



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Oifig an Cheannaire Oibríochtaí,
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8th December 2021

Deputy Mark Ward,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
e-mail: mark.ward@oireachtas.ie

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 58213/21

To ask the Minister for Health the cost to the HSE of completing an assessment of needs privately; and if he will make a statement on the matter.

PQ 58214/21

To ask the Minister for Health the number of assessment of needs completed privately by the HSE in each of the years 2016 to 2020 and to date in 2021, by CHO in tabular form.

PQ 58940/21

To ask the Minister for Health if the HSE refers children to private service providers for treatment following an assessment of needs in which a service is identified such as occupational therapy, psychology and speech and language; and if he will make a statement on the matter.

HSE Response

Part 2 of the Disability Act (2005) provides for an Assessment of Need (AON) for persons suspected of having a disability born on or after 1st June 2002. Prior to the implementation of the HSE's Standard Operating Procedure for AON in January 2020 the approach to AON was not consistent across the country. Furthermore, each Assessment of Need varied depending on the assessments identified for the applicant. It is not therefore possible to provide a cost for a private AON.

In August 2020 the HSE secured €7.8m to address overdue AONs. This funding was allocated to Community Healthcare Organisations based on the number of overdue assessments in their area at 30th June 2020. This allocation provided approximately €1,200 per assessment.

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

The implementation of the Standard Operating Procedure for AON has standardised the approach to assessments under the Disability Act (2005). The Preliminary Team Assessment format means that although the assessment will vary depending on the child's presenting needs, the broad format will be consistent as required by the iHIQA Standards for Assessment of Need. It is intended that these assessments will be undertaken by the service that will provide on-going support for that child, usually their Children's Disability Network Team (CDNT).

Following an AON, the Disability Act (2005) requires the HSE to provide a Service Statement for children who are determined to have a disability. These statements must outline the services that the HSE will provide and the timeframe for same. As required under section 11.7 (e) of the Act, the officer preparing this statement must have regard to

"in the case of a service to be provided by or on behalf of the Executive, the need to ensure that the provision of the service would not result in any expenditure in excess of the amount allocated to implement the approved service plan of the Executive for the relevant financial year"

The HSE does not refer children to private providers for intervention subsequent to their AON.

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.

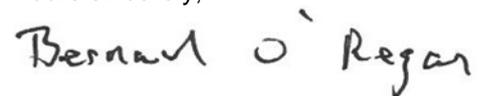
The HSE is establishing a total of 91 Children's Disability Networks across each of the nine CHOs comprised of specialist inter-disciplinary Children's Disability Network Teams to work with children with complex disability needs. This reconfiguration of services under the Progressing Disability Services 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,



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