

Joint Committee

on

Disability Matters

OPENING STATEMENT

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Introduction.

Good evening, Chair and members of the Committee. Thank you for the invitation to meet with the Committee today. I welcome the opportunity to engage with the Committee on Progressing Children's Disability Services.

I am joined today by my colleagues;

- Dr Rosie Gowran, Clinical Lead for the National Clinical Programme for People with Disabilities
- Ms Ann Bourke, National Service Improvement Lead, Children's Disability Services
- Mr John Fitzmaurice, Chief Officer, CHO West

The HSE prioritises the development of supports and services to children with disabilities. At the outset, I want to acknowledge that these services still fall short of what children and families need and I apologise profoundly for these shortfalls.

In October 2023 we launched the Roadmap for Service Improvement 2023 – 2026, Disability Services for Children and Young People. While implementation of the Roadmap was impacted by industrial action, which is now suspended, we have been able to make progress on a number of critical actions. The suspension of the industrial action enables us now to drive the implementation of all of the 60 measures in the Roadmap, including but not limited to:

- The standing up of the delivery structures at both governance and working groups levels, involving service managers, parents, Government departments, unions, mental health/CAMHS and primary care
- A recruitment campaign that resulted in 495 applications for therapy posts, which are currently progressing through the interview stage
- The development of a dedicated recruitment campaign for therapy assistants which will go live in the coming weeks
- Engagement with the wider community and voluntary sector to identify a range of supports and services that can be provided to children and families whilst they await CDNT services

- Workshops led by the National Team and involving Chief Officers, Heads of Service, Lead Agencies, Children's Disability Network Managers and their staff to ensure everyone understands their roles and responsibilities in delivering on Roadmap actions, and importantly, harnessing existing good practice models that will help to achieve Roadmap actions. Further workshops with CDNMs are planned
- Work is underway in each area to develop a Roadmap implementation plan for their area
- Guidance has been developed and issued, including at a workshop, on how the initial contact with all children currently in a waiting list will be addressed in the context of the Roadmap
- Significant work on workforce strategy for disability services, including dedicated working groups within the HSE and a cross sectoral group chaired by Minister Rabbitte the HSE are actively participating on, and which has a focus on rebuilding, extending and planning sustainable recruitment and retention initiatives for HSCP and Therapy Assistants education and practice education places
- Strong oversight and support by the CEO and Board of the HSE
- 69 of the 91 Family Forums and 5 of the 9 Family Representative Groups are now up and running, and have nominated their 2 Family Reps for the CHO CDNT Governance Group. We will run an independent review on the experience of this model of engagement, to ensure it is the optimal for family input on the development of children's disability services
- A National Tender Process for Assessment of Need (AON) has been completed to maximise private provider provision of AON, supporting public services to meet their legislative responsibilities
- 45 new psychology trainee placements commenced in Sep 2023, with an additional 45 due to commence in Sept 2024 and Sept 25 for the health services from which Disabilities will seek to attract to CDNT services both for placement and post grad on boarding

Recruitment and retention is the most significant area for improvement. We need to ensure a sustainable model for recruitment and retention is put place. The HSE is offering all new graduates permanent positions, similar to the programme for nursing.

The development of additional capacity through the third level institutions to increase the number of graduates across all of the disciplines is critical. It would be useful to revisit the Bacon Report 2001 to ensure the targets are reviewed and revised to reflect the increased population.

The HSE recognises that it must do more to provide and support the necessary student practice placements. We are currently gathering data on the number of student placements that have been provided in the last academic year across all CDNTs, in order to set targets for all teams based on staff in post. We have developed a guidance to support this, along with additional staffing capacity at national and CHO levels. Consideration of short, medium and long-term sustainability for education, recruitment and retention and clinical governance, ensuring staff well-being and safety and in turn delivery of the best services for children and families, is our priority.

While there are challenges, we should also note that approximately 46,000 children are on the CDNT caseload with approximately 16,000 currently receiving a service from the CDNTs every month. In addition, based on each individual team's capacity, a significant number of children on waiting lists are also receiving interventions. We will have national data on this once the CDNT Information Management System has been fully rolled out.

The CDNT services provide supports on an inter-disciplinary basis, in group work for children with common needs and individual supports, as required. It is delivered across a multitude of settings and a key component of the child's programme is training and capacity building for families provided both in person and remotely. It also includes the provision of then legislated for Assessment of Needs.

The increasing demand for Assessment of Need continues to be very challenging. The number of applications in 2023 was 8472, an increase of 1717 or 25% over 2022. This reflects population increase and families who we believe are exploring every avenue to access services for their child.

Of the total AONs completed in 2023, 849 or 36% of the total assessments were found not to have a disability. This time could have been more productively used to provide additional assessments of need and other services.

As of December 2023 there were 8893 assessments overdue. On an average of 36 hours of clinician time required for each AON, this would take 334 full time Health and Social Care Professionals to complete in 12 months, again diverting scarce resources from service provision.

An AON is not required to access Primary Care, Children's Disability Services or Mental Health Services providing services including assessment, goals setting, intervention and follow up services. This direct access ensures more efficient and timely access for many families, and I think it is important that we highlight the stats regarding the appropriateness of the number of people that go through the AON process.

In 2023, the HSE spent approximately €10.5m commissioning AONs from the private sector. We will continue to secure any available capacity though we are of the view that the available capacity is being maximised. We are concerned that the impact of this direction also serves to further deplete the development of public services.

The situation in relation to AON is not the same in every area. The numbers of applications in some areas have historically been significantly lower than other areas. This reflects a service model used in those areas to engage with families and support them to access services without them having to resort to the Assessment of Need legal route. This will be explored in detail by Working Group 2 of the Roadmap: Services Access and Improvement with the objective to spread this good practice across all teams nationally, and rebalancing the demand for AON with CDNT Service Provision, including workshops with families and with staff on how this can be achieved.

In conclusion, the challenges continue to be demanding. However, there is scope for optimism as we build momentum through the delivery of the Roadmap, both through the specific actions set out in it and in the way that we seek to harness the support and involvement of all stakeholders: staff, families, providers, all relevant services of the HSE and Government. Working collectively to meet these challenges is critical.

That concludes my statement and we are happy to answer questions from the Committee.