

Oifig an Príomhoifigeach Eagraíocht Cúram Sláinte Pobail Lár Tire, An Lú, An Mhí

Feidhmeannacht na Seirbhíse Sláinte, Oifig Cheantair, Bóthar Ardáin, An Tulach Mhór, Co. Uíbh Fhailí. Office of the Chief Officer Community Health Organisation Midlands Louth Meath

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Ms Patricia Ryan T.D., Dáil Éireann, Leinster House, Kildare Street, Dublin 2

Re: Parliamentary Question - 29951/22

To ask the Minister for Health the current waiting list for the Children's Disability Network Teams in County Laois broken down by waiting time in tabular form.

Dear Deputy Ryan,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and I outline the position as follows.

Progressing Disability Services for Children and Young People is being rolled out across the CHO and this will mean a change in how services are being provided to children with disability.

In Laois there are two (2) Children's Disability Network Teams, namely Network 12 (covering Portlaoise, Stradbally, Mountrath, Borris in Ossary, Abbeyleix and Ballickmoyler) and Network 11 (covering Mountmellick, Portarlington and Edenderry).

Waiting lists are not kept for individual disciplines as this does not reflect the nature of the support provided for children with complex needs. There will be one multi-disciplinary team which will provide a more integrated model of service delivery.

The CDNTs are currently reviewing all children within the service and in the process of planning and delivering on Individual Family Service Plans (IFSPs) for children within the service. An IFSP is an Individual Family Support Plan and is developed by the family, child and the members of the CDNT. It guides how the team supports the child.

This is a process which requires getting to know the child and their needs (if not already known), preparing the family to create the IFSP and the development of the document along with the development of the supports to address the identified goals which include universal, targeted, and individual supports. Each IFSP is estimated to take up to 12 clinical hours across 2-3 staff to develop over a period of 6 weeks. This does not include the supports delivered after the IFSP to meet the goals and priorities identified.



In Network 12 there are currently approximately 822 children who are registered with the team. It is estimated 450 children with complex needs will require an IFSP within the model of service.

In Network 11 there are currently approximately 600 children who are registered with team of which an estimated 350 children with complex needs will require an IFSP.

Children with non-complex needs will likely not receive an IFSP, but will require MDT supports.

There are some children where the complexity of needs has not been confirmed and the Spraoi CDNT is planning to make contact with these families to further understand their needs.

Whilst waiting on provision of an IFSP, children can be provided some other Universal Supports inputs prior to this date depending on the need (Universal Supports are first line of input in format of groups, team facilitation, standardised parent workshops etc). MLM CHO are currently developing waitlist initiatives which families can avail of while awaiting their IFSP.

I trust the above is in order but please do not hesitate to contact me should you have any further queries in this regard.

Yours sincerely,

Des O'Flynn

Chief Officer

Midlands Louth Meath Community Health Organisation