CHO Area 2 | 2017

Intellectual Disability Database Bulletin 2017

CHO Area 2: Galway, Roscommon, Mayo

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Research

Demographic profile

There were 3,277 people registered on the National Intellectual Disability Database (NIDD) in CHO Area 2 in December 2017. One third (1,046, 31.9%) of the persons in CHO Area 2 were aged less than 18 years, 898 (27.4%) were aged between 18 and 34 years, 855 (26.1%) were aged between 35 and 54 years and 478 (14.6%) 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, 1,790 people (54.6%), were in the moderate, severe, or profound range of intellectual disability. A further 1,162 people (35.5%) were classified as having a mild intellectual disability, and 325 people (9.9%) had not had their level of intellectual disability established.

In addition to the 3,277 registrations described above, the NIDD CHO Area 2 also contains records relating to 234 people of average ability and 100 people with a borderline intellectual disability; however these people were not included in this analysis.

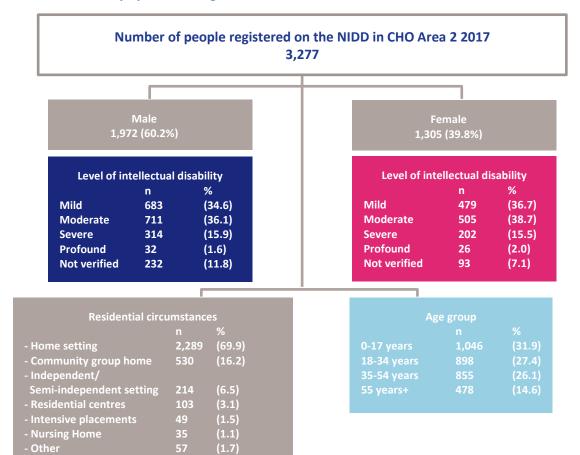


Figure 1 Profile of the population registered on the NIDD in CHO Area 2, NIDD 2017

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Living arrangements in 2017

- 2,289 people (69.9%) lived at home with parents, relatives or foster parents.
- 530 people (16.2%) lived in community group homes.
- 103 people (3.1%) lived in residential centres.
- 214 people (6.5%) lived independently or semi-independently.
- 55 people (1.7%) lived in other residential services.
- 49 people (1.5%) lived in intensive placements.
- 35 people (1.1%) lived in nursing homes.
- Less than five people lived in psychiatric hospitals.

Service Provision in 2017

Table 1 summarises service provision within CHO Area 2 and displays the equivalent national figures. In 2017 within CHO Area 2 there were:

- 3,193 people with intellectual disability receiving services, which represents 97.4% of the total population registered within CHO Area 2.
- 49 people (1.5%) who did not receive a service in 2017 and were on a waiting list.
- 35 people (1.1%) who were without services in 2017 and had no identified requirement for services in the period 2018-2022.

Table 1 Summary of service provision in CHO Area 2, NIDD 2017						
	CHO Area 2		National			
	n	%	n	%		
Attending services on a day basis	2419	73.8	20,404	71.9		
Receiving 5-or 7-day residential services	770	23.5	7,391	26.0		
Resident in a psychiatric hospital	~	~	139	0.5		
Receiving residential support services only	~	~	24	0.1		
Receiving no service-on waiting list	49	1.5	259	0.9		
No identified service requirements	35	1.1	171	0.6		
Total	3,277	100	28,388	100		

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

Day services were provided to 3,184 people in 2017. The most common day service types were activation centres (1,023 people, 32.1%), mainstream schools (532 people, 16.7%), and special schools (288 people, 9.0%). A total of 2,781 (84.9%) people registered in CHO Area 2 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 20,278 respite nights were provided to 420 people by CHO Area 2 in 2017. As might be expected, people with moderate/severe/profound levels of intellectual disability received on average more respite nights than those with a mild level of intellectual disability.

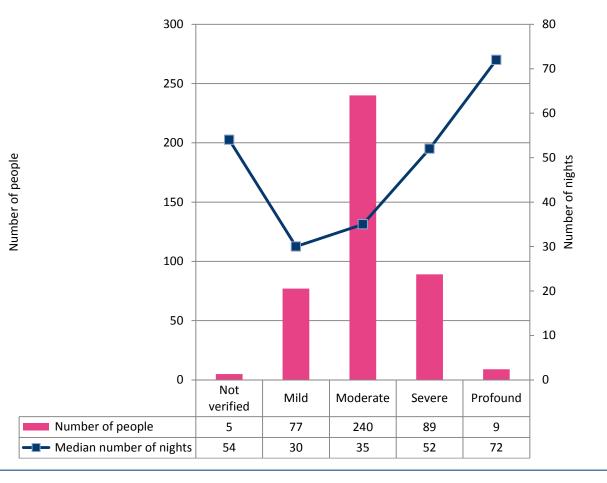


Figure 2 Number of people in receipt of respite nights and median number of respite nights provided, by level of intellectual disability, NIDD 2017

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 2 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 2, 2018-2022					
	CHO Area 2	National	CHO Area 2 as a % of National		
Full-time residential	231	2,179	10.6		
Day	26	185	14.1		
Residential support	361	2,365	15.3		

Summary of service change requirements

Of the 3,193 people who received services in CHO Area 2 in 2017, 1,146 people have recorded a requirement for a change or enhancement to their existing service in the period 2018-2022. To address this demand, 868 day places (of which 630 are healthfunded places), 259 full-time residential places, and 292 residential support places will need to be changed or enhanced. The number of changes required (1,419) exceeds the number of people (1,146) 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):

- Speech and language therapy 580 people require this service for the first time and 529 people require an enhanced service.
- Psychology 572 people require this service for the first time and 393 require an enhanced service.

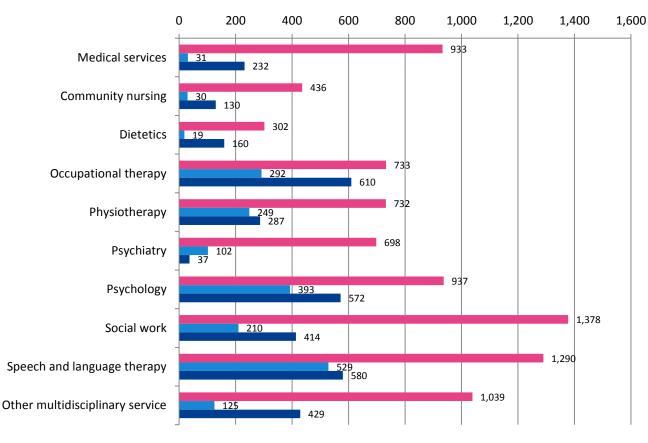


Figure 3 Multidisciplinary support services received in 2017 and required in the period 2018-2022, by people registered on the NIDD in CHO Area 2, NIDD 2017

Currently receiving this input

Enhancement of service required 2018-2022 for those currently receiving this input

New services required 2018-2022 for those not receiving this input

For queries regarding this bulletin or the NIDD contact: e: disability@hrb.ie Health Research Board Grattan House 67-72 Lower Mount Street Dublin 2 www.hrb.ie

