

Oifig an Cheannaire Oibríochtaí,

Na Seirbhísí Míchumais/An Rannán Cúram Sóisialta, 31-33 Sráid Chaitríona, Luimneach.

Office of the Head of Operations,

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8th December 2020

Deputy Joe O'Brien
Dail Eireann,
Leinster House, Kildare Street,
Dublin 2.
e-mail: joe.obrien@oireachtas.ie

Dear Deputy O'Brien,

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: 38783/20

To ask the Minister for Health if his attention has been drawn to a campaign (details supplied) which seeks to highlight ongoing structural delays in the delivery of assessments for occupational therapy, speech and language therapy and other supports for children with additional needs; his plans to reduce waiting times in these areas; and if he will make a statement on the matter.

Details Supplied: the "Make a Mess" campaign

HSE Response

Therapies including Speech and Language Therapy, Occupational therapy and other therapy serivces are provided through Primary Care Teams in CHO Areas to children and young people requiring assessment, diagnosis and treatment and in the case of Speech and Language Therapy, for language and communication difficulties and feeding and swallowing difficulties.

Whilst accepting that significant levels of vital therapies including speech and language therapy, were temporarily curtailed due to the current Covid-19 pandemic, processes are underway in order to plan for the reintroduction of non-Covid services.

Resumption of Disability Services

In respect of the provision of Disability Services and in the context of the Governments Resilience & Recovery Framework (2020 - 2021), the HSE regards the provision of disability services, including therapy provision, as essential to maintaining a response to people with a disability.

All disability services must follow public health guidance in this area, including the prevention and management of covid related infection. The HSE and its funded disability partners will continue to provide supports, including respite services, in line with public health guidance and direction and having regard to the availability of staffing resources.

Reference is drawn to the following HSE weblink which provides updates and guidance for disability service providers, including 'service resumption planning guidance'.

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



Attention is also drawn to the following important web links which provide up to date information resources in respect of COVID-19.

www.hspc.ie

https://www.gov.ie/en/campaigns/c36c85-covid-19-coronavirus/

The HSE and Service Providers recognise the critical need and importance of disability supports for people and their families. The impact of COVID-19 on people's lives has and continues to be very significant. Our collective aim is to restore services and to ensure continuity of services in a safe way in line with the very significant investment made by the State and funded agencies. We continue to work with service users and their families/carers to ensure that we achieve this aim.

In this context, we welcome the recent announcements from the Government of additional funding for Disability Services:

- An additional €100 million secured for Disability Services in the recent budget.
- €10 million is being made available to support the resumption of day services and enhanced home support services for disability service users. The €10 million funding is being drawn down from the National Action Plan on COVID-19 €7.5 million will increase the level of day service provision and €2.5 million will provide intensive support packages for children and young people with complex/high support needs.
- €20 million in one-off grants will be provided to reform disability services, build the capacity of disability organisations and to improve the quality of life of those who rely on these services.
- €7.8 million has been allocated by Sláintecare to facilitate the HSE and its funded service providers to address the overdue Assessments of Need.

Assessment of Need

The Disability Act (2005) was commenced for children aged under 5 in June 2007. It was intended that the HSE would deliver Assessments of Need under the Disability Act for this age group and the Education for Persons with Special Education Needs Act (2004) (EPSEN) would provide assessments for school going children. Unfortunately, the relevant sections of the EPSEN Act were never commenced.

With regard to structural delays in the delivery of assessments for occupational therapy, speech and language and other supports for children with additional needs, since its commencement in June 2007, the HSE has endeavoured to meet its legislative obligations under 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 2019, this figure was 55%. This is a reflection that the AON process is an accumulative process in terms of numbers of children seeking access. However, it is acknowledged that the numbers of assessments overdue for completion remain high, although there had been some improvement in these figures in 2018 and 2019 prior to the COVID-19 public health emergency.

The Disability Act requires the HSE to provide a consistent approach to Assessments of Need across the country. The HSE acknowledges that this has not been the case and that approaches to assessment and waiting times have varied.

To help address this situation, the HSE has implemented a Standard Operating Procedure (SOP) for the Assessment of Need process to ensure that;

- children with disabilities and their families access appropriate assessment and intervention as quickly as possible
- the approach to Assessment of Need is consistent across all areas.

In line with this procedure, an Assessment of Need will include a Preliminary Team Assessment that will identify initial interventions and any further assessments that may be required. This preliminary assessment will usually be undertaken by a children's disability service that are also tasked with delivering intervention.



While not required by the Act, diagnostic assessments will continue to be provided, as appropriate, and these will be captured in the child's Service Statement as part of the Assessment of Need process.

These changes are intended to alleviate the current situation where children in some parts of the country may wait a number of years before they can access an assessment. During this waiting period, they often have little or no access to intervention or support. It is intended that the changes in the SOP, particularly the new preliminary assessment, will facilitate children with disabilities to access assessment in a timelier fashion.

The HSE believes that the implementation of this SOP and the planned reorganisation to Children's Disability Network Teams (CDNTs), will have a positive impact on the lives of the children and young people who require our services.

The recent allocation of €7.8 million by Slaintecare, referenced above,to address overdue Assessments of Need will further support the HSE and its funded service providers to meet the legislative timelines for Assessment of Need.

This funding has been allocated to CHO areas based on the numbers of overdue AONs at 30th June 2020. Each CHO area has developed a plan to address this backlog through a combination of:

- Restoration of relevant clinicians to children's disability services
- Waitlist initiative utilising existing clinicians working overtime at weekends or evenings
- Procurement of private assessments
- Commitment to filling maternity leaves
- Recruitment of Additional Clinical Staff for fixed term contracts of 6 months from 1/9/20

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 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 diagnosis, where they live or where they go to school.

The HSE is establishing a total of 91 Children's Disability Networks across each of the nine CHOs comprised of Specialist Inter-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 later this year.

This PDS reconfiguration and the elimination of AON backlogs will facilitate reconfigured teams to provide child and family centred services in line with the PDS model.

Yours sincerely,

Dr. Cathal Morgan,

Head of Operations - Disability Services,

Community Operations

