Publicly Funded Home Support in Ireland

Report to Care Alliance Ireland

Indecon International Economic and Strategic Consultants

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1. Introduction

- Indecon undertook research on the current level of provision of and unmet need for publicly funded home support in Ireland in 2025 on behalf of Care Alliance Ireland. Care Alliance Ireland works to enhance the wellbeing of family carers so that they are better able to care for their loved ones. They provide direct support to family carers as well as indirectly supporting them by working with researchers, statutory actors and other not-for-profits.

- Home support (also referred to as home care support) encompasses a range of health, personal, and domestic care services delivered by *professional carers* to individuals in their own homes (often described as formal home support). The purpose of home support is to assist people with activities of daily living (ADLs), the core tasks involved in self-care such as mobility and eating, and/or instrumental activities of daily living (IADLs), which are essential for independent living, including cleaning, shopping, and meal preparation.

- Home support services may be delivered through the HSE's public home support scheme or provided by professional carers engaged privately by the recipient or their family members (referred to as private home support). Individuals may avail of both public and private home support services concurrently.

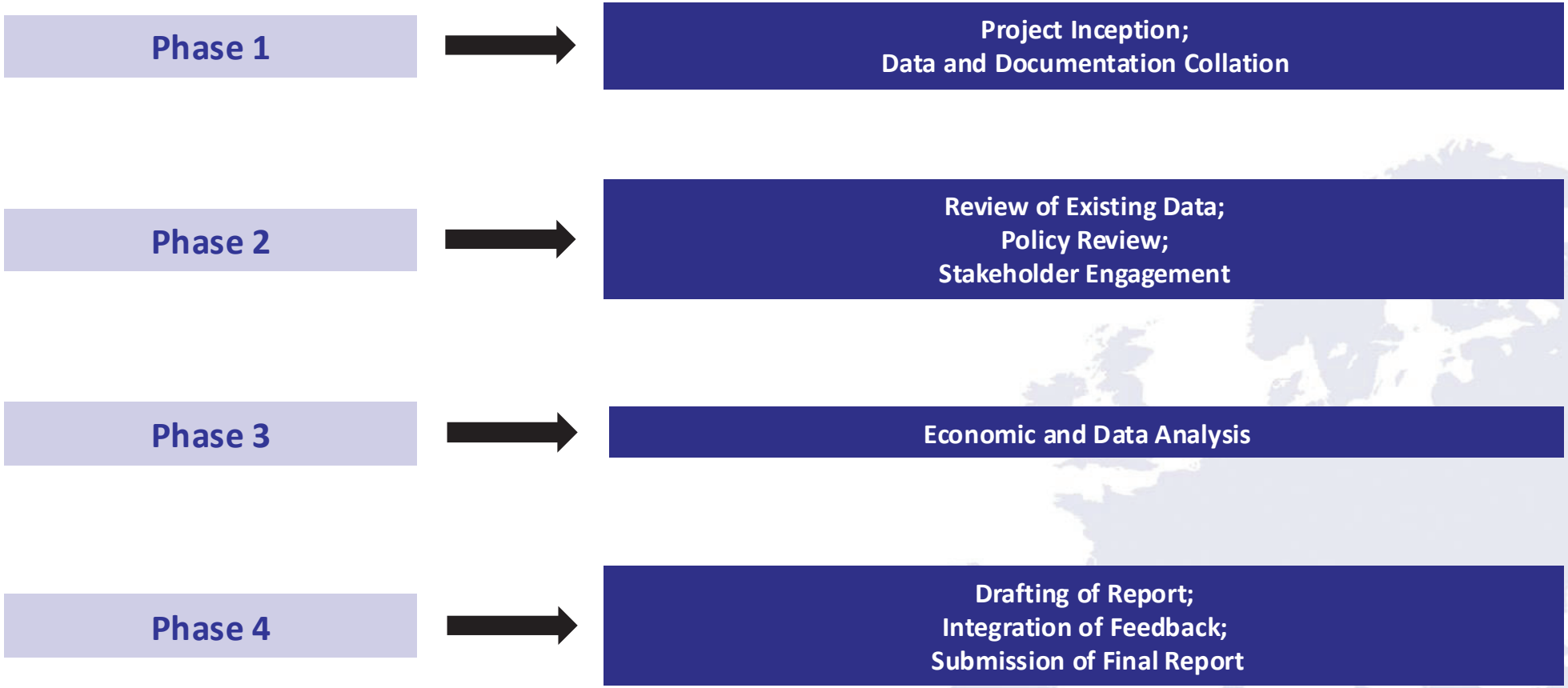
1. Introduction

- The overall objective of this research report is to provide an analysis of the current level of provision of publicly funded home support in Ireland.
- To do so, the research focussed specifically on addressing the following three questions:
  - What is the current unmet need for public provision of homecare in Ireland as of 2025?
  - Is homecare provision keeping pace with demographic pressures?
  - What are the waiting times between referral for homecare, and delivery of a service (not necessarily the delivery of the entire assessed need)?



1. Introduction

- To address the terms of reference, Indecon undertook a mixed-methods approach, comprising both qualitative and quantitative research. The views of key stakeholders in the area were combined with both primary and secondary sources, as well as findings from a desk-based review.



2. Policy Context

- Relevant Policy Documents:
  - Statutory Home Support Scheme – *Aims to provide a legislative framework to ensure access to home support, including by implementing a legal entitlement to home support, creating a person-centred model of care, regulating home support, providing for equal access to care, establishing a sustainable funding model, and modernising the sector.*
  - Draft National Standards for Home Support Services – *Establishes a series of National standards to ensure that all users of home support services receive high-quality care.*
  - Path to Universal Healthcare: Sláintecare & Programme for Government 2025+ – *Highlights the importance of enhanced community care and improving the quality of services provided to older people, as well as enabling people to remain at home for as long as possible.*

2. Policy Context

- Relevant Policy Documents:
  - Programme for Government – Securing Ireland's Future – *Pledges to advance the social care model for older persons and design a statutory Homecare scheme that will allow older people to stay in their homes for as long as possible.*
  - National Development Plan – *National Strategic Objective 10 prioritises access to health services and care for older people.*
  - National Planning Framework – *National Policy Objective 40 seeks to make Ireland more 'age friendly', in line with Government policy to "support older people to live with dignity and independence in their own homes and communities for as long as possible".*

2. Policy Context

- The HSE National Service Plan 2026 outlines the HSE's key priorities and health care targets for the coming year
- Key targets related to the care of older persons include to:
  - Deliver 26.7 million home support hours (5% increase from 2025), with 22% of all new home support hours delivered to people with dementia or a cognitive impairment
  - Provide more effective home support through the development and implementation of the integrated ICT system for home support services and the Nursing Homes Support Scheme
  - Reduce the homecare waiting list by 1,000 people
  - Deliver 275,000 complex home support hours to 90 people (7% increase from 2025)
  - Ensure compliance with future home support provider regulations and Health Information and Quality Authority (HIQA) standards through implementation of a regulated home support service model and the deployment of an ICT solution

3. Stakeholder Engagement

- Indecon's Stakeholder Engagement included meetings with:
  - Homecare Coalition
  - Home & Community Care Ireland
  - HSE Older Persons Unit
  - Focus Group, including:
    - Disability Federation of Ireland
    - Rehab Group
    - Irish Hospice Foundation
    - Homecare Coalition
    - Sage Advocacy
    - Family Carers Ireland



3. Stakeholder Engagement

- Indecon's Stakeholder Engagement included written submissions from:
  - ALONE
  - Age Well Programme
  - Vision Ireland
  - ESRI



3. Stakeholder Engagement

Outputs from Stakeholder Engagement:

- Demographic pressures – Ireland's over-65 population is growing rapidly, particularly in rural areas, where waiting lists are generally longer. It is likely that demand for homecare will increase significantly in the coming years.
- Demand exceeding supply – Demand for homecare exceeds supply, this has led to significant waiting lists and many older people having to wait significant periods of time to receive care.
- Waiting times for homecare – Waiting times following homecare referrals often range from 4 to 10 weeks, with some Older People offered reduced schedule/interim hours in the meantime. This delay leads to delayed discharges from hospitals, as well as significant distress for older people and their families.
- Data issues – Discrepancies regarding data recording, including delivery of hours (e.g. including vs. excluding travel time, etc.), and how staff leave is accounted for, lack of complete information regarding waiting times, etc.

3. Stakeholder Engagement

Outputs from stakeholder engagement:

- Staff recruitment and retention – Service providers frequently highlight difficulties related to the recruitment and retention of carers, particularly in rural areas.
- Inconsistency/inequity of care – Care recipients receive differing levels of care and assistance, with some receiving personal care only and others receiving personal care in addition to domestic help. It was highlighted in our stakeholder engagement that domestic help is just as important as personal care in supporting dignity and quality of life for care recipients.
- Lack of Options for Older People Needing Care – Without adequate home support, the only option is for older people to move into nursing homes, which are expensive, and fewer are reportedly being built.
- End of Life Care – HIQA National End of Life Survey seeks to answer why people aren't dying at home, and rather are entering hospice care.
- Issues with Fair Deal Scheme – No equal entitlement to home support as an alternative to nursing home support, many people still cannot afford nursing homes due to fair deal funding model and privatisation of nursing home sector.

3. Stakeholder Engagement

Outputs from stakeholder engagement:

- Uncaptured Demand –Demand for home support that is not captured by waiting lists. Stakeholders reported that individuals who need and want home support are frustrated by the system and waiting lists that they do not seek home support, with the result that these individuals are not captured by waiting lists.



4. Economic and Data Analysis

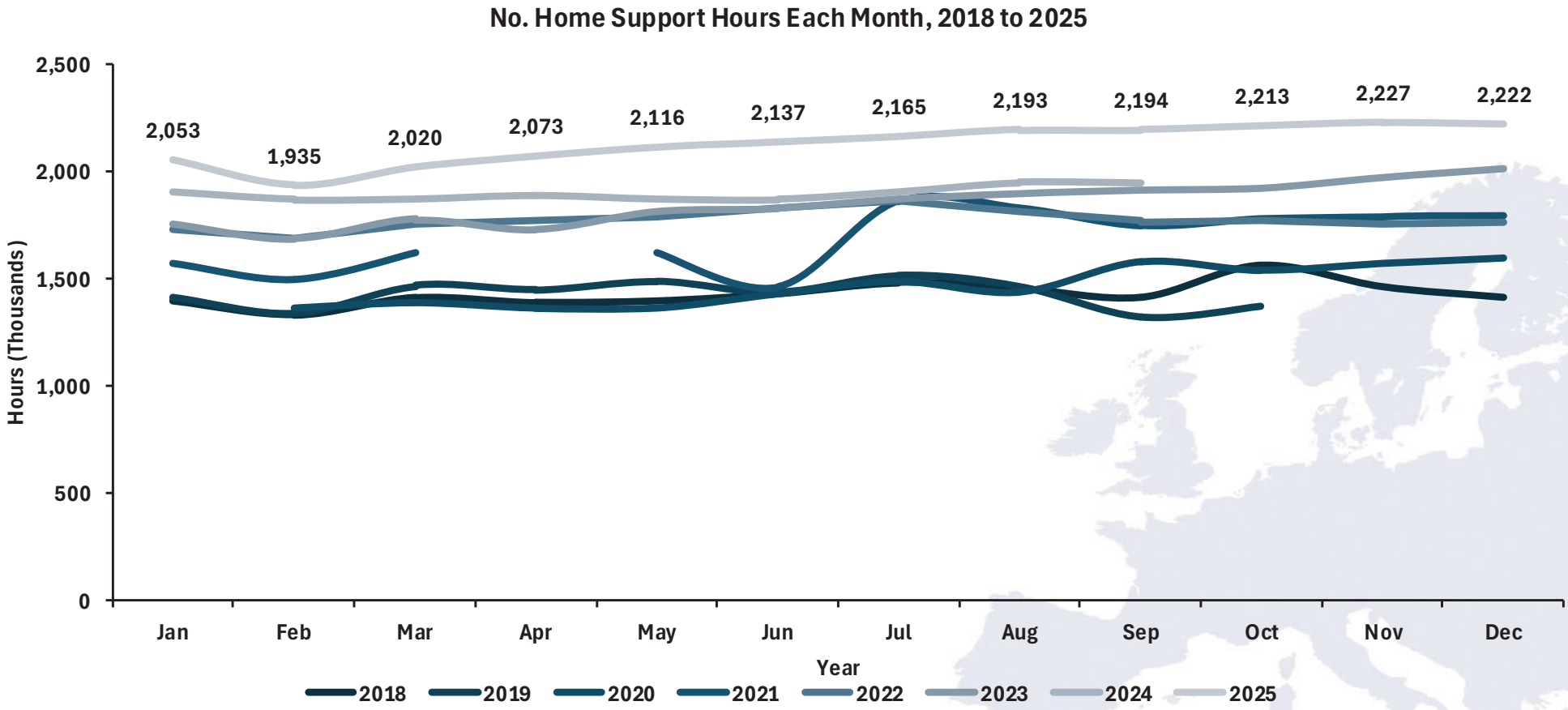
- This section provides an analysis of publicly funded home support provision in Ireland, drawing on HSE Management Data, CSO Population Projections, HCCI data, and TILDA survey findings.
- The analysis examines trends in home support hours and recipients over time, the demographic pressures driving demand, the adequacy of provision relative to population growth, and the scale of unmet need as evidenced by waiting lists.
- The data analysis is structured around three themes:

1. Provision of Home Support — trends in hours and recipients;
2. Demographic Pressures — population ageing and projected demand growth; and
3. Waiting Lists — the gap between assessed need and actual provision.

4. Economic and Data Analysis

Provision of home support

- 2025 recorded the highest level of home support hours delivered in any year since the establishment of the single-funded Home Support Service in 2018.



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Source: Indecon Analysis of HSE Management Data
Note: No data available for some months

4. Economic and Data Analysis

Provision of Home Support

- In 2018, home support hours were split approximately 44% direct (staff employed by the HSE) and 56% indirect (services delivered on behalf of the HSE by non-HSE providers). By 2025, this had shifted to 32% direct and 68% indirect provision. Over the period 2018–2025, indirect provision accounted for 91% of the growth in total hours delivered.

- Between 2022 and 2025 alone, indirect hours increased by 23% (around 4.8 million hours). This expansion may, in part, reflect the introduction of the Home Support Authorisation Scheme (AS), which established new service standards and a fixed-price model for approved home support providers delivering services on behalf of the HSE. The AS also supports the entry of new providers over time with a view to extending capacity.

Home Support Hours Delivered Per Year– Direct & Indirect			
Year	Total Direct Hours	Total Indirect Hours	Total Hours Delivered
2018	7,506,958	9,623,495	17,130,453
2019	7,694,593	9,790,870	17,485,463
2020	7,302,442	10,252,438	17,554,880
2021	7,542,319	12,920,674	20,462,993
2022	8,079,015	12,713,757	20,792,772
2023*	7,899,967	13,120,608	21,020,575
2024	-	-	-
2025	8,262,286	17,285,259	25,547,545

Source: Indecon Analysis of HSE Data
*estimated based on data available between January and May

4. Economic and Data Analysis

Provision of Home Support

- Home support hours delivered in 2025 were 49% higher than in 2018, reflecting sustained growth in publicly funded home support provision over the seven-year period.
- Growth in home support hours has been sustained, with monthly increases ranging from 14% to 28% in the period 2018 to 2022 and 15% to 27% in the period 2022 to 2025.
- Notably, the autumn and winter months of September, October, November and December recorded some of the strongest rates of growth.

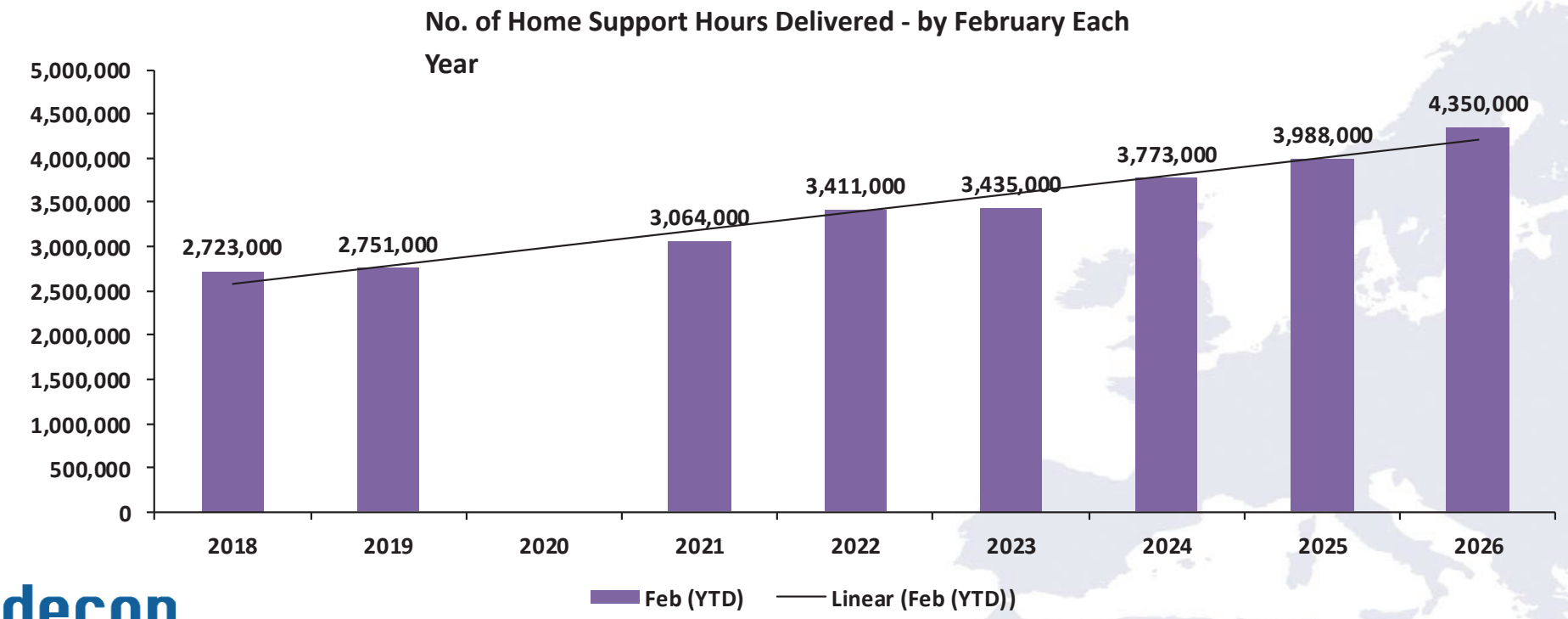
% Increase in Monthly Home Support Hours			
	2018 - 2022	2022-2025	2018-2025
Jan	24%	19%	47%
Feb	27%	15%	45%
Mar	24%	15%	43%
Apr	28%	17%	49%
May	28%	18%	52%
Jun	28%	17%	50%
Jul	26%	16%	46%
Aug	25%	21%	51%
Sep	25%	24%	56%
Oct	14%	25%	42%
Nov	20%	27%	52%
Dec	25%	26%	57%

Source: Indecon Analysis of HSE Management Data

4. Economic and Data Analysis

Provision of Home Support

- Home support hours delivered by February of each year have increased consistently from 2.72 million in 2018 to 3.99 million in 2025.
- Preliminary data up to February 2026 indicate 4.35 million hours delivered year-to-date, representing the highest level recorded in any comparable period and a 9.1% increase on the same period in 2025.



Source: Indecon Analysis of HSE Management Data
Note: Data for 2026 is preliminary

4. Economic and Data Analysis

Provision of Home Support

- Home support delivery fell short of targets between 2019 and 2022
- Despite targets rising sharply from 18.7 million hours in 2020 to 23.7 million in 2021, delivery reached only 86.5% and 87.8% of target in 2021 and 2022 respectively
- In 2025, delivery exceeded its target for the first time since 2018, reaching 106.4% of the 24 million hour target
- However, the persistence of waiting lists suggests the target itself remains below the level needed to meet true demand

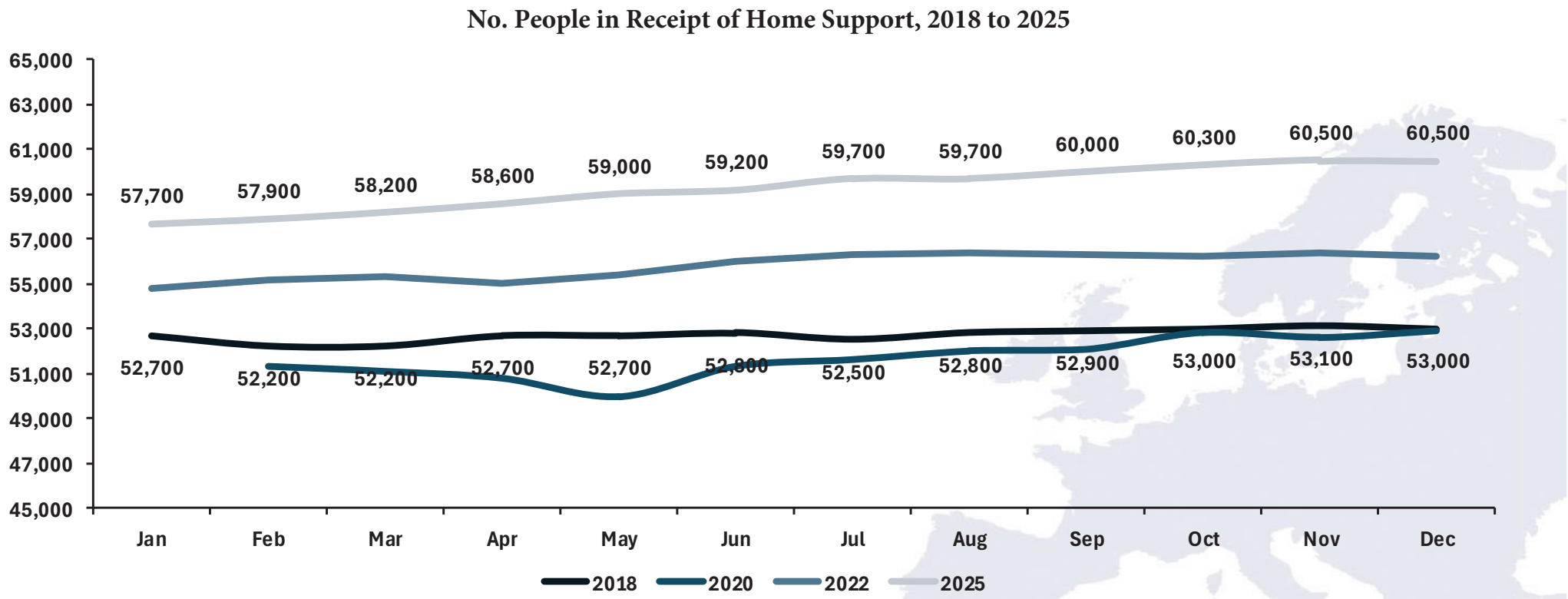
Targets Vs Delivered		
Year	**Full Year Target**	**% of Target**
2018	*17,094,000*	*100.20%*
2019	*17,900,000*	*97.70%*
2020	*18,670,000*	*94.00%*
2021	*23,670,000*	*86.50%*
2022	*23,670,000*	*87.80%*
2023 (Jan–May)	*9,881,275*	*88.60%*
2024	-	-
2025	*24,000,000*	*106.40%*

Source: Indecon Analysis of HSE Data

4. Economic and Data Analysis

Provision of Home Support

- The number of people in receipt of home support has increased consistently over the period 2018 to 2025, rising from approximately 52,700 in January 2018 to 60,500 in December 2025.



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Source: Indecon Analysis of HSE Management Data
Note: No data available for some months

4. Economic and Data Analysis

Provision of Home Support

- The percentage increase in the number of people in receipt of home support has been more moderate than the corresponding increase in hours delivered.
- Over the full period 2018 to 2025, the number of people in receipt increased by between 10% and 14% across all months.
- This is considerably lower than the 43% to 57% increase in hours delivered over the same period.

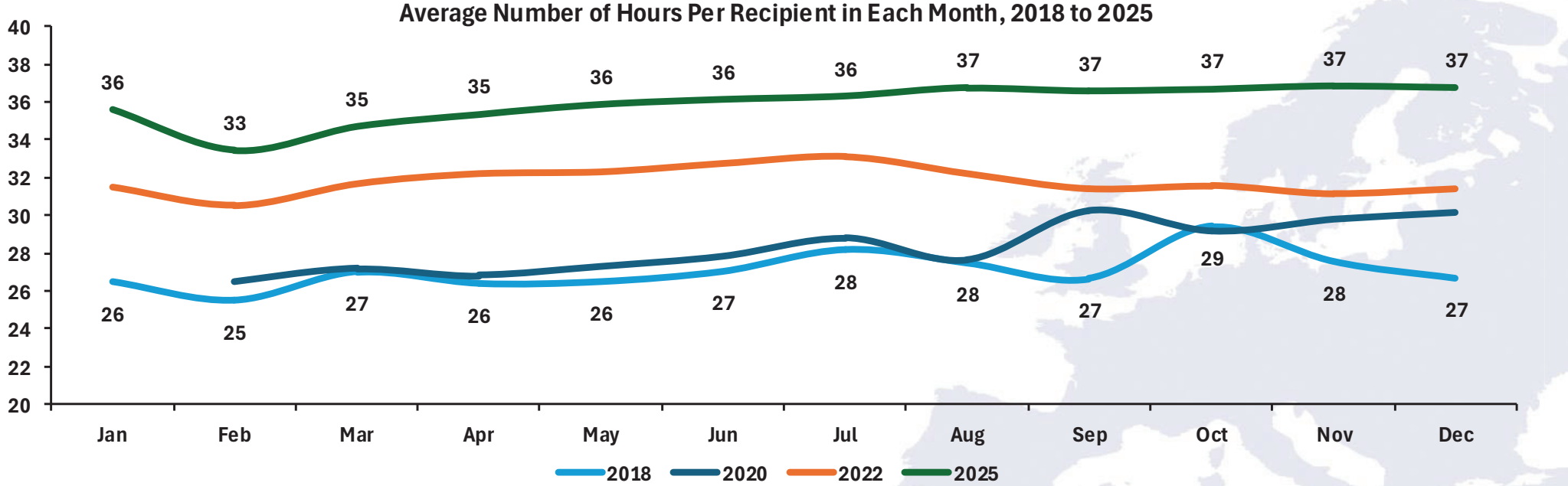
% Increase in the No. of People in Receipt of Home Support			
	2018 to 2022	2022 to 2025	2018 to 2025
Jan	4%	5%	10%
Feb	6%	5%	11%
Mar	6%	5%	12%
Apr	4%	7%	11%
May	5%	7%	12%
Jun	6%	6%	12%
Jul	7%	6%	14%
Aug	7%	6%	13%
Sep	6%	7%	13%
Oct	6%	7%	14%
Nov	6%	7%	14%
Dec	6%	8%	14%

Source: Indecon Analysis of HSE Management Data

4. Economic and Data Analysis

Provision of Home Support

- The divergence between growth in total hours (49% since 2018) and growth in recipient numbers (10–14%) indicates that the system has increasingly concentrated resources among existing recipients rather than extending coverage to new ones.
- This divergence between growth in recipients and growth in hours indicates that the average number of hours per recipient has increased 33% on average between 2018 and 2025.

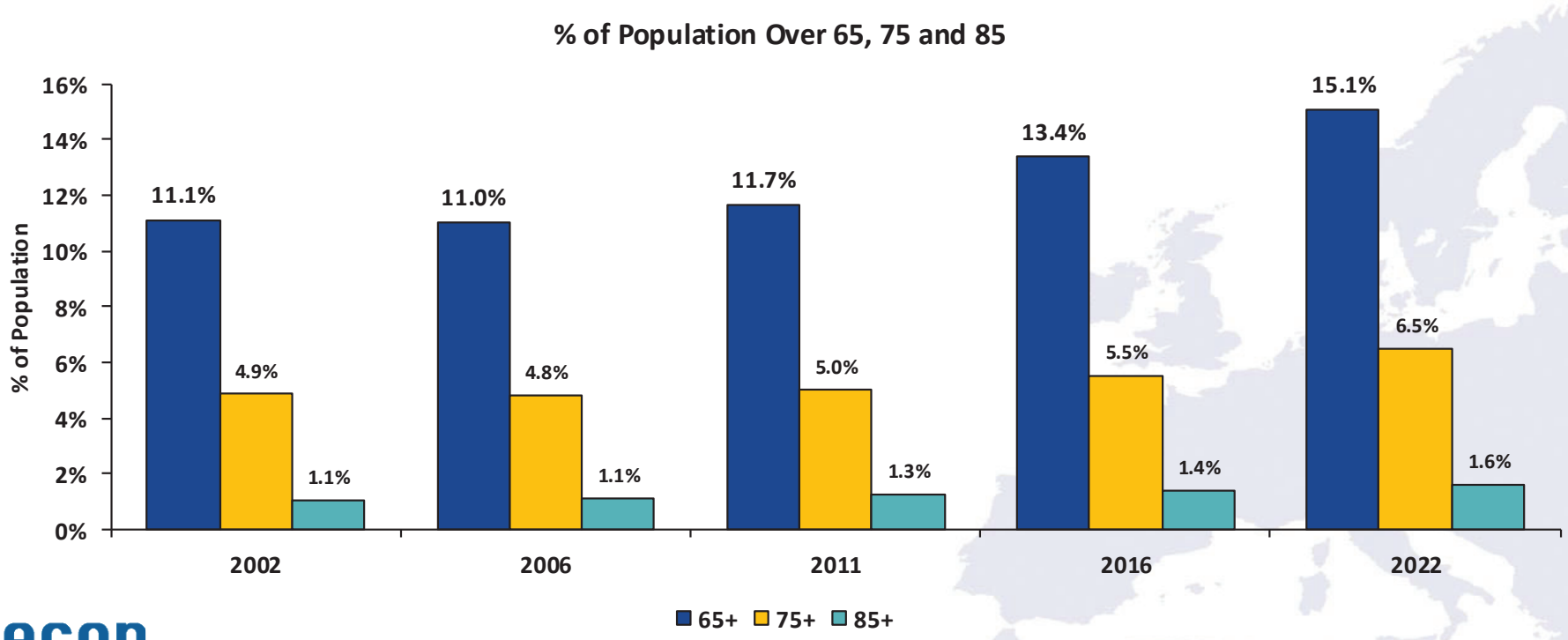


Source: Indecon Analysis of HSE Management Data

4. Economic and Data Analysis

Demographic Pressures

- Ireland is experiencing rapid population ageing - the share of Ireland's population aged 65 and over increased from 11.1% in 2002 to 15.1% in 2022.
- The cohort aged 85 and over grew by 102% between 2011 and 2022, the fastest rate of growth of any age group.

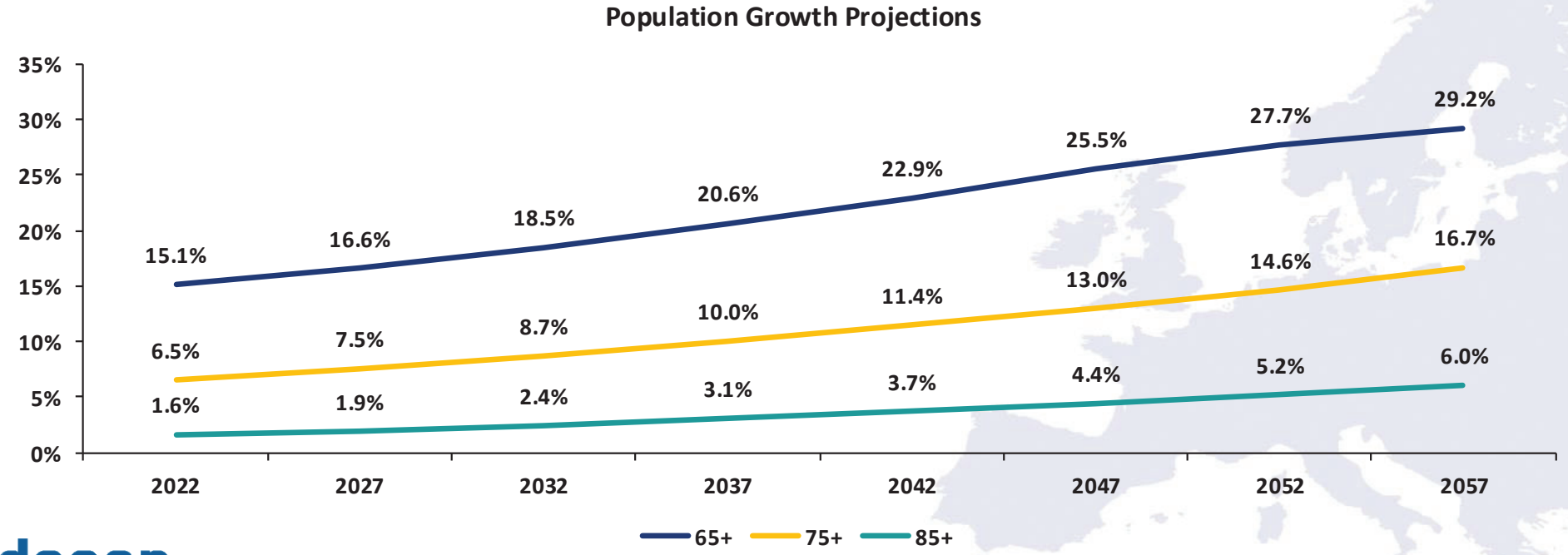


Source: Indecon Analysis of Census Data

4. Economic and Data Analysis

Demographic Pressures

- The CSO produce population projections based on a number of different migration assumptions, given that this variable is both highly variable in Ireland's case, and results in very different population projections. The M2 projections represent the central forecast.
- Under CSO M2 projections, the share of the population aged 65 and over is projected to increase from 15.1% in 2022 (approximately 0.78 million people) to 29.2% by 2057 (around 1.9 million people), almost doubling its share of the total population.
- The proportion aged 85+ is projected to triple its population share, from 2.0% to 6.0% by 2057.



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Source: Indecon Analysis of CSO M2 Population Projections

4. Economic and Data Analysis

Demographic Pressures

- These demographic pressures are highlighted in the ESRI's Projections of National Demand and Bed Capacity Requirements for Older People's Care in Ireland, 2022–2040.[1]
- The report shows that growth in demand for older persons' services is largely driven by demographic change, with Ireland's over-65 population projected to exceed 1.3 million by 2040, up from approximately 780,000 in 2022.
- This growth is expected to result in a substantial increase in the demand for home support hours.
- Home support hour requirements are projected to increase by 2.5%-3.7% annually throughout this period, reaching 44.9-54.9 million annual hours in 2040.
- Report suggests "there is a clear need for policymakers to develop effective financing, workforce and infrastructure planning to help deliver the additional long-term care and capacity".

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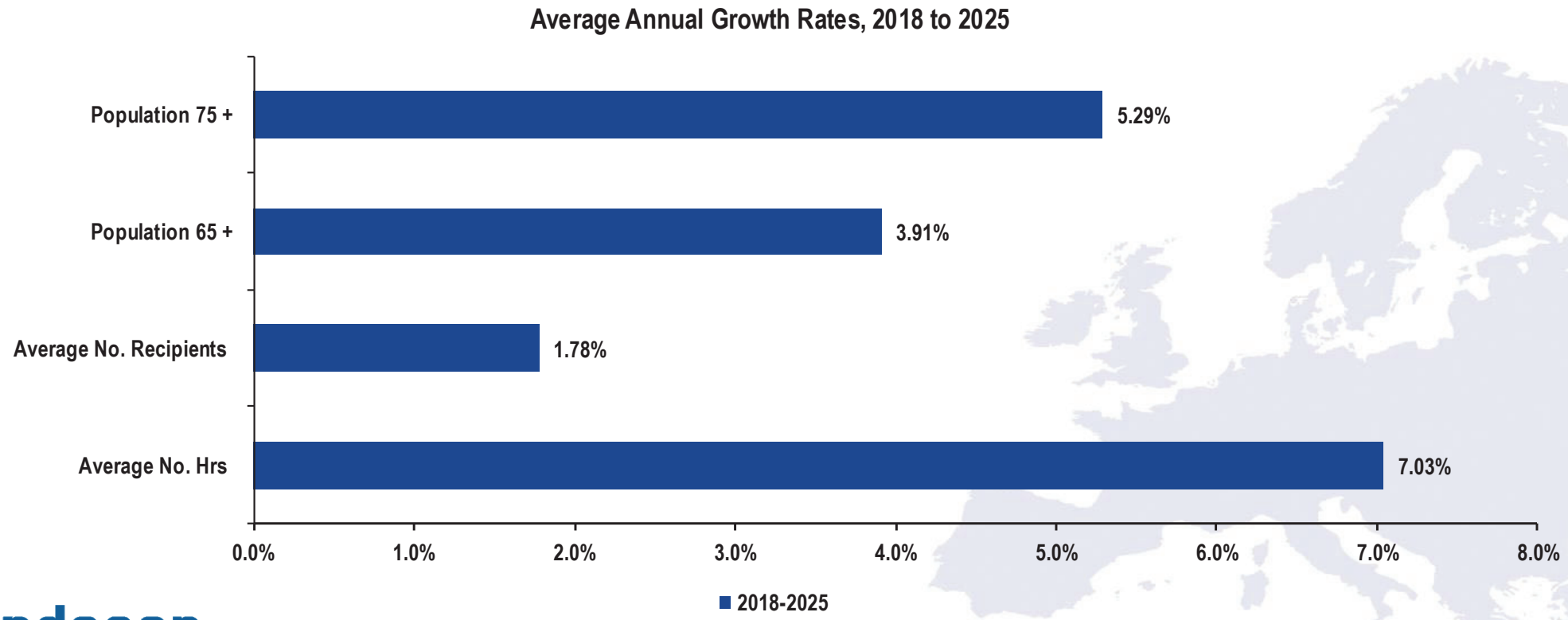
1. Walsh, B. and Kakoulidou, T. (2025) Projections of national demand and bed capacity requirements for older people's care in Ireland, 2022–2040: Based on the Hippocrates model. ESRI Research Series 214. Dublin: Economic and Social Research Institute.

4. Economic and Data Analysis

Growth in Home Support relative to Demographic Growth

- Between 2018 and 2025, annual home support hours grew by ~7% per annum, while the number of recipients increased by ~2%.
- As such, the growth in the number of recipients has lagged behind the growth in the population aged over 65, though the number of hours outpaced population growth.

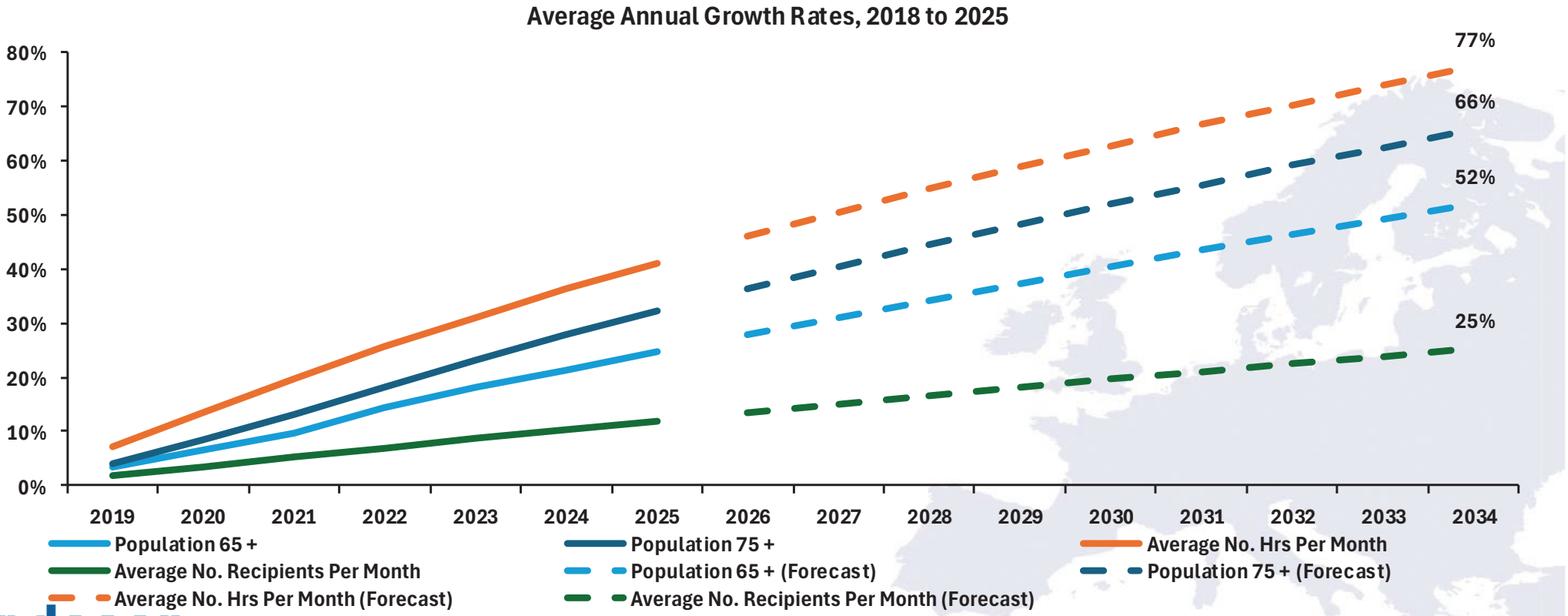


Source: Indecon Analysis of CSO M2 Population Projections & HSE Management Data

4. Economic and Data Analysis

Growth in Home Support relative to Demographic Growth

- Projecting current provision rates alongside CSO M2 population projections reveals a growing gap between supply in terms of the number of recipients and demand. While hours delivered have grown substantially since 2018, the rate of growth in the population aged 65 and over means demand is projected to continue rising.



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Source: Indecon Analysis of CSO M2 Population Projections & HSE Management Data

4. Economic and Data Analysis

Waiting lists

- Overall waiting list numbers declined by approximately 9% between January 2018 and May 2023. By December 2025, waiting lists stood at around 5,600, approximately 40% below the February 2020 peak.
- The reduction observed during 2020–2021 coincides with the COVID-19 period and likely reflects a combination of restricted service availability and reduced demand, as individuals deferred or were unable to access assessment and treatment during public health restrictions. Since late 2021, waiting list numbers have trended upwards again; however, levels have not returned to their pre-pandemic peak.

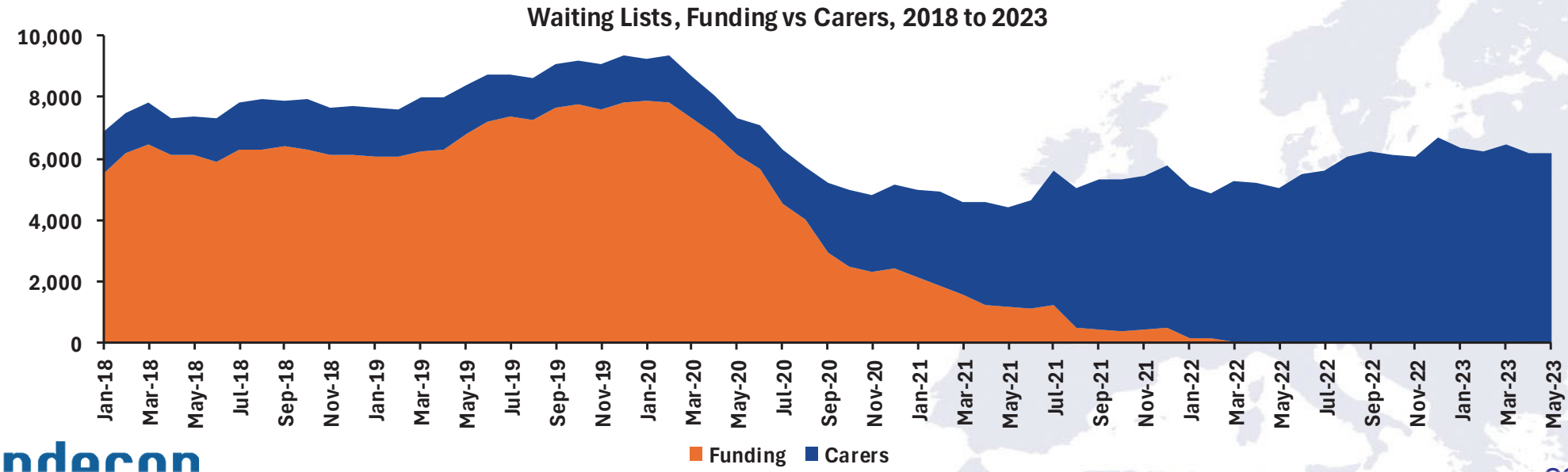


Source: Indecon Analysis of HSE Data

4. Economic and Data Analysis

Waiting lists

- HSE administrative data distinguishes between cases waiting due to funding availability and those waiting due to a lack of available carers.
- Over time, the composition of the home support waiting list has shifted from being primarily driven by funding constraints to being increasingly driven by carer supply constraints.
- Since 2021, the funding-related component of the waiting list has remained low, with limited evidence of delays arising solely from funding allocation. In contrast, the carer-related waiting list has persisted and expanded



Source: Indecon Analysis of HSE Data

4. Economic and Data Analysis

Waiting lists

- HSE reported that as of February 2026, 5,406 people assessed for Home Support were waiting for care staff.
- Of these, 2,198 were awaiting a new service and 3,208 were existing Service Users waiting for additional hours.
- They reported that nationally no person was waiting on Funding for the provision of Home Support Service and that 5,098 people assessed for Home Support Services were waiting for care staff for the provision of Home Support.
- Rising demand for Home Support services has increased pressure on delivery capacity, with recruitment and retention challenges in the care workforce identified by the HSE as key contributors to ongoing capacity constraints.[2]

2. HSE Briefing Note on Home Support Services – 24/03/2026

4. Economic and Data Analysis

Waiting lists

- The geographic distribution of waiting lists shows significant regional variation, with HSE West & North West accounting for approximately 25% of those waiting, while Dublin CHOs report comparatively lower waiting list levels.
- Waiting list pressures differ across the country, with rural areas experiencing longer waiting lists than urban areas. Dublin, which has a higher concentration of the population, records lower waiting list levels relative to many rural regions.

Home Support Waiting List – December 2025			
	New	Additional	Total
National Total	*2,253*	*3,347*	*5,600*
HSE Dublin & Midlands	*113*	*245*	*358*
HSE Dublin & North East	*350*	*498*	*848*
HSE Dublin & South East	*384*	*727*	*1,111*
HSE Mid West	*245*	*633*	*878*
HSE South West	*575*	*450*	*1,025*
HSE West & North West	*586*	*794*	*1380*

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Source: Indecon Analysis of HSE Data

4. Economic and Data Analysis

Key Findings

- Hours delivered have grown substantially, but recipient numbers have not kept pace. Home support hours increased by 49% between 2018 and 2025, while the number of recipients rose by only 10–14%. Resources have been expanded for existing recipients rather than extended to new ones.

- In 2025, delivery reached 106.4% of the 24 million hour target – the first time the target was exceeded since 2018. However, the persistence of waiting lists indicates the target is set below the level of demand.

- Demographic growth is outpacing the growth in recipients. The number of people receiving home support has grown at approximately 2% per annum since 2018, while the population aged 65 and over has grown at a faster rate. Should the current trend continue the gap is projected to widen to 2040 and beyond.

- Waiting lists are now driven by carer supply, not funding. As of February 2026, 5,406 people were waiting for home support, all due to carer availability. No person was waiting solely due to lack of funding. Significant regional variation persists, with rural CHOs recording substantially higher waiting lists than Dublin relative to the population in those areas.

5. International Comparison

- The European Social Network (ESN) is a European network that facilitates knowledge exchange to support improvements in the quality and effectiveness of social services across Europe.[3]

- One of ESN's key initiatives is the European Social Services Index, which provides a comparative overview of social service provision across participating European countries.

- The Index includes indicators on the provision of homecare services, enabling cross-country comparison of Ireland's level of provision relative to other European systems of care.



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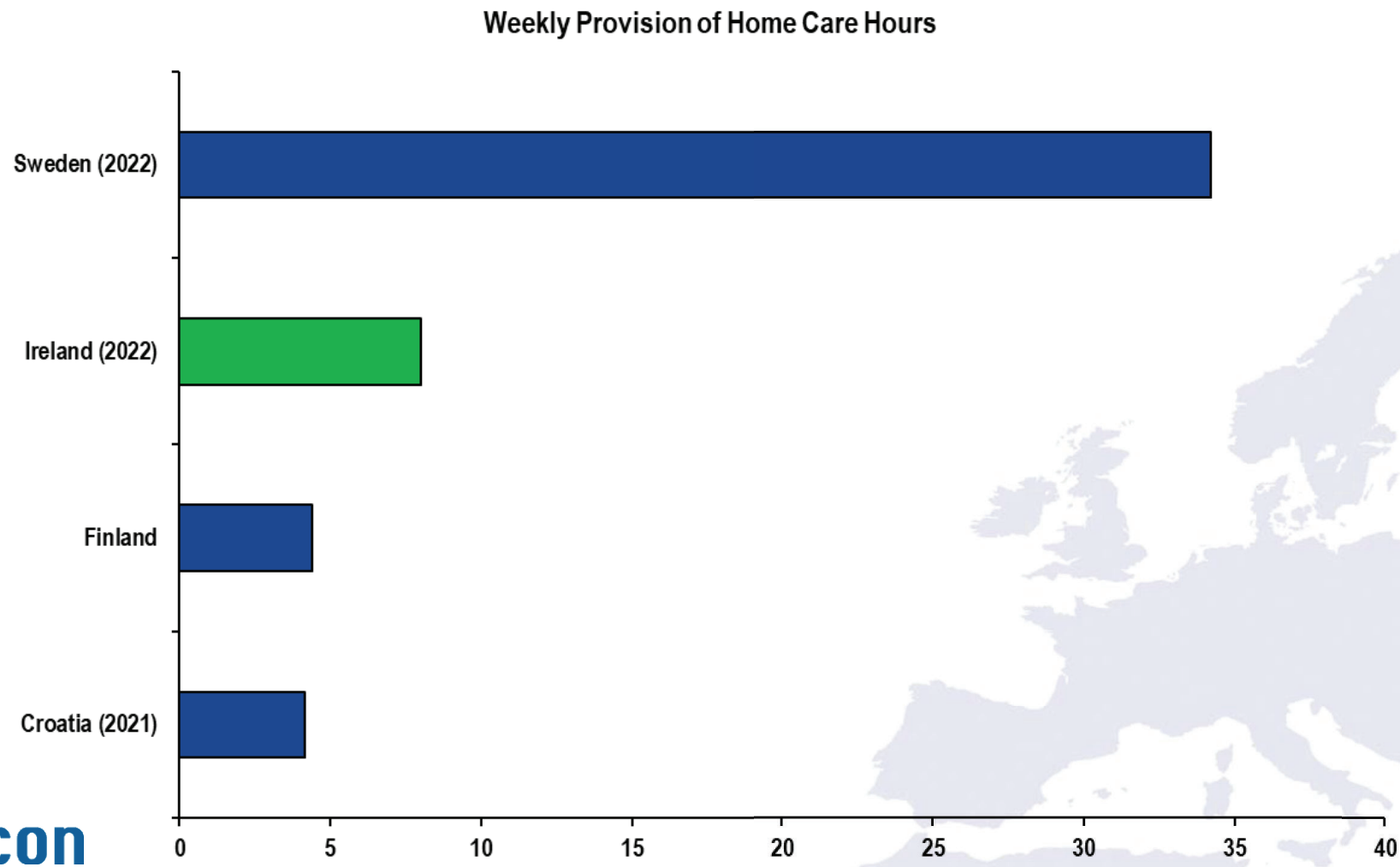
3. European Social Network. See: https://www.esn-eu.org/

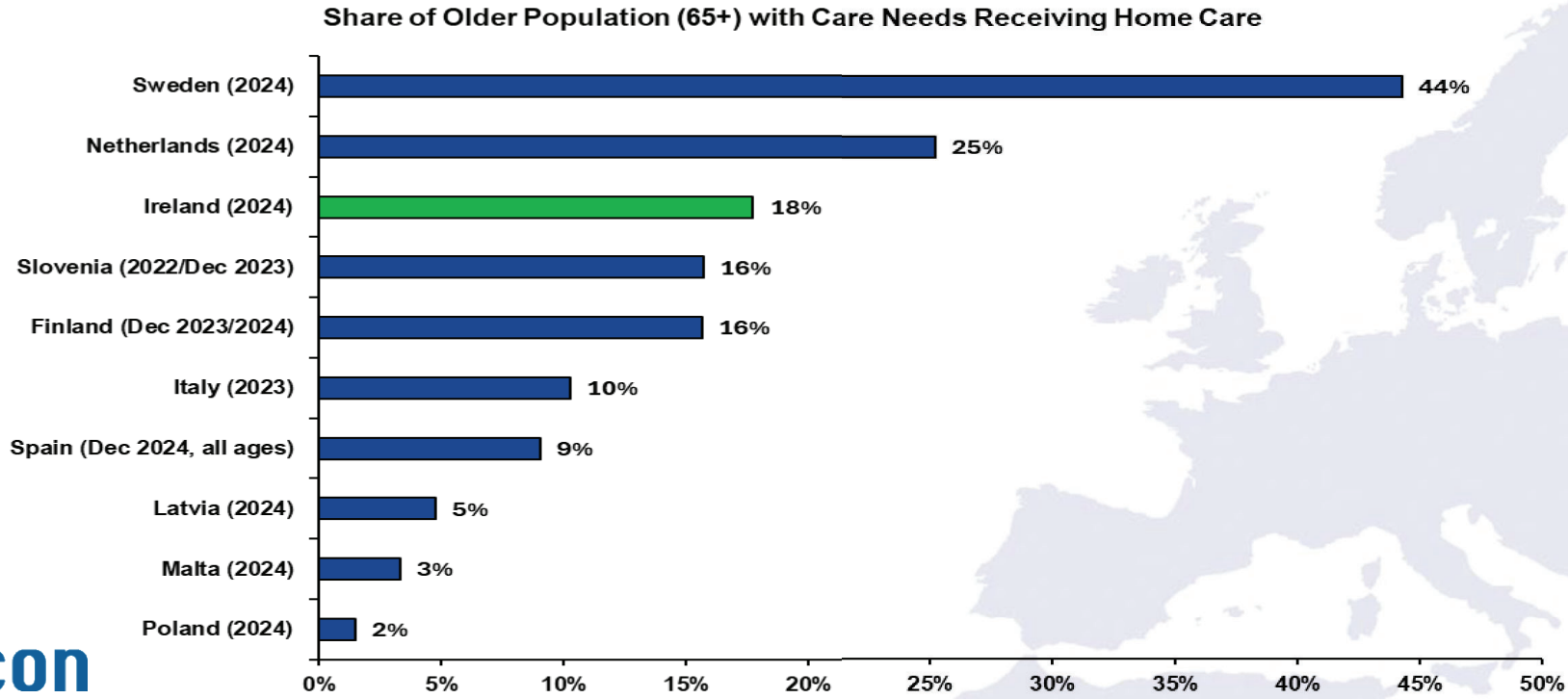
5. International Comparison

- In 2022, Ireland provided approximately 8 hours of weekly home support to those receiving care.
- This care delivery exceeds that of a number of European countries, but falls short of the volume of care delivered in European leaders.



5. International Comparison

- Chart below presents the share of the older population with care needs receiving care in a number of European countries.
- In 2024, 18% of Irish Older People with care needs received home support.
- Ireland performs well on this metric relative to comparator nations, although we lag significantly behind Sweden, which delivers care to 44% of its Older People with care needs.
- It should be noted that Ireland has the youngest population in Europe, with the result that the share of persons in the 65+ age group is lower than other countries, though this share will rise.



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6. Demand Modelling and Unmet Need

Population-Level Evidence of Care Need and Unmet Need (TILDA) official waiting lists capture only individuals who have been assessed and recorded within the home support system and may understate the true level of need in the population.

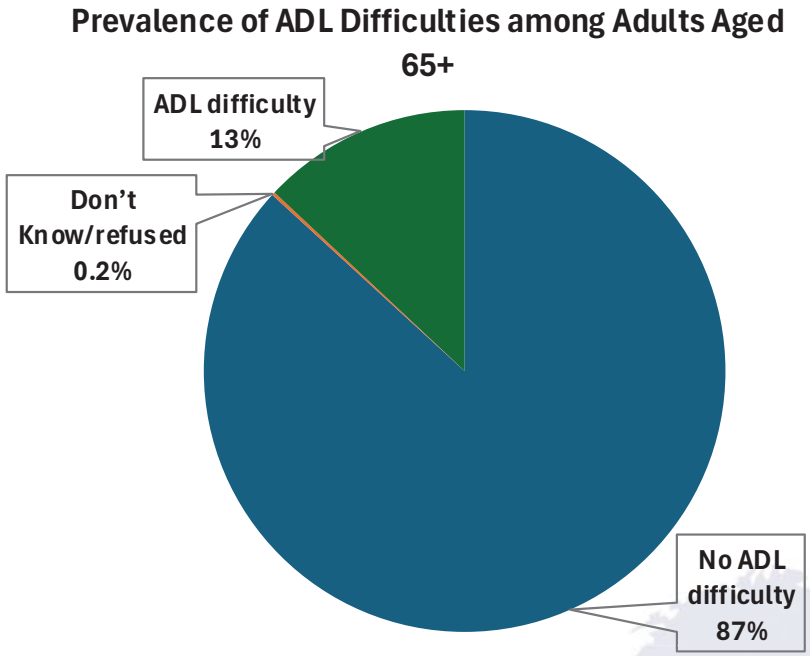
- To assess underlying care need, Indecon analysed data from the Irish Longitudinal Study on Ageing (TILDA)[4], a nationally representative survey of older people in Ireland.
- TILDA provides evidence on the prevalence of functional limitations, including Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs), and whether individuals reporting these limitations receive support (either formal or informal)
- This analysis provides insight into unmet and partially met need that may not be reflected in administrative data or waiting lists.

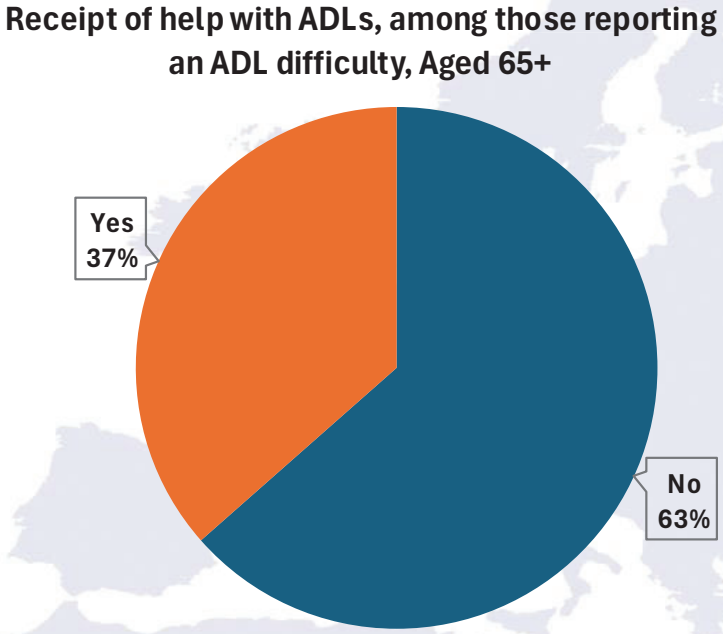
4. Irish Longitudinal Study on Ageing (TILDA). See: https://tilda.tcd.ie/

6. Demand Modelling and Unmet Need

Functional Limitations and Receipt of Support – ADLs (TILDA)

- Activities of Daily Living (ADLs) refer to basic self-care tasks, such as bathing, dressing, or moving around the home.
- TILDA data indicate that 13% of adults aged 65+ report difficulties with one or more ADLs.
- Among those reporting ADL difficulties, 36.5% report receiving help, while the majority do not report receiving support for these needs.
- This suggests that a substantial share of older people with basic care needs may have unmet or partially met support requirements.





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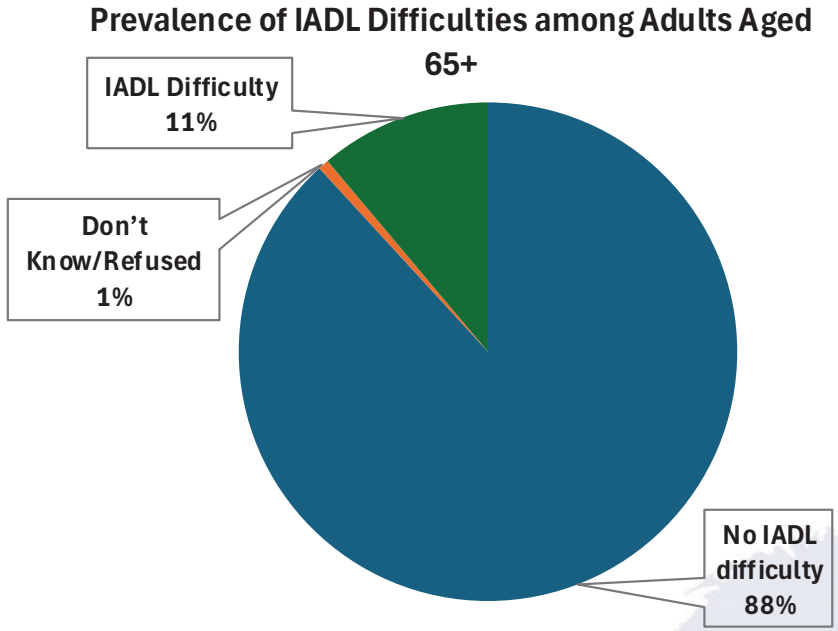
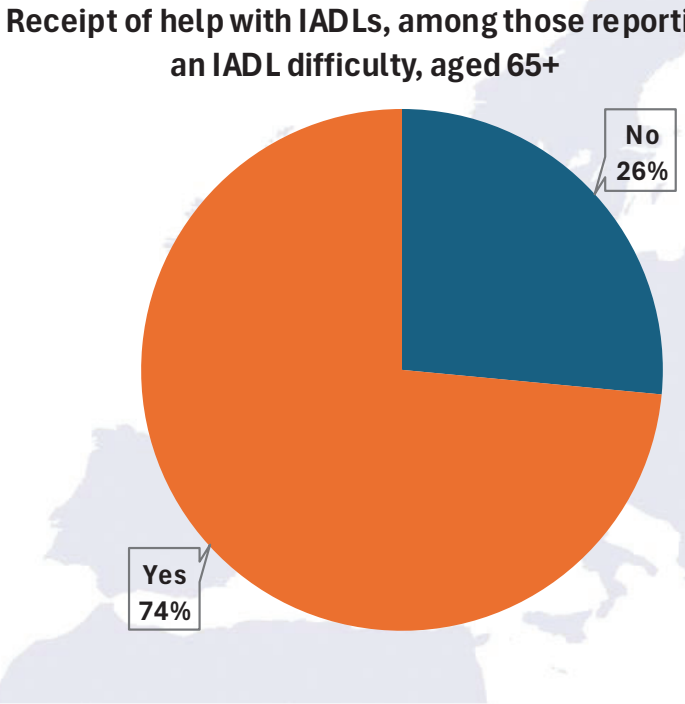
6. Demand Modelling and Unmet Need

Population-Level Evidence of Care Need and Unmet Need (TILDA)

- Instrumental Activities of Daily Living (IADLs) relate to activities required for independent living, such as shopping, food preparation, and managing finances.
- TILDA data show that 11.2% of adults aged 65+ report difficulties with IADLs.
- Among those reporting IADL difficulties, 73.5% report receiving help, indicating higher levels of support relative to ADLs.
- Nonetheless, a meaningful proportion of individuals with IADL limitations do not report receiving assistance, highlighting gaps in support.



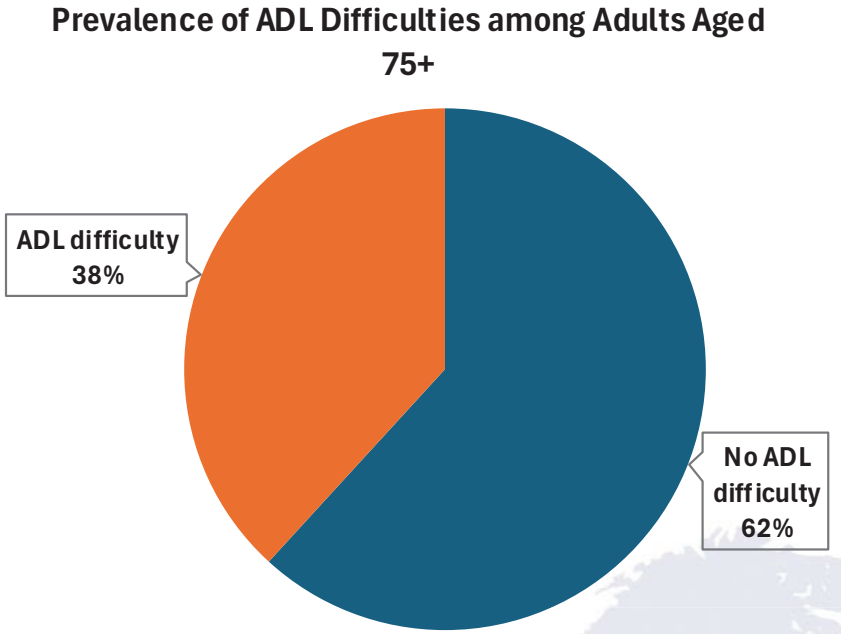


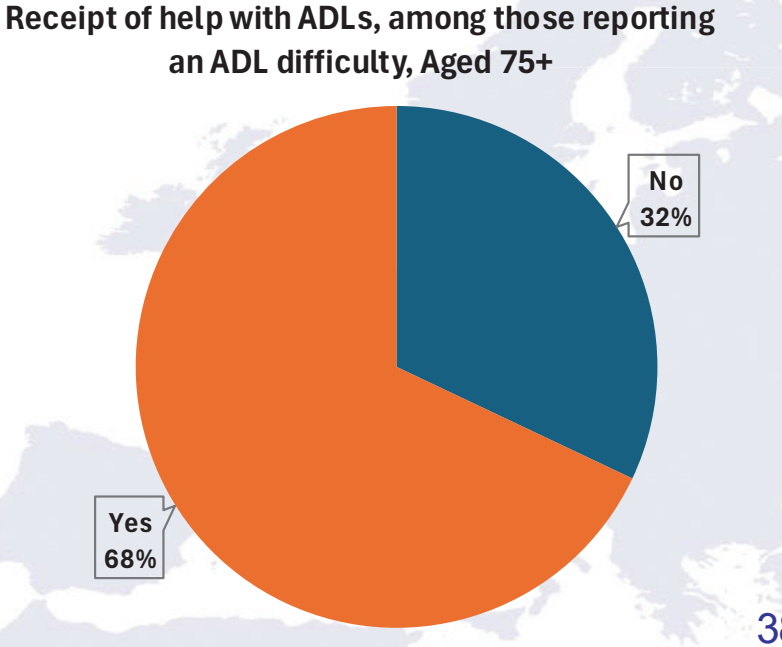
Indecon

6. Demand Modelling and Unmet Need

Population-Level Evidence of Care Need and Unmet Need (TILDA)

- The proportion receiving assistance increases modestly with age among those reporting care needs.
- 38.2% of adults aged 75+ with ADL difficulties report receiving help, compared with 36.5% among those aged 65+.
- For IADLs, 76.8% of adults aged 75+ report receiving support, compared with 73.5% among those aged 65+.
- Despite this increase in aid, a significant proportion of older people with functional limitations remain without reported support.





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6. Demand Modelling and Unmet Need

- Evidence from TILDA indicates that a significant proportion of older people with functional limitations do not report receiving support for their care needs.
- Estimating the true scale of unmet need for publicly funded home support is complex. Official waiting lists capture only individuals who have been formally assessed and recorded as waiting and may not reflect unmet need among those who have not engaged with the system, including due to limited awareness of service availability or perceptions of long waiting times.
- As part of this study, Indecon has undertaken scenario-based modelling to estimate the potential scale of unmet demand for home support beyond that captured in official waiting list data.
- Two scenarios are examined:
  - Scenario 1 - Waiting List Approach: Applies current provision rates to those on the waiting list (October 2025), on the assumption that waiting lists are broadly representative of unmet demand.
  - Scenario 2 - Regional Benchmarking Approach: Current waiting lists provide an incomplete picture of true demand for publicly funded home support. This scenario identifies CHO 9 as a region with comparatively low waiting lists, calculates total home support hours delivered per person aged 65 and over in that region, and applies this rate nationally to derive an estimate of true demand.

6. Demand Modelling and Unmet Need

Scenario 1: Waiting-List-Based Demand (Lower-Bound Estimate)

- As a conservative lower bound, if current provision fully reflects recipients' approved hours, clearing the December 2025 waiting list would require approximately 2.4 million additional hours per annum, a 9.4% uplift on current delivery.
- In practice, some recipients do not receive their full approved hours. Adjusting for a delivery shortfall of 10–20%, the additional hours requirement rises to between 2.7 million and 3 million hours per annum.
- On this basis, total estimated demand ranges from 28 million to 28.6 million hours per annum.

Demand for Home Support Calculations (2025)			
Assumption on Delivery of Approved Hours	Additional Hours Required (per annum)	% Increase on Current Delivery	Total Estimated Hours Required
100% of approved hours delivered	2,414,000	9.4%	27,962,000
90% of approved hours delivered	2,682,000	10.5%	28,230,000
80% of approved hours delivered	3,018,000	11.8%	28,565,000
Source: Indecon Analysis			

6. Demand Modelling and Unmet Need

- As of December 2024, CHO 9 (Dublin North, North-Central, and North-West) had a waiting list of 0, making it the most appropriate benchmark region for estimating what national provision could look like if access were equitable across all areas.

- Applying CHO 9's hours-per-person-65+ rate nationally, demand in 2022 is estimated at approximately 29.7 million hours, compared to 20.8 million actually delivered. This implies that only around 70% of true national demand was met.

True Demand for Home Support Calculations	
	2022 Figures
A. Home Support Hours Delivered (CHO 9)	*3,267,437*
B. Over 65-Population (CHO 9)	*85,264*
C. Benchmark Hours Per Over 65 Population (A/B)	*38.82*
D. National Over 65 Population	*776,315*
E. Total National Home Support Hours Demanded (C*D)	*29,749,488*
F. Total National Home Support Hours Delivered	*20,792,772*
G. % of True Demand Met (F/E)	*70%*
Source: 2022 Census, HSE.	

6. Demand Modelling and Unmet Need

Key Findings

- Official waiting lists may understate true unmet need. TILDA data indicate that the majority of older people with ADL difficulties do not report receiving any support, and over a quarter of those with IADL limitations are similarly unsupported. Stakeholders reported that many individuals do not formally engage with the waiting list system due to a perception of lengthy waiting times and a lack of available services.

- Scenario 1 (Waiting List Approach): Clearing the October 2025 waiting list would require approximately 2.4 million additional hours per annum, a 9.4% increase on current delivery.

- Scenario 2 (Regional Benchmarking Approach): Applying the provision rate of CHO 9 nationally suggests true demand in 2022 was approximately 29.7 million hours, compared to 20.8 million actually delivered.

7. Conclusions

- Home support hours have expanded substantially, but growth in the number of recipients has not kept pace with demographic pressures. This indicates that increased provision has primarily intensified care for existing recipients rather than expanding access to new ones.
- Administrative waiting lists capture only part of overall demand, with TILDA and stakeholder evidence indicating unmet need among older people that is not reflected in waiting list data.
- Workforce capacity constraints are the primary driver of current access pressures. The composition of waiting lists has shifted over time, with delays increasingly driven by limitations in care staff availability rather than funding constraints.
- Demographic pressures will increase demand in the coming decades. Based on CSO population projections, Ireland's over-65 population is projected to progressively increase its share of the total population by 2057.
- Scenario-based modelling suggests that clearing existing waiting lists alone would require an increase in annual home support hours. Benchmarking against regions with low waiting lists implies that current delivery meets only around 70% of potential underlying demand.

8. Implications for Policy

1. **Projected demographic trends**

    - There has been a significant increase in funding allocated to home support in Ireland in recent years. However, based on the CSO population projection that Ireland's over-65 population is expected to nearly double its population share by 2057, delivery levels will face significant additional demands, indicating the requirement to continue to increase long-term funding.

2. **Shift in waiting list composition**

    - The lack of timely services is increasingly due to constraints on the recruitment of carers rather than funding constraints, which indicates that policy levers related to workforce supply and retention are increasingly central to addressing access pressures.

3. **Waiting lists understate true unmet need**

    - Administrative waiting lists should not be treated as a comprehensive measure of unmet need, as this risks underestimating the scale of demand. TILDA evidence shows one measure of unmet need, with stakeholders in this study suggesting that potential service users do not engage with the system.

8. Implications for Policy

4. **Significant geographic variation in waiting lists**

    - HSE West & Northwest account for approximately 25% of those on the waiting list, compared to comparatively lower levels in Dublin CHOs. This indicates that the distribution of provision across the system is uneven, and broader national-level policy should be complemented by more targeted initiatives.

5. **Gaps in data**

    - Current gaps in data recording - including how home support hours are measured, how staff leave is accounted for, and the absence of comprehensive waiting time information - limit the evidence base available to policymakers. The HSE's planned procurement of a digital case management and e-Rostering platform, alongside expanded use of interRAI, has the potential to standardise data collection across the service user pathway and reduce these gaps over time.