



Comment from the Psychological Society of Ireland regarding proposed line management duties of Children's Disability Network Managers

This document was prepared in response to concerns raised by members of the PSI in relation to the proposed line management responsibilities of Children's Disability Network Managers (CDNMs). Following the proposed commencement of these posts, the PSI communicated concerns to the HSE on behalf of the Society members.

Our members have raised these concerns due to the Society's Code of Professional Ethics, which require them to 'help develop, promote, and participate in accountability processes and procedures related to their work...behave in professional activities in such a way as not to damage clients' interests (and) be aware of their professional...responsibilities to clients, to the community, and to the society in which they work and live'.

Following careful consideration of all available information, the PSI wishes to express substantial concern regarding the proposed job description under which the Health Service Executive (HSE) is proceeding with the imminent appointment of CDNMs.

Background

Under the HSE's Progressing Disability Services (PDS) initiative, all current HSE and voluntary organisation children's disability services will be reconfigured. The proposed model creates 96 geographical cells termed Disability Networks. Each of these networks is responsible for the delivery of children's disability services within a defined geographical area.

Child Disability Network Teams (CDNTs) will provide a single interdisciplinary model of clinical services for children and young people with complex needs.

The PSI very much welcomes the continued implementation of the PDS initiative. Our members have been actively promoting the values embedded within the PDS model for many years. We are hopeful that it will result in the future development of children's services in a way that ensures accessible, equitable and timely access to quality services that include psychological assessments and interventions.

It is proposed that each CDNT will be coordinated and led by a CDNМ. The CDNМ Job Description currently states that the CDNМ will 'provide strategic leadership and direction for the team which results in the delivery of effective, efficient, quality assured...services'. Crucially the Job Description also states that the CDNМ will 'provide operational day to day line management' for the Health and Social Care Professionals (HSCPs) that comprise the team, including Psychologists, Physiotherapists, Speech and Language Therapists, Occupational Therapists and

Social Work Practitioners. It is further proposed that clinical supervision will be provided separately by members of each HSCP's own discipline.

We understand that the issue of CDNMs holding responsibility for operational line management of children's disability staff has been the subject of dispute between Fórsa and the HSE during 2019. We are not aware of any outcome from this.

Most recently, the HSE confirmed at the end of August that they are to commence with processing the appointment of CDNMs.

Position of the PSI

The Health Information and Quality Authority (HIQA) National Standards for Safer, Better Healthcare (2012) define clinical governance as, 'A system through which service providers are accountable for continuously improving the quality of their clinical practice, and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish. This includes mechanisms for monitoring clinical quality and safety...'

Theme 5 of the Standards (Leadership, Governance and Management) states that 'effective leadership, governance and management...are fundamental prerequisites for the sustainable delivery of safe, effective person-centred care and support'. Standard 5.2 (Service providers have formalised governance arrangements for assuring the delivery of high quality, safe and reliable healthcare) further stipulates that features of a service meeting this standard are likely to include (5.2.4): 'Arrangements that ensure that the people involved in the governance of the service have the skills and competencies necessary to provide effective assurance of high quality, safe and reliable healthcare'.

It is currently envisaged that all HSCPs within the team will have their performance management carried out by the CDNM. The CDNM will, therefore, carry responsibility for the clinical practice of staff including members of four disciplines different to that of the CDNM. The PSI contends that it is simply not possible for a single member of staff, trained in one discipline, to possess the prerequisite knowledge, skills, and competencies required in order to effectively monitor and assure the clinical competency and activity of all team members. We believe that CDNMs will therefore not, in fact, be able to ensure the delivery of a high-quality, safe and reliable service. As a result, the PSI is of the view that the above proposed changes are likely to have a deleterious impact on the standards of service delivery to children with complex needs and their families, and may result in increased clinical risk.

We contend that professional accountability must remain within discipline to ensure safe and effective service provision and, on behalf of our members, request that the HSE reconsider their position on this issue.

The PSI Council,
The Psychological Society of Ireland