

Oifig an Cheannaire Oibríochtaí,

Na Seirbhísí Míchumais/An Rannán Cúram Sóisialta, 31-33 Sráid Chaitríona, Luimneach.

Office of the Head of Operations,

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12th June 2023

Deputy Ruairí Ó Murchú, Dail Eireann, Leinster House, Kildare Street, Dublin 2. E-mail: <u>ruairi.omurchu@oireachtas.ie</u>

## Dear Deputy Ó Murchú,

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: 25898/22

To ask the Minister for Children; Equality; Disability; Integration and Youth if he will outline the efforts being made by his Department to ensure improvements to assessments and access to services for people with disabilities, to ensure there is 'no wrong door' when accessing services; and if he will make a statement on the matter.

### **HSE Response**

### Progressing Disability Services for Children & Young People (PDS)

The implementation of the PDS programme is agreed Government and HSE policy. This policy supports the reconfiguration of children's disability services to provide equitable, child and family centred services based on need rather than diagnosis. This aligns with the UN Convention on the Rights of People with Disabilities.

The PDS model addresses the previous inequity in service provision whereby there may have been an excellent service for some children and little or no service for others. This variance may have been linked to diagnosis, age group or geography. Under the PDS programme, access to children's disability services has changed from diagnosis based to needs based, so that all children with a disability or developmental delay have access to the right service based on their needs no matter where they live or where they go to school.

PDS is a significant change programme for the provision of services and supports for children from birth to 18 years of age, in order to:

- Provide a clear pathway and fairer access to services for all children with a disability
- Make the best use of available resources for the benefit of all children and their families
- Ensure effective teams are working in partnership with families and with education staff to support children with a disability to reach their full potential.

PDS aligns with two clear objectives of The Sláintecare Report to:

- Provide the majority of care at or as close to home as possible
- Create an integrated system of care with healthcare professionals working closely together



# The National Access Policy to CDNT and Primary Care services

The National Policy on Access to Services for Children & Young People with Disability & Developmental Delay ensures that children are directed to the most appropriate service based on the complexity of their presenting needs i.e. Primary Care for non-complex functional difficulties and Children's Disability Network Teams for complex functional difficulties. This policy also supports the transition of a child between Primary Care and Children's Disability Network Team where their needs may change as they grow.

# Children's Disability Network Teams (CDNTs)

There are ninety one Children's Disability Network Teams (CDNTs) providing services for children with complex disability needs aged 0 - 18 years. CDNTs are teams of health and social care professionals, including nursing, occupational therapy, psychology, physiotherapy, speech and language therapy, social work and others. The team works closely together in a family centred model, focusing on the child's and family's own priorities.

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 completed its second annual Children's Disability Network Team Staff Census and Workforce Review in October 2022. The resulting report was finalised in February 2023 and has been circulated to relevant stakeholders. An overall analysis of the data from 2021 and 2022 demonstrates an increase of 11% in the number of approved posts and a 2% increase in the CDNT workforce. This increase has been achieved in a context where there is an average turnover rate 9.6% in health and social care professionals each year.

The census indicates over 707 posts vacant out of 2103 at this time across all CDNTs. Disability services, similar to all other areas of the Irish health services are experiencing enormous challenges in recruiting Health and Social Care Professionals (HSCP) at this time.

Funding not utilised due to vacant posts committed to the CDNTs is used to fund:

- AON/ASD assessments privately
- International recruitment of clinicians
- Extensive National CDNT Training Programme 2022 2023 based on each of the 91 CDNTs prioritised competency gaps for development.
- Ancillary supports for children and their families such as alternative respite services, complementary therapies including in areas of autism, medical supports, communication, syndromes and disabilities, and capacity building initiatives.
- Additional clinical supervision for senior staff where not available inhouse due to vacancies.
- A sponsorship programme to support 91 therapists through college

## **Retention and Recruitment**

The HSE and Lead Agencies are operating in a very competitive global market for healthcare talent as there are significant shortages of qualified healthcare professionals across the globe. In partnership with our CDNT Lead Agencies, the HSE continues to explore a range of options to enhance the recruitment and retention of essential staff into CDNTs.

Each lead agency is responsible for recruitment of staff on their CDNTs and is using a variety of approaches to fill funded vacancies. Each agency has on-going rolling recruitment to address a range of vacancies including short term temporary posts, full time permanent posts, development posts, part time posts etc.

Options to support the recruitment of staff for the CDNTs currently being progressed include:



- · Confined competition to fill all vacant senior posts across all disciplines on CDNTs
- Targeted National Recruitment for CDNTs
- Targeted International Recruitment for CDNTs with an agreed relocation allowance
- Sponsorship Programme for therapy grades

In addition, the following options are being explored:

- Apprentice Programme for therapy grades
- Employment of graduates as therapy assistants while they await CORU registration
- Expansion of therapy assistants in the system with HSE supporting individuals to return to education to qualify as therapists.
- Increase in the number of student clinical placements on CDNTs.

The HSE has launched International Recruitment campaigns for qualified healthcare professionals. To support these international campaigns, the HSE is working in partnership with CORU, the regulator and government departments to maximise this pool. In addition, some of the CDNT Lead Agencies are also progressing International Recruitment. There are also national panels in place for occupational therapists, psychologists, physiotherapists, and speech and language therapists.

To sustain staff retention, a comprehensive Team Development Programme 2020/2021 was provided for Children's Disability Network Managers (CDNMs) and cascaded to all team members. The programme, designed to support the establishment of the new teams and implementation of a child and family centred model of services, will also support staff retention. All resources from this programme are now accessible online for CDNT staff. A further CDNT Training and Development Programme 2022/2023 has been launched, with €660k dedicated funding. This programme of learning is focused on competency gaps identified and prioritised by the teams.

In addition, a secure online site has been set up for CDNMs and their staff to facilitate sharing of training and development resources as well as clinical and service good practice models in place across the country. The HSE and partner Lead Agencies are committed to providing ongoing training and development for CDNT staff supporting their professional development and retention, and promoting CDNTs as an attractive place to work.

Filling the current staffing vacancies will take time. In the interim, the HSE continues to drive a number of initiatives to reduce waiting times for children and families. These include sourcing therapy assessments and interventions externally via private service providers. In addition, the level of Admin support to CDNTs has been increased. Both of these will facilitate the Children's Disability Network Teams to focus on the provision of intervention for children on their caseloads.

The HSE remains committed to the delivery of appropriate services for children with disabilities and will continue to work with families and staff to develop services that meet their needs.

Yours Sincerely,

Regar

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