BRIEFING FOR DEPARTMENT OF HEALTH OFFICIALS · NOVEMBER 24th 2026

# Publicly Funded Home Support in Ireland -

## Findings from Indecon Economic Consultants June 2026 Report

Care Alliance Ireland's reflections on the report

**Liam O'Sullivan**, CEO, Care Alliance Ireland



CONTEXT

# Why we commissioned this research

**Care Alliance Ireland** - Umbrella body for 100+ not-for-profit organisations that support family carers. Our focus is macro advocacy: policy, research and governance. We also deliver peer to peer online carer support interventions.

### Home Care Matters to Family Carers

- Family carers provide over 80% of care.
- High-quality home care bridges that gap – to enable people to continue to live at home.

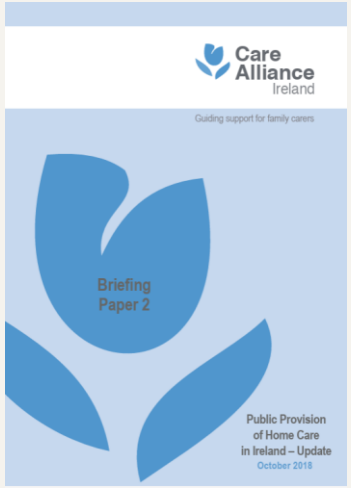
### Three questions Sought to Answer

- What is the unmet need for public home support in 2025?
- Is provision keeping pace with demographics?
- How long from referral to receipt of a (partial) service?

### Data Sources/Methodology

- HSE management data, CSO, TILDA and ESRI, plus the HSE Older Persons Unit, a stakeholder focus group and written submissions.




This continues our 2016 and 2018 analyses of HSE-funded home care.

CONTEXT

# Caveats

## Report Covers many topics not discussed here

- Methodology – Phases 1-4
- Policy Context – in significant detail
- Stakeholder Engagement and Qualitative Feedback
- Trend in provision by type of Agency
- Annual provision targets
- Detailed waiting lists trends
- International Comparisons
- Detailed demand modelling ref TILDA
- (Key Findings p 31, Conclusions p43, Implications for Policy p44/45)
- Full report at: https://www.carealliance.ie/userfiles/files/Indecon_HomeCare_Provision_Final.pdf



PROVISION

# 2025 was a record year for home support hours –

## 25.5m hours

Reported – but how much were actually delivered?

## 106%

of the 24m-hour target, the first time the target was exceeded since 2018

## +49%

more hours than in 2018, with non-HSE providers delivering 91% of the growth

**Budget 2027: we welcome the additional resourcing**

An extra €123m for home support, 1.8m more hours and a record 28.5m-hour target for 2027.

Sources: Indecon (2026) from HSE data; Dept of Health Budget 2027 announcement · 3

PROVISION

# But more hours have not reached many more people

**+ 49%**

**Hours, 2018–2025 (Aug 2026 +7.4% yoy)**

**+ 10–14%**

**Recipients, 2018–2025**

52,700 in Jan 2018 to 60,500 in Dec 2025 (+5.7% clients as of August 2026, Disability + 18% provision (July 2026)

**~ 37**

**Hours per recipient a month**

About 8.5 hours a week, up about a third since 2018

> Recipients grew about 2% a year, slower than the population aged 65+. Care has intensified for existing clients rather than reaching new ones.

DEMAND

# Demographics adding Pressure -Family Carer capacity is limited

### More older people

The 65+ share rises from 15.1% (2022) to 29.2% by 2057. ESRI: 44.9–54.9m home support hours needed by 2040, up 57–91%.

### Healthier ageing helps a little

Modest falls in morbidity ease some pressure, as our 2018 paper noted. ESRI: Population growth offsets much of this.

### Fewer family carers available

- Fertility fell from 1.9 to 1.5 (2015–2025).
- Separation and migration of adult children add to this. [Care Alliance contention]

> The State cannot assume families will absorb a growing share of the gap.

Sources: CSO M2 projections; ESRI RS214 (2025); CSO Vital Statistics 2025; CAI Briefing Paper 2 (2018) · 5

WAITING LISTS

# Waiting lists are now a more a regional & workforce problem

**5,406**

**Waiting for care staff**

February 2026: 2,198 awaiting a first service, 3,208 awaiting more hours

**0**

**Waiting on funding**

In 2018–19, most of the list was waiting on funding

**~25%**

**In HSE West & North West**

1,380 of 5,600 waiting in December 2025

> Are there tiered waiting lists? – waiting for funding, waiting for allocation to a provider, waiting for a partial service, waiting for a full service.

Sources: HSE Briefing Note 24/03/2026; HSE PQ responses 2025; Indecon (2026); HSE NSP 2026 · 6

HIDDEN NEED

# Unmet need often falls on family carers, neighbours – or people go without.

**13%**

of people aged 65+ have difficulty with basic self-care such as washing or dressing (TILDA)

**63%**

of them report no help at all, formal or informal

**74%**

of family carers say the person they support lacks enough formal support (FCI 2024)

**75%**

of family carers have never received respite (FCI 2026)

> Many people who need home support never apply, so waiting lists likely under-report need. (Sometimes its for other reasons – subjective self-denial of need, shame, privacy etc.).

Sources: Indecon (2026) analysis of TILDA; Family Carers Ireland, State of Caring 2024 and 2026 · 7

UNMET NEED MODELLING

# Modelling Unmet Need

**+2.4–3.0m**

**Scenario 1: waiting list**

Extra hours a year to clear the Dec 2025 list (+9.4–11.8%). A lower bound.

**~70%**

**Scenario 2: CHO 9 benchmark**

Of true demand met in 2022, using CHO 9's provision rate as the national benchmark.

**~9m**

**Hours gap, 2022**

29.7m hours demanded vs 20.8m delivered in 2022 (Scenario 2).

- Even the record 2027 target of 28.5m hours is below Scenario 2s estimate of 2022 demand (29.7m hours, before any account of >65 population increase since 2022.
- CHO9 seems to have unique features – ready availability of home care labour through non HSE providers.
- Figure of 30-35m provision seems reasonable – based on most recent population data.

Source: Indecon (2026), section 6: Demand Modelling and Unmet Need · 8

COST

# Home support is the lowest-cost setting of care

| Setting | Approx. weekly cost | Basis |
|---|---|---|
| Home support, average client | ~€280 | ~8.5 hours × €32.73 core hourly rate provide to non-HSE providers |
| Nursing home (Fair Deal) | ~€1,300 | Average private and voluntary rate, June 2026 |
| Acute hospital bed | ~€10,010 | €1,430 a day, Care Alliance estimate (from 2022 data plus health care inflation using German and English hospital cost indices.) |

- **What is the true cost of HSE delivered home care? The HSE appear unable to provide this information. We feel it is approaching €50 per hour? (CAI Estimate)**
- **A week of average home support costs less than a fifth of one acute bed day.**
- **Not like-for-like, care needs differ by setting, and home support works because family carers provide most of the care unpaid.**

Sources: HSE PQ 45257/25 (hourly rate); HSE PQ – 42333-26 NTPF rates via BDO (June 2026); Indecon (2026); Care Alliance estimate · 9

REPORTING ACCURACY

# Need to do Better – Absences rates High

**2018:** Our FOI request – 3.3mths, 15% unmet need

**2026:** Initial administrative request – followed by FOI request - Refused: Data "not available"

**Over 2 million unverified hours a year (Care Alliance estimate)**

HSE data show ~11% sickness absence – together with annual leave, bank holidays, other leave, force majeure, per image below). c25-30% (CAI estimate)

August 2026

| Health Service Absence Rate - by Care Group : Aug 2026 | Certified absence | Self Certified Absence | Total absence rate | Medical & Dental | Nursing & Midwifery | Health & Social Care Professionals | Management & Administrative | General Support | Patient & Client Care |
|---|---|---|---|---|---|---|---|---|---|
| Total | 5.60% | 0.60% | 6.20% | 1.80% | 6.95% | 5.33% | 5.43% | 7.88% | 7.97% |
| Acute Hospital Services | 5.13% | 0.64% | 5.78% | 1.48% | 6.50% | 5.16% | 5.84% | 7.98% | 8.43% |
| **Acute Services** | **5.13%** | **0.64%** | **5.78%** | **1.48%** | **6.50%** | **5.16%** | **5.84%** | **7.98%** | **8.43%** |
| Community Health & Wellbeing | 6.84% | 0.36% | 7.19% | 0.00% | 0.00% | 13.85% | 9.79% | | 5.26% |
| Primary Care | 6.38% | 0.45% | 6.82% | 3.95% | 8.42% | 5.83% | 5.98% | 10.19% | 7.76% |
| Disabilities | 5.15% | 0.52% | 5.67% | 4.92% | 6.45% | 5.21% | 3.82% | 5.66% | 5.89% |
| Mental Health | 6.51% | 0.63% | 7.14% | 2.82% | 8.25% | 5.61% | 6.49% | 7.54% | 8.67% |
| Older People | 8.68% | 0.76% | 9.43% | 1.89% | 8.38% | 6.20% | 7.16% | 9.07% | 11.26% |
| **Community Services** | **6.32%** | **0.57%** | **6.89%** | **3.35%** | **7.85%** | **5.49%** | **5.65%** | **8.00%** | **7.49%** |
| **Regional Service Support Functions** | **4.36%** | **0.35%** | **4.71%** | **4.24%** | **4.58%** | **5.30%** | **4.83%** | **1.67%** | **0.29%** |
| **National Services & Central Functions** | **5.46%** | **0.49%** | **5.95%** | **2.22%** | **6.27%** | **5.38%** | **4.30%** | **5.63%** | **11.44%** |

Source: In respect of HSE delivered care, the monthly HSE performance data, when reporting of hours delivered, includes all forms of paid leave including sick leave (11%, August 2026 data), annual leave (est. 12%) and other leave (we assume maternity and other types of paid leave). *('The number of home support hours delivered to clients in a calendar month from the Home Support Budget SOP including any paid hours for annual, sick or other leave for HSE directly employed staff.' p1, Older Persons' Key Performance Indicator Metadata 2026, HSE)* This may be leading to a c25%-30% over reporting on actual HSE delivered hours. This could represent an over-reporting of the delivery of up to 2 million home care hours per year.

POLICY IMPLICATIONS

# What this means for policy

| | |
|---|---|
| **Fund to demographics** | Build on Budget 2027 with multi-year funding linked to population ageing |
| **Workforce first** | Recruitment and retention seem to be key |
| **Measure need, not lists** | Publish waiting times and the gap between assessed and delivered hours |
| **Target regions** | Focused action where lists are longest, e.g., the West and North West |
| **Count Family Carers** | Record carer status and roll out the Family Carer Needs Assessment |

Sources: Indecon (2026), section 8; CAI Briefing Paper 2 (2018); Health (Amendment) (Home Support Providers) Act 2026 · 11

DISCUSSION

# Some Questions to Pose for Discussion

- Will funding for home care post 2027 continue to increase?
- When will referral-to-service waiting times be published nationally?
- How will delivered hours be verified against hours reported?
- Why did the waiting list rise through 2025 despite record hours?
- Who outside of the HSE can be usefully involved in the development of the ICT system (Digital for Care) for home care? Ref ESRI Nov 2026 report https://doi.org/10.26504/sustat145
- When will population health data meaningfully inform resource allocation?
- Should rural areas have additional resourcing to compensate for challenges in provision?
- Will interRAI assessments really ramp up? Will they record the family carer's situation and capacity?
- Has increased home care provision been associated with a reduction in Nursing Home admissions?
- More political questions
    - Who pays for this home care?
    - Are we OK with for profits increasingly being involved in the provision?

THANK YOU

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Full Indecon report: https://www.carealliance.ie/userfiles/files/Indecon_HomeCare_Provision_Final.pdf

*'Guiding support for family carers'*

SOURCES

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