



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Joint Committee on Health

Meeting

Wednesday 27th June 2018

Opening Statement

by

Dr. Cathal Morgan

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Health Service Executive

Good morning Chairman and members of the Committee. Thank you for the invitation to attend the Committee meeting to address matters relating to the assessment of need under the Disability Act 2005. I am joined today by my colleague:

- Ms Angela O' Neill, National Disability Specialist, Community Operations

I understand that the committee wishes to gain greater understanding of issues surrounding the 'standard operating procedure' (SOP) which the HSE regards as a necessary operational support to implementing the act and which is currently the subject of an important consultation process with the Fórsa trade union.

The Disability Act 2005

Since the commencement of Part 2 of the Disability Act in June 2007 the HSE has endeavoured to meet its legislative requirements as set out in the Act. Under the Act, any child born on or after June 1st 2002 is eligible to apply for an Assessment of Need (AON). Children who qualify for an AON under the Act have a right to:

- an assessment of their health needs arising from their disability
- an assessment report
- a statement of the services they will receive
- make a complaint if they are not happy with any part of the process

The Disability Act 2005 outlines the statutory timelines under which AONs must be completed. In effect the assessment must be completed within six months of the application date with a further month to issue the report and service statement.

The numbers of applications for AON under the Act have risen steadily since its implementation in June 2007. In 2008 2,535 applications for AON were received with 1,392 assessments completed. In 2017 the number of applications received had grown to 5,814 with 3,660 assessments completed. When originally implemented, it was envisaged that AON would apply to children aged less than five years and the Education for Persons with Special Education Needs Act (EPSEN) would address the needs of older children. The committee may be aware that the EPSEN Act has not been fully implemented and following a High Court ruling in 2009 eligibility for AON was expanded to include all children born on or after June 1st 2002.

A 2016 review of the practice of implementation of this part of the act confirmed anecdotal evidence that the approach to AON is not consistent across the country. In fact there is evidence that practice varies widely across the 9 Community Health Organisation Areas. While a large number of "Guidance Notes" regarding AON processes have been issued since 2007 there has been no nationally standardised or agreed definition of AON.

As a consequence of the foregoing, it is a considered view on the part of the HSE that the Act includes a number of definitions that are open to interpretation operationally, therefore leading to an inconsistent approach as well as inequity in terms of time afforded to 'assessment' versus 'support or treatment' interventions with children and their families.

Whilst the Disability Act does not attempt to define an AON, it does state that the Assessment Officer must prepare a report of the results of the assessment. This report must set out the findings of the assessment together with determinations in relation to

- a) whether the applicant has a disability
- b) where the applicant has a disability
 - i. a statement of the nature and extent of the disability
 - ii. a statement of the health needs (if any) occasioned to the person by the disability
 - iii. a statement of the services considered appropriate to meet the needs of the applicant and the period of time ideally required for the provision of those services and the order of such provision
 - iv. a statement of the period within which a review of the assessment should be carried out

In practice, Assessment Officers and clinicians have, because of a perceived legislative requirement to undertake a very detailed and comprehensive assessment, erred on the side of requesting and administering a wide range of assessments in as short a time frame as possible. In some cases children may undergo numerous assessments in a short time frame where a period of diagnostic intervention may be more appropriate.

In an effort to standardise procedures and to facilitate timely assessments the HSE identified a requirement to develop a Standard Operating Procedure (SOP) for AON. This SOP is intended to replace the suite of approximately 50 guidance notes that have been issued since 2007 and will define the assessment. It is intended that an AON will comprise a Preliminary Team Assessment that will determine a child's needs and will identify initial interventions that will be required to meet these needs.

In developing this SOP a consultation workshop was held in September 2017. Attendance included representative from the following disciplines:

- Assessment Officers
- Liaison Officers
- Community Health Doctors & Paediatricians
- Occupational Therapists
- Physiotherapists
- Psychologists
- Speech & Language Therapists

Following this workshop a range of e-mail submissions were received and considered. In addition parent feedback provided through a parallel review of ASD services was included.

It is intended that the National Policy on Access to Services for Children & Young People with Disability & Developmental Delay (2016) will form the basis of the revised structure for AON. The implementation of this policy has already been identified as a priority in the National HSE Operational Plan for 2018.

The decision making process outlined in the Access policy should be utilised to determine whether or not the child presents with the level of difficulty and complexity that would require referral to a children's disability service. Children who do not require a disability service would generally, be deemed not to meet the criteria for eligibility for an Assessment of Need.

It is important to note that the implementation of the revised AON procedure and the National Access Policy are linked to the wider reconfiguration of children's disability services. This reconfiguration project is already well advanced and represents a change from a historical model whereby children access services based on criteria such as age and diagnosis. The new model is designed to facilitate equitable, timely access to services based on need.

Conclusion and current status of the SOP

The SOP is intended to ensure a standardised approach across the state in respect of the operational application of the Disability Act 2005. Additionally, the SOP offers an important opportunity to balance or ensure equity in terms of assessment and support interventions for vulnerable children and young people with a disability.

In terms of the current status of the AON SOP, it is important to reiterate that HSE is engaged in a consultation process through Fórsa and hopes to successfully conclude this engagement in the coming weeks prior to roll out.

This concludes my opening statement and together with my colleague we will endeavour to answer any questions you may have.

Thank you.