



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

**Oifig an Cheannaire Oibríochtaí,**  
Na Seirbhísí Míchumais/An Rannán Cúram Sóisialta,  
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30<sup>th</sup> October 2019

Deputy Richard Boyd Barrett  
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Dear Deputy Boyd Barrett,

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 42649/19**

*To ask the Minister for Health if all school age teams have a full complement of specialists to allow multidisciplinary assessment and interventions; if in particular, a team (details supplied) has the complement; and if he will make a statement on the matter.*

Details supplied: the Dublin South School Age Team

**PQ 42650/19**

*To ask the Minister for Health the way in which children are prioritised for the school age team assessment; if it follows the national policy for prioritisation for persons with disabilities; and if he will make a statement on the matter.*

**PQ 4265219**

*To ask the Minister for Health if each child has to have a second full multidisciplinary assessment after having one with the early intervention team when moving to primary school when they reach the age of five; and if he will make a statement on the matter.*

**HSE Response - 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 is now underway given that the interview and selection process is complete.

Some HSE Areas have already reconfigured into Children’s Disability Network Teams, providing interdisciplinary services for all children with complex disability needs, based on their individual need. Other HSE Areas are in the process of reconfiguration. However, it must be noted that **all** HSE Areas planning reconfiguration continue to have significant Early Intervention Services in place, provided either directly by the HSE or by voluntary service providers funded by the HSE, such as Enable Ireland, Kare, Muriosa Foundation, St. John of God Services, Brothers of Charity Services, St. Michael’s House, Cope Foundation, CRC, Daughters of Charity Services etc.

Transitioning to this new child and family centred model of service is complex as in most cases, it is bringing together into one team staff from different organizations with different ways of working and to ensure optimal and safe service provision for children during the transition, solid ground work must be developed beforehand whilst continuing to provide full services. For example, clear, integrated policies, procedures and protocols for the newly forming multiagency teams, a clear governance structure and an agreed model of services must be developed and signed off by all stakeholders including parent representatives, staff and management.

### **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).

### **Staffing of Children’s Disability Network Teams**

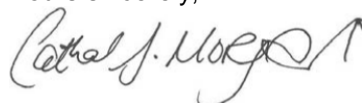
The HSE acknowledges that in some areas, including Community Healthcare Dublin South, Kildare & West Wicklow (CHO7), current staffing levels are insufficient to meet the demand. However, NSP 2019 provided for an additional 100 new therapy posts to be implemented by end 2019 with new development funding 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 and Psychology. 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. Community Healthcare Dublin South, Kildare & West Wicklow (CHO7) has been allocated 13 additional staff from this new resource, including Psychologists, OTs, Speech and Language Therapists and Dieticians.

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.

Yours sincerely,



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