

Oifig an Cheannaire Oibríochtaí,

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

Office of the Head of Operations,

Disability Services/Community Operations, 31-33 Catherine Street, Limerick.

T: 00353 (0) 61 483369

Suíomh Gréasáin/Website: http://www.hse.ie

4th May 2021

Deputy Donnchadh Ó Laoghaire, Dail Eireann, Leinster House, Kildare Street, Dublin 2.

e-mail: donnchadh.olaoighaire@oireachtas.ie

Dear Deputy Ó Laoghaire,

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 18256/21

To ask the Minister for Health if measures have been put in place to ensure new referrals for assessment of need are seen in a timely fashion during the transition from current services to the progressing disability service model.

PQ 18258/21

To ask the Minister for Health if steps have been put in place to ensure new referrals for assessments of needs are seen in a timely fashion during the transition from current services to the progressing disability service model.

HSE Response

Since the Disability Act commenced 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 throughout 2020, this figure averaged 54%. 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.

As required by the Act, applications for Assessments of Need are managed in strict chronological order.

Assessment of Need is reported on a quarterly basis and activity for Quarter 1 indicates that there has been significant progress in the number of Assessment of Need reports completed during the Quarter. This has led to a significant reduction in the total number of applications 'overdue for completion', which now stands at 3,103 (excluding those applications for which an extended time-frame was



negotiated with the parent on the grounds of there being exceptional circumstances as provided for in paragraph 10 of the regulations). The increase in activity in Q1 can be attributed to the additional funding allocated to the AON process via Slaintecare. This has been utilised to provide additional assessments through a range of options including overtime for existing staff and private procurement.

In August 2020 the HSE secured €7.8m to address overdue Assessments of Need (AON). This funding was provided on a once off and strictly time bound basis to eliminate all AONs overdue at 30th June 2020. This funding provided a very welcome and timely opportunity to address AON backlogs as implementation of the Standard Operating Procedure for Assessment of Need and the reconfiguration of all children's disability services to Children's Disability Network Teams (CDNTs) will ensure that further backlogs do not occur. Furthermore, the elimination of these waiting lists will support the new CDNTs to deliver child and family centred services in line with the Progressing Disability Services for Children & Young People (PDS) model.

Each Community Healthcare Organisation developed a plan to address their backlog of overdue Assessments of Need through:

- Overtime initiative for existing therapists at weekends / evenings
- Procurement of private assessments
- Short term recruitment of additional staff

The impact of COVID 19 restrictions also required clinicians to deliver some of these assessments remotely.

Significant numbers of assessments have been completed in the period since September 2020 and it is anticipated that most of the CHO areas will have eliminated their backlogs by the end of Quarter 2 2021.

The latest data available shows that as at 31st March 2021, CHOs 1, 2 and 4 had cleared those assessments that were overdue at 30th June 2020. Across the country 71% of those assessments have been completed.

	AONs overdue @ 30/6/20	AONs completed @ 31/3/21	% Completed
CHO1	138	138	100%
CHO2	100	100	100%
СНОЗ	589	429	73%
CHO4	1098	1098	100%
CHO5	643	461	72%
CHO6	257	197	77%
CHO7	1056	680	64%
CHO8	764	636	83%
CHO9	1913	900	47%
Total	6558	4639	71%

Allocation of Therapy Posts

100 therapy posts were allocated to children's disability services under the HSE National Service Plan 2019. These posts were funded at basic grade therapist level. Posts were allocated to CHO areas based on the numbers of overdue Assessments of Need in each area as well as taking cognisance of



the existing ratio of staff to the number of children with disabilities in each area. A further 100 posts have been allocated under the HSE National Service Plan 2021.

Children's Disability Network Teams (CDNT)

The implementation of the Progressing Disability Services for Children & Young People (PDS) programme is agreed Government and HSE policy. This policy supports the reconfiguration of children's disability services to provide equitable, child and family centred services based on need rather than diagnosis. The PDS programme will ensure that services are provided for children with complex needs regardless of where they live or where they go to school. A total of 91 Children's Disability Network Teams (CDNT) are being established to provide services and supports for all children with complex needs within a defined geographic area. It is envisaged all 91 CDNTs will be established by end Q2 2021.

CDNTs are teams of health and social care professionals, including occupational therapy, psychology, nursing, physiotherapy, speech and language therapy, social work and others. The team will work closely together in a family centred model, focussing on the child's and family's own priorities. Once all teams are in place, every child with complex needs will have access to a team, regardless of the nature of their disability, where they live, or the school they attend.

Children and their families will have access to the full range of services and supports of the CDNT according to their individual needs. This includes universal, targeted and specialist supports, such as individual therapeutic intervention and access to specialist consultation and assessment when needed. Supports will be provided as is feasible in the child's natural environments - their home, school and community.

Progressing Disability Services for Children and Young People Programme (PDS) is a significant change programme for the provision of services and supports for children from birth to 18 years of age, in line with Slaintecare and the Programme for Government, in order to:

- Provide a clear pathway and fairer access to services for all children with a disability.
- Make the best use of available resources for the benefit of all children and their families.
- Ensure effective teams are working in partnership with families and with education staff to support children with a disability to reach their full potential.

PDS aligns with two clear objectives of The Sláintecare Report to:

- Provide the majority of care at or as close to home as possible.
- Create an integrated system of care with healthcare professionals working closely together.

Children's Disability Network Teams (CDNT) are being established to provide services and supports for all children with complex needs within a defined geographic area.

CDNTs are teams of health and social care professionals, including occupational therapy, psychology, nursing, physiotherapy, speech and language therapy, social work and others. The team will work closely together in a family centred model, focussing on the child's and family's own priorities. Once all teams are in place, every child with complex needs will have access to a team, regardless of the nature of their disability, where they live, or the school they attend.

Children and their families will have access to the full range of services and supports of the CDNT according to their individual needs. This includes universal, targeted and specialist supports, such as individual therapeutic intervention and access to specialist consultation and assessment when needed. Supports will be provided as is feasible in the child's natural environments - their home, school and community.



Under PDS, transition plans will be developed with families and special schools to ensure a smooth and safe transition from what is often a unidisciplinary service into the multidisciplinary team over a defined period of time.

On full implementation in mid-2021, there will be 91 CDNTs covering the country and every child with complex needs will have access to a CDNT as close to their home as possible.

Yours sincerely,

Dr. Cathal Morgan,

Head of Operations - Disability Services,

Community Operations