



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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6th October 2020

Deputy Dara Calleary
Dail Eireann,
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Dear Deputy Calleary,

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 25568/20

To ask the Minister for Health when essential services such as early intervention assessment and speech and language therapy will recommence; his views on whether Covid-19 restrictions are resulting in the suspension of services and is having a detrimental effect on children awaiting services; the steps being taken to recommence services and to erase the waiting list; and if he will make a statement on the matter.

HSE Response

In preparing for and responding to COVID-19 and to fully align with Public Health guidance as recommended via the NPHET, the HSE and its partner service providers put in place a range of measures. These 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.

Children's Disability Services were stepped down in March 2020 in line with government recommendations to minimise spread of COVID-19. Through the pandemic, services continued to be provided on the phone/online and also, face to face for some children and families with high prioritised needs, taking all of the required infection prevention and control (IPC) precautions and in line with HSE's Alternative Models of Support (Non-Residential)(March 31st). Some services continued with staff including therapists such as speech and language therapists working with service users and their families remotely and using technology in new and effective ways.

On July 31st, the HSE issued the Guidance to Support Resumption of Children's Disability Services:

<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/guidance-to-support-resumption-of-children-disability-services.pdf>

This guidance applies to all Children's Disability Network Teams and those services planning reconfiguration into CDNTs. The Guidance clearly maps the pathway of access to services and supports, commencing with on phone/online supports, and where that does not meet the needs of the child and/or their family, moving to face to face interventions and what is required to do so safely

The HSE's Chief Clinical Officer also issued Interim Guidance on Conducting Assessments in Disability Services. This document which was circulated in July 2020 applies to both children's and adult services.

As an additional response to the COVID-19 pandemic, Special Needs Assistants were temporarily reassigned from the Department of Education & Skills to support HSE funded children's disability services. At June 30th, when this reassignment ceased, 263 SNAs were matched to children with complex needs, providing a range of centre and home based supports.

A further cross sectoral agreement facilitated the allocation of SNAs on a voluntary basis to support a range of HSE led summer programmes for children with complex needs.

The HSE, in partnership with Section 38 and Section 39 service providers, schools, preschools, community groups and sports partnership organisations provided a range of supports for children with complex needs during July / August 2020. Children's Disability Services worked with SNAs to deliver these supports in schools, community centres, homes and other locations across the country. Examples of the programmes provided included:

- In home supports to provide short respite breaks for families;
- SNAs working with Family Support Workers to provide in home supports for children with high support needs;
- SNAs implementing home programmes developed by Children's Disability Services;
- Centre based day respite;
- Centre based day respite with added therapeutic interventions;
- 3 day / week community run summer camp extended to 5 days / week with HSE and SNA support;
- Horse riding for 3 hours per day (weekly for 3 weeks);
- 1 week yoga camp for children with ASD;
- 1 week surf camp for children with ASD;

In addition, children's disability services provided support to a number of DES school based programmes.

Under PDS, the HSE continues to establish 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.

Each Community Healthcare Organisation has well established Local Implementation Group(s) to progress the implementation of this project in their local area. These groups have developed Project Initiation Documents and Implementation Plans specific to their area. The National Community Operations – Disability Team through the National Children's Programme Oversight Group provides support to the Community Healthcare Organisations in this regard.

Please note that all HSE Areas planning reconfiguration continue to have significant Early Intervention and School Age 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.

In the context of the Governments Resilience & Recovery Framework (2020 – 2021), the HSE regards the provision of disability services 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 residential, including respite, and day services in line with public health guidance and direction and having regard to the availability of staffing resources.

This must be supported by way of assurance and oversight from the HSE's Chief Clinical Officer along with the NPHET, so that we can do so in a safe manner. This means that childrens services including early intervention assessment and speech and language therapy, whilst being delivered in new ways, will gradually be

re-introduced to children with disabilities. Therefore staff will be required to revert to their substantive assignment as part of a planned and co-ordinated approach in each CHO.

The HSE has recently commenced a recruitment campaign for staff to support community testing facilities for COVID-19. The recruitment of staff for these roles will support the return of staff including speech & language therapists and other clinical staff to their substantive roles

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 provides up to date information resources in respect of covid: www.hspc.ie

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

In addition, the HSE welcomes the recent announcement from Minister for Health Stephen Donnelly TD and Minister of State for Disability Anne Rabbitte TD that €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

Sláintecare Funding

In addition to the measures above, €7.8 million has been allocated by Sláintecare to facilitate the HSE and its funded service providers to address the overdue Assessments of Need.

This 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.

Yours sincerely,



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



Seirbhís Sláinte
Níos Fearr
á Forbairt

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Better Health
Service