



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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

Office of the Head of Operations,
Disability Services/Social Care Division,
31-33 Catherine Street, Limerick.

T: 00353 (0) 61 483369

Suíomh Gréasáin/Website: <http://www.hse.ie>

1st February 2021

Deputy Thomas Pringle,
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.
E-mail: thomas.pringle@oireachtas.ie

Dear Deputy Pringle,

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: 4302/21

To ask the Minister for Health if he will report on the new standard operating procedure for assessments of needs; the reason this assessment was reduced to a single assessment of 90 minutes; and if he will make a statement on the matter.

PQ: 4303/21

To ask the Minister for Health the number of children awaiting an assessment of needs; the length of time that children are waiting by county or CHO area; the measures being taken to reduce waiting times and lists; and if he will make a statement on the matter.

HSE Response

Since the Disability Act commenced in June 2007, 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 children born after 1st June 2002, 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 at end of 2019, this figure was 55%. This is a reflection that the AON process is an accumulative process in terms of numbers of children seeking access. However, it is acknowledged that the numbers of assessments overdue for completion remain high, although there had been some improvement in these figures in 2018 and 2019 prior to the COVID-19 public health emergency.

Assessment of Need is reported on a quarterly basis, so the latest information available is end of Quarter 4, 2020. The Table below provides information on the number of children by CHO awaiting an assessment of needs to be completed and the length of time they have been waiting since they were first referred. The information is based on data extracted from the Assessment Officers' System Database (AOS). 5,078 applications are overdue for completion with 281 of these on the grounds of there being exceptional circumstances as provided for in paragraph 10 of the regulations.

CHO	Total Overdue ¹	Overdue/ Exceptional Circumstances ²	Overdue/ No Exceptional Circumstances	<1 month	1 - 3 Months	>3 Months
-----	----------------------------	---	---	-------------	-----------------	--------------

AREA 1	27	27	0	3	4	20
AREA 2	51	1	50	7	6	38
AREA 3	434	5	429	16	21	397
AREA 4	994	78	916	38	91	865
AREA 5	461	8	453	13	14	434
AREA 6	218	1	217	8	11	199
AREA 7	1023	2	1021	33	43	947
AREA 8	574	1	573	34	28	512
AREA 9	1296	158	1138	58	54	1184
Total	5078	281	4797	210	272	4596

¹All assessment reports that were not completed within 6 months of application or within 3 months of Start Stage 2 and before the end of the quarter are included in this report.

²The number of Assessment Reports 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. Consent to extension is only valid if agreed extension date has not already passed.

Overall Reform of Children's Disability Services

The Disability Act requires the HSE to provide a consistent approach to Assessments of Need across the country. The HSE acknowledges that this has not been the case and that approaches to assessment and waiting times have varied.

In an effort to standardise procedures and to facilitate timely assessments, the HSE developed a Standard Operating Procedure (SOP) for Assessment of Need (AON), which clearly defines the assessment process. The SOP was implemented for all applications for Assessment of Need from January 2020.

The SOP seeks to ensure that backlogs in assessments are not a barrier to children receiving interventions. Assessment of Need now comprises a Preliminary Team Assessment that will determine a child's needs and will identify initial interventions that will be required to meet these needs. These changes are intended to alleviate the current situation, where children in some parts of the country may wait a long time before they can access an assessment. During this waiting period, they often have little or no access to intervention or support. It is intended that the changes in the SOP, particularly the new preliminary assessment, will facilitate children with disabilities to access timely assessment, which will then ensure that children will be prioritised for intervention based on their presenting needs.

The recent allocation of €7.8 million through Slaintecare to address overdue Assessments of Need will further support the HSE and its funded service providers to meet the legislative timelines for Assessment of Need.

This funding has been allocated to CHO areas based on the numbers of overdue AONs at 30th June 2020. Each CHO area has developed a plan to address this backlog through a combination of:

- Restoration of relevant clinicians to children's disability services
- Waitlist initiative utilising existing clinicians working overtime at weekends or evenings
- Procurement of private assessments
- Commitment to filling maternity leaves
- Recruitment of Additional Clinical Staff for fixed term contracts of 6 months from 1/9/20

The HSE acknowledges the challenges in meeting the demand for children's disability services and is acutely conscious of how this impacts on children and their families.

A number of service improvements are being introduced that, when implemented, will help improve access to services for children with disabilities and developmental delays. The overall programme of improvement is the ongoing roll out of Progressing Disability Services for Children and Young People (PDS). This requires the reorganisation of all current HSE and HSE funded children's disability services into geographically-based CDNTs.

PDS is doing this by forming partnerships between all the disability organisations in an area and pooling their staff with expertise in the different types of disabilities to form the CDNTs. These teams will provide for all children with significant disability, regardless of their diagnosis, where they live or where they go to school.

The HSE is establishing a total of 91 Children's Disability Networks across each of the nine CHOs comprised of specialist inter-disciplinary Children's Disability Network Teams to work with children with complex disability needs. This reconfiguration of services under the Progressing Disability Services for Children & Young People (PDS) programme is in line with Health Service Reform and the implementation of Community Healthcare Networks under Sláintecare.

Yours sincerely,



**Dr. Cathal Morgan,
Head of Operations - Disability Services,
Community Operations**