



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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7th December 2021

Deputy Mark Ward
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Dear Deputy Ward

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 57652/21

To ask the Minister for Health his plans to address the backlog for assessment of needs; the reason for the current backlog; the estimated timeframe to address the backlog; and if he will make a statement on the matter.

PQ 57657/21

To ask the Minister for Health the number of assessment of needs that resulted in a diagnostic assessment in the past year; and if he will make a statement on the matter.

PQ 57658/21

To ask the Minister for Health the breakdown of the €7.8 million provided to address the overdue assessment of need in August 2020; the amount spent on private providers; and if he will make a statement on the matter.

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, 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 an Assessment of Need (AON) process is an accumulative process in terms of numbers of children seeking access.

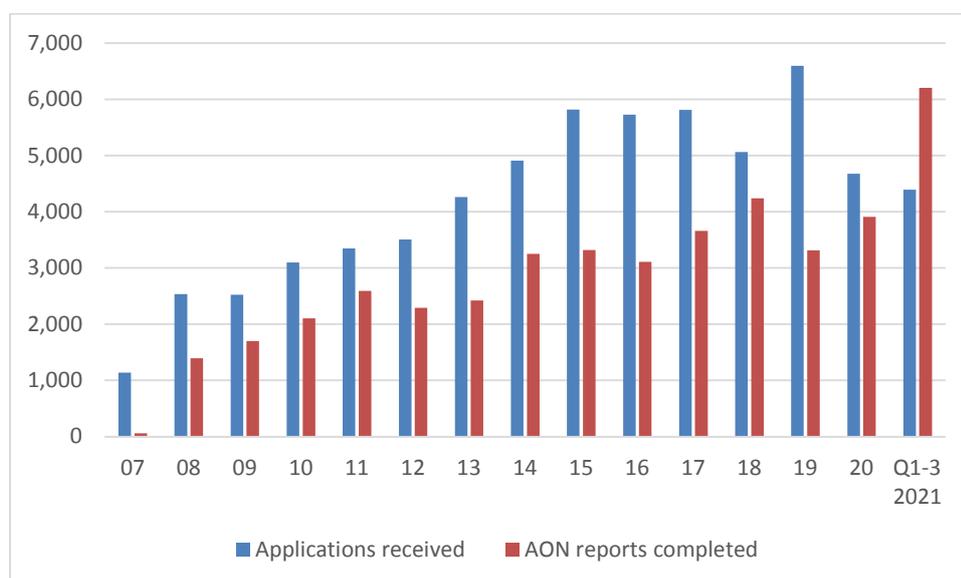
Part 2 of the Disability Act (2005) provides for an AON for persons suspected of having a disability born on or after 1st June 2002. The Act and its associated regulations set out the requirements with regard to the time frame for this assessment. The AON is a legal process and as such does not align

with the HSE commitment to delivering equitable, child and family centred services for children with disabilities. It is not the gateway to services and parents can arrange direct referrals to services without going through the AON process.

Assessment of Need is reported on a quarterly basis, so the latest information available is end of Quarter 3 2021. Activity for the year (up to end Quarter 3) indicates that there has been significant progress in the number of Assessment of Need reports completed during the year, 6,204 by end of September. This has led to a significant reduction in the total number of applications 'overdue for completion', which now stands at 2,720 (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 detail regarding the numbers of overdue Assessments of Need at 30th September 2021 is provided below.

CHO	Overdue to Commence	Overdue to Complete*	Total Overdue
1	32	9	41
2	1	9	10
3	3	33	36
4	452	736	1188
5	23	95	118
6	3	65	68
7	542	898	1440
8	9	145	154
9	189	730	919
Total	1254	2720	3974

The number of AON reports completed in the first 9 months of 2021 is the highest since the commencement of the Act in 2007. The graph below provides detail regarding the number of applications received and reports completed each year.



The increase in activity to date in 2021 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. Seven of the nine CHO areas have achieved significant reductions in the numbers of overdue AONs since the commencement of this project.

It should be noted that the Quarterly report does not capture detail regarding the number of AON reviews completed. The Disability Act requires one review of an applicants AON to be completed

within one year. Historically, the HSE did not provide such reviews as it did not have the capacity to do so. As a consequence of the increasing litigation around AON, the HSE has, in parallel, been obliged to complete significant numbers of reviews.

In addition, the HSE has provided a higher number of service statements in 2021 than in any year since commencement of Part 2 of the Act. In the first nine months of this year, 3,108 service statements have been completed. The Act requires an annual review of the service statement for each child with a disability. Again these annual reviews are not captured in the data base system. The HSE is struggling to meet its obligations in this regard as it represents a huge administrative burden.

Standard Operating Procedure for AON

An internal HSE review of the practice of implementation of Part 2 of the Act in 2016 confirmed anecdotal evidence that the approach to AON was not consistent across the country. It was apparent that practice varied widely across the 9 Community Health Organisation (CHO) areas as well as within CHO areas. While a large number of "Guidance Notes" regarding AON processes had been issued since 2007, there had been no nationally standardised or agreed definition of an Assessment of Need. This led to an inconsistent approach to assessment as well as inequity in terms of time afforded to 'assessment' versus 'support or treatment' interventions with children and their families.

To help address this situation, the HSE has implemented a Standard Operating Procedure (SOP) for the Assessment of Need process to ensure that;

- Children with disabilities and their families access appropriate assessment and intervention as quickly as possible.
- The approach to Assessment of Need is consistent across all areas.

In line with this procedure, Stage 2 of the Assessment of Need process comprises a Preliminary Team Assessment that will identify initial interventions and any further assessments that may be required. This preliminary assessment will usually be undertaken by a children's disability service that are also tasked with delivering intervention. The Standard Operating Procedure provides an indicative timeframe for this assessment, however, the format for each assessment is a matter for the assessing clinicians and will be based on the information provided through the stage 1 desktop assessment. While not required by the Act, diagnostic assessments will continue to be provided, as appropriate, and these will be captured in the child's Service Statement as part of the Assessment of Need process.

These changes are intended to alleviate the current situation where children in some parts of the country may wait a number of years before they can access an assessment. During this waiting period, they often have little or no access to intervention or support. It is intended that the changes in the SOP, particularly the new preliminary assessment, will facilitate children with disabilities to access assessment in a timelier fashion.

The HSE believes that the implementation of this SOP and the reorganisation to Children's Disability Network Teams (CDNTs), will have a positive impact on the lives of the children and young people who require our services.

Preliminary Team Assessment

The format for each PTA is a matter for the assessing clinicians. The guidance for assessors included in the SOP suggests that this assessment should include;

- Discussion with parents / guardians to establish case history information, explore their concerns and profile their goals for the child
- Assessment of the child's needs through the following as appropriate

- Informal observation
- Play based assessment
- Administration of screening assessment tools
- Administration of formal or informal assessment tools
- Discussion with the child / young person

Furthermore, the guidance also states that no family should leave the clinic without some strategies to support the child / young person.

Some teams may have scheduled initial appointments with children and families that coincide with the timeframe for that child's AON. In such cases teams are not expected to duplicate and may complete their AON report based on the scheduled assessment.

Activity data with regard to Preliminary Team Assessments for the first nine months of 2021 indicates that 3,860 PTAs have been completed. 86% of children were referred for intervention on the basis of this assessment with 53% requiring some further assessment. Children requiring follow on diagnostic assessments are included in this figure.

Funding to address overdue Assessment of Need

In August 2020 the HSE secured €7.8m to address overdue Assessments of Need (AON). 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 plans to address backlogs in their areas. These plans took a multifaceted approach and included:

1. Restoration of relevant clinicians to children's disability services

All areas in the first instance ensured that all clinicians reassigned to COVID-19 related duties were returned to their pre-existing roles and participate in the AON process.

2. Waitlist initiative utilising existing clinicians working overtime at weekends or evenings

This approach had most impact in areas that had relatively small numbers of overdue assessments.

3. Procurement of private assessments

4. Recruitment of Additional Clinical Staff for fixed term contracts of 6 months from 1/9/20

Because of the time bound nature of this project the recruitment of additional therapists and psychologists could only be considered in areas with very high numbers of overdue assessments. Rapid recruitment in partnership with lead agencies facilitated, in some cases, the establishment of a dedicated AON assessment team for a defined 6-month period. These teams were established using a mix of experienced and new staff.

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). This was calculated on the basis of overdue assessments at 30th June 2020.

CHO	Total Overdue Assessments	Cost
CHO1	138	€214,386

CHO2	100	€158,808
CHO3	589	€680,559
CHO4	1,098	€1,163,299
CHO5	643	€692,874
CHO6	257	€362,852
CHO7	1,056	€1,702,380
CHO8	764	€901,029
CHO9	1,913	€1,973,896
Total	6,558	€7,850,084

The table below shows the progress made up to end September 2021 in relation to the backlog of overdue assessments, which has reduced from 6,558 in June 2020 to 518 at end of September 2021. CHOs 1, 2, 4, 5, 6 and 7 have cleared those assessments that were overdue at 30th June 2020. Across the country, 92% of those assessments have been completed. (Note: This activity data refers only to those AONs that were overdue at 30/6/2020).

CHO	Overdue @ 30/6/20	Outstanding @ 30/9/21
CHO1	138	0
CHO2	100	0
CHO3	589	10
CHO4	1098	0
CHO5	643	0
CHO6	257	0
CHO7	1056	0
CHO8	764	6
CHO9	1913	502
Total	6558	518

It is acknowledged that while the CHOs have completed the AONs that were overdue in June 2020, further backlogs have built up in some CHO areas that are experiencing challenges whereby as a consequence of litigation, they are required to prioritise assessments and reviews required under Court Orders. The CHOs are continuing to focus on eliminating their overdue AONs

Overall Reform of Children's Disability Services

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 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 diagnosis, where they live or where they go to school.

The HSE is establishing a total of 91 Children's Disability Networks across each of the nine CHOs comprised of specialist inter-disciplinary Children's Disability Network Teams to work with children with complex disability needs. This reconfiguration of services under the Progressing Disability Services for Children & Young People (PDS) programme is in line with Health Service Reform and the implementation of Community Healthcare Networks under Sláintecare.

Since 2019, 285 development posts have been allocated to children's disability services across the country. This includes 100 posts allocated under the HSE National Service Plan 2021. 185 development posts were allocated to children's disability services across the country in 2021. 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.

In June 2021, the Minister of State for Disabilities confirmed that the HSE should progress the recruitment of 85 whole time equivalent (wte) posts 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 must 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 will be established before the end of 2021, thereby all 91 CDNTs will be in place and delivering services at that time.

Yours sincerely



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Head of Operations - Disability Services,
Community Operations**