

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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3rd October 2023

Deputy Ivana Bacik, Dail Eireann Leinster House, Kildare Street, Dublin 2.

E-mail: ivana.bacik@oireachtas.ie

Dear Deputy Bacik,

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: 40010/23

To ask the Minister for Children; Equality; Disability; Integration and Youth if he will report on progress to establish a minimum of six regional assessment of needs units; and the contingencies put in place to present a backlog building on the list of assessments of need.

HSE Response

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.

The HSE has endeavoured to meet its legislative obligations under the Act. However, as a consequence of a High Court ruling of December 2009, the effect of which was to open eligibility to all persons born after 1st June 2002 who are suspected of having a disability, 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 and young people seeking access.

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 (PTA) 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 is impacting significantly on their capacity to provide necessary intervention / treatment for children with disabilities.



As a result of the Judgement, activity for the second quarter of 2023 indicates that there has been an increase in the total number of applications 'overdue for completion', which now stands at 6,495 (including 236 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).

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 2023 indicates that there are approximately 5,171 Preliminary Team Assessments requiring a diagnostic assessment.

When the 5,171 PTAs requiring an assessment are added to the 6,495 AONs overdue at the end of Q2, 2023 (including 236 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), the total number of applications 'overdue for completion' at this time is 11,666.

In addition, an estimated 7,612 new AONs are anticipated in 2023 based on the number of AONs received over the previous four quarters.

Actions to address AON waiting lists

A revised AON Standard Operating Procedure (SOP) incorporating guidance on completion of clinical assessment was launched on July 14th to reflect the High Court ruling in CMT & JA vs HSE 2022. This includes also the Interim Guidance on Replacement of the PTA in the AON SOP.

Additional funding

Approximately €11m has been allocated to address waiting lists for clinical assessments identified through the Assessment of Need process. This funding is being utilised to procure diagnostic ASD assessments from the private sector.

Progressing the outsourcing of these assessments is challenging however, in this regard, Disability Services nationally is working with HSE Procurement to develop a tender process and Service Specification for the delivery of Assessment of Need from private providers. A successful procurement process will facilitate the CDNTs to focus on the provision of intervention for children on their caseloads.

In parallel, a large scale international procurement process is also being progressed.

In addition, the HSE at local level is using time related savings to source AON assessments privately for children in the order as registered on the AOS (AON information management system).

In line with appropriate procurement procedures, Garda vetting and due diligence practice, private providers are currently being contracted by the HSE to provide assessments and / or interventions. In such instances, the HSE ensures that the contracted providers are appropriately qualified and that any assessments or interventions are provided in line with the appropriate standards.

Assessment of Need Administrative Hubs

AON Administrative Hubs are now in place in Community Healthcare Areas (CHOs) 1, 4, 5, 7, and 8.

Assessment of Need Assessment hubs have been established in CHOs 3, 6 and 9. CHO 3 is utilising existing staff reassigned from CDNT service. CHO 6's hub is pending recruitment of clinical specialist posts and in interim, the AON process is outsourced to a private service provider.

CHO 9 has recruited 2 of its 3 clinical specialists and recruitment of the 3rd is in train.



It is important to note that children do not require an Assessment of Need as defined by the Disability Act (2005) in order to access a CDNT or Primary Care service. They can be referred by a healthcare professional or parent/carer to the CDNT for children with complex needs as a result of their disability, or to Primary Care for children with non-complex needs.

Yours Sincerely,
Bernal O'Regar

Bernard O'Regan,

Head of Operations - Disability Services,

Community Operations

