

SWID Conference 2020

Joint working protocols - structures for collaboration

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Interagency and Intra-agency Collaboration



- Slaintecare “Right care, right place, right time”
- Integrated services
- Children & families at the centre

Joint Working Protocols

Joint Working Protocol - Primary Care, Disability and CAMHS 2017

HSE and Tusla Joint Protocol for Interagency Collaboration 2017 (currently being reviewed)

AIM Joint Working Protocol - HSE & HSE funded Service Providers, Better Start Early Years Specialists and DCYA 2020

How will protocols help with improving collaboration?

- Define everyone's role and responsibilities
- Give the structure for raising concerns and problem solving
- Give a clear path for escalation of unresolved issues

Joint Working Protocol between Primary Care, Disability and CAMHS



Focus

Children and young people whose needs cross health services



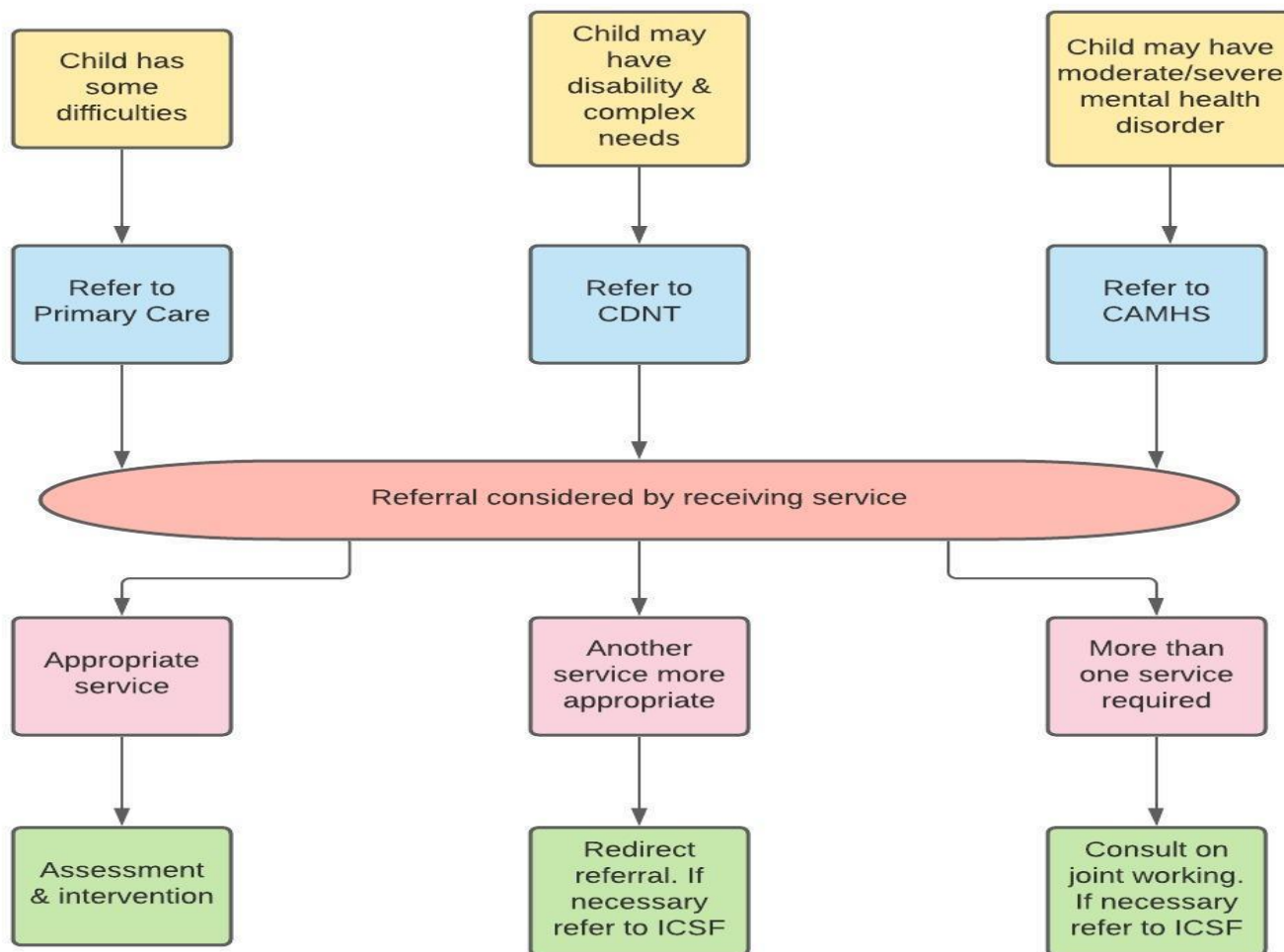
Issues

- Exclusion criteria for access
- Referrals passed from one service to another & back
- Gaps in access
- Lack of joint working

Recommendations

- Collaboration
- Seamless access
- Information
- Consultation
- Joint working
- Integrated Children's Services Forum (ICSF)

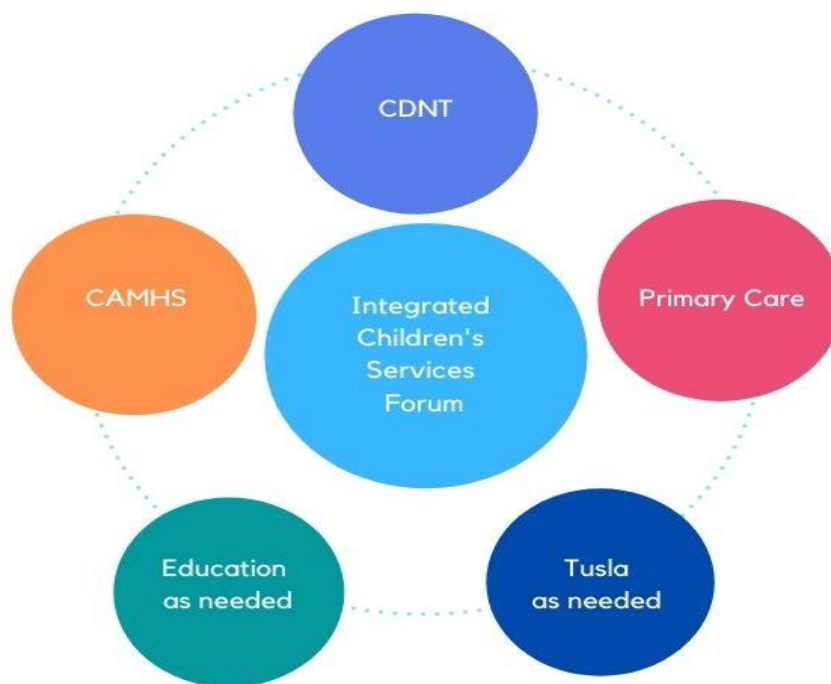
Referral pathway



Integrated Children's Services Forum

Forum to make final decisions

Only for referrals where most appropriate service unclear or when joint service delivery is needed



**Joint protocol for
interagency
collaboration
between the HSE
and Tusla**



Focus

Children and young people whose needs cross health services and Tusla



Issues

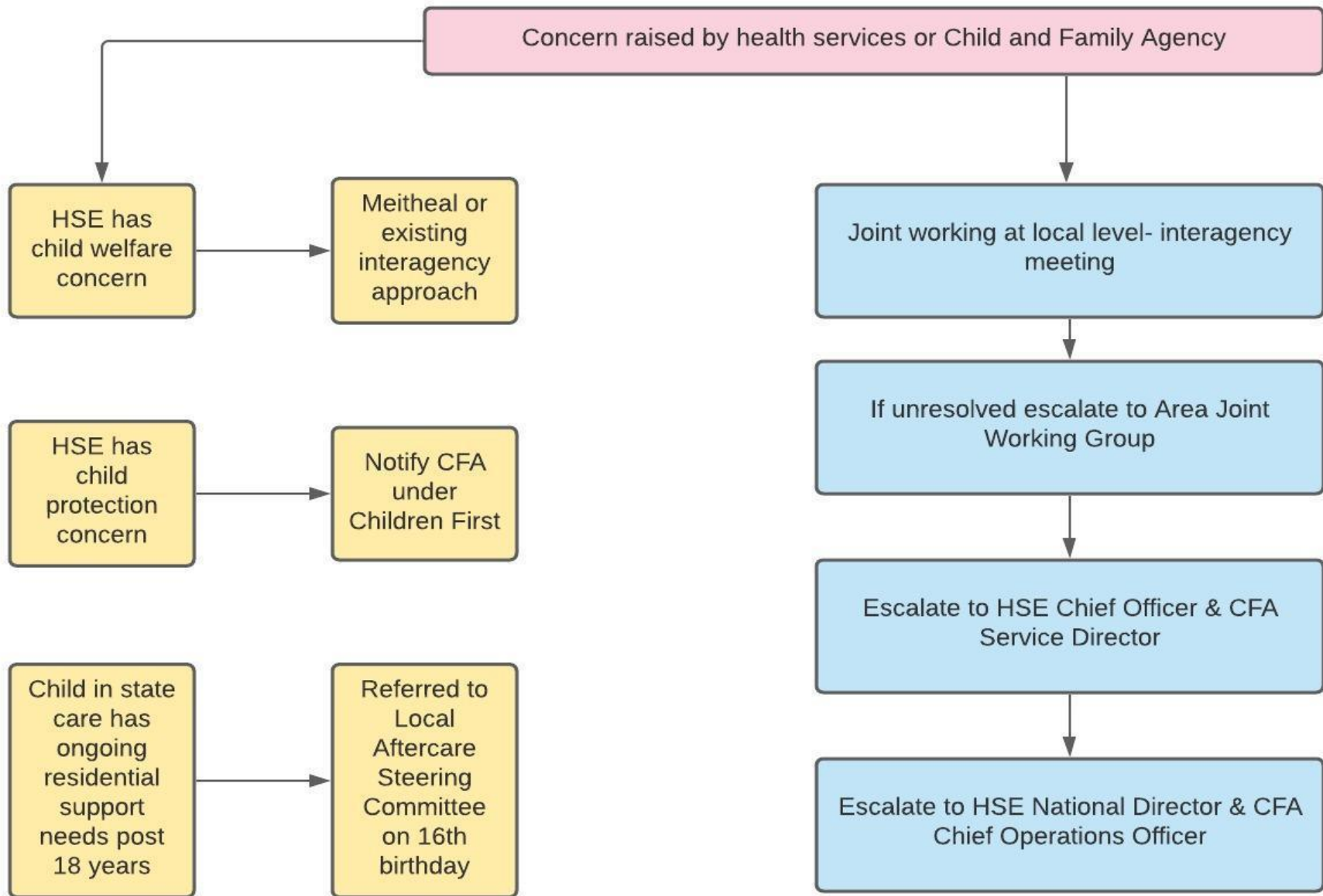
- Access to health services for children in state care
- Young people who require specialist support when they leave state care
- Children with health needs and child welfare issues, requiring early collaboration
- Funding

Key recommendation

Transition planning from 16th birthday for young people in care who have disability or mental health needs



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<https://commons.wikimedia.org/w/index.php?curid=79644682>



Joint Working at Local Level

Early engagement and informal consultation

Interagency meeting to develop joint care plans:

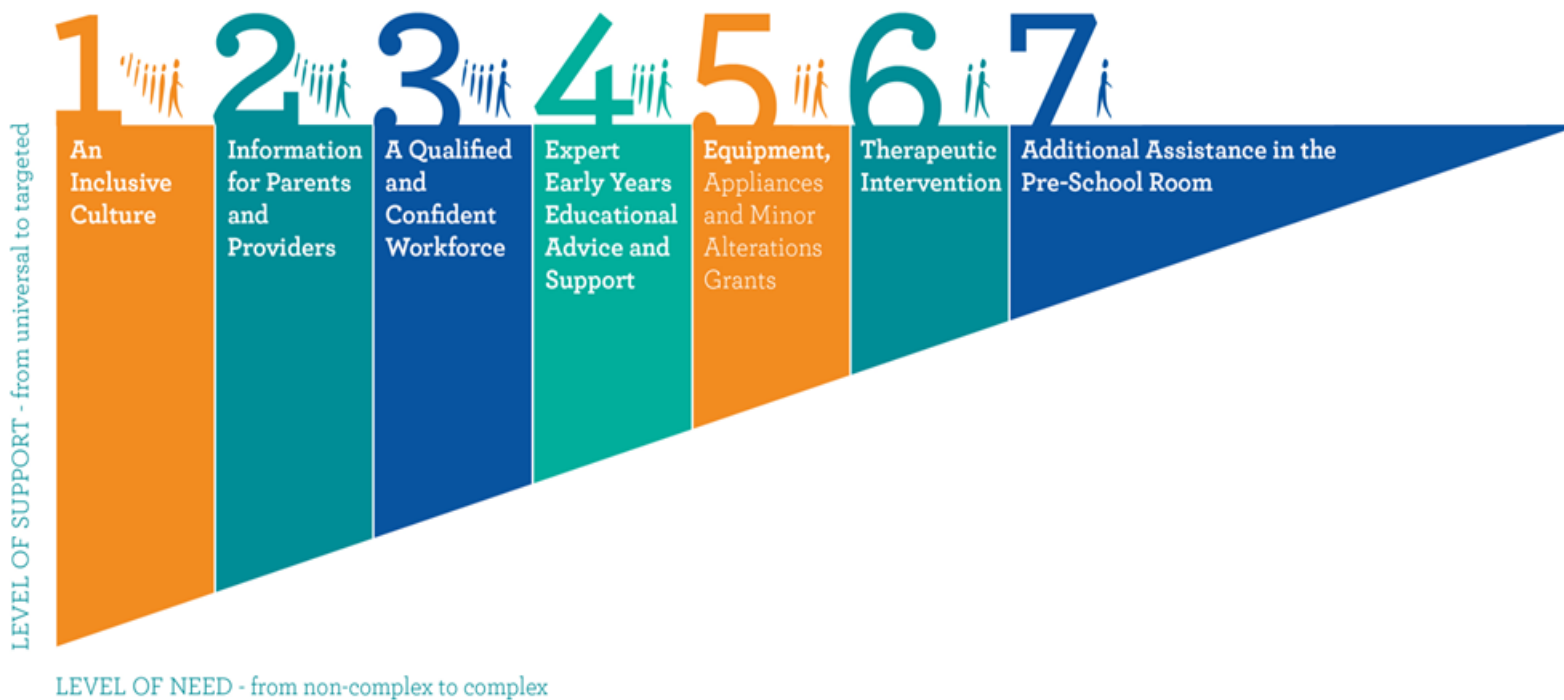
- Agree lead agency & key co-ordinator
- Identify interventions
- If a need cannot be met, advise line management
- Escalate unresolved issues to Area Joint Working Group

AIM Joint Working Protocol for HSE/HSE funded services, Early Years Specialists and DCYA



AIM levels 4 – 7 targeted supports

A Model to Support Access to the ECCE Programme
for Children with a Disability



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Building a Better Health Service

CARE COMPASSION TRUST LEARNING

Level 4 Expert Educational Advice

Role of Early Years Specialists

- If child known to health service, EYS contacts to review strategies
- If child not known to health service, EYS may contact to seek appropriate universal strategies

Level 5 Equipment & Alterations

Health professional:

- Confirms critical to child's participation
- Advises whether needs to be present for set up and training
- Advises on equipment transferring with child to school



By John Nieves Camacho, Public domain, via Wikimedia Commons

Level 6 Health Service Supports



Universal – information &
advice to EYS

Targeted - individualized
intervention &
support
plans

Level 7 Additional Capitation

- Role of EYS to recommend whether level 7 additional adult support required
- Role of health services solely to provide copies of pre-existing reports

Where to find these protocols

Under Key National Documents in the PDS pages on www.hse.ie/childdisability

<https://www.hse.ie/eng/services/list/4/disability/progressing-disability/pds-programme/documents/>

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