



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

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25<sup>th</sup> July 2022

Deputy David Cullinane,  
Dail Eireann,  
Leinster House, Kildare Street, Dublin 2.  
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Dear Deputy Cullinane,

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 37417/22**

*To ask the Minister for Health the full list of companies providing staff that make up children's disability network teams broken down by company, the number of staff that each company provides to the teams, the funding allocated to each company other than the HSE to provide such staff, the cost per HSE employee and further broken down by each team and staff type; and if he will make a statement on the matter.*

**PQ 37418/22**

*To ask the Minister for Health the full cost of all services, assessments or interventions to children with disabilities provided by non-HSE organisations through children's disability network teams, broken down by year; and if he will make a statement on the matter.*

**PQ 37429/22**

*To ask the Minister for Health the full range of health and social care services for children with disabilities outsourced by the HSE through children's disability network teams broken down by year; and if he will make a statement on the matter.*

**PQ 37415/22**

*To ask the Minister for Health the way that the HSE ensures that contracted providers such as organisations (TTM Healthcare) and others are appropriately qualified and that any assessments or interventions are provided in line with the appropriate standards; the person in the HSE who is responsible for checking qualification and standards; the number of checks regarding qualification and standards were carried out since services were first contracted broken down by year; and if he will make a statement on the matter.*

**PQ 39392/22**

*To ask the Minister for Health the number of hours of therapy carried out by children's disability network teams in 2021 and to the end of June 2022, broken down by therapy and by month in tabular form; and if he will make a statement on the matter.*

**PQ 39394/22**

*To ask the Minister for Health the current number of funded but vacant posts in children's disability network teams by team and by post category; and if he will make a statement on the matter.*



## **HSE Response**

In Ireland, a wide range of disability services are provided to those with physical, sensory, intellectual disability and autism. Disability services focus on supporting and enabling people with disabilities to maximise their full potential, as independently as possible. Current policies are based on the principles of person-centredness to ensure insofar as possible that the supports for a person are based on individual assessed need, will and preference and to support people to remain as close to home and connected to their community as possible.

In 2022, Disability Services has been allocated c. €2.3 billion to provide a range of services throughout the country and is spent in line with nationally agreed policy for disability services, whilst at the same time endeavouring to maximise value. Services include Residential and Respite Services, Day Services, PA and Home Support Services, Children's Disability Services and Therapeutic Supports.

Over 60% of the resources available are allocated to provide a range of residential services to approximately 8,300 people with a disability for both children and adults. A further 20% is targeted at the provision of over 18,000 day places, for persons over 18 years of age and supports to nearly 25,000 people. The remaining 20% provides respite care services to just over 5,700 adults and children; almost 5 million personal assistant and home support hours, as well as multi-disciplinary teams and other community services and supports.

Disability services are delivered through a mix of HSE direct provision as well as through non-statutory service providers, and private providers. The relationship between these providers and the HSE is governed by way of a Service Arrangement (SA) or Grant Aid Agreement (GA) via the nine Community Healthcare Organisations. The HSE currently manages 1,045 SAs or GAs with a total of 419 organisations.

## **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. An additional 190 posts have been allocated this year to Children's Disability Services in addition to the 185 posts in 2021, which will support the implementation of family centred services across all CDNTs. These additional posts are intended to support the newly established CDNTs to prioritise intervention for children with complex needs.

In parallel, the recently published Department of Health Waiting List Action Plan provides for funding to address community waiting lists for children.

## **Children's Disability Network teams (CDNTs)**

In 2021, the remainder of ninety-one multidisciplinary CDNTs were established to provide services and supports for all children with complex needs within a defined geographic area.

Since 2019, more than 475 development posts have been allocated to children's disability services across the country. 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.

Work is ongoing on mapping specialised services and supports, and paediatric supports available and gap analysis for children with highly complex needs, in order to develop standardised approaches to integrated pathways of support for CDNTs and Primary Care staff.

A Children's Disability Network Team (CDNT) Staff Census and Workforce Review was undertaken in October 2021 and a final report has been issued to the Department of Health and relevant stakeholders. This report has provided valuable information on the number of staff working in the CDNTs by discipline and grade and staff vacancies at a point in time. This information is supporting targeted workforce planning by the HSE in consultation with the CDNT Lead Agencies to reinforce the skill mix of their teams to accommodate local population need.

Please see the National CDNT Census and Workforce Review 2021 Report attached, which provides much of the details you have requested in relation to the staffing of the CDNTs by employer at Oct 2021; the number of hours of therapy



available to the CDNTs; and the current number of funded but vacant posts in CDNTs. The data in this report does not include the 2022 development posts.

Please note that a National Management Information System for all 91 CDNTs, commencing roll out in Q4 2022, will enhance the collection and validation of current activity data and other important information to support service management and development for all CDNTs.

The CDNT Lead Agencies are detailed below together with the funding provided to each agency in 2021.

<b>Lead Agency</b>	<b>No. of CDNTs</b>	<b>Funding Allocated in 2021</b>
HSE	41	
Enable Ireland	20	€47,317,614
Brothers of Charity	6	€253,037,548
Central Remedial Clinic	5	€21,784.005
Avista (Daughters of Charity)	4	€134,072,991
St Michael's House	4	€101,420,456
Cope Foundation	3	€62,689,897
St Gabriel's	2	€3,520,039
St Joseph's Foundation	2	€21,650,687
Stewarts Care	2	€56,911,111
CoAction West Cork	1	€9,101,509
Kare	1	€25,630,207
<b>Total</b>	<b>91</b>	

Disability services are provided based on the needs of an individual rather than by the age of the individual or the actual type of disability or service required. Most of the Service Providers involved in the provision of Children's Disability Services also deliver a broad range of services to both Children and Adults, such as Residential, Respite and Day Services. Therefore, while we can provide details of the funding allocated to each Service Provider, the funding allocated specifically to Children's Disability Services is not routinely collated and aggregated into a statistical profile.

### **HSE Governance Framework**

All funded services are required to deliver safe and effective services within a defined budget allocation. The HSE must ensure that it prioritises available resources on the basis of meeting the health and social needs of people with a disability.

The HSE works in partnership with agencies to ensure the best level of service possible is provided to people with a disability and their families, within the resources available.

There is continuous engagement between the HSE, the Community Healthcare Organisations (CHOs) and these agencies to ensure resources are prioritised on the basis of meeting the needs of people with a disability and those caring for them.

The HSE has established a Governance Framework to cover funding relationships with all Non Statutory Agencies. The framework was introduced in order to implement the legislative provisions of the Health Act, 2004 and to reflect the requirements for public accountability whereby the HSE is legally obliged to account for all public expenditure on health and personal social services. There is also a requirement to ensure that value for money is being achieved. In this regard, the framework takes account of the 2005 VFM report of the Comptroller and Auditor General on disability funding. It is the policy of the HSE, that all funding arrangements with non-statutory agencies are formalised by complying with this Governance Framework which has 2 different components:

Part 1: - A Service Arrangement that is signed every 3 years by both parties and sets out the legal requirements that the agency must comply with to receive funding for the provision of services.

Part 2: - A Set of 10 Schedules which must be completed and signed by the Agency and the HSE which sets out the detail of the service and the exact funding that the HSE is providing for the delivery of this service. This Set of Schedules also identifies the quality standards and best practice guidelines to be adhered to in the provision of all services, along



with the process for managing complaints in relation to service provision. The service arrangement between the HSE and a provider is an important contractual document that sets out the funding provided by the state to deliver services, and is underpinned by governance and quality policy frameworks. The part 2 service level agreement is completed on an annual basis between the agency and the local Community Healthcare Organisation. As part of the governance process, the HSE receives signed audited accounts from organisations on an annual basis.

Schedules are renewed annually by local Service Managers with each provider to reflect the funding for the year in question and the quantum of services to be provided for same.

As Service Providers are obliged to deliver services in line with a Service Arrangement, the HSE is required to monitor the delivery of the services on an ongoing basis. Expected performance levels must be clearly set out in the relevant Schedules. In particular, Schedule 3 - Service Delivery Specification will contain the functional details of the services to be provided under the arrangement; Schedule 4 - Performance Monitoring will contain the agreed performance management requirements and Schedule 5 – Information Requirements will provide business critical information to the Executive i.e. Annual Reports, Audited Accounts and other evaluation reports.

In order to meet these requirements, a clearly defined review process under the SA is implemented in line with the relevant Clauses and Schedules of the Arrangement. This review includes both submission of documentation and a schedule of review meetings and may entail inspections of the services by the HSE if deemed appropriate.

Yours sincerely



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

