

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

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6th December 2023

Deputy Pauline Tully, Dail Eireann, Leinster House, Kildare Street, Dublin 2. E-mail: <u>pauline.tully@oireachtas.ie</u>

Dear Deputy Tully,

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: 52423/23

To ask the Minister for Children; Equality; Disability; Integration and Youth the actions he has taken or if he has plans to establish a single-entry point to children's disability services and child and adolescent mental health services for autistic and disabled children to ensure that children are no longer passed between services.

PQ: 52436/23

To ask the Minister for Children; Equality; Disability; Integration and Youth the actions he has liaise with the Department of Education to adopt an approach which integrates the school inclusion model and the children's disability network team model to ensure that in-school therapies are available along with community-based services for autistic people; and the estimated cost of undertaking this measure.

HSE Response

The National Access Policy

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 ASD may access supports from a Children's Disability Network Team or from Primary Care 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 multidisciplinary mental health teams, such as moderate to severe anxiety disorders, moderate to severe

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depression, Bi Polar Affective disorder, Psychosis, moderate to severe eating disorders, self-harm that require the input of a multi-disciplinary mental health team.

Children's Disability Network Teams

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.

Regardless of the nature of their disability, where they live, or the school they attend, 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.

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.

HSE Primary Care, Disabilities, CAMHS Joint Protocol

The HSE developed a joint working protocol between Primary Care, Disabilities, and CAMHS services with the aim to make both the referral process between the three services easier for families and all referrers to navigate, and to clearly define how they will work together where a child with complex needs as a result of a disability requires supports from more than one of these services.

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.

Roadmap for Service Improvement 2023 – 2026, Disability Services for Children and Young People

Roadmap for Service Improvement 2023-2026, Disability Services for Children and Young People was approved by the HSE Board on July 28th and launched by the Government and the HSE on 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.

The Roadmap also establishes a clear, robust governance structure at national level to drive the delivery of integrated Services between Disabilities, Primary Care, CAMHS and Tusla at local level, providing the critical building blocks for service integration for the benefit of children and families. Fundamental to this is the implementation of the Primary Care, Disabilities, CAMHS Joint Protocol and National Access Policy by Primary Care, Disabilities and CAMHS jointly for all children with disabilities.

Many of the 60 actions contained in the Roadmap have already been progressed, including:

- The National Director of Community Operations has commenced engagement with Chief Officers, National Disabilities, Primary Care and Mental Health re **Integrated Children's Service**
- The Roadmap includes the National Children's Integrated Services 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.

Working Group 5: **Engagement with Education and Support for Special Schools** is tasked with implementing the recommendations of the *Collaborative Working between Education and Health Protocol* and in addition, working collaboratively to optimise health and education integration for the benefit of children with disabilities. The recruitment target of 300 Therapy Assistants over the next 2 and ½ years to work on CDNTs will also support children onsite in special schools with additional needs arising from their disability.

An intense and focused recruitment campaign to fill the remaining posts continues.

Yours Sincerely,

Bernard O'Regar

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