



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Oifig an Cheannaire Oibríochtaí,
Na Seirbhísí Míchumais/An Rannán Cúram Sóisialta,
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30th October 2020

Deputy Sean Sherlock
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: sean.sherlock@oireachtas.ie

Dear Deputy Sherlock

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 30790/20

To ask the Minister for Health the average cost per child of assessment of need.

HSE Response

Assessment of Need under Disability Act

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. Since the commencement of Part 2 of the Disability Act in June 2007 the Health Service Executive has endeavoured to meet its legislative requirements as set out in the Act. 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.

While applications for Assessment of Need under the Disability Act continue to be accepted, the HSE acknowledges that during the current COVID-19 pandemic situation, it has not been possible for services to undertake clinical assessments while maintaining social distancing and meeting health and safety requirements. It has therefore, been difficult to complete the assessment within the statutory timelines.

Sláintecare Funding

The HSE can confirm that €7.8 million has been allocated by Sláintecare to facilitate the HSE and its funded service providers to address the overdue Assessments of Need. The following table provides a breakdown of the numbers of overdue Assessments of Need and the allocation of funding to each Community Healthcare Organisation (CHO).

CHO	Total Overdue	Funding Allocated
CHO1	138	€214,000
CHO2	100	€159,000
CHO3	589	€681,000

CHO4	1098	€1,163,000
CHO5	643	€693,000
CHO6	257	€363,000
CHO7	1056	€1,702,000
CHO8	764	€901,000
CHO9	1913	€1,974,000
Total	6558	€7,850,000

The allocation of funding to each area was based on the number of overdue assessments at 30th June 2020.

With regard to the average cost per child of assessment of need, there are various factors to consider. Some children may require non complex assessment, whereas other children may require a more complex assessment taking various lengths of time. Also, an assessment that may include an ASD assessment, may take a longer period of time to complete. Additionally, depending on the requirements of the child, some assessments require the input of various disciplines or a combination of disciplines for example OT and or SLT and or psychology and or physiotherapy assessment.

Slaintecare funding has been provided on a once off basis and is strictly time limited. Each CHO has an agreed plan that will focus on completing assessments in as timely a fashion as possible, having regard to significant competing priorities with regard to COVID-19. These plans will be multifaceted and will include a range of actions including:

- a) Restoration of relevant clinicians to children's disability services: All areas have been asked in the first instance, to ensure that all clinicians reassigned to COVID-19 related duties should be returned to their pre-existing roles and participate in the AON process.
- b) Waitlist initiative utilising existing clinicians working overtime at weekends or evenings: This approach will have most impact in areas that have relatively small numbers of overdue assessments. CHOs will ensure that clinicians in Section 38 and Section 39 organisations, as well as within Primary Care and Mental Health Services are encouraged to participate in this overtime initiative. This has the potential to provide a valuable opportunity to support the upskilling of staff who do not usually participate in AONs.
- c) Procurement of private assessments: CHOs will engage with private providers in their areas to procure private assessments where appropriate.
- d) Commitment to filling maternity leaves: Where existing teams have vacant maternity leaves during the defined period immediate efforts will be made to fill the resulting vacancies.
- e) Recruitment of Additional Clinical Staff for fixed term contracts: Because of the time bound nature of this project the recruitment of additional therapists and psychologists will only be considered in areas with very high numbers of overdue assessments.

Recruitment of short term assessment teams is intended to supplement work done under points a – d and will only be proposed in areas where there are exceptionally high rates of overdue assessments and where there is a realistic expectation that clinicians can be secured for this work.

The funding allocated is strictly for the purposes of addressing overdue Assessments of Need and will not be targeted towards intervention.

Overall Reform of Children's Disability Services - Progressing Disability Services Programme

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

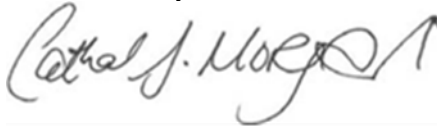
the ongoing roll out of Progressing Disability Services for Children and Young People (PDS). This requires the reorganisation of all current HSE and HSE funded children's disability services into geographically-based Children's Disability Network Teams (CDNTs).

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.

The HSE is establishing 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.

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**