



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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28th October 2021

Deputy Sorca Clarke,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: sorca.clarke@oireachtas.ie

Dear Deputy Clarke,

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 48666/21

To ask the Minister for Health the details of the additional resources applied per centre to reduce waiting lists for preliminary team assessment as per the statement made by him on 28 September 2021 in Dáil Éireann; 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, 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.

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 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.

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%



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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 @ 31/9/21
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

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 planned 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.

Resources

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.

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).

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 allocation of funding to each area was based on the number of overdue assessments at 30th June 2020.

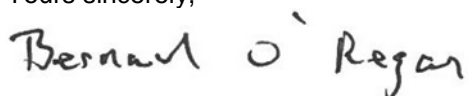
In addition to the above, to support the rollout of Progressing Disability Services and the Children's Disability Network Teams (CDNTs), since 2019, 285 development posts have been allocated to children's disability services across the country. This includes:

- 100 therapy posts that were allocated to children's disability services under the HSE National Service Plan 2019. 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 was allocated under the HSE National Service Plan 2021. Funding for these posts facilitates each area to determine the discipline and grade required to address the gaps in their Children's Disability Network Teams.
- 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 in 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