



Roadmap for Service Improvement 2023 – 2026, Disability Services for Children and Young People End of 2024 Report

The ***Roadmap for Service Improvement 2023-2026, Disability Services for Children and Young People***, [\(here\)](#) launched by then Ministers Roderic O’Gorman and Anne Rabbitte and the HSE’s CEO, Bernard Gloster, is a targeted programme to achieve a quality, accessible, equitable and timely service for all children with complex needs as a result of a disability and their families. It includes 60 actions under themes of

1. Integrated Children’s Services
2. Service Access and Improvement
3. Workforce Retention and Recruitment
4. Communication and Engagement
5. Collaboration with Education and Support for Special Schools.

Four working groups that include parents, and representatives of HSE, Section 38 and Section 39 Children’s Disability Services, Primary Care, CAMHS, trade unions and Department of Children, Disability and Equality (DCDE, formally, Department of Children, Equality, Disability, Integration and Youth) are focused on driving the implementation of specific assigned actions under themes 1 to 4 above.

The HSE and DCDE continue to work closely with Department of Education and National Council for Special Education (NCSE) in progressing the special schools’ pilot in train in Cork, Dublin and Galway.

The following report provides an update on the status of each of the 60 Roadmap Action and works in train to deliver on the Roadmap commitments.

Section 1: Dashboard

Service Demand: Children's Disability Network Teams (CDNT)

From January to December 2024¹: for the 93 teams aligned to the 6 HSE Health Regions:

- A total of **10,281** new children were **referred** to CDNTs in 2024, an average of 857 per month.
- On Dec 31st 2024, **12,920 children** were **waitlisted**, down from 14,297¹ in December 2023.

Service Provision: CDNTs

From January to December 2024¹,

- **9,609** new children and families participated in their **initial contact**, an average of 801 per month.
- An average of **12,020** children and/or their families per month participated in one or more **individual interventions**, with a peak of 13,624 in April
- An average of **16,015²** children and families per month participated in **an initial contact, one or more group and/or individual interventions**.

In the month of December 2024 (see appendix 2):

- **12,590** children and/or their parents were offered an **initial contact, group and/or individual intervention** in December, down from a monthly average of **17,745**, impacted by staff leave and availability of families in lead into and through Christmas.
- **11,177²** children and/or their parents participated in an **initial contact, individual and/or group intervention**.
 - **448** children and/or their parents participated in an initial contact
 - **8,922** children and/or their parents participated in one or more **individual appointments**
 - **1,807** children and/or their parents participated in **one or more group interventions**.
- New Metric: A further **942 waitlisted children** and/or their families participated in one or more individual and/or group intervention appointments.
- **42,836** children are on open CDNT caseloads.
- **1,412** children and/or their parents failed to attend one or more appointments.

¹ Note a level of underreporting over Q4 2023 - Q1 2024 due to fallout from industrial actions

² As this data is manually gathered, a degree of inaccuracy is acknowledged. This issue will be resolved when all CDNTs have moved onto the CDNT Information Management System (end of 2025).

Workforce

2024 National CDNT Staff Census as of 16/10/2024 identified:

- 22% CDNT staff vacancy rate vs 29% twelve months previously
- Workforce increase of 17% across all teams
- Growth of 272 whole time equivalent (WTE) of which 204 are Health and Social Care Professionals (HSCP) and a further 110 WTE were advanced in the recruitment process.

Assessment of Need (AON)

AONs completed in the last six quarters (Q3, 2023 to Q4, 2024) against Roadmap Target

The **AON target of 19,042** set in the Roadmap for completion over the lifespan of the Roadmap (July 2023 – June 2026) is based on AONs overdue in June 2023, estimated new AONs for 2023 and estimated Preliminary Team Assessments³ (PTA) to be reassessed. Over the last 6 quarters since the target was set, **5,933 AONs** have been **completed**, and an estimated **807 PTAs reassessed** with a **remaining AON Roadmap target of 12,259** (inclusive of residual PTAs).

A total of 4,162 AONs were completed in 2024, a **30% increase** on the 3,205 completed in 2023.

Table 1: AONs completed, PTAs reassessed, Remaining Roadmap Target:

| In the last 6 quarters | | | |
|------------------------|----------------|------------------|--------------------------|
| | AONs completed | PTAs* reassessed | Roadmap remaining Target |
| 2023 (end of Q3) | 888 | 121 | 18,033 |
| 2023 (end of Q4) | 883 | 120 | 17,030 |
| 2024 (end of Q1) | 849 | 116 | 16,065 |
| 2024 (end of Q2) | 992 | 135 | 14,938 |
| 2024 (end of Q3) | 1,047 | 142 | 13,749 |
| 2024 (end of Q4) | 1,274 | 173 | 12,302 |
| Total | 5,993 | 807 | n/a |

Table 2: AONs overdue for completion, AONs received, AONs completed

| Year | End of Quarter | Overdue | <1 month | 1 - 3 Months | >3 Months | AONs received | AONs completed |
|-------------|----------------|---------------|------------|--------------|---------------|---------------|----------------|
| 2023 | Q3 | 7,608 | 697 | 1,035 | 5,876 | 1,954 | 888 |
| | Q4 | 8,893 | 756 | 1,174 | 6,963 | 2,260 | 883 |
| 2024 | Q1 | 9,924 | 664 | 1,119 | 8,141 | 2,603 | 849 |
| | Q2 | 11,131 | 618 | 1,478 | 9,035 | 2,742 | 992 |
| | Q3 | 12,722 | 802 | 1,600 | 10,320 | 2,507 | 1,047 |
| | Q4 | 14,221 | 924 | 1,604 | 11,693 | 2,838 | 1,274 |

³ Preliminary Team Assessments carried out under the previous Standard Operating Procedure (SOP) were found by the High Court not to have met the requirements of the Disability Act.

Table 3: AONs procured privately via an ongoing Targeted AON Waiting List Initiative:

| | Number of AONs | Cost | Average Cost per AON |
|----------------------|----------------|-------------------|----------------------|
| June 2024 | 379 | €1,245,455 | €3,300 |
| July 2024 | 342 | €1,155,703 | €3,379 |
| August 2024 | 371 | €1,173,031 | €3,162 |
| September 2024 | 318 | €1,080,993 | €3,399 |
| October 2024 | 344 | €1,174,933 | €3,416 |
| November 2024 | 365 | €1,155,168 | €3,165 |
| December | 360 | €1,244,636 | €3,457 |
| Total to date | 2,479 | €8,229,919 | €3,320 |

AON waiting lists are growing as demand continues to outstrip capacity. 10,690 applications were received in 2024 with circa 4,162 completed. By the end of 2024, circa 19,559 AONs were due for completion: AONs overdue at end of Q4 2024 (14,221); new AONs received in Q4, 2024 (2,838); and 2,500 Preliminary Team Assessments.

Special Schools Therapists in Post and Hours⁴ provided onsite as of 31/12/24

89.19 WTE HSCPs recruited of total 136.57 allocated in 2022. This includes a level of turnover in these posts since they were allocated. **4,898.6 therapy hours** were delivered onsite in special schools in December, a reduction from 6,291.5 hours delivered in November due to school closures and staff leave over Christmas holidays.

Roadmap Targets for 2025:

| Roadmap Targets set for 2025: |
|--|
| <ul style="list-style-type: none">✓ At least, 50% of all Roadmap Actions will be implemented by the end of 2025✓ A 12% increase in CDNT posts recruited in 2025 over 2024 will be achieved, as evidenced in the annual CDNT Workforce Survey October 2024 vs 2025✓ A minimum of 10% increase in CDNT caseloads nationally, as evidenced in a comparison of December 2025 and December 2024 CDNT metric returns⁵. |

Funding secured in Budget 2025/2026 to drive progress

Children's Disability Services have been allocated funding for the following in 2025 in line with the Roadmap for Service Improvement 2023 – 2026, Disability Services for Children and Young People:

- 20 senior grade and 20 staff grade health and social care professional/nursing WTE
- 20 Health and Social Care Profession Assistant WTE

⁴ This includes former CHO 8's Special Schools data returns as of October 2024.

⁵ CDNTs return monthly data on a suite of 22 metrics (per Roadmap Table 'CDNT Metrics') through their Health Regions to National Children's Disability Services.

- 15 new Psychology Trainee Placements
- €500,000 for AON staff to enhance HSE's compliance with the Disability Act.

Section 2. Roadmap Actions achieved to date

The HSE in collaboration with partner HSE funded agencies, DCDE and CORU have **completed 15 Roadmap actions as of 31/12/2024** as follows:

(i) Governance and Integrated Children's Services

Action 1.1: Interdepartmental Oversight Group chaired by the Minister of State for Disabilities was set up in November 2023 to consider any necessary departmental measures to support improvement of children's disability services, implementation of the Roadmap and requirements of the Disability Act (2005). DCDE now participates on all Roadmap Working Groups and its Service Improvement Programme Board.

Action 1.4: A National Service Improvement Lead reporting to the Assistant National Director, HSE Access and Integration - Children's Disability Services, was appointed to coordinate and lead the delivery of the Roadmap Actions.

(ii) Service Access and Improvement

Action 2.5: Individual Family Support Plan Guidance and current template was reviewed and reissued to all teams in 2023

Action 2.7: HSE ran an Expression of Interest for organisations currently providing or appropriate to provide services for children with disabilities, to apply for inclusion in a Framework of Approved Providers for CDNTs to offer waitlisted children and their families. Assessment of the applications was submitted in Q1 2024 to DCEDIY and the Minister for consideration in light of significant changes in the status of the overall Disability budget.

Action 2.18: The *Interim Clinical Guidance on Assessment* for staff as part of the AON Standard Operating procedures was issued in 2023 and a webinar delivered for staff.

Action 2.20: A National AON tender process was completed in Q1 2024 to support Regions in achieving their AON targets. It resulted in a small number of successful applications and additional capacity due to private commissioning being already maximised by Health Regions.

(iii) Workforce

Action 3.1 Confined Senior Grade competition was completed in 2023 to promote retention of existing CDNT staff, their knowledge, competencies and experience.

Action 3.4: The HSE explored the potential with key stakeholders to employ new graduate on therapy graduate grades until they are CORU registered. It was agreed instead to support CORU on expediting graduation for new graduates and international recruits which has been achieved (see Action 3.20 below).

Action 3.5 A Therapy Assistant Programme to support therapists has been advanced with a job specification for a Health and Social Care Professional Assistant (Generic) grade developed with HSE funded agencies, Heads of Service Disabilities, Primary Care and CORU. The Grade Code was sanctioned by Department of Health (DOH) in Dec '24. Consultation with SIPTU and Fórsa on the job specification is ongoing with an advanced draft available for Lead Agencies current recruitment activities. Staff webinar on the role, safe task delegation and job specification was delivered in Nov'24.

Action 3.12: National Children's Disability Services approved an increase of CDNT Clinical Specialist posts to 60 WTE.

Action 3.14: National Psychology Placement Office was superseded by an integrated clinical infrastructure approved by the HSE CEO to support practice education of all HSCP students across the health service.

Action 3.18: National CDNT Training Programme 2022/2023 based on CDNTs' prioritised competency gaps for development, with an allocation of €650,000, was completed in Q1 2024. National CDNT Training Programme 2024/2025 is now in train for full delivery by December 2025.

Action 3.20: The CORU registration process has been successfully expedited to 5 days for graduates trained in Ireland and from 80 to 47 days for international graduates.

(iv) Communication and Engagement

Action 4.3: National Children's Disability Services delivered workshops for CDNMs in person and online and two sharing events for Independent Facilitators on establishing Family Forums and Family Representative Groups.

Action 4.9: National Children's Disability Services led 3 workshops for CHOs including management and staff of the HSE and its funded agencies on the Roadmap, their responsibilities in it and consultation on the First Intervention Guidance draft in advance of Roadmap Working Groups and SIP Board being set up. Staff feedback informed the Project Charters (Action Plan) for each of the Working Groups.

Section 3: Roadmap Actions in place and ongoing

In addition to above 15 Roadmap Actions completed, the following 8 Roadmap Actions are in place and ongoing:

(i) Governance and Integrated Children's Services

Action 1.2: A Service Improvement Programme Board (SIP Board), in place and meeting monthly since February 2024, is closely monitoring, supporting and driving implementation of the Roadmap Action Plan via the following 4 working groups:

1. Integrated Children's Services
2. Service Access and Improvement
3. Workforce Retention and Recruitment
4. Communication and Engagement.

Action 1.3: Working Group 1 above, set up in March 2024, is leading implementation of the National Access Policy and the Primary Care, Disability, CAMHS Joint Working Protocol, a critical foundation stone of child and family centred services, emphasised by staff and parents. See Section 4, Action 2.10 for further detail.

(ii) Service Access and Improvement

Action 2.1: Health Regions and their funded Lead Agencies governing CDNTs continue to maximise use of voluntary and private disability service providers for waiting list initiatives where funding allows. In 2025, we will commence an annual review of the additional private service provision that CDNTs have accessed to support waitlisted children.

Action 2.2: During COVID, all services moved to online appointments, and families generally responded well to online services. Post COVID, CDNTs advise that families mostly prefer in person appointments. In 2025, we will gather data on the current use of digital tools by CDNTs to provide online services and supports for children and their families, both waitlisted and on the team's caseload. Then, we will work with Lead Agencies to optimise their use, where appropriate, and in line with families' preferences.

Action 2.3: Temporary redeployment of staff across CDNTs is in place for exceptional circumstances to mitigate risk but it is rarely used as it was found to increase staff burnout and turnover.

Action 2.4: National Children's Disability Services continues to organise webinars for staff by staff to share initiatives and experiences across teams.

Action 2.6: Each HSE area gathers monthly team data ("CDNT Metrics") on staff and children referred, waiting for and seen by each team every month for review by their Operational Management Group. This group includes CDNTs, HSE and Lead Agency Management staff. This gives CDNTs a regular opportunity to benchmark their team's activity levels against others and to identify performance improvement opportunities as they arise. Areas also submit this data nationally where it is shared with the SIP Board in advance of each monthly meeting.

(iii) Workforce

There are no Roadmap Actions in place and ongoing at this time

(iv) Communication and Engagement

Action 4.1: A multistakeholder group including family voices bringing their lived experience, Inclusion Ireland's CEO, HSE and Voluntary Service Providers' staff and management representatives continue working with Genio to inform the development of their review on the functionality and sustainability of Family Forums and Family Representative Groups (FRG). An Interim Report was submitted to the SIP Board in Dec.'24 for consideration. Whilst the Final Report is awaited, National Children's Disability Services will host a webinar for FRG members on Jan 29th to update them on the Roadmap, progress to date, works in train and challenges, findings of the Interim Genio Report, and the Children's Disability Services Communication Plan as it relates to their roles.

Section 4: Roadmap Actions in progress

The following **28 Roadmap Actions** are in progress:

(i) Governance and Integrated Children's Services

Action 1.5 HSE Tusla Joint Protocol Review: Following a HSE Tusla meeting on December 13th, a revised draft of the HSE Tusla Joint Protocol has been circulated to key stakeholders for wide consultation.

Action 2.10 Implementation of the National Access Policy (NAP) and the Primary Care, Disability, CAMHS Joint Working Protocol (JWP):

Working Group (WG) 1 is tasked with driving implementation across community services of the

- (i) NAP signposting children and their families to the right service at the right time in line with Sláintecare i.e. Primary Care for children with non-complex need and CDNT for children with complex needs arising from a disability
- (ii) JWP enabling children to receive the right services, including joint assessment and/or interventions where required, with 2 or more providers working together with the child and family to support them in achieving their outcomes.

CDNT, Primary Care and CAMHS staff were surveyed in October on what is working, what is not and their proposals to address the challenges. Their feedback will inform the development of Regional Integrated Children's Services workshops, to be led by each Region's Senior Leadership, with CDNT, Primary Care and CAMHS Managers responsible for the NAP and JWP implementation. These will be scheduled to start at the end of March, pending finalisation of roles beneath the HSE's Integrated Health Area Manager.

(ii) Service Access and Improvement

Action 2.11: Following consultations with a wide range of stakeholders on a proposal for implementing the First Intervention for all waitlisted children, the SIP Board approved Working Group 2's recommendation that in order to progress this action, the following key enablers are developed and in place first

- (i) Welcome packs are now in place in approximately half of the CDNTs for new children and families referred and are in development for the remaining CDNTs.
- (ii) Development of standardised initial pathway from CDNT waitlist to caseload: a multistakeholder group reviewed the different practices of when teams move a child from waiting list to caseload via a survey, building on learning from 2024 CHO workshops and webinar. A further workshop ran on Jan 22nd to advance this. Completion target: May '25.
- (iii) National Online Resources Platform for children with disabilities and their families awaiting Primary Care/CDNTs/CAMHS services: SIP Board has approved the business case. For Phase 1, we will gather and evaluate against a set of standards existing online resources developed by services and others e.g. NHS for launch in September 2025.

Action 2.12: Implementation of 5 actions arising from 2022-23 Reviews of the *Interagency Agreement* and *CHO CDNT Governance Policy* and their implementation as agreed by Heads of Service and Lead Agencies CEOs is being led by each Head of Service (CDNT Governance Group Chair).

Action 2.13: Under a Global Digital and Assistive Technology Initiative, WHO surveyed and consulted with a broad range of stakeholders to gather data on Aids and Appliances provision. The Oversight Group will review the findings to inform the WHO's report.

Action 2.14: All CDNTs are fully aligned to Health Region structures e.g. their Community Healthcare Network, Primary Care Network or Integrated Healthcare Area with the exception of Kildare, South Dublin and 1 team in North Dublin which are being progressed by the Regions.

Action 2.15: All HSE teams are now on the CDNT Information Management System (CDNTIMS). Following resolution of a legal issue regarding data sharing by HSE funded Lead Agencies with the HSE on the CDNTIMS, migration of remaining 43 teams onto the system will resume in January for completion by end of 2025.

Action 2.17: Following extensive consultation with key stakeholders, including DCEDIY, Minister of State, Lead Agencies, PDS Leads and FORSA, the NDA Review of CDNT Service Model in operation and optimal workload and staff team composition will begin in January '25. The NDA has completed significant foundation work, including literature reviews and baseline data analysis.

Action 2.21: DCEDIY led a 2nd multistakeholder AON workshop in April 2024 to explore the drivers of AON, communications, good practice CDNT service models where AON demand has remained relatively lower, and AON demand variance nationally to explore opportunities to balance AON demands and therapy interventions.

Action 2.22: A multistakeholder Task Group has reviewed outstanding clinical issues for assessment and intervention following release of the Interim Clinical Guidance on AON and will submit its recommendations for updates to the Interim Guidance and the overall AON Standard Operating Procedures to the National Clinical Forum for approval in early 2025.

Action 2.23: Health Regions continue to maximise their delivery of AONs based on CDNT and private service providers' capacity, and available funding. See table 2 above on AONs received and delivered over the past 6 quarters since the Roadmap was approved by Government and page 3 for those procured privately.

(iii) workforce

Action 3.2: Forty five new psychology trainee placements commenced in October 2023 and a further forty five in October 2024 for all health services

Action 3.3: A national minimum standard set for CDNTs of 1 student placement per 2 full time staff per discipline in post on the team, has resulted in 317 placements in the academic year 2023/2024, a 29% increase up from 243 the previous year. This is a strong recruitment and retention strategy, beneficial for student learning and attraction to CDNT work post-graduation, and for individual staff and team development, and a credit to the teams and their managers for this progress.

Action 3.6: Data will be gathered in 2025 on the status of the 32 new Admin posts allocated in 2023.

Action 3.8: Sponsorship Programme Phase 1 for speech and language therapy, occupational therapy, physiotherapy and social work students in the final years of their programmes is being finalised with the HSE's Regional Directors of People for launch in early 2025.

Action 3.9: A proposal for 4 years' salary paid to new graduates over 5 years for a gap year in year 5 initiative was submitted to DOH and copied to DCDE in December following discussions with key stakeholders. A final version agreed with DOH is anticipated in the coming weeks.

Action 3.13 Therapy Assistants grade has commenced roll out in the CDNTs. The draft CDNT Workforce Report 2024 (as of 16/10/24) draft indicates of the 2023 allocation of 50 WTE,

- ✓ 30.40 have been recruited
- ✓ 7.25 are in recruitment
- ✓ 12.35 have not been fillable to date.

Action 3.15: The Social Worker apprenticeship programme was launched in Sept '24 with 12 places and a further 20 expected in 2025. A Social Care Worker programme is now under development. Tertiary programmes i.e. pathways under Education and Training Boards developed in 2024 included 123 places for Nursing with an additional 70 ID Nursing places expected in 2025. In addition, tertiary programmes are being considered for Occupational Therapy and Dietetics.

Action 3.16: The Clinical Programme for Paediatrics and Neonatology is currently recruiting 2 Consultant Paediatricians with a special interest in Neurodisability.

Action 3.17: CDNT Workforce Report 2024, based on the CDNT Staff Census of 16/10/2024) and due for release in January 2025, will confirm the number of HSCPs and Nursing staff recruited into CDNTs over the past 12 months against this Roadmap Action target of 462 WTE.

Action 3.19: CDNT Phase 3 National Training and Development Programme 2024-2025 is in year 2 of delivery, this time by the Regions and Lead Agencies, and for conclusion by year end.

Action 3.21: HSE National HR continues collaboration with Higher Education Institutes (HEIs) re increasing third level HSCP programmes capacity to meet service demands. The National Clinical Programme for People with Disabilities and National Children's Disability Services are working with the HEIs on building and sustaining student placement programmes to enable growth of HSCP trainee numbers.

(iv) Communication and Engagement

Action 4.2: A comprehensive Communication Strategy and Plan developed by Roadmap Working Group 4, Communications and Engagement, has been submitted to the SIP Board January 22nd meeting for approval. It will require a dedicated staffing resource to drive its implementation across the country.

Action 4.5 Regions have confirmed that 91 of their 93 Family Forums are in place and meeting. One CHO has 2 remaining Family Forums to set up

Action 4.6 The phased PDS Website review is in train. The Discovery Phase on the information needs of families has been completed. The Communications Working Group including parents, Inclusion Ireland, staff and management reps are working with Communications Digital to agree the content plan for phase 1 and to identify subject matter experts. Digital will then confirm a delivery date for Phase 1.

Action 4.7 Regions have confirmed that 8 of 9 Family Representative Groups (FRG) are in place and meeting. 1 remaining FRG is to be set up, or alternatively, the elected family reps from Family Forums in place, will join the relevant FRGs in the new Health Regions – this will be progressed by the Regions once the new roles under the Integrated Health Managers have been finalised in due course.

(v) Education and Support for Special Schools

Action 5.1: Recruitment of 136.3 WTE senior health and social care professionals – see page 4.

Action 5.2: Significant cross sectoral work is ongoing between the HSE, its funded organisations, DCDE, Department of Education and the NCSE regarding the ongoing Special Schools Pilot. In addition, the Cross Sectoral Group on issues relating to Children with Disabilities will resume in the coming months, with a key purpose to optimise integration between Education and Health at local level.

Section 5: Roadmap Actions not yet commenced and targeted for 2025

Action 2.16: Development of a Capital Plan for CDNTs whose staff are not yet colocated, an enabler for provision of family centred services, will begin in early 2025, following the new Assistant National Director (AND) for Estates – Disabilities coming in post. National Children’s Disability Services has gathered baseline data on the CDNT accommodation gaps, including the status of plans to address each one in preparation for the new AND coming on board.

Action 2.19: Six CHOs set up their AON Hubs in 2023 on a direct request from the Minister of State ranging from AON Administrative Hubs to AON Administrative and Assessment Hubs. In 2025, National Children’s Disability Services will work with the Regions to review these structures, scope, memberships, and processes, and to make recommendations to the REOs for consideration to implement including their critical realignment to the new Health Regions.

Action 3.10

- (i) and (ii): In 2025, National HR Disabilities will assess feasibility of programmes to support Therapy Assistants/other eligible staff to return to education to qualify as Therapists, including level of interest from staff, net increase in Therapists, short-term reduction in staffing levels during study, drop-out rates, 3rd level institution requirement, and cost of above.
- (iii): In 2023, CHOs were requested to contact their recently retired therapists regarding a Return to Work incentivised programme with no reported uptake on same. This action has now been completed.

Section 6: Remaining Roadmap Actions presently on hold

Action 2.8: Service Improvement Function of National Childrens Disability Services Team to work with individual teams is compromised due to ongoing 65% staffing gaps.

Action 2.9: CHO Service Improvement Plan was paused in 2024 to allow developments noted under Action 2.11 (page 7) to be completed. It has been agreed to relaunch it now for Regions to develop, with 2.11 action to be completed retrospectively pending completion of the works outlined on page 7.

Action 3.7: CHO CDNT Retention Plan as part of the CHO Service Improvement Plan – as per 2.9 above.

Action 3.11: Recruitment of the six Regional Leads to drive Roadmap Service Improvement programme across all teams within their respective Regions and Lead Agencies is awaiting approval to proceed.

Action 4.4: First Intervention Communication Guidance for Lead Agencies to issue to families – see update on Action 2.11 above on page 7

Action 4.8: Family Representative Group Survey is paused, as recommended by parents involved in driving implementation of the Roadmap, until the Genio Report with recommendations due on March 31st and next steps for implementation have been agreed by the SIP Board.

Section 7: Key challenges impacting on rate of progress

- Recruitment to CDNTs remains a key challenge. Staff and CDNMs note this as the most critical factor in achieving the level of service improvement and quality required as outlined in the Roadmap. Filling all vacant CNT posts is also a critical factor in retaining the highly specialised existing staff and promoting CDNTs as good and rewarding places to work.

The increase in CDNT workforce of 17% or 272 WTE new staff as profiled in the 2024 CDNT Workforce Report is very positive in addition to the further 110 WTE well advance in the recruitment process at the time of the annual CDNT Staff Census (October 16th 2024).

- Depletion of the National Children's Services Team: The team remains at 35% of its capacity pre-launch of the Roadmap which is impacting on the level of support available to drive existing and oncoming multiple workstreams required and agreed to deliver on Roadmap Actions in 2025.
- Reduction in new development posts 2025 vs those defined in the Roadmap 2023-2026: The Roadmap detailed 180 new development HSCP posts in 2025 whilst 20 Senior and 20 Staff Grades have been funded this year. Several CDNTs, fully staffed for a period of time, are evidencing their inability to meet current demand for CDNT services. National Children's Disability Services is working with Public Health to upload all CDNTs onto Health Atlas, to use a population based approach for allocation of new resources from this year onwards, taking into account the local profile on age, disability and social deprivation.

Appendix 1: Acronyms and Abbreviations:

| | |
|-----------|---|
| AND | Assistant National Director |
| AON | Assessment of Needs |
| CDNM | Children's Disability Network Manager |
| CDNT | Children's Disability Network Team |
| CDNTIMS | Children's Disability Network Team Information Management System |
| CHO | Community Healthcare Organisation |
| DCDE | Department of Children, Disability and Equality (from Jan 2025) |
| DCEDIY | Department of Children, Equality, Disability, Integration & Youth (to Jan 2025) |
| DOH | Department of Health |
| FRG | Family Representative Group |
| HEI | Higher Education Institute |
| HSCP | Health and Social Care Professional |
| ICT | Information and Communications Technology |
| ID | Intellectual Disability |
| IFSP | Individual Family Support Plan |
| NCSE | National Council for Special Education |
| NDA | National Disability Authority |
| NEPS | National Educational Psychological Services |
| PTA | Preliminary Team Assessment |
| SIP Board | Service improvement Programme Board |
| WHO | World Health Organisation |
| WTE | Whole Time Equivalent |

Appendix 2: National CDNT Interim Metrics December 2024

| National CDNT Interim Metrics | | Dec-24 | 2024 Collated Return (FINAL) | | | | | | | | |
|-------------------------------|--|--------|------------------------------|--------|--------|--------|--------|--------|--------|--------|----------------|
| No. | Metric | CHO 1 | CHO 2 | CHO 3 | CHO 4 | CHO 5 | CHO 6 | CHO 7 | CHO 8 | CHO 9 | TOTALS |
| 1 | No. of staff WTE allocation @ month end i.e. on the last day of the month | 202.51 | 238.88 | 191.08 | 370.24 | 220.73 | 191.40 | 283.09 | 316.40 | 292.25 | 2306.58 |
| 2 | No. of staff WTE actually working @ month end | 139.09 | 206.61 | 153.18 | 287.97 | 137.23 | 120.91 | 199.22 | 218.27 | 220.52 | 1683.00 |
| 3 | No. of staff WTE on maternity leave @ month end | 8.80 | 9.61 | 10.50 | 20.90 | 12.40 | 10.40 | 17.80 | 21.00 | 16 | 127.41 |
| 4 | No. of children on open caseload @ month end | 2371 | 4069 | 5913 | 7710 | 3647 | 2595 | 5170 | 7192 | 4169 | 42836 |
| 5 | No. of children referred to the CDNT this month | 56 | 76 | 70 | 111 | 63 | 32 | 125 | 162 | 68 | 763 |
| 6 | Number of children transferred as 'Open' from disability services prior to reconfiguration who have not had an initial contact or intervention by month end | 60 | 161 | 0 | 27 | 439 | 0 | 392 | 10 | 1 | 1090 |
| 7 | No. of children discharged during the month | 35 | 47 | 55 | 74 | 40 | 29 | 98 | 95 | 148 | 621 |
| 8 | No. of children with a current IFSP @ month end | 993 | 3182 | 5177 | 3437 | 1222 | 1711 | 2001 | 4035 | 2621 | 24379 |
| 9 | % of children with a current IFSP @ month end | 44.47% | 80.10% | 89.51% | 0.43 | 35.86% | 65.93% | 38.44% | 58.56% | 64.65% | 56.91% |
| 10 | No. of children waiting 0-3 months for an initial CDNT contact @ month end | 109 | 175 | 247 | 157 | 82 | 61 | 151 | 296 | 48 | 1326 |
| 11 | No. of children waiting 4-6 months for an initial CDNT contact @ month end | 70 | 102 | 157 | 120 | 83 | 74 | 153 | 178 | 62 | 999 |
| 12 | No. of children waiting 7-12 months for an initial CDNT contact @ month end | 58 | 136 | 298 | 104 | 150 | 138 | 325 | 282 | 128 | 1619 |
| 13 | No. of children waiting over 12 months for an initial CDNT contact @ month end | 405 | 242 | 605 | 305 | 1091 | 1228 | 1942 | 800 | 2358 | 8976 |
| 14 | Total no. of children waiting for an initial contact @ month end | 642 | 655 | 1307 | 686 | 1406 | 1501 | 2571 | 1556 | 2596 | 12920 |
| 15 | Total No. of children and/or their parents who were offered an initial contact, an individual or group intervention appointment this month | 1417 | 0 | 1048 | 1901 | 1207 | 944 | 2169 | 1818 | 2086 | 12590 |

| | | | | | | | | | | | |
|----|--|------|---------|-----|------|------|-----|------|------|------|-------|
| 16 | No. of children &/or their parents who participated in an initial contact this month | 32 | 0 | 49 | 60 | 44 | 22 | 37 | 124 | 80 | 448 |
| 17 | No. of children &/or their parents who participated in individual intervention appointment this month | 1061 | 0 | 771 | 1366 | 909 | 708 | 1493 | 1237 | 1377 | 8922 |
| 18 | No. of children &/or their parents who participated in a group intervention appointment this month | 158 | 0 | 161 | 278 | 111 | 105 | 391 | 260 | 343 | 1807 |
| 19 | Total No. of children &/or their parents who participated in an initial contact, an individual or group intervention appointment this month | 1251 | 0 | 981 | 1704 | 1064 | 835 | 1921 | 1621 | 1800 | 11177 |
| 20 | No. of children &/or their parents who have not attended an individual or group intervention appointment this month | 165 | 0 | 67 | 197 | 143 | 109 | 248 | 197 | 286 | 1412 |
| 21 | % of children &/or their parents who have not attended an individual or group intervention appointment this month | 12% | #DIV/0! | 7% | 10% | 12% | 12% | 10% | 11% | 16% | 11% |
| 22 | No. of children (&/or their parents) on CDNT waiting list who have participated in one or more individual and/or group intervention appointments this month. | 25 | 0 | 3 | 115 | 205 | 48 | 118 | 41 | 167 | 722 |