



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

Office of the Head of Operations,
Disability Services/Social Care Division,
31-33 Catherine Street, Limerick.

T: 00353 (0) 61 483369
Suíomh Gréasáin/Website: <http://www.hse.ie>

16th December 2021

Deputy Pauline Tully,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: pauline.tully@oireachtas.ie

Dear Deputy Tully,

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: 59631/21

To ask the Minister for Health the estimated number of additional therapy posts that are needed to fully resource children's disability network teams to an adequate level that will ensure timely access to both an assessment of need report and the subsequent access to the interventions identified in the assessment of needs report; and if he will make a statement on the matter.

PQ: 60282/21

To ask the Minister for Health the number of children with a disability in each CHO; the number of therapists working as part of a children's disability network team in each CHO and by therapy speciality provided, in tabular form; and if he will make a statement on the matter.

PQ: 60283/21

To ask the Minister for Health the number of therapists working with the children's disability service in each CHO in 2018, 2019, 2020 and to date in 2021 by therapy speciality provided, in tabular form; and if he will make a statement on the matter.

HSE Response

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.

Therapy services for children are provided through Primary Care Teams in Community Healthcare Organisations to children and young people requiring assessment, diagnosis and treatment. Children with complex needs access these supports through Children's Disability Network Teams. Children do not require an Assessment of Need under the Disability Act (2005) to access any of these services. Parents, health or education professionals may refer children directly.

A number of service improvements are being introduced that, when implemented, will help improve access to services including therapy services for children with disabilities and developmental delays.



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 across all statutory and non-statutory organisations into Children's Disability Network Teams (CDNT) to provide equitable, child and family centred services based on need rather than diagnosis, where the child lives or goes to school.

The PDS model addresses the previous inequity in service provision whereby there may have been an excellent service for some children and little or no service for others. This variance may have been linked to diagnosis, age group or geography. Under the PDS programme children's disability services are changing from diagnosis based to needs based, so that all children with a disability or developmental delay have access to the right service based on their needs no matter where they live.

The National Policy on Access to Services for Children & Young People with Disability & Developmental Delay policy provides a single point of entry, signposting parents and referrers to the most appropriate service (Primary Care for non-complex functional difficulties and Children's Disability Network Teams for complex functional difficulties).

The HSE is committed to the full implementation of the PDS programme. PDS is a significant change for the provision of services and supports for children from birth to 18 years of age, in line with Sláintecare 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 (CDNTs)

In line with the PDS model, resources assigned to children's disability services are allocated to the birth – 18 CDNTs, 91 Children's Disability Networks (CDN) have aligned to 96 Community Healthcare Networks (CHNs) across the country and each Children's Disability Network has one CDNT providing services and supports for children aged from birth to 18 years of age. Every child across the country with complex needs arising from their disability will have access to a CDNT

CDNTs are teams of health and social care professionals, including nursing, occupational therapy, psychology, physiotherapy, speech and language therapy, social work and others. The team works closely together in a family centred model, focusing on the child's and family's own priorities.

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.

Since 2019, 285 development posts have been allocated to children's disability services across the country. This is broken down as follows:

- 100 posts provided in NSP 2019
- 100 posts provided in NSP 2021
- 85 posts for services in special schools approved mid 2021

The allocation of posts by CHO is summarised in table below:



Allocation of Development Posts by CHO			
	2019	2021	2021 Special School Posts
CHO1	12	14.7	1
CHO2	3.5	11.1	4.4
CHO3	12	13.4	0
CHO4	6	7.5	5.8
CHO5	15	11.7	4.3
CHO6	3.5	6.7	23.69
CHO7	13	10.7	15.9
CHO8	19	12.3	2.65
CHO9	16	11.9	27.75
Total	100	100	85.49

The range of posts recruited / in recruitment in 2021 include; dietitians, occupational therapists, physiotherapists, psychologists, speech & language therapists, nurses and some administrative support. These posts have been assigned based on a number of factors, including the existing ratio of staff to the number of children with disabilities in each area.

The special school posts were approved by the Minister of State for Disabilities to facilitate the provision of in-reach services to those special schools that have heretofore provided a school based service. These staff members will be employed as part of the new CDNTs and will report to the Children's Disability Network Manager. CHOs will ensure that the allocation of any posts to CDNTs are targeted towards providing appropriate interventions.

Services in most parts of the country have now reconfigured to CDNTs. The remaining teams in Mayo will be established before the end of 2021 thereby all 91 CDNTs will be in place and delivering services at that time. The newly established CDNTs are currently providing services for children in prioritised groups while also validating their new caseloads.

With regard to the number of children with a disability in each CHO, it is accepted that 3.5% of children present with complex needs that will require support via an interdisciplinary CDNT. The table below provides this figure for each Community Healthcare Organisation area.

CHO	Children with Complex Needs
1	3,600
2	3,916
3	3,369
4	5,899
5	4,603
6	3,091
7	6,029
8	6,065
9	5,095
Total	41,667

With regard to the number of therapists currently working within CDNTs and additional therapists required, a staffing census of the CDNTs has been undertaken to help identify gaps and to inform a workforce plan for the sector.

A National Management Information System for all 91 CDNTs is in development and when implemented, will provide current data on caseloads and waiting lists for all CDNTs.

With regard to the number of therapists working with the children's disability service in each CHO in 2018, 2019, 2020 and to date in 2021 by therapy speciality please see useful weblink for information on HSE Staff levels and S38 Staff levels; Monthly reports are available here:



<https://www.hse.ie/eng/staff/resources/our-workforce/workforce-reporting/social-care.html>

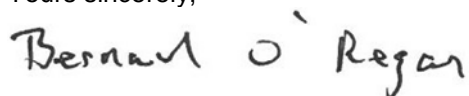
Please see table below which gives information regarding the Whole Time Equivalent (WTE) for Therapy Grades to end of October 2021.

Disability Services	WTE Dec 2017	WTE Dec 2018	WTE Dec 2019	WTE Dec 2020	WTE Oct 2021
Occupational Therapists	249	241	264	279	299
Physiotherapists	185	181	189	193	199
Dietitians	12	14	18	16	18
Speech & Language Therapists	283	279	293	307	306
Social Workers	221	219	219	228	235
Psychologists	224	207	204	229	243

Please note that these reports refer to staff numbers in the HSE and in S38 organisations and do not include staff employed in S39 organisations.

Additionally, the staff numbers reported serve all age groups and the reporting system cannot currently apportion the staff working in children's disability services specifically.

Yours sincerely,



Bernard O'Regan
Head of Operations - Disability Services,
Community Operations

