



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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18th November 2019

Deputy Thomas Broughan
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Dear Deputy Broughan

The Health Service Executive has been requested to reply directly to you in the context of the following parliamentary question, which was submitted to this department for response.

PQ 44628/19

To ask the Minister for Health the number on the waiting list for assessments of need for children by CHO; and the average length of time between the date of referral and date of assessment by CHO.

PQ 44629/19

To ask the Minister for Health the number on the waiting list for initial meetings with early intervention teams for children by CHO; and the average length of time between the date of referral and date of assessment by CHO

HSE Response

Since the commencement of Part 2 of the Disability Act in June 2007, (The Act), the HSE has endeavored to meet its legislative requirements as set out in the Act. However, as a consequence of a High Court ruling of December 2009, the effect of which was to open eligibility to all children born after 1st June 2002, the number of children aged five and over, and in addition of school-going age, has risen steadily as a percentage of all applications received. At the end of 2011, the figure stood at 26%, while at end of 2018, this figure was 52%. This is a reflection that the AON process is an accumulative process in terms of numbers of children seeking access. It should be noted that the clinical teams who complete the assessments are also the teams who deliver intervention.

Waiting Lists

It is acknowledged that the numbers of assessments overdue for completion remain high, although there has been some improvement in these figures in 2018 and 2019. At end of 2017 there were 4,067 applications overdue for completion.

The table below provides the number of applications for Assessment of Need under the Disability Act that were overdue for completion on the last day of the Quarter in 2018 and to date in 2019, broken down by CHO Area. The information is based on data extracted from the Assessment Officers' System Database (AOS).

CHO Area	Quarter 1 2018	Quarter 2 2018	Quarter 3 2018	Quarter 4 2018	Quarter 1 2019	Quarter 2 2019	Quarter 3 2019
AREA 1	198	220	213	140	103	70	56
AREA 2	71	57	33	35	39	41	62
AREA 3	134	215	183	295	313	365	390
AREA 4	1771	1571	1192	1013	959	888	876
AREA 5	400	421	404	401	400	389	387
AREA 6	59	50	81	103	115	155	159
AREA 7	538	500	550	474	478	500	552
AREA 8	402	434	469	491	454	420	484
AREA 9	531	442	595	659	707	817	921
Total	4104	3910	3720	3611	3568	3645	3887

The overdue dates are compared against the 'milestone complete Assessment Date' on the database.

The Assessment Officer can extend the 'milestone complete Assessment Date' beyond the statutory timelines as provided for in the regulations.

Applications that were put 'on hold' are NOT included in this table.

All Community Healthcare Organisations have progressed improvement plans to address compliance with Disability Act timelines. During 2018, significant improvements were achieved in the numbers of assessments overdue for completion. This improvement is particularly evident in Cork Kerry Community Healthcare where the numbers overdue for completion have reduced by 895 since Q1 2018.

In 2018, 3,391 applications for assessment of need commenced stage 2 of the assessment process, with 70% (2,364) of these within 3 months of receipt of the completed application. In the third quarter of 2019 the percentage was at 72%.

In 2018, 4,237 applications for assessment of need were completed with 9% (374) completed within the 6 months timeline. In the third quarter of 2019 the percentage was at 14%.

It must be noted that the length of time to complete the assessment of need under the Disability Act varies depending on the person's complexity of need; however, the average duration of the assessment process per report completed in the years from 2010 to Q3 2019 are included in the table below. Please note that this table is based on data extracted from the Assessment Officers' System Database (AOS) and provides the national average for each year.

Year	2010	2011	2012	2013	2014	2015	2016	2017	2018	Q3 2019
No. of Months	9.5	9.4	8.9	8.9	9.1	10.4	11.5	12.9	18.48	19.13

CHO Improvement Plans

Each CO is required to have in place plans to ensure compliance with AON. The National Disability Operations Team both supports and monitors the effectiveness of these plans on a routine basis. Having regard to the evidence as set out above, there is reason to believe that these plans are showing some positive effect in terms of dealing with non-compliance. However it is critically important to note that there are "structural" and "resource" challenges that impact on CHOs capacity to deal effectively with AON compliance. Therefore, additional to the aforementioned, important attention is paid to the following actions being implemented as part of an overall plan to improve the effectiveness and delivery of family centred interventions with children and young people with a disability.

New Standard Operating Procedure (SOP) for Assessment of Need (AoN)

The Disability Act (2005) provides for an Assessment of Need (AoN) for people with disabilities. Any child suspected of having a disability, born on or after June 1st 2002 is eligible to apply for an Assessment of Need that will detail his / her health needs arising from the disability. The Act does not define this assessment and the process is not standardised across the country. This lack of standardisation and clarity has contributed to significant delays in the Assessment of Need process. In addition, the Assessment of Need, being an accumulative process, has resulted in resources being targeted almost exclusively towards assessment with some children receiving very limited intervention.

As required by the standards for Assessment of Need there should be a consistent approach to assessments across the country. To improve this process and ensure that children receive an intervention as soon as is possible, the HSE has developed a Standard Operating Procedure for the Assessment of Need process. The purpose of this procedure is to ensure children with disabilities and their families, access appropriate assessment and intervention as quickly as possible. In addition, this procedure will ensure that the approach to Assessment of Need is consistent across all areas.

The HSE is currently concluding a lengthy consultation and IR engagement regarding the implementation of this procedure. An independent clinical advisor and legal advisors have provided the necessary assurances regarding the appropriateness of the Standard Operating Procedure. It is intended that the procedure will be implemented from Q1 2020.

Waiting Lists for Therapeutic Interventions

The HSE is aware of the numbers of children and adults waiting for therapy services and is fully cognisant of the stress this can cause to families. One of the key priorities for the HSE is to improve waiting times for therapy services by implementing a revised model of care for children's Speech and Language Therapy services and Psychology services and develop new models for Physiotherapy and Occupational Therapy services.

In addition to the significant numbers of additional posts allocated to Primary Care and to Social Care under the Progressing Children's Disabilities Programme in recent years (see further details below), the HSE is committed to using innovative approaches, involving public, voluntary and private providers, to achieving a targeted reduction in therapy waiting lists.

The HSE is fully committed to working in partnership with service providers to achieve maximum benefits for children with complex needs, and aims to ensure that resources available are used in the most effective manner possible.

Reform of Children's Disability Services - Progressing Disability Services Policy

In terms of the structure of network teams providing services to children with complex disability needs, HSE is rolling out the Progressing Disability Services for Children and Young People (PDS) Programme, which requires a reconfiguration of all current HSE and HSE funded children's disability services into geographically-based Children's Disability Network Teams (Early-Intervention and School-aged or 0-18 Teams). This Programme aims to achieve a national equitable approach in service provision for all children based on their individual need and regardless of their disability, where they live or where they go to school. Based on the recommendations of the Report of the National Reference Group on Multidisciplinary Services for Children aged 5-18 Years (2009), its objectives are:

- ✓ One clear pathway to services providing equity of access for all children with disabilities, according to their need.
- ✓ Effective teams working with partnership with parents and Education to support children in achieving their potential.
- ✓ Available resources used to the optimum benefit for children and their families.

PDS is doing this by forming partnerships between all the disability organisations in an area and pooling their staff with expertise in the different types of disabilities to form local Children's Disability Network Teams (CDNTs) who will provide for all children with significant disability, regardless of what their disability is.

In tandem with Health service reform which seeks to have Health and Social Care “Networks” in place, the HSE is establishing a total of 96 Children’s Disability Networks across each of the nine CHOs and comprised of Specialist Multi- Disciplinary Teams to work with complex disability needs. Each Network will have a Children’s Disability Network Manager with specialist expertise in providing Childrens disability clinical services. The appointment of these Network Managers can now proceed following the recent Labour Court ruling with regard to same.

Additional Therapy Resources for Children’s Disability Services

NSP 2019 has provided for an additional 100 new therapy posts to be implemented by end 2019 with new development funding of €2.5m granted via NSP 2019 and with a full year investment cost rising to €6m in 2020.

This welcome new resource will result in additional new therapy posts ranging from Speech and Language Therapy, OT, Physio, Social Work, Psychology, Dietitians and Allied Health Professional Assistants. This new resource will impact on both assessment of need as well as support interventions for children with complex disability concerns.

The 100 new therapy grade posts have been allocated with discipline, grade and location now assigned in each case. Formal approval was received from Strategy and Planning on 17/5/2019 and confirmation to proceed with recruitment was sent from Community Operations to NRS on 15/07/2019. This was required to generate permissions for each CHO to progress recruitment. CHO areas are currently progressing recruitment in partnership with HBS Recruit and non-statutory employers. 63 of these posts are already in place with the remaining expected to be in post before year end.

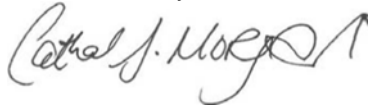
The above should be considered in light of previous investment secured by the HSE for therapeutic services which has been invested in the Progressing Disability Services for Children and Young People (0-18s) Programme (PDS). Since 2014, the roll out of the PDS has entailed targeted investment of €14m and the provision of 275 additional therapy staff, to increase services for children with all disabilities.

National Policy on Access to Services for Children with a Disability or Developmental Delay

National HSE Disability and Primary Care are working together collaboratively with Community Health Organisations via their Chief Officers to support implementation of the HSE’s National Policy on Access to Services for Children with a Disability or Developmental Delay. This policy will provide a single point of entry, signposting parents and referrers to the most appropriate service (Primary Care for non-complex functional difficulties and Children’s Disability Network Teams for complex functional difficulties).

It is expected that the re-configuration of services under Progressing Disability Services for Children and Young People (0-18s) Programme will have a significant impact on our ability to meet the needs of children and young people in a more efficient, effective and equitable manner and, in particular, on our ability to comply with the statutory time-frames set out in the Disability Act.

Yours sincerely,



**Dr. Cathal Morgan,
Head of Operations - Disability Services,
Community Operations**