

Ceannasaí Seirbhíse do Dhaoine Faoi Mhíchumas

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Mr Alan Farrell TD, Dáil Éireann, Leinster House, Kildare Street, Dublin 2

Email: alan.farrell@oireachtas.ie

PQ 14395/23 "To ask the Minister for Children; Equality; Disability; Integration and Youth the number of children waiting for their initial appointment with their CDNT in the Balbriggan, Swords and coastal CDNT teams; and if he will make a statement on the matter." **Alan Farrell TD**

Dear Deputy Farrell,

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

The number of children awaiting an initial appointment with the Coastal, Balbriggan and Swords Children's Disability Network Teams (CDNT) is as follows:

Balbriggan Team: 610 Swords Team: 396 Coastal Team: 65

The CDNTs in CHO DNCC were established in late September 2021. The reconfiguration of children's disability services has been a very significant change and has necessitated development of new teams, a new model of service that adheres to national policies and required development of new skill sets and new care pathways. The CDNTs and Lead Agencies (Central Remedial Clinic, Avista and St Michael's House) have worked closely together to manage the change process, mitigate risks and promote the new model of service across the 12 teams in the CHO. Our CDNTs have now providing a new model of service for children with disabilities and their families for over 18 months.

The introduction of CDNTs represents an evidence-based fundamental shift to a child and family centred model of care. This model of service sees a family set and achieve their own goals, supported by an interdisciplinary team. The ultimate goal of this approach is to enable children to flourish at home and in their communities. The focus of CDNT service delivery is child and family centred and enabling the child and family to carry out exercises and activities at home that may enhance their family life. In this regard, CDNTs often bring groups of children and groups of parents together to learn new skills and mix with each other in person or through digital platforms, which is convenient for many families in today's world. Family members learn how to support their child's development at home, as part of their everyday life and based in evidence across the world, which has formed the framework of the CDNT working models.

Since the CDNTs were established in CHO DNCC, there have been some noticeable improvements evident in the level of service provided to children with disabilities and their families. There has been an increase in the number of children receiving services from the 12 CDNTs across CHO DNCC. The CDNTs are experiencing a number of challenges, in particular recruitment and retention of key health services staff including psychologists, speech and language therapists, occupational therapists, dieticians and physiotherapists among others. Unfortunately, there are more positions vacant than qualified staff available nationally and internationally. CHO DNCC is experiencing vacancies ranging from 20-50% across different teams the 12 CDNTs with an average vacancy rate of 40%.

HSE CHO DNCC Disability Services with the Central Remedial Clinic, St Michael's House and AVISTA are running a targeted local and international recruitment campaigns for the staff grades referenced above and interviews are ongoing. Concurrently, CHO DNCC have undertaken to increase administrative support to all the CDNTs, to enable existing clinical staff to devote more of their time directly to children and families. To help reduce waiting time for children, the CDNT is working very hard to support cases which are now identified as having needs best met within a HSE Primary Care services in order for them to be transferred.

I trust this information clarifies this matter for you.

Yours sincerely,

Ms Olive Hanley

Head of Service for Disability