



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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

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6th April 2021

Deputy Matt Shanahan,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: matt.shanahan@oireachtas.ie

Dear Deputy Shanahan,

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 15310/21

To ask the Minister for Health if he will address a matter (details supplied) regarding changes to the organisation and provision of health services to children and young persons with developmental delay and disabilities; and if he will make a statement on the matter.

Details supplied: Re Proposed changes to organisation and provision of health services to children and young people with developmental delay and disability. The new policy intends to implement new care pathways to see children with complex needs receive their services from newly formed, interdisciplinary, Children's Disability Network Teams (CDNTs), while children with non-complex needs will receive their services in Primary Care. The designation of referral centre appears to be made on city and county boundary designation and for a number of Waterford constituent families residing within 5 miles of their present access center sees them being redirected to centers almost 30 miles away because of their address designation. Can the minister confirm that care decisions will be based around the most appropriately located centre rather than whether the client lives in a metropolitan or rural address and will the minister make a statement on the matter.

HSE Response

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 Slaintecare 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.

The National Policy on Access to Services for Children & Young People with Disability & Developmental Delay (2019) provides nationally agreed criteria for access to primary care services and CDNTs. This policy has been developed to ensure consistency across all areas. As outlined in this policy, the child's residence determines the CDNT or primary care service which has responsibility for their service delivery. This policy also requires each Community Healthcare Organisation to have a process in place that will consider any exceptional individual circumstances that may require a child to access an alternative CDNT to that determined by their home address.

Yours sincerely,



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