



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

**Oifig an Cheannaire Oibríochtaí,**  
Na Seirbhísí Míchumais/An Rannán Cúram Sóisialta,  
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25<sup>th</sup> May 2020

Deputy Joe O'Brien,  
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Dear Deputy O'Brien,

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

**PQ 4229/20**

*To ask the Minister for Health the number of children that aged out of and off the waiting lists for early intervention team assessments by HSE area in 2018 and 2019.*

**PQ 4230/20**

*To ask the Minister for Health the waiting time for new applicants for early intervention team assessments in each HSE area.*

**HSE Response**

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. While waiting lists are collated nationally for individual therapy services such as Speech and Language, Physiotherapy and Occupational Therapy, the numbers of children waiting for therapeutic intervention are not combined into one National Early Intervention or School-aged waiting list.

The HSE acknowledges the challenges in meeting the demand for children's disability services and is acutely conscious of how this impacts on children and their families.

A number of service improvements are being introduced that, when implemented, will help improve access to services for children with disabilities and developmental delays. The overall programme of improvement is the ongoing roll out of Progressing Disability Services for Children and Young People (PDS). This requires the reorganisation of all current HSE and HSE funded children's disability services into geographically-based Children's Disability Network Teams (CDNTs).

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 the CDNTs. These teams will provide for all children with significant disability, regardless of their disability, where they live or where they go to school.



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The HSE is establishing a total of 96 Children's Disability Networks across each of the nine CHOs comprised of Specialist Multi-Disciplinary Teams to work with children with complex disability needs. Each Network will have a Children's Disability Network Manager with specialist expertise in providing children's disability clinical services. The appointment of these managers will facilitate the establishment of the Children's Disability Network Teams in 2020.

Where Children's Disability Network Teams are not yet set up, children aging out of Early Intervention services are referred on to the appropriate School Age service, where available.

In some areas, Early Intervention services will not accept a referral after a child's fifth birthday, where their waiting list is over a year, as the child will have aged out before Early Intervention service commences. Instead, with parental consent, they will forward, or advise the parent or referrer to forward, to the appropriate School Age service. This is part of the rationale for PDS; a seamless 0-18 team with 'sub' teams for 0-6 and 6-18 (which are different service models for preschool and school age), thereby removing one key transition at six years of age.

### **COVID-19 Public Health Emergency**

In preparing for and responding to COVID-19 and to fully align with Public Health guidance as recommended via the NPHE, the HSE and its partner service providers put in place a range of measures, which included the prioritisation of vital residential and home support services whilst curtailing or closing certain services such as day services, as well as certain clinical supports in order to; a) prioritise essential public health services at CHO level and b) ensure continued delivery of the referenced residential and home supports provision.

In this regard, all decisions regarding supports for children with disabilities and their families are made in the context of contemporaneous public health advice from the NPHE.

As the impact of social distancing measures has restricted the HSE and its partner organisations' ability to provide routine multidisciplinary / interdisciplinary team services, after school supports, home supports and respite services, the HSE and HSE funded children's disability services are endeavouring to provide remote telephone / video supports for children and families wherever possible.

Where a face to face contact is deemed critical to supporting a service user, and where a service user (and if a child, their carer,) is willing and able to attend a clinic, or for the clinician to provide a home visit, a face to face intervention may be provided. Again, strict adherence to Public Health guidance on COVID-19 must be maintained at all times.

Whilst accepting that significant levels of vital therapies have been temporarily curtailed, it is important to emphasise that since the publication of the Government's 'Roadmap for reopening Society & Business' as well as the 'Return to work safely' protocol, the HSE is finalising plans to re-establish vital non-covid supports and services. This includes very careful and detailed work on the part of the Disability Sector with national guidance and will result in directing how all funded agencies can deliver services on a medium to long-term basis. In effect this means that the HSE will soon set out its plans in terms of how we can safely begin to commence services, which will have to comply with guidance as set out by the National Public Health Emergency Team as well as Public Health specialists in the HSE.

Additionally, I can also clarify that the HSE is recommencing work in relation to the setting up of Children's Disability Networks with our agency partners, with Network Managers currently being appointed.

I also want to draw attention to some important work we have been undertaking in terms of contingency measures/ guidance that HSE and disability umbrella bodies have jointly delivered.

Under the governance of the HSE's National Integrated Operations Hub chaired by the COO and work relating to vulnerable people, Disability Operations has a team in place with the responsibility for providing supports and capacity building training for the sector. To date, a range of guidance material has been developed to support people with disabilities, families and staff including:

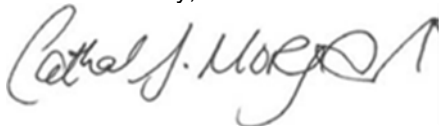
- Alternative Models of Care (Non-Residential)
- Streamlined Health Passport for people with disabilities who are admitted to hospital
- Coronavirus (Covid-19) Frequently Asked Questions for people with disabilities and family carers
- Guidance for supporting children in a community residence/at home
- Support coordination in a pandemic; practical checklist to avoid stressors for service users

Please see attached for the full list of guidance/advice documents, all of which are available at the below web link, which is the central repository for disability specific guidance material during the COVID-19 emergency.

<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/>

Additional to the above, we are also putting in place a series of “webinar” training modules to assist frontline staff during the COVID-19 emergency period.

Yours sincerely,



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



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