



Oifig an Cheannaire Oibríochtaí,
Na Seirbhísí Míchumais/An Rannán Cúram Sóisialta,
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4th July 2023

Deputy Roisin Shortall,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: roisin.shortall@oireachtas.ie

Dear Deputy Shortall,

The Health Service Executive has been requested to reply directly to you in the context of the following parliamentary questions, which were submitted to this department for response.

PQ 29491/23

To ask the Minister for Children; Equality; Disability; Integration and Youth the number of assessment of need applications received by CHO in each of the last five years, in tabular form. -

PQ 29493/23

To ask the Minister for Children; Equality; Disability; Integration and Youth if children referred to children's disability network teams by a GP, public health nurse or other health official are automatically added to the assessments of need waiting list as covered by the Disability Act 2005; if not, if they are added to a separate list that is not covered by the Act; where a separate list that is not covered by the Disability Act 2005 is maintained, how a child can be added to the assessments of need waiting list covered by the Act; if this requires an application via an assessment of needs officer; the number of children on a separate list that is not covered by the Act, by CHO; their duration on this list; and if he will make a statement on the matter.

HSE Response

The National Policy on Access to Services for Children & Young People with Disability and Developmental Delay ensures that children are directed to the appropriate service based on the complexity of their presenting needs rather than based on diagnosis. Many children and adults with a disability who have support needs can be effectively supported within mainstream child and adult health services. This policy provides a single point of entry, signposting parents and referrers to the most appropriate service (Primary Care for non-complex functional difficulties and Children's Disability Network Teams for complex functional difficulties).

Children do not require an Assessment of Need as defined by the Disability Act (2005) in order to access a Children's Disability Network Team (CDNT) service. A healthcare professional or parent/carer can refer children with complex needs as a result of their disability to the CDNT, or to Primary Care for children with non-complex needs.

Children referred by parents or professionals to CDNT or Primary Care services are not added to the AON waiting list under the Disability Act 2005. Children with complex needs and their families awaiting CDNT targeted supports, including assessment and interventions, are offered evidence informed universal strategies based on individual needs and available staffing resources.



Assessment of Need under The Disability Act (2005)

The Disability Act (2005) provides a legislated right to an Assessment of Need (AON) that outlines the health and education needs for people born on or after 1st June 2002 who are suspected of having a disability, but does not include a legislated right to service provision as an outcome of that AON.

6,755 applications for AON were received in 2022. This was the highest number of applications received in any year since Part 2 of the Act was commenced in June 2007.

Please see the table below for a breakdown of the number of completed assessment of need applications received by each CHO in each of the last five years

CHO	Total for 2018	Total for 2019	Total for 2020	Total for 2021	Total for 2022
Area 1	110	240	265	440	455
Area 2	171	285	97	167	197
Area 3	546	719	413	478	395
Area 4	1132	1349	1097	734	683
Area 5	235	432	256	271	341
Area 6	258	340	245	323	495
Area 7	785	921	752	1224	1,745
Area 8	670	879	579	875	916
Area 9	1279	1431	970	1387	1,528
Totals	5,060	6,596	4,674	5,899	6,755

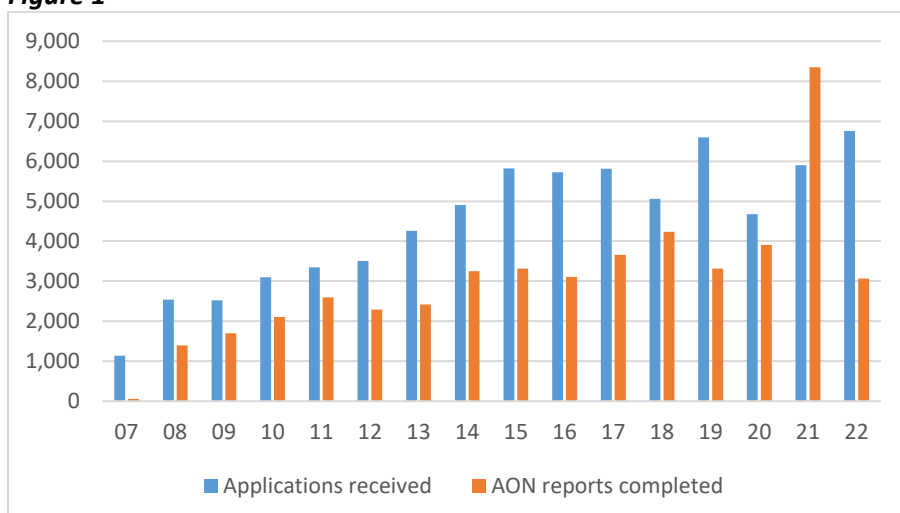
The numbers of applications for Assessment of Need under the Act have risen steadily since its implementation in June 2007. This rise is illustrated in the graph below

The non-commencement of the Education for Persons with Special Education Needs (EPSEN) Act (2004) is a significant contributory factor. When originally implemented it was envisaged that the Assessment of Need would apply to children aged less than five years. Following a High Court ruling in 2009 eligibility was expanded to include all persons born on or after June 1st 2002. This has also contributed to the rise in applications. 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 2022, this figure averaged 55%.

This is a reflection that the AON process is an accumulative process in terms of numbers of children seeking access.

The following graph illustrates the increase in applications and the corresponding increase in the number of AONs completed each year from end of 2007 to the end of 2022.

Figure 1



5,899 applications for AON were received in 2021 and 8,353 AONs were completed. As evidenced in the graph above, this was the highest number of completed assessments since Part 2 of the Act was commenced in June 2007.

The number of assessments completed in 2022 was 3,071. This reduction in numbers of AONs in 2022 was as a direct result of the High Court judgement in March 2022 in the case of CTM and JA v HSE.

High Court – Challenge to the Standard Operating Procedure for AON

The judgement of Ms Justice S Phelan in the case of CTM & JA v the HSE was delivered in March 2022. This judgment found that the Preliminary Team Assessment approach described in the HSE's Standard Operating Procedure for Assessment of Need does not meet the requirements of the Disability Act. This judgement in effect requires the HSE to deliver diagnostic assessments where necessary and appropriate as part of the Assessment of Need process. This ruling has a significant impact operationally and has resulted in a growth in the numbers of overdue Assessments of Need. The requirement for services to prioritise the statutory Assessment of Need process will also impact significantly on their capacity to provide necessary intervention / treatment for children with disabilities.

As a result of the Judgement, activity for the first quarter of 2023 indicates that there has been an increase in the total number of applications 'overdue for completion', which now stands at 5,484 (including 180 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).

CHO	Overdue	<1 month	1 - 3 Months	>3 Months
AREA 1	241	40	38	163
AREA 2	74	13	14	47
AREA 3	298	21	33	244
AREA 4	732	59	93	580
AREA 5	260	21	32	207
AREA 6	334	47	59	228
AREA 7	1630	126	232	1272
AREA 8	375	50	76	249
AREA 9	1540	126	198	1216
Total	5484	503	775	4206

The HSE has reviewed the files of all children who received a preliminary team assessment and engaged directly with families to establish what additional assessments will be required to meet the requirements of the Act. Overall activity for the first quarter of 2023 indicates that there are approximately 5,171 Preliminary Team Assessments requiring a diagnostic assessment.

A revised AON Standard Operating Procedure incorporating guidance on completion of clinical assessment will be shortly launched.

Children's Disability Network Teams (CDNTs)

As mentioned above, **children do not require an Assessment of Need to access health services. Parents may refer their child directly to their local Children's Disability Network Team (CDNT).**

91 Children's Disability Network Teams (CDNTs) are aligned to 96 Community Healthcare Networks (CHNs) across the country and are providing services and supports for children aged from birth to 18 years of age.

Regardless of the nature of their disability, where they live, or the school they attend, every child with complex needs and their families have access to the full range of family centred services and supports of their CDNT according to their individual needs. This includes universal, targeted and specialist supports, such as individual therapeutic intervention and access to specialist consultation and assessment when needed. Supports are provided as is feasible in the child's natural environments - their home, school and community.

Since 2019, more than 610 development posts have been allocated to children's disability services across the country. These posts have been assigned to teams based on a number of factors, including the existing ratio of staff to the



number of children with disabilities in each area. This figure includes 190 posts provided in 2022 as well an additional 136.3 WTEs to restore pre-existing services in 104 special schools.

The HSE continues to explore a range of options to enhance the retention and recruitment of essential staff across all aspects of the health services. The HSE is operating in a very competitive global market for healthcare talent as there are significant shortages of qualified healthcare professionals across the globe. The HSE Community Operations Disability Services is working collaboratively with the CDNT lead agencies at CHO level to promote CDNTs as a workplace of choice in a competitive employment market. Each lead agency is responsible for recruitment of staff on their CDNTs and is using a variety of approaches to fill funded vacancies.

National Information Management System for the CDNTs (CDNTIMS)

Historically the number of children waitlisted for children’s disability services provided by section 38 and section 39 providers has not been available nationally.

The establishment of CDNTs will facilitate the collection of this data. A National Management Information System for all 91 CDNTs is being rolled out and when implemented, will provide current data on waiting lists and other details for all CDNTs. In the interim, manual data collection is on-going and will provide information to the local areas regarding the number of children waiting for each CDNT.

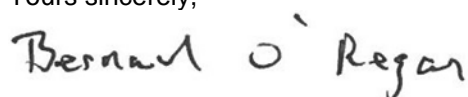
The most recent data available is provided in the table below and shows the number of children that are waiting for an initial contact with a CDNT in the 9 CHO Areas. This Dataset represents end of March 2023 activity reports. Please note that CHO 8 data is end of December 2022*.

Information is not collated on the average time on waiting lists.

Status report	CHO 1	CHO 2	CHO 3	CHO 4	CHO 5	CHO 6	CHO 7	CHO 8	CHO 9
No of children waiting 0-3 months for an initial contact @month end	402	170	335	150	157	84	133	361*	71
No of children waiting 4-6 months for an initial contact @month end	310	133	224	154	121	112	207	498*	84
No of children waiting 6-12 months for an initial contact @month end	299	202	269	230	282	281	521	367*	304
No of children waiting over 12 months for an initial contact @month end	375	442	377	1303	1399	740	1729	1903*	2428

Please also note that this is an interim dataset as we await the roll out of the National Information Management System and some individual CDNTs indicate that they do not have a system in place to capture this level of activity, therefore there are gaps in data returns for some of the CHO Areas.

Yours sincerely,



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

