National Ability Supports System (NASS)



NASS Regional Bulletin for CHO 3-Clare,Limerick, North Tipperary,2022

Research. Evidence. Action.

1 Background

This bulletin is based on validated data extracted from the National Ability Supports System (NASS) at the end of December 2022 for Community Healthcare Organisation (CHO) area 3. NASS is a national database that records information about current Health Service Executive (HSE) disability-funded¹ 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,² 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 and under who are engaging with children's disability services, and 'adults' refers to those engaging with adult disability services.

This bulletin presents an overview of the information recorded on NASS for people engaging with disability services in CHO 3. In total, 8,828 people are included in this bulletin, of which 6,716 are children and 2,652 are adults.

¹ '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/

² 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.

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/needing 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. 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.

2 Profile of children engaging with children's disability services in CHO 3

2.1 Number of children registered on NASS in CHO 3 in 2022

In 2022, there were 6,176 children registered on NASS as receiving their main service in CHO 3.

2.2 Demographic profile

There were more male (4,354; 71%) children than female (1,822; 29%) children registered on NASS in CHO 3.

Over one-half of children were aged 5-12 years (53%; 3,257), 27% (1,681) were aged 13-17 years, 17% (1,051) were aged 0-4 years and 3% (187) were aged 18 years (Table 1).

		Male		Female		Total
Age groups	n	%	n	%	n	%
0-4 years	710	11.5	341	5.5	1,051	17.0
5-12 years	2,348	38.0	909	14.7	3,257	52.7
13-17 years	1,174	19.0	507	8.2	1,681	27.2
18 years	122	2.0	65	1.1	187	3.0
Total	4,354	70.5	1,822	29.5	6,176	100.0

Table 1 Number of children registered on NASS in children disability services in CHO 3 by age group and sex, 2022

2.3 Reported disabilities

Primary disability type was recorded for 3,225 children (52%). Where primary disability type was known, the most frequently reported primary disability type was autism (2,742; 85%), followed by ID (231; 7%) and specific learning difficulty (79; 2%) (Table 2).

		Male		Female		Total
Primary disability	n	%	n	%	n	%
Autism	2,065	75.3	677	24.7	2,742	85.0
Intellectual	167	72.3	64	27.7	231	7.2
Specific learning difficulty (other than intellectual)	48	60.8	31	39.2	79	2.4
Neurological	20	48.8	21	51.2	41	1.3
Visual	20	54.1	17	45.9	37	1.1
Developmental delay (under 10 years only)	23	71.9	9	28.1	32	1.0
Physical	15	48.4	16	51.6	31	1.0
Speech and/or language	13	76.5	~	~	~	~
Hearing loss and/or deafness	7	46.7	8	53.3	15	0.5
Total	2,378	73.7	847	26.3	3,225	100.0

Table 2 Primary disability among children registered for children's disability services inCHO 4 on NASS by sex, 2022

~ 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.

2.4 Additional disabilities

A total of 264 children had at least one additional disability along with their primary disability recorded. The most commonly reported additional disability was a speech and/or language disability (76), followed by autism (66) and a specific learning difficulty (47).

3 Profile of adults engaging with adult disability services in CHO 3

3.1 Number of adults registered on NASS in CHO 3 in 2022

In 2022, there were 2,652 adults engaging with adult disability services in CHO 3.

3.2 Demographic profile

There were more male (1,355; 51%) adults registered in CHO 3 compared with females (1,297; 49%). Table 3 shows the age and sex breakdown of adults in CHO 3.

Table 3 Number of adults registered in adult disability services in CHO 3 by age group and sex, 2022

	Male		Female		Total	
Age groups	n	%	n	%	n	%
18-24 years	240	9.0	136	5.1	376	14.2
25-39 years	310	11.7	281	10.6	591	22.3
40-59 years	515	19.4	540	20.4	1,055	39.8
60-69 years	232	8.7	242	9.1	474	17.9
≥ 70 years	58	2.2	98	3.7	156	5.9
Total	1,355	51.1	1,297	48.9	2,652	100.0

3.3 Occupational status

Information on occupational status was available for 94% (2,492) of the 2,652 adults accessing or requiring an adult HSE disability-funded service in 2022, in CHO 3, of whom:

- Over one-half (51%; 1,266) were unable to work due to a disability.
- Over one-fifth (21%; 514) were in a training or day programme.
- One in ten (10%; 258) were unemployed.
- Eight percent (186) were in paid employment.
- Six percent (146) were retired.
- The remaining 4% were either engaged in home duties (52;2%), were students (36;1%) or had 'other occupational status' recorded (1%;34).

3.4 Ethnicity or cultural background

Where ethnicity or cultural background information was known (2,425;91% of the total), 96% (2,323) of adults were Irish. A total of 2% (57) were from any other white background.

3.5 Living arrangements

Information on living arrangements was available for 99% (2,627) of the 2,652 adults accessing or requiring adult HSE disability-funded services in CHO 3, of whom:

- Nearly three-fifths (58%; 1,514) were residing with family members.
- Three in ten (30%; 792) were living in a residential setting.
- Over one in ten were living alone (11%; 288).
- The remaining 1% (33) were living with non-relatives.

3.6 Reported disabilities

The most frequently reported disability amongst adults in CHO 3 was an ID (1,641; 62%), followed by a neurological disability (622; 24%), and a physical disability (174; 7%) (Table 4).

Table 4 Primary disability among adults registered in adult disability services in CHO 3 on NASS by sex, 2022

		Male		Female		Total
Primary disability	n	%	n	%	n	%
Intellectual	874	53.3	767	46.7	1,641	61.9
Neurological	261	42.0	361	58.0	622	23.5
Physical	84	48.3	90	51.7	174	6.6
Visual	35	55.6	28	44.4	63	2.4
Mental health*	35	62.5	21	37.5	56	2.1
Autism	41	82.0	9	18.0	50	1.9
Hearing loss/deafness	16	55.2	13	44.8	29	1.1
DeafBlind (dual sensory)	0	0.0	~	~	~	~
Specific learning difficulty (other than intellectual)	~	~	~	~	~	~
Speech and/or language	~	~	~	~	~	~
Not verified**	6	66.7	~	~	~	~
Total	1,355	51.1	1,296	48.9	2,651	100.0

* 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.

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3.7 Additional disabilities

A total of 1,143 adults had at least one additional disability along with their primary disability recorded. The most commonly reported additional disability was a physical disability (512), followed by a speech and/or language disability (449) and a visual disability (144).

3.8 Primary carer

Of adults registered on NASS who do not live in a residential setting (1,860; 70%), 69% (1,280) reported having a primary carer; almost all of these individuals live with their primary carer (87%; 1,112).

The majority (66%; 849) of primary carers were parents, 13% (162) were a wife/husband/partner, 11% (141) were siblings, 6% (80) were a non-relative. The remaining 4% were either a daughter/son (22;2%) or another relative (24; 2%). Age was recorded for 89% (1,143) of primary carers; 41% (465) of whom were aged 60 years and over.

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

The following outlines 2022 data for current service provision in CHO 3.

- A total of 755 people were recorded as living in a residential setting in CHO 3.
 - The majority (99%; 749) were adults.
 - A house in the community with four or fewer residents (337) was the most common type of residential setting, followed by a community group home (202) and a residential centre (162).
 - Of the 755 people living in a residential setting, 44% (334) require an enhancement to their current service.
- There were 133 people accessing home support.
 - \circ Of these, 130 were adults.
 - Of the 133 people in receipt of home support, 21% (28) required an enhancement to their service.
- A total of 1,881 adults accessed at least one day service.
 - A day programme was the most commonly accessed (1,672; 89%) type of day service.
 - Rehabilitative training was received by 236 adults and neuro-rehabilitative training was accessed by 5 adults.
 - Of the 1,881 adults accessing a day service, 38% (714) of their day services require an enhancement to their current service.
- Overall, 170 people accessed day respite in CHO 3.
 - Of these, 48 were children and 122 were adults.
 - Of the day respite places provided, 124 were centre-based respite, 34 were home sharing arrangements and 14 was day respite in their own home.
 - Of the 170 people accessing day respite, 55% (93) required an enhancement to their service.

- A total of 290 people accessed 303 overnight respite places.
 - o Of these, 35 were children and 255 were adults.
 - The most commonly accessed type of overnight respite was house in the community or in a dedicated respite centre (249), followed by respite accessed through a home sharing arrangement (25).
 - A total of 8,883 nights of overnight respite were received in CHO 3.
 Children accessed 1,142 nights and adults accessed 7,741 nights in 2022.
 - Of the 290 people accessing overnight respite, 43% (125) require an enhancement to their current service.
- There were 234 people accessing the services of a PA, all of which were adults.
- Additionally, there were 96 people in receipt of community support.
- Of the 6,176 children registered on NASS in CHO 3, 99% (6,140) were assessed and found to require the support of a multidisciplinary CDNT.
- 1,110 adults accessed 3,491 specialist supports.
 - The most commonly accessed specialist support services were key worker (609), nursing (402), and speech and language therapy (315).
 - Of the 1,110 adults accessing specialist support services, 45% (504) required an enhancement to at least one of their specialist supports.

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.

The following outlines data regarding new services required for 2022-2027, as identified by service providers in CHO 3.

- A total of 153 people were identified by service providers as requiring a residential service, all of whom were adults.
 - Of the residential services required, 92% (141) are for a place in a house in the community with four or fewer residents.
- Overall, 20 adults require a day service, of which 17 require a day programme.
- A total of 21 people require a day respite service.
- Overall, 83 people require overnight respite.
 - Overnight respite in a house in the community or a dedicated respite centre is the most commonly required (64).
- Overall, 269 adults require at least one specialist support.
 - The specialist supports most commonly required are psychiatry (197), clinical psychology (16) and vision communication services (16).