 were aged between 60-69 years, 1,235 were aged between 70-79 years and 336 were aged 80 years and over.

Of the primary carers:

- 73% parents
- 11% wife/husband/partner
- 10% siblings
- 40% aged 60+ years
4 Services

NASS collects information on the HSE disability-funded services people with disabilities use and/or will require in the next 5 years, as reported by their service providers, in the following categories:

- Residential and home support services
- Day services
- Day and overnight respite, and
- Support services (including personal assistant (PA), multidisciplinary, and specialised disability supports).

The information presented in this section represents whether a service was recorded as:

- **Current services**: The number of places accessed in the reporting year.
- **Enhancement required to current services**: The number of places accessed which require an enhancement in the next 12 months; for example, additional hours/days or additional support.
- **New services required**: The number of new places required for those not in receipt of that service but who require it now or will require it within the next 5 years.

This section reports on children and adults engaging with disability services. Information on residential services, respite (day and overnight) services, and supports for daily living is presented for the full cohort of people. Information on specialist supports for children is incomplete; therefore, these data are only presented for adults.

Individuals may access one or more services within our broad categories of services outlined e.g. a person can access both centre based day respite and day respite in their own home over the calendar year.
4.1 Current service provision

4.1.1 Residential and home support services

Residential services include HSE disability-funded accommodation and services that provide support in order to enable people with disabilities to remain in their existing accommodation or to move to more suitable or appropriate accommodation.

The following outlines 2022 data for residential and home support services:

- A total of 7,486 people were recorded as living in a residential setting.
  - Of these, 7,396 were adults and 90 were children.
  - For the first time since information from NASS was first reported in 2019, a residential house in the community with four or fewer residents was the most commonly accessed residential service (3,007; 40%), which reflects a shift away from congregated residential settings.
  - One-fifth (20%; 1,545) of current residential places accessed require an enhancement.
  - Ninety percent (6,773) of people living in a residential setting had an ID, of whom 81% (5,497) had either a moderate, severe, or profound ID. This group comprised 6,708 adults and 65 children.
• A total of 3,516 people were in receipt of 3,520 home support services.
  - Of these, 2,839 were adults and 677 were children.
  - More than one-fifth (21%; 749) of these home support services require an enhancement.
  - One-third (33%; 1,181) of those who received home support services were aged 55 years and over.
  - Just over one-half (51%; 1,807) of those who received home support services had a primary disability of ID, and 42% (1,464) had a physical and/or sensory disability.
  - Fifty-seven percent (1,613) of adults in receipt of home support were living with family, and more than one-quarter (27%; 760) were living alone.

4.1.2 Day services

HSE disability-funded day services captured on NASS include day programmes, rehabilitative training, and neuro-rehabilitative training, which may be accessed by those aged 18 years and over.

The following outlines 2022 data for day service provision:

• A total of 18,183 (63%) adults accessed either a day programme, rehabilitative training, or neuro-rehabilitative training.

• A day programme was the most commonly accessed (16,360; 90%) type of day service. An enhancement is required for 3,699 (23%) day programme places.

• Rehabilitative training was received by 1,866 people, and neuro-rehabilitative training was received by 194 people.

• The breakdown of day services by primary disability type is shown in Table 9.
Table 9 Day services accessed by adults registered in adult disability services on NASS by primary disability type, 2022

<table>
<thead>
<tr>
<th></th>
<th>Intellectual disability</th>
<th>Physical and/or Sensory*</th>
<th>Autism</th>
<th>Other**</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Total population</td>
<td>18,195</td>
<td>100</td>
<td>8,858</td>
<td>100</td>
<td>1,402</td>
</tr>
<tr>
<td>Day programme†</td>
<td>13,551</td>
<td>74.5</td>
<td>1,878</td>
<td>21.2</td>
<td>692</td>
</tr>
<tr>
<td>Rehabilitative training</td>
<td>1,320</td>
<td>7.3</td>
<td>208</td>
<td>2.3</td>
<td>262</td>
</tr>
<tr>
<td>Neuro–rehabilitative training</td>
<td>0</td>
<td>0.0</td>
<td>194</td>
<td>2.2</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>14,692</td>
<td>80.7</td>
<td>2,238</td>
<td>25.3</td>
<td>938</td>
</tr>
</tbody>
</table>

† A day programme aims to provide a supportive environment which addresses a person’s needs. These day programmes provide, or are moving towards providing, the 12 supports outlined in the New Directions Model.®

* Physical and/or sensory includes DeafBlind (dual sensory), hearing loss and/or deafness, neurological, physical, speech and/or language, and visual.

** Other includes specific learning difficulty (other than intellectual), mental health, and not verified.

Note: Primary disability type is missing for eight adults, three of whom were accessing a day programme.

4.1.3 Day respite

Day respite consists of short-term care in the local community. It may be provided in the service user’s own home, in a centre-based facility, or through a home sharing arrangement.

The following outlines 2022 data for day respite services:

- A total of 1,055 people accessed 1,098 day respite places in 2022.
  - Of these, 620 were adults and 435 were children.
  - Of the day respite places provided in 2022, 748 were centre-based respite places, 240 were home sharing places, and 110 had day respite in their own home.
  - Almost one-quarter (23%; 249) of current day respite places accessed in 2022 require an enhancement.

4.1.4 Overnight respite

Overnight respite consists of occasional residential care in the local community. Overnight respite care may involve providing alternative family or residential care for a person with a disability in order to enable their carer to take a short break, a holiday, or a rest while providing a positive experience for the service user. It includes short-term respite (such as a weekend) and longer respite arrangements (for example, in order to cover a holiday or hospital stay for the primary carer).

The following outlines 2022 data for overnight respite services:

- There were 3,196 people who availed of 3,308 overnight respite places in 2022.
  - Of these, 2,612 were adults and 584 were children.
  - Respite in a house in the community or a dedicated respite centre (2,755) was the most commonly accessed type of overnight respite, followed by holiday respite in a residential centre or summer camp (201), and overnight respite through home sharing arrangements (195).
  - A total of 84,785 nights were accessed, with individuals accessing a median of 16 nights during 2022.
  - Almost two-fifths (39%; 1,288) of overnight respite places accessed in 2022 require an enhancement.

Figure 6 shows the overnight respite provision in each of the CHO areas as reported by service providers.
4.1.5 Support services

A range of services and supports that enable a person with a disability to live more independently and participate more effectively in the community may be recorded on NASS by service providers. Examples include PA, community support, and transport services.

The following outlines 2022 data for support services:

- A total of 1,455 PA services were accessed in 2022.
  - Of these, 1,386 were accessed by adults and 69 were accessed by children.
  - Fifteen percent (218) of PA services require an enhancement.
  - More than four-fifths (82%; 1,196) of PA services were received by those with a physical and/or sensory disability.

- In 2022, 2,065 community support services were accessed and 1,106 transport services were availed of.

Multidisciplinary therapies and specialised disability services which aim to develop or restore a person’s capabilities are also outlined in this section. Due to the differences in the availability of information for children and adults in relation to these service types, the service use of the two groups is described separately below.

Children

- In total, 43,759 children registered on NASS in 2022 were assessed and found to require the support of a multidisciplinary Children’s Disability Network Team (CDNT). All CDNTs include occupational therapists, psychologists, physiotherapists, social workers, and speech and language therapists. The teams also have access to dietitians, family support workers, nurses, and social care workers. However, details of the specific supports currently received by children, as well as the supports they will require, were not provided to NASS.

- Children with neurological, physical, and/or sensory disabilities may receive specialist supports from dedicated organisations which engage with their service users independently of the CDNTs. Service providers reported 653 children accessing vision rehabilitation, 349 accessing assistive technology/client technical service, and 349 accessing orthotics/prosthetics in 2022.

---

7 Information about children’s disability services is available on the HSE website at https://www2.hse.ie/services/disability/childrens-services/services/overview/
Adults

- Nearly three-fifths (58%; 16,675) of adults received one or more specialist supports from either a multidisciplinary team or a specialised disability service in 2022.
  - A total of 10,607 (58%) adults with an ID received one or more specialist support services. The most commonly accessed services were social work (4,519), speech and language therapy (3,684), and psychiatry (3,579) (Figure 7). Of the 4,519 people accessing social work, 45% (2,039) require an enhancement to that service. Additionally, of the 3,684 people accessing speech and language therapy, 44% (1,609) of people require an enhancement. Nearly three in ten (29%; 1,053) people attending psychiatry require an enhancement to that service.
  - Sixty-three percent (5,583) of adults with a physical and/or sensory disability received one or more specialist support services. The most commonly accessed services were key worker (2,006), physiotherapy (1,371), and vision rehabilitation (1,111) (Figure 8). Of the 1,371 people accessing physiotherapy, 9% (126) require an enhancement to that service. One in ten (10%; 115) people receiving vision rehabilitation services require an enhancement to that service.
Figure 7 Most commonly received specialist supports for adults registered on NASS with an ID (places currently being accessed and enhancements required to current places), 2022

[Bar chart showing the number of adults receiving different supports, with the following data:
- Social work: 4,519
- Speech and language therapy: 3,684
- Psychiatry: 3,579
- Nursing: 3,570
- Occupational therapy: 3,263
- Physiotherapy: 3,211
- Key worker: 2,692
- Clinical psychology: 1,792
- Dietetics: 1,749
- Behaviour therapy: 997]
Figure 8 Most commonly received specialist supports for adults registered on NASS with a physical and/or sensory disability (places currently being accessed and enhancements required to current places), 2022

- Key worker: 2,006
- Physiotherapy: 1,371
- Vision rehabilitation services: 1,111
- Occupational therapy: 974
- Assistive technology/client technical service: 812
- Case manager: 725
- Nursing: 530
- Social work: 324
- Speech and language therapy: 272
- Complementary therapy: 222

Number of adults
4.2 New services required for 2022–2027

As outlined in Section 1, NASS collects information on the HSE disability-funded services that people with disabilities currently use and/or will require in the next 5 years. New services required are the number of new places that service providers have identified as being required by people who are not yet in receipt of a particular type of service but who need it now or will need it within the next 5 years.

Services are identified as required by a service provider. As stated in Section 1.2, data on children’s services are incomplete due to the nature of data collection for this cohort in 2022. Therefore, support services (for example, PA, transport, and specialist supports) are presented for adults only.

<table>
<thead>
<tr>
<th>Adults and children</th>
<th>Adults only</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,743 residential places required</td>
<td>395 adults require a day service</td>
</tr>
<tr>
<td>471 home support places required</td>
<td>2,646 adults require specialist supports</td>
</tr>
<tr>
<td>1,349 people require overnight respite</td>
<td></td>
</tr>
</tbody>
</table>

395 adults require a day service
4.2.1 Residential and home support requirements

The following outlines 2022 data for residential and home support requirements:

- A total of 1,743 people were identified by service providers as requiring a residential service.
  - Of these, 1,709 are adults and 34 are children.
  - Ninety-one percent (1,581) of residential services required are for a place in a house in the community with four or fewer residents.
  - Nearly three-fifths (59%; 1,021) of those in need of residential services are aged 35 years or over.
  - Ninety percent (1,574) of people in need of residential services have an ID, 74% (1,164) of whom have a moderate, severe, or profound ID.
  - More than three-quarters of adults requiring a residential service (78%; 1,326) have a primary carer; of those primary carers, almost one-half (46%; 614) are aged 60 years and over.

- Service providers identified 471 people as requiring home support.
  - Of these, 412 are adults and 59 are children.
  - Almost two-thirds (63%; 298) have an ID, and 26% (120) have a physical and/or sensory disability.
  - Sixty-two percent (293) are aged 35 years and over, more than one-quarter (26%; 121) are aged 18–34 years, and 12% (57) are aged under 18 years.

4.2.2 Day service requirements

The following outlines 2022 data for day service requirements:

- A total of 395 adults require a day service, including either:
  - A day programme (340 adults)
  - Rehabilitative training (49 adults), or
  - Neuro-rehabilitative training (7 adults).

- Three-quarters of adults (75%; 255) requiring a day programme have an ID, and just over one-third (36%; 124) of these individuals are aged 18–24 years.
4.2.3 Day respite requirements
The following outlines 2022 data for day respite requirements:

- A total of 205 people require a day respite service.
  - Of these, 115 are adults and 90 are children.
  - Centre-based respite (including clubs and camps) and own-home respite are the most commonly required day respite services (145 places and 62 places, respectively).

4.2.4 Overnight respite requirements
The following outlines 2022 data for overnight respite requirements:

- A total of 1,349 people require overnight respite.
  - Of these, 1,069 are adults and 280 are children.
  - Overnight respite in a house in the community or dedicated respite centre is the most commonly required (946), followed by holiday respite in a hotel or bed and breakfast (220), and holiday respite in a residential centre or summer camp (200).
  - More than three-quarters (78%; 1,052) of those who require overnight respite services have an ID. 11% (149) have a physical and/or sensory disability, and 10% (136) are Autistic.

4.2.5 Support service requirements (identified for adults only)
The following outlines 2022 data for support service requirements for adults only:

- PAs are required by 170 adults.

- Nearly one-tenth (9%; 2,646) of adults require a specialist support.
  - The specialist supports most commonly required are speech and language therapy (554), physiotherapy (525), and occupational therapy (516).

See Figure 9 for the breakdown of specialist supports required for those with an ID and for those with a physical and/or sensory disability.
Figure 9 Most commonly required specialist support services for adults registered in adult disability services on NASS with a primary disability of ID or physical and/or sensory disability, 2022

- In order to protect against the risk of indirect identification of individuals, values less than 5 have been suppressed.

Physical and/or sensory includes DeafBlind (dual sensory), hearing loss and/or deafness, neurological, physical, speech and/or language and visual.
5 CDNT project

Under the HSE’s Progressing Disability Services (PDS) for Children and Young People programme, 8 91 CDNTs have been established throughout Ireland with the goal of providing multidisciplinary support services to children with complex needs in their local areas. 9 A child is considered to be on the caseload of a CDNT when they have been assessed and found to require supports from a multidisciplinary team. All CDNTs include occupational therapists, psychologists, physiotherapists, social workers, and speech and language therapists. The teams also have access to dietitians, family support workers, nurses, and social care workers. 10

Since 2019, when data were first available from NASS, only some special schools and a small number of the HSE’s Early Intervention Teams and School-Age Teams were returning information to NASS. In order to improve the coverage of children on NASS in 2022, the Health Research Board (HRB) NASS team and HSE NASS personnel in the CHO areas undertook a project to register the caseloads of the CDNTs on NASS.

As part of the 2022 data collection, the 91 new CDNTs were asked to submit all relevant available data from their current caseloads to NASS, where possible, given the teams’ existing resourcing issues. 11 The data requested from the CDNTs included name, address, sex, date of birth, primary disability type, and whether the child had received any service or support from the CDNT at the time of providing the information. A child’s record was considered to have been updated for the 2022 reporting year if it was provided by a CDNT as part of its caseload at any point in time during the 2022 reporting year.

A total of 43,759 children were recorded as being on the caseload of a CDNT in 2022. Of these, 30,251 were new registrations on NASS. The remainder (13,508) were existing records previously held on NASS.

---

8 Information about the PDS for Children and Young People Programme is available on the HSE website: at https://www.hse.ie/eng/services/list/4/disability/progressing-disability/about/.
9 Details of the 91 CDNTs are available from on the HSE website: at https://www2.hse.ie/services/disability/childrens-services/services/find-a-cdnt/.
10 Information about children’s disability services is available on the HSE website at https://www2.hse.ie/services/disability/childrens-services/services/overview/.
Information was received about the caseloads of all 91 CDNTs around the country; however, the extent to which data were provided varied greatly. Details of some demographic characteristics, current service use, and need for new services were not available for inclusion on NASS for most children on the caseloads of the CDNTs. For many children, the only service information available was that the child had been accepted onto the caseload of the CDNT, which means that he/she had been assessed as requiring the support of a multidisciplinary team. However, it could not be confirmed whether the child had received supports from the team at the time of data collection or if he/she was still waiting to receive multidisciplinary supports.

It is not possible to calculate exactly what proportion of relevant children accepted to the caseloads of the CDNTs have been registered on NASS in 2022. However, based on the number of NASS registrations per county, known incomplete provision of records to NASS by certain CDNTs, and previous estimates of those with complex needs per CHO published by the HSE (3.5% of the population), it is estimated that around 6,750 children on the caseloads of CDNTs in 2022 were not captured on NASS. The overall level of coverage achieved is estimated to be in the region of 87%.

Although the information for children on the caseloads of CDNTs is not complete, 2022 was the first time that the number of caseloads could be provided from NASS at a national level, and that some characteristics of the children could be described (as outlined in Sections 2 and 4 of this bulletin).

It is expected that children’s data will be submitted to NASS in a more complete form in future years, given the current roll-out of the HSE’s dedicated children’s case management system for use by the CDNTs.

---

12 In 2021, the HSE estimated that a total of 41,667 children would require support via an interdisciplinary CDNT based on an estimate that 3.5% of children present with complex needs; see [https://www.hse.ie/eng/about/personalpq/pq/2021-pq-responses/november-2021/pq-58784-21-ped-nash.pdf](https://www.hse.ie/eng/about/personalpq/pq/2021-pq-responses/november-2021/pq-58784-21-ped-nash.pdf) for more information.
6 Publications and analysis

This bulletin provides a national overview of data from NASS. Additional supplementary bulletins presenting information by disability type (ID, autism, and physical and/or sensory) and by CHO area are also available on the HRB website at https://www.hrb.ie/data-collections-evidence/disability-service-use-and-need/publications/.

Requests for further analysis with more detailed or different breakdowns are welcomed. Please visit https://www.hrb.ie/data-collections-evidence/disability-service-use-and-need/request-data/ to access a data request form and return it to nass@hrb.ie.