

### 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: <a href="http://www.hse.ie">http://www.hse.ie</a>

17th November 2023

Deputy John Lahart, Dail Eireann, Leinster House, Kildare Street, Dublin 2.

E-mail: john.lahart@oireachtas.ie

Dear Deputy Lahart,

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: 48648/23

To ask the Minister for Children; Equality; Disability; Integration and Youth his views on the policy regarding primary care psychology and a child's eligibility to access this service if they are seeing a psychiatrist for a separate diagnosis; the reason there are gaps on the CDNT team specifically in the psychology department, that a child referred in 2021 is told they will not be seen before they turn 18 years of age in 2024; and if he will make a statement on the matter.

### **HSE Response**

The National Policy on Access to Services for Children & Young People with Disability & Developmental Delay ensures that children are directed to the appropriate service based on the complexity of their presenting needs i.e. Primary Care for non-complex functional difficulties and Children's Disability Network Teams for complex functional difficulties. Children with disabilities may access supports from a Children's Disability Network Team or from Primary Care or from or from Child and Adolescent Mental Health Services CAMHs depending on the complexity of their needs.

CAMHS provide specialist mental health service to those aged up to 18 years, who have reached the threshold for a diagnosis of moderate to severe mental health disorder that require the input of a multi-disciplinary mental health teams, such as moderate to severe anxiety disorders, moderate to severe depression, Bi Polar Affective disorder, Psychosis, moderate to severe eating disorders, self-harm that require the input of a multi-disciplinary mental health team.

## **Childrens Disability Services**

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 aged from birth to 18 years of age.



CDNTs are teams of health and social care professionals, including nursing, occupational therapy, psychology, physiotherapy, speech and language therapy, social work and others. The team works closely together in a family centred model, focusing on the child's and family's own priorities.

With regard to psychology, in line with the Progressing Disability Services model it is important to note that the CDNTs are a Multidisciplinary service.

Every child with complex needs and their families have access to the range of family centred services and supports of their CDNT according to their individual needs. This includes universal, targeted and specialist supports, such as individual therapeutic intervention and access to specialist consultation and assessment when needed. Supports are provided as is feasible in the child's natural environments - their home, school and community.

Since 2019, more than 610 development posts have been allocated to children's disability services across the country. These posts have been assigned to teams based on a number of factors, including the existing ratio of staff to the number of children with disabilities in each area. This figure includes 190 posts provided in 2022 as well an additional 136.3 WTEs to restore pre-existing services in 104 special schools.

Based on the CDNT Staffing Census (Oct 2022), there are over 700 vacant whole time equivalent posts in CDNTs. The HSE continues to explore a range of options to enhance the retention and recruitment of essential staff across all aspects of the health services.

The HSE is operating in a very competitive global market for healthcare talent as there are significant shortages of qualified healthcare professionals across the globe. The HSE Community Operations Disability Services is working collaboratively with the CDNT lead agencies at CHO level to promote CDNTs as a workplace of choice in a competitive employment market.

The CDNTs are currently providing services and supports for 45,741 children and strategies and supports for urgent cases on the waitlist where staffing resources allow.

### Roadmap for Service Improvement for Disability Services for Children and Young People

Substantial work has been undertaken by the HSE to develop a Roadmap for Service Improvement for Disability Services for Children and Young People which was approved by the HSE Board on July 28th and was launched by the Government and the HSE on Tuesday 24th October 2023.

The Roadmap is a targeted Service Improvement 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 sets out the overall aim for Children's Disability Services, provided by the HSE and its partner agencies, that for every child to have a childhood of inclusive experiences where they can have fun, learn, develop interests and skills, and form positive relationships with others in a range of different settings.

#### Implementation of the Roadmap for Service Improvement Actions will:

- Ensure children are referred to the most appropriate service (National Access Policy)
- Reduce the waiting time for children currently waitlisted for CDNTs
- Optimise use of voluntary and private disability service providers for assessments and interventions.
- Improve HSE's legislative compliance for AONs as defined in the Disability Act
- Improve outcomes for children and families and their experience of CDNT service
- Enable teams to optimise service effectiveness and efficiencies, and opportunities to collaborate with community networks such as Children and Young People's Services Committees.
- Improve staff retention on CDNTs in the long-term as a good place to work.



The actions also include a robust suite of CDNT Retention and Recruitment targets, the majority of which are now in train. For example;

- National Team Development Programme (delivery of the 2<sup>ND</sup> extensive two year programme prioritised by the CDNMs will be completed by Mar '24)
- Online lunchtime staff webinars (on-going monthly)
- Online basecamp account for staff and team managers to share innovative programmes, practices and resources across the country
- Confined Senior grade competition for CDNTs completed
- Additional 20 Senior clinical psychology trainee placements
- Marketing CDNTs as a workplace of choice
- HSE HR engagement with graduates in person and via webinar
- Recordings of CDNT staff and parents on benefits of working or receiving services from a CDNT, used for recruitment of staff off national panels
- HSE Recruitment, Reform and Resourcing has featured CDNTs on their "Service in the Spotlight", hosted on the HSE Career Hub. The 16,000 individuals now registered on the hub will receive notice of the targeted recruitment campaign for CDNTs and be encouraged to share with family and friends, extending our reach into the market.

The HSE acknowledge the current challenges in the recruitment and retention of staff and work is also progressing to commence the following;

- Student Sponsorship Programmes
- Targeted recruitment campaigns for senior and staff grade therapies will commence in early December 2023 to fill existing vacancies on HSE, S.38 and S.39 Lead Agency teams.

In addition, Minister of State Anne Rabbitte has convened a Disabilities Workforce Enhancement Group, including National Disability Operations Team and NCPPD representation, focused on the immediate, medium and long term sustainability of Disabilities workforce, including CDNT.

# **Disability Services and CAMHS**

The HSE developed a joint working protocol between Primary Care, Disabilities, and CAMHS services with the aim to make the referral process between the three services easier for medical professionals and families to navigate.

When information indicates that there is more than one service that could best meet the child's needs, consultation should take place with the other service(s) to determine which is the most appropriate or whether a joint approach is indicated. Joint assessment may be indicated when presenting concerns or initial assessment indicates that there is a significant possibility of differential or co-morbid diagnosis of disability and/or mental health conditions.

In addition, the Integrated Children's Services Forum has been established to provide a formal, regular mechanism for services to meet and discuss individual children whose needs are not clear or who require some level of joint assessment or intervention and for whom direct consultation between the relevant services has not led to a decision on the best arrangement for the child.

Historically services have developed in differing ways leading to inequity and inconsistency. One aspect of this inconsistency is in joint case management of complex cases between Primary Care, Disability Services and CAMHS. The joint protocol between Primary Care, Disabilities and CAMHS has been designed to address this and work is ongoing to strengthen the connections between the two services.

The Roadmap includes Working Group chaired by the National Director of Community Operations and including Senior Management from National and CHO Disabilities, CAMHS and Primary Care to drive implementation of the National Access Policy and the HSE Joint Protocol between Primary Care, Disabilities and CAMHS to ensure children with disabilities access the right service at the right time,



and where necessary shared assessment and shared services where a child has needs of more than one service.

Yours Sincerely, Bernal O'Regar

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

**Community Operations** 

