

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.

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7<sup>th</sup> November 2023

Deputy Cian O'Callaghan, Dail Eireann, Leinster House, Kildare Street, Dublin 2. E-mail: cian.ocallaghan@oireachtas.ie

Dear Deputy O'Callaghan,

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: 48371/23

To ask the Minister for Children; Equality; Disability; Integration and Youth if he plans to reimburse parents whose children have been forced to get an private assessment of need due to the long waiting lists in the HSE; if this reimbursement would apply to necessary therapies also; and if he will make a statement on the matter.

## **HSE Response**

91 Children's Disability Network Teams (CDNTs) are aligned to 96 Community Healthcare Networks (CHNs) across the country and are providing services and supports for children with complex disabilities aged from birth to 18 years of age.

The CDNTs are currently providing therapy services for over 46,000 children and strategies and supports for urgent cases on the waitlist where staffing resources allow.

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

Some families source private assessments to facilitate access to educational supports such as special schools or classes. In many cases, these are unidisciplinary assessments which are usually accepted in the education sector. In general, HSE or HSE funded services, in line with best practice guidelines, use a multidisciplinary approach to assessment, specifically to ASD assessment. In these circumstances, while HSE services may take cognisance of any unidisciplinary reports that may be available, they will undertake a multidisciplinary assessment where appropriate, to confirm a diagnosis and to determine the necessary interventions.

The HSE does not fund or reimburse any fees paid to private practitioners in any of the health service areas where assessments or interventions have been commissioned by the service user or their family directly.

Approximately €11.5m 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.

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 May 2023, the National Director of Community Operations issued a memo advising Chief Officers to use unspent CDNT funding to commission ancillary supports to complement children's disability services whilst we continue working to recruit into the vacant posts. These include additional respite, complementary therapies where appropriate clinical and governance assurances are in place, and capacity building initiatives for children and their families.

Progressing the outsourcing of these assessments is challenging however, in this regard, Disability Services nationally is working with HSE Procurement to complete 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.

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,

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Bernard O'Regan, Head of Operations - Disability Services, Community Operations