

# Sharing the Vision A Mental Health Policy for Everyone

Policy Implementation
Status Report
Quarter 3, 2022

#### **Executive Summary**

This is the fifth status report on the implementation of *Sharing the Vision – A Mental Health Policy for Everyone* (StV). As the StV implementation reporting processes develop, so too do the quarterly status reports evolve. In response to feedback from the NIMC Steering Committee and Reference Group, and need for a more focused, qualitative approach to reporting, the NIMC Steering Committee has decided to trial a domain-themed report presentation, starting with this report, covering activity completed over the course of Quarter 3, 2022.

StV is organised around four core domains:

- Domain 1: Promotion, prevention and early intervention (12 recommendations).
- Domain 2: Service access, coordination and continuity of care (53 recommendations).
- Domain 3: Social inclusion (9 recommendations).
- Domain 4: Accountability and continuous improvement (26 recommendations).

Reflecting this structure, future reports will similarly be organised thematically in the following order:

- Report on Domain 1 & 3
- Report on Domain 2 (Part I)
- Report on Domain 2 (Part II)
- Report on Domain 4

This approach facilitates thematic reporting on the basis of domains, corresponding to the policy's organising framework. However, to ensure that momentum and oversight is maintained across all policy recommendations, reports will continue to be provided on a quarterly basis for all one hundred recommendations and will be available in Appendix B of this document.

The Quarter 3, 2022 status report is the first report to follow this domain-themed format and will focus on Domain 1 (Promotion, prevention and early intervention) and Domain 3 (Social inclusion).

#### **Report Content**

Section 1: Report Overview

Section 2: Quarter 3, 2022 Progress at a Glance

Section 3: Highlights Report on Sharing the Vision (StV)

recommendations from Domains 1 & 3

Appendix A – HSE StV New service developments Quarter 3, 2022

Appendix B – Quarter 3, 2022 StV recommendation updates

#### **Acronyms used**

In general, acronyms are not used widely in this report. However, those listed below appear frequently and will be commonly understood acronyms for most readers:

- ADHD attention deficit hyperactivity disorder
- CAMHS child and adolescent mental health services
- CBT cognitive behavioural therapy
- CHO community healthcare organisation
- DoH Department of Health
- GP general practitioner
- HIG HSE Implementation Group
- HSE Health Service Executive
- NIMC National Implementation Monitoring Committee
- PICU Psychiatric Intensive Care Unit
- StV Sharing the Vision



# Sharing the Vision A Montal Health Policy for

A Mental Health Policy for Everyone

Section 1
Report Overview

#### **Report Overview**

This is the fifth status report on the implementation of 'Sharing the Vision: A Mental Health Policy for Everyone' covering activity completed during Quarter 3, 2022. The report has been prepared by the joint NIMC Steering Committee and HIG Secretariats, and measures progress against milestones set out in the Sharing the Vision Implementation Plan 2022 – 2024 (StV Implementation Plan), published in March 2022.

The implementation of StV involves numerous stakeholders with extensive cross-collaboration across sectors. Eighty-two of the one hundred recommendations are being led by various care groups within the HSE and supporting partners, while the remaining 18 recommendations are being led by the DoH and other government departments and state agencies. A range of supporting partners have been identified, including key partners across the voluntary and community sector.

Building on the StV Implementation Plan, programme development is ongoing and establishment of thematic workstreams for HSE led recommendations is at an advanced stage with 70% of workstreams now stood up. These workstreams will support development of detailed delivery plans for individual recommendations, against which progress reporting can be further refined.

Implementation progress is reported based on an aggregate analysis of recommendations using the following categories: 'on track' / 'minor delivery issue' / 'major delivery issue' / 'paused' / 'not started yet' / 'completed'. The focus for this report is Domain 1 (Promotion, prevention and early intervention) and Domain 3 (Social inclusion), and highlights are summarised under the following headings: - *Progress Achieved, Emerging Developments,* and *Implementation Problems*.

Appendix A to this status report details HSE National Service Plan developments, specifically around the recruitment of posts to ensure the commencement of key service improvements. A full list of all one hundred recommendations is included as Appendix B where the lead agency is identified and quarterly progress captured.

## **Report Overview**

#### **Report Content**

This status report highlights timeframes associated with each recommendation (short-term, medium-term and long-term) from the publication of the StV Implementation Plan, as outlined below.

| Timeframe       | Duration   | No# Of Recommendations   | Due            |
|-----------------|--|--|----------------|
| Short-term      | The recommendation is to be delivered in 18 months | There are 42 short-term recommendations (one of which is categorised as 'ongoing') | September 2023 |
| Medium-<br>term | The recommendation is to be delivered in 3 years   | There are 53 medium-term recommendations   | March 2025     |
| Long-term       | The recommendation is to be delivered in 10 years  | There are 5 long-term recommendations  | March 2032     |

#### **Report Overview**

#### **Report Content - Continued**

Risk and issue management tracking systems continue to be developed, aligned with the StV Implementation Plan. As part of that development process, a modified reporting template requesting additional detail on risk and issue categories was piloted with a number of implementation leads across the HSE, government departments and state agencies in Quarter 1, 2022. Incorporating feedback from this pilot, an improved template was fully rolled out in Quarter 2, 2022, which included detail on 'implementation problems' and plans for addressing identified problems. The reporting template was further refined in Quarter 3, 2022 to allow for additional tracking and categorisation of implementation problems and mitigation plans.

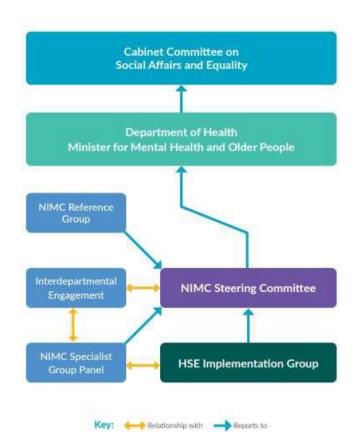
As detailed delivery plans are formed for each recommendation, metrics will also be developed and included in future reporting. For this report, implementation leads have indicated the status of their relevant recommendations in the following categories, as relevant:

- On-track –The project/initiative is proceeding and is on track to achieve the milestones that the implementation lead has identified (This is aligned to delivery timeframe identified in StV Implementation Plan)
- Minor delivery issue The project/initiative has a minor issue that is impacting, but not preventing ongoing work or is not critical to the delivery at this point. This could include slight delays to delivery plans, limited access to relevant stakeholders/partners, etc.
- Major delivery issue The project/initiative has a major issue that is critical and will prevent achieving the intended deliverables if not resolved
- Paused The project/initiative is involuntarily stalled due to an issue or voluntarily paused due to capacity issues or competing priorities
- Not started yet The project/initiative has not yet started. This could be due to the project/initiative still being defined, not being scheduled to start until a later date or awaiting funding
- Completed The planned actions associated with the recommendation are completed and intended outcomes have been realised.

#### **Oversight and Implementation Structures**

#### StV Recommendation 99

"A national 'whole-of-government' Implementation Committee should be established with strong service user and VCS representation to oversee the implementation of the recommendations in this policy and to monitor progress."



In line with recommendation 99, the NIMC has been established and comprises:

- The Steering Committee, which oversees implementation progress (Established December 2020)
- The HIG, tasked with HSE implementation (Established May 2021)
- A Reference Group to provide the service user, family and carer perspective (Established March 2022)
- Specialist groups to address the implementation of complex recommendations:
- Youth Mental Health Transitions
- Women's Mental Health
- Acute Inpatient Bed Capacity
- Digital Mental Health
- o Primary Care Mental Health

#### A note on co-production

In the development of recovery-oriented services, co-production has become a key mechanism for demonstrating recovery principles in action. Perspective of experts by experience (people with lived and recovery experience of mental health challenges and family/supporters) at all levels of mental health service development and delivery is essential to progress change. This approach is central to StV policy implementation.

To support the process of co-production at a strategic level, the HSE Mental Health Engagement and Recovery office have established a National Panel for Co-Production. This panel currently consists of 14 people with a broad range of interests and skill sets who represent their stakeholder group. Mental Health Engagement and Recovery will continue to recruit for volunteers throughout 2023 and will offer a volunteer support package which is similar to the approach of employee assistance programmes.

#### A note on gender

When StV documents refer to gender and being gender-sensitive, it is intended in the most inclusive sense. In using this term (gender-sensitive), the intention is to include and not exclude, recognising that gender identity extends beyond traditional binary concepts. Using gender to inform health policy is just one way of creating more targeted, personalised health services for all people in Ireland. It is important to keep language under constant review so that all those for whom StV is relevant see themselves reflected in it. It is important to recognise the ways in which the socio-political and cultural context shapes health service delivery and the experience of healthcare.



# Sharing the Vision

A Mental Health Policy for Everyone

Section 2
Quarter 3, 2022
Progress at a Glance

#### Work of the NIMC and the HIG Quarter 3, 2022

#### **NIMC Steering Committee and Secretariat**

Established in December 2020, the NIMC Steering Committee meets monthly. At NIMC Steering Committee meetings held in Quarter 3 (August and September), the Committee discussed: the report of the High Level Taskforce, the work of the Acute Bed Capacity and Youth Mental Health Specialist Groups, priority groups, recruitment and the Integrated Community Case Management System being developed by the HSE. Changes to quarterly reporting practices, the work of the Secretariat and the HIG, and the Mental Health Commission Submission to NIMC, were also discussed. The Committee agreed follow up actions as appropriate (for details please see published minutes here).

Additionally, the Committee discussed and approved the StV Status Implementation Report Q2 2022, taking into account the Reference Group Feedback, and published the NIMC Quarterly Report Analysis Quarter 2, 2022 (available here).

The NIMC Secretariat continued in its work of supporting the NIMC Steering Committee and co-ordinating the 18 non-HSE recommendations.

#### **HSE Implementation Group (HIG)**

The HSE Implementation Group (HIG) was established in May 2021 with an initial focus on the development of the first StV implementation plan. Following publication of the implementation plan in March 2022, a workstream model has been developed where StV recommendations are grouped thematically to assist implementation and collaboration. Reflecting this workstream model, and with the approval of NIMC, the HIG was reconstituted in Quarter 2 and continued to meet during Quarter 3 with a face-to-face workshop planned for October 2022.

The reconstituted HIG is made up of the individuals who are leading workstreams with additional membership representing key support functions. This approach is facilitating collaboration between workstreams which is crucial to implementation given the considerable overlap and interdependencies across recommendations within the various workstreams.

#### **Reference Group**

Established in March 2022, the Reference Group held its first official meeting on 11 May 2022, attended by Minister Butler and the NIMC Steering Committee Chair, Mr John Saunders. Since its establishment, the Reference Group has contributed to the reporting processes around the Quarter 1 and Quarter 2, 2022 status reports, providing commentary on the overall implementation of StV, as well as feedback on progress made in relation to specific recommendations.

The Reference Group Chair and Secretariat presented feedback on the Quarter 2, 2022 Report to the NIMC Steering Committee at the meeting on 19 August 2022. In advance of the preparation of this status report on activity completed during Quarter 3, 2022, implementation leads were made aware of Reference Group feedback in the previous quarter relating to their specific recommendations, and where possible, asked to provide additional detail where requested by the Reference Group. The joint NIMC Steering Committee and HIG Secretariats are planning to arrange a meeting with the Reference Group in Quarter 4, 2022 with a view to explore ways to further enhance communication and engagement on the implementation of StV.

#### **Specialist Groups**

#### **Youth Mental Health Transitions Specialist Group**

In Quarter 3, 2022, the specialist group consulted with young people with a two strand focus: 1. Young people's experience of transitioning from CAMHS and 2. Consultation on the 'Enhanced Transitions' recommendations as drafted by the specialist group. This facilitated process comprised of an online survey and two follow up opt-in focus groups. Quantitative and qualitative analysis of the survey and focus group data is underway, supported by the Royal College of Surgeons in Ireland. The group is at an advanced stage of developing an implementation plan for strand one of this work, and will consider the report produced by Royal College of Surgeons in Ireland in finalising this. A contract has been finalised with the University of Galway to undertake research to inform the evidence base for service planning to optimise mental health supports to the age of 25.

#### **Primary Care Specialist Group**

The Primary Care Specialist Group has convened with membership drawn from the Irish College of General Practitioners, HSE Mental Health Operations, and HSE Primary Care Operations. The core group now also includes a HSE Head of Service – Primary Care and a Head of Service – Mental Health. By Quarter 3, 2022, four meetings have been held to scope out a workstream and delivery structure to ensure that there is timely access to mental health resources, supports and services at a primary care level, thereby reducing demand for specialist mental health services. Reflecting the particular focus for recommendations within its remit, the Specialist Group is seeking to establish a number of working groups with the relevant subject matter expertise, including working groups on access to talk therapies and shared care.

#### **Acute Bed Capacity**

Established August 2021, the Acute Bed Capacity Specialist Group was set up to examine Acute Inpatient (Approved Centre) bed provision, (including PICU's) and to make recommendations on capacity reflective of emerging models of care, existing bed resources and future demographic changes. It has met on a number of occasions since, most recently in mid-September 2022 in order to review a draft, interim report. Due to the overlap in activities and focus, the acute bed capacity workstream was merged with the mental health services workstream of StV in Quarter 3, 2022. It is anticipated that the group will present to the NIMC in Quarter 4, 2022 and will also submit a written interim report.

#### **Digital Specialist Group.**

Set up May 2022, the Specialist Group on Digital Mental Health has held six meetings to date, with representation from HSE Psychology, HSE National Counselling Service, HSE Community Operations, HSE Digital, HSE Mental Health & Wellbeing, Mental Health Reform, the National Office for Suicide Prevention, Community Creations (Text 5808) and academia.

While developing a strategic action plan for digital mental health in Ireland, the group has also been providing governance and oversight with respect to ongoing service developments and operational issues in the digital mental health space. In Quarter 3, the group provided expert advice to the HSE's Mental Health Communications Steering Group and HSE Digital Communications on their public campaign on mental health literacy and reconfiguration of <u>yourmentalhealth.ie</u> in preparation for the October launch of 'Making the Connections'.

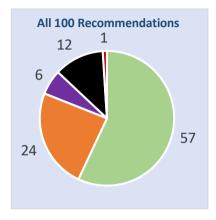
#### Women's Mental Health Specialist Group

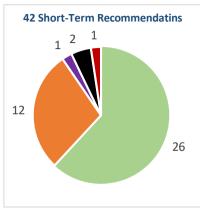
The Specialist Group on Women's Mental Health has met on a number of occasions during this quarter, and is finalising a report with recommendations to gender-proof the StV policy and support a focus on gender in its implementation. On-going engagement with its Consultation Group is supporting the completion of its work. The Specialist Group and Consultation Panel will meet in Quarter 4, 2022 to discuss the report with a view to present same to NIMC.

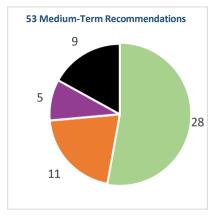
### **High Level Recommendation Status Summary**

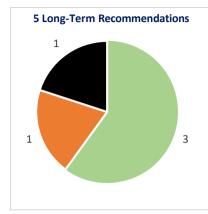
In Quarter 3, 2022, implementation leads have indicated the status of their relevant recommendations as illustrated below, based on timeframe for completion and domain respectively:

#### **Recommendation status by timeframe**



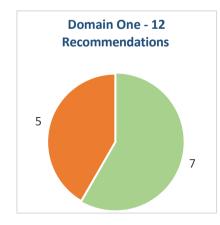


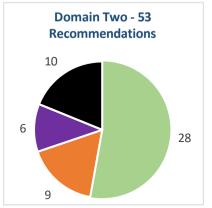


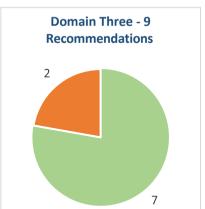


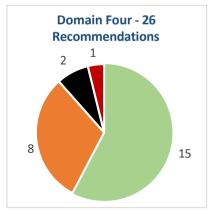


#### Recommendation status by domain



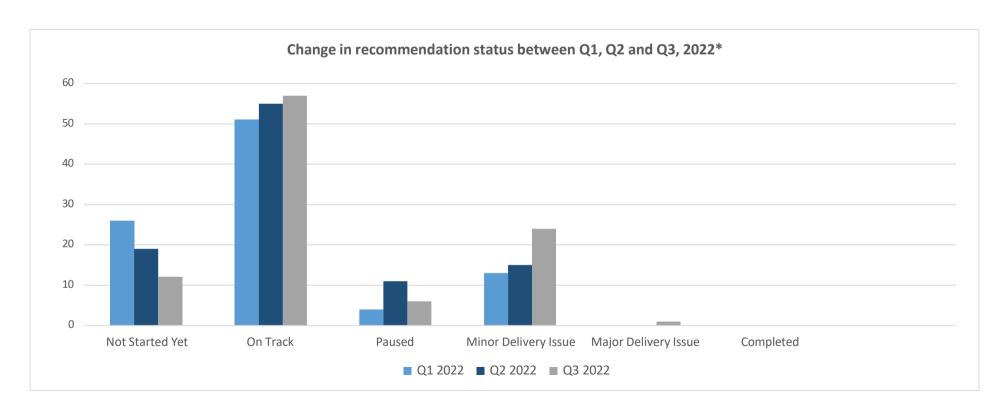




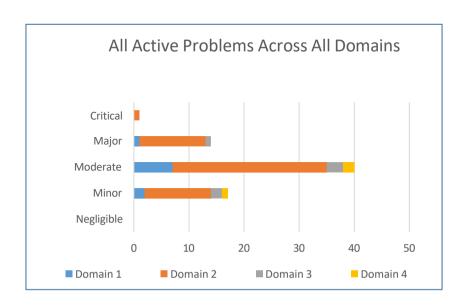


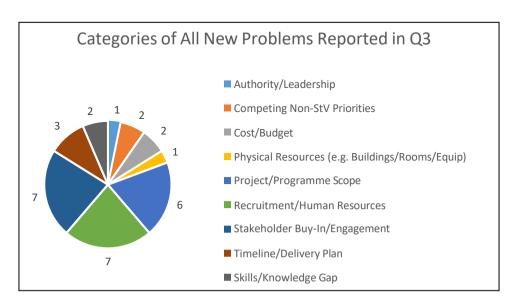


## **High Level Recommendation Status Summary**



## **Reported Problems**





The majority of implementation problems experienced in Quarter 3, 2022, relates to timelines for delivery, stakeholder engagement and recruitment/human resource.



# Sharing the Vision A Mental Health Policy for Everyone

Section 3

Highlights Report on

StV Recommendations

for Domains 1 & 3

# Domain 1 - Promotion, Prevention and Early Intervention (Recommendations #1 - #12)

- Background
- Detailed highlight report
- Progress Achieved
- Emerging Developments
- Problems & Mitigation Plans

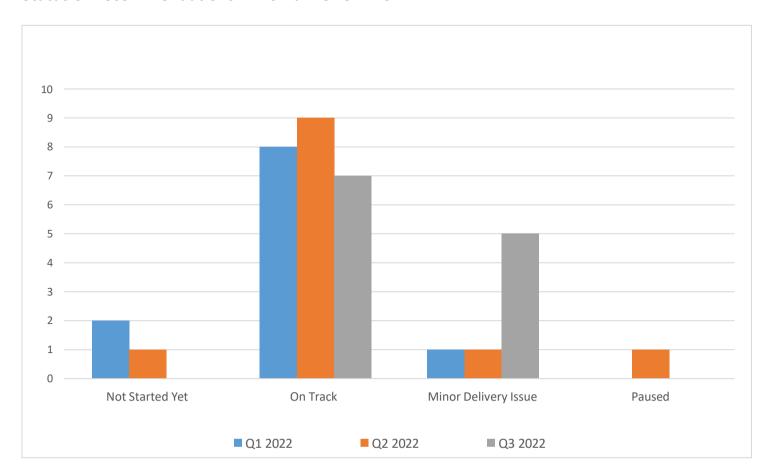
#### **Background**

Recommendations within Domain 1 are concerned with the promotion of mental health and wellbeing, building resilience, reducing mental health stigma and prioritising early intervention and prevention. Together, these recommendations will contribute to achieving the following outcomes:

- Positive mental health, resilience and psychological wellbeing amongst the population as a whole
- Positive mental health, resilience and psychological wellbeing amongst priority groups through targeted promotion and preventive mechanisms
- Reduced prevalence of mental health difficulties and/or reduced severity of impact(s) through early intervention and prevention work
- Reduced stigma and discrimination arising through improved community wide understanding of mental health difficulties

#### Recommendation status at a glance

#### Status of Recommendations in Domain One in 2022



#### **Progress Achieved**

Progress was made on the development of a new public mental health literacy campaign. Research informed additional content was developed on the topics: Anxiety, stress, low mood and sleep. This content was fact checked and reviewed clinically and designed for publication on yourmentalhealth.ie. Creative routes were tested and new campaign material was developed for the 'Making the Connections' campaign directing people to an improved landing page on <a href="mailto:yourmentalhealth.ie">yourmentalhealth.ie</a>, which incorporates the new content along with 'evergreen' mental health content and there is an enhanced focus on signposting supports and services.

In parallel, the Digital Mental Health Specialist Group is meeting monthly and is developing a strategic action plan with a focus on a layered model of digital mental health support.

(Recommendation #2)

The report of the Specialist Group on Women's Mental Health has been drafted and is currently being finalised. The Specialist Group and Consultation Panel will meet in October to discuss the report with a view to present same to NIMC in November 2022

(Recommendation #3)

A national network for health promotion and improvement officers working in the area of mental health has been established. The first meeting was held in September and there was exploration of how to develop the role with a view to putting greater emphasis on mental health promotion. Heads of Service for Health and Wellbeing and Health Promotion and Improvement Managers were surveyed on how mental health promotion work can best be implemented and results are now being analysed.

(Recommendation #4)

Data has been collated in relation to accessibility of social prescribing services for people with disabilities with a view to how inclusion might be improved. This is being done in collaboration with the recently established HSE Social Prescribing Advisory Group

(Recommendation #5)

The Directories of Continuing Professional Development (CPD) and the Catalogues of Resources have been updated and published online. Work on improving the online resources is continuing. CPD for schools on wellbeing promotion is also being progressed.

(Recommendation #9)

#### Recommendations Overview, Domain 1 – Promotion, Prevention and Early Intervention

#### **Emerging Developments**

A first meeting of the oversight group for the National Mental Health Promotion Plan took place in September, 2022. Terms of Reference were accepted and meeting schedules planned.

(Recommendations #1, #6, #11)

The working group tasked with developing a protocol for the liaison process between primary/post-primary schools, mental health services and supports such as the National Educational Psychology Service, GPs, primary care services and specialist mental health services continues to meet. The group is made up of representatives from the Department of Education and the DoH and in Quarter 3, 2022 the membership was expanded to also include representatives from the HSE and from the Primary Care Section of the DoH. An outline protocol on the liaison process is being drafted.

(Recommendation #10)

#### **Problems**

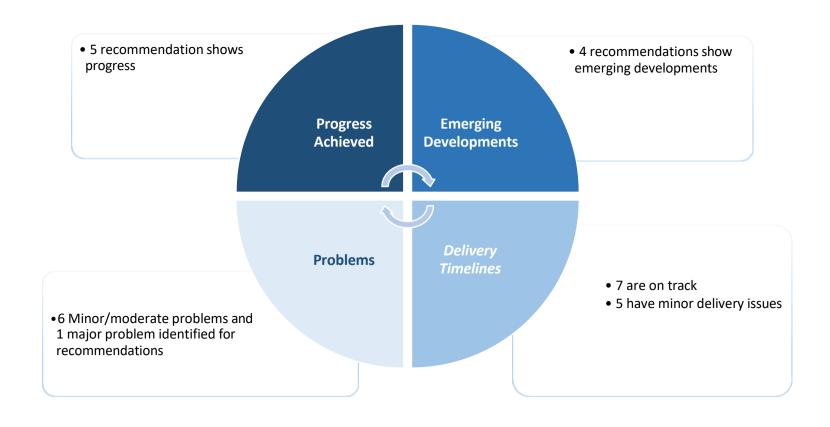
The development of a national stigma-reduction programme, informed by learning from delivery of existing campaigns, will require an allocated staff resource. A detailed delivery plan will be prepared in Quarter 4, 2022, to include analysis of required staff resource to progress this recommendation.

(Recommendation #7)

Resource constraints are reported as a problem for the development and implementation of actions designed to achieve the goals of the National Positive Ageing Strategy for the mental health of older people. To mitigate, this issue has been escalated through the DoH Older People's Strategy Unit and Human Resources department and it is expected this will resolve current resource constraints

(Recommendation #12)

# **Domain 1** (12 Recommendations) **Summary Health Status**



## **Domain 3 – Social Inclusion (Recommendations #66 - #74)**

- Background
- Detailed highlight report
- Progress Achieved
- Emerging Developments
- Problems & Mitigation Plans

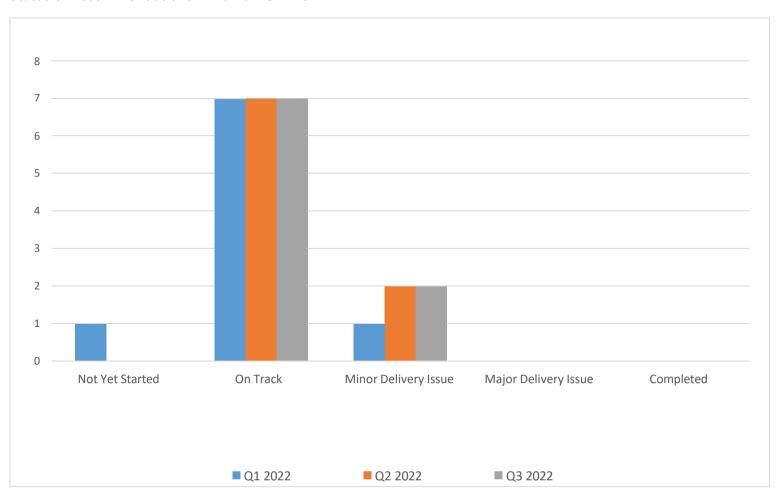
#### **Background**

Recommendations within Domain 3 are aimed at enabling service users living with complex mental health difficulties and their families, carers and supporters to feel connected and valued in their community. Together, these recommendations will contribute to achieving the following outcomes:

- Service users are respected, connected and valued in their community
- Improved outcomes in relation to education, housing, employment and income for service users relative to the population as a whole (i.e., reduced disparity).
- Increased ability of service users to manage their own lives [self-determination] via stronger social relationships and sense of purpose

#### Recommendation status at a glance

#### Status of Recommendations in Domain 3 in 2022



#### **Progress Achieved**

The new National Housing Strategy for Disabled People 2022-2027 was published earlier this year. The Department of Housing is taking the lead role in organising the new multi-agency group that will be tasked with providing oversight on the implementation of the Strategy. The Housing Design Guidelines (2016) will be included in the implementation plan. A HSE Mental Health nomination has been sought for membership of the Implementation Oversight Group.

(Recommendation #70)

The draft Standard Operating Procedure (SOP) for the Individualised Placement Support (IPS) model is at an advanced stage and further expansion of the model has been sought through Programme for Government (PFG) funding for 2023. A work programme has been finalised to include learning sets.

(Recommendation #71)

To help people aged 18-22 years who are in receipt of Disability Benefits to enter or return to employment, Intreo (Public Employment Service) case officers are currently sending Easy-to-Read letters inviting them to avail of Intreo services. This follows the commencement of the roll out of 'Early Engagement' in July. At the end of September some 2,000 people had received a call from a case officer with 15% of those expressing an interest in availing of Intreo supports. Work was undertaken in Quarter 3, 2022 in preparation for a two-week national media campaign, promoting Early Engagement.

Under the Roadmap for Social Inclusion and Pathways to Work strategies work has commenced on a 'strawman' proposal for restructuring long-term disability payments with a public consultation to be undertaken in due course.

(Recommendation #73)

#### Recommendations Overview, Domain 3 – Social Inclusion

#### **Emerging Developments**

Plans are underway to develop a position paper for review by NIMC which would outline a policy implementation approach for this recommendation. It will include a broadened perspective regarding the alignment of this recommendation with related government policy areas, including Housing, Social Protection etc.

(Recommendation #66)

Work on the Implementation Plan for the National Housing Strategy for Disabled People 2022 - 2027 is ongoing with the Department of Housing, Local Government and Heritage liaising with other departments on the actions.

(Recommendation #67)

The DoH and HSE is collaborating to agree terms of reference and stand up a working group to progress the development of a joint protocol that can guide the effective transition of individuals from HSE-accommodation to community living.

(Recommendation #68)

A working group has met and agreed a work plan to progress evaluation of current day service provision and includes development of a data mapping tool to categorise all day services and their functions across the CHOs. A potential learning site for the national project has been identified.

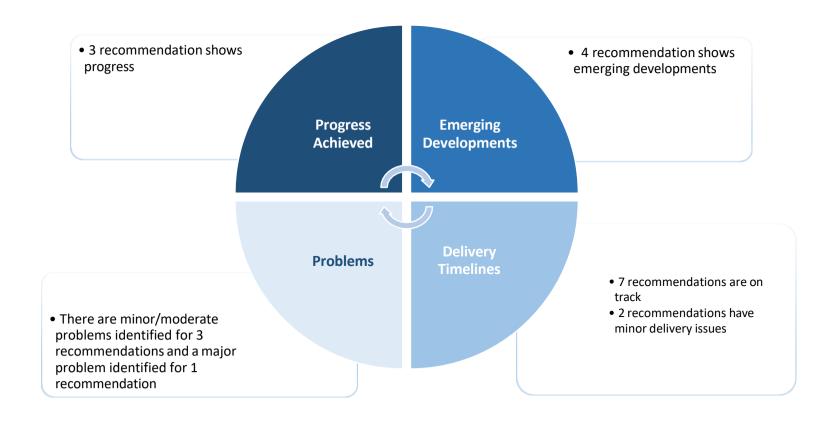
(Recommendation #72)

#### Problems

The challenge of obtaining ethical approval is reported as a major problem for progressing an evaluation of peer-led/peer-run services. To mitigate, efforts have been made to engage with a number of HSE ethics committees. A tender will be drafted to engage an external evaluator and the need to address ethics will be outlined in that tender.

(Recommendation #74)

# **Domain 3** (9 Recommendations) **Summary Health Status**





# Sharing the Vision

A Mental Health Policy for Everyone

Appendix A

HSE StV New Service

Developments

Quarter 3, 2022

#### **Executive Summary – National Service Plan**

The HSE approved the release of 302.7 previously held programme for government (PFG) posts for recruitment in 2021, alongside planned recruitment of an additional 154.4 posts under new developments for 2021 and 322.7 posts under new developments 2022, providing for an additional 779.8 staff across services.

Significant progress continued in Quarter 3, 2022 in the recruitment of staff, with 336.9 in place, and the remaining 442.9 posts at various stages in the recruitment process.

The shortfall in recruitment represents the challenges faced in

- o demand and availability of staff,
- o a significant demand on the HR/Recruitment systems across the HSE to support planned recruitment for replacement and development posts across care areas

The availability of skilled staff is a significant issue in mental health services across all disciplines where demand outstrips supply in both the national and international contexts, and our workforce (particularly younger staff) are availing of employment opportunities outside of Ireland.

An Integrated Mental Health Care Team Working Group is established, the purpose includes tracking and reporting on progress of National Service Development posts to comply with revised national Primary Notification processes.

A new recruitment operating model is being implemented under the direction of the National Director of Human Resources. Recruitment systems are in transition to this new model, which will enhance the effectiveness and efficiency of recruitment activities.

## National Service Plan - Quarter 3, 2022

| Programme for Government Funding  | Overall WTEs | <sup>6</sup> Staff<br>recruited to<br>date Q.3 2022 | Posts in process for recruitment e.g. advertising underway |
|---|--------------|---|--|
| <ul> <li>National Service Plan Commitments associated with Programme for Government Funding 2022</li> <li>Further investment in all developments outlined under NSP 2021</li> <li>Forensics services</li> </ul>   | 322.7        | 61.2  | 261.5  |
| <ul> <li>National Service Plan Commitments associated with Programme for Government Funding 2021</li> <li>Clinical Programmes(R 50,51, 57)</li> <li>CAMHS Hubs (R 35)</li> <li>Crisis Resolution Services (R 24,40)</li> <li>Individual Placement Service (R 71)</li> <li>Recovery Education Programme (R 29)</li> <li>Community Mental Health Teams (incl. Peer support) (R 32, 33, 34)</li> </ul> | 154. 4       | 97  | 57.4   |
| Programme for Government Funding 2013-2019 (posts released to system 2021)  | 302.7        | 178.7   | 124.1  |
|   | 779.8        | 336.9   | 442.9  |

<sup>&</sup>lt;sup>4</sup>All posts are new and additional and **not** replacement

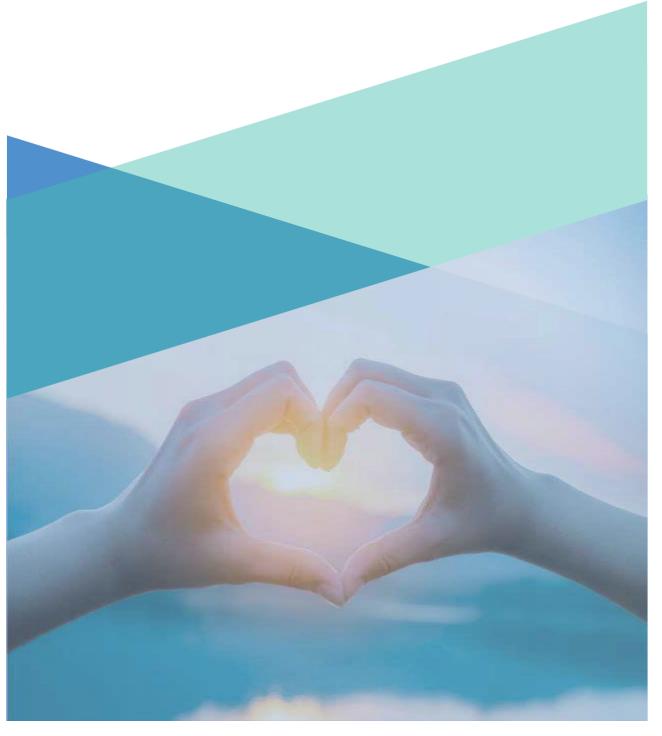
<sup>&</sup>lt;sup>5</sup>The HSE approved the release of 302.7 previously held PFG posts for recruitment in December 2020 of which 178.7 posts are filled. An additional 154.4 posts were allocated as PFG 2021 of which 97 posts are filled. In 2022 a further 322.7 posts were allocated of which 61.2 posts are filled.

 $<sup>^6</sup>$ Recruited means "in post" R= StV recommendation WTE = Whole Time Equivalents

# **Breakdown of whole time equivalents (WTEs)**

| NSP Initiative Area  | Recs       | Q.3 Update  |
|--|------------|---|
| Mental Health Clinical Programmes - Continue to progress development and implementation of the agreed clinical programmes and new models of care- Mental Health Intellectual Disabilities, Early Intervention in Psychosis and pilot site development for Dual Diagnosis | 50, 51, 57 | <ul> <li>The <u>CAMHS MHID Model of Service</u> was launched.</li> <li>Progress continues on the recruitment of staff to teams across Early Intervention in Psychosis, Eating Disorders, NCP ADHD in Adults, NCP Self Harm and NCP Dual Diagnosis</li> <li>Model of Care for Older Persons plans progressing with 4 pilot sites identified and business case approval with the Department</li> <li>Seeking Safety programme commenced- a partnership between the HSE and 7 specialist NGO's who work with women experiencing dual diagnosis and sexual and or domestic violence</li> </ul>  |
| Individual Placement Service-<br>Mainstream implementation of the<br>individual placement and support<br>programme   | 71         | Individual Placement Service posts mainstreamed as of 07.2021 in line with NSP  |
| Digital Developments- Implement agreed eMental health digital responses  | 2, 31      | <ul> <li>Work progressing on the development of a layered care model for delivery of digital mental health services. This model will reflect and incorporate services currently in place and in development.</li> <li>Final preparations made for the launch of the new public mental health campaign to coincide with World Mental Health Week.</li> <li>The HSE continues to offer a guided digital CBT service, provided by Silver Cloud. In Q3 (up until 23/9/22), there were 2,395 referrals with an activation rate of 62%. The procurement process to mainstream service has been completed with a contract now being finalised</li> </ul> |

| NSP Initiative Area   | Recs   | Q.3 Update   |
|---|--------|--|
| CAMHS Hubs - Progress the development of three CAMHS telehealth hubs to increase the provision of accessible care across multiple community healthcare areas, reducing waiting lists and managing projected new referrals.  | 35     | <ul> <li>National CAMHs Hub Steering group established, eight meetings held to date.</li> <li>Draft 2 of Standard Operating Procedure preparation for review by National Steering Group. Planning underway for stakeholder engagement process</li> <li>Recruitment of WTEs across 5 pilot sites progressing, anticipated in place Q.4 2022.</li> </ul>   |
| Crisis Resolution Services (Team and Café)- Progress the development of crisis resolution services as part of a phased development plan in line with Sharing the Vision, to implement alternatives to acute inpatient care and ED presentations through integrated care | 24, 40 | <ul> <li>National Crisis Resolution Services Steering group established, nine meetings held to date.</li> <li>Literature review and logic model completed and webinar held in March.</li> <li>Draft 4 of Standard Operating Procedure under review and close to finalisation.</li> <li>Recruitment of WTEs across 5 pilot sites progressing, anticipated in place Q.4 2022.</li> <li>Draft tender for monitoring and evaluation programme with National Steering Group for review and sign off.</li> </ul> |
| Expansion of Community Mental Health Teams Continue development of CAMHS and adult mental health teams in line with implementation priorities under Sharing the Vision  | 25     | <ul> <li>Recruitment continues across CHO areas with progress made across posts</li> <li>Mental Health Integrated Care Team working closely with CHO areas to monitor recruitment progress</li> </ul>  |



## Sharing the Vision

A Mental Health Policy for Everyone

Appendix B

Quarter 3, 2022

Recommendation updates

|             | Domain 1   | Promotion, Prevention and Early Intervention  |  |                      |
|-------------|--|---|--|----------------------|
|             | Recommendation   | Quarter 3, 2022 Update  | Owner  | Current status       |
| 1<br>Short  | Healthy Ireland already has a remit for improved mental health and wellbeing. To further strengthen this, a dedicated National Mental Health Promotion Plan should be developed and overseen within Healthy Ireland implementation frameworks, with appropriate resourcing. The plan should be based on the principles and scope described in Chapter 2 of Sharing the Vision. | First meeting of the Oversight Group for the National Mental Health Promotion Plan was held in September, 2022. Terms of Reference were accepted with some minor amendments and agreement reached to meet approximately monthly thereafter  | DoH<br>Health & Wellbeing Unit               | Minor Delivery Issue |
| 2<br>Medium | Evidence-based digital and social media channels should be used to the maximum to promote mental health and to provide appropriate signposting to services and supports.   | Additional content was developed on the topics identified (through research) for the new public mental health literacy campaign: Anxiety, stress, low mood and sleep. This content was fact checked and reviewed clinically and designed for publication on yourmentalhealth.ie  Creative routes were tested and new campaign material was developed for the 'Making the Connections' campaign directing people to a new landing page on yourmentalhealth.ie. The new landing page incorporates the new content along with 'evergreen' mental health content and there is an enhanced focus on signposting supports and services. | HSE<br>Mental Health<br>Integrated Care Team | On Track             |
| 3<br>Short  | The Department of Health Women's Health Taskforce and the National Implementation Monitoring Committee will undertake a joint project within 12 months to outline an effective approach to the mental health of women and girls. The project should ensure   | The report on women's mental health is currently being finalised. The Specialist Group and the Consultation Panel will meet in October to discuss the report with a view to presentation to NIMC in November, 2022.   | DoH<br>Women's Health<br>Taskforce           | On Track             |

|             | that mental health priorities and services are gender-<br>sensitive and that women's mental health is<br>specifically and sufficiently addressed in the<br>implementation of policy.  |  |                                |                      |
|-------------|---|--|--------------------------------|----------------------|
| 4<br>Short  | The work programme for health promotion and improvement officers should be reviewed to ensure parity of effort and emphasis on mental health promotion and physical health promotion.   | A survey was disseminated with CHO Heads of Service for Health and Wellbeing and Health Promotion and Improvement Managers, which included questions on how mental health promotion work can best be implemented. The results are currently being analysed.  A mental health and wellbeing practitioner network for health promotion and improvement officers working in the area of mental health promotion has been established and the first meeting was held September, 2022. Views on the development of the role to put a greater emphasis on mental health promotion were explored. | HSE<br>Health & Wellbeing      | On Track             |
| 5<br>Medium | New and existing community development programmes which promote social inclusion, engagement and community connectedness should be appropriately resourced and developed in line with the proposed National Mental Health Promotion Plan. | Data has been collated in relation to accessibility of social prescribing services for people with disabilities with a view to how inclusion might be improved. This is being done in collaboration with the recently established HSE Social Prescribing Advisory Group  | HSE<br>Health & Wellbeing      | On Track             |
| 6<br>Short  | The proposed National Mental Health Promotion Plan and the existing work of Connecting for Life should incorporate targeted mental health promotion and prevention actions that recognise the distinct needs of priority groups.          | First meeting of the Oversight Group for the National Mental Health Promotion Plan was held in September, 2022. Terms of Reference were accepted with some minor amendments and agreement reached to meet approximately monthly thereafter   | DoH<br>Health & Wellbeing Unit | Minor Delivery Issue |

| 7            | A National Stigma-Reduction Programme (NSRP)  | The development of a national stigma-reduction  | HSE   | Minor delivery issue |
|--------------|---|---|---|----------------------|
| Medium       | should be implemented to build a 'whole community' approach to reducing stigma and discrimination for those with mental health difficulties. This should build on work to date and determine a clear strategic plan, with associated outcomes and targets across related strands of work.   | programme will be progressed through a dedicated mental health promotion and digital mental health workstream and be informed by learning from delivery of existing campaigns, including 'See Change'. This workstream has now held its inaugural meeting and work is underway to prepare a detailed delivery, resource and stakeholder engagement plan to ensure timely delivery of this and other recommendations within its remit. | Mental Health<br>Operations   |                      |
| 8<br>Medium  | Learning from innovations in improving outcomes for children and young people should be identified and should inform relevant mainstream service provision.  This includes learning from prevention and early intervention programmes such as Tusla's Area Based Childhood (ABC) and Prevention, Partnership and Family Support (PPFS) Programme as well as crossborder programmes addressing the impact of Adverse Childhood Experiences (ACEs). | In order to ensure outcomes-focused working, efforts are continuing to promote use of Individual Family Service Plans in Children's Disability Network Teams.  This recommendation will be further progressed through a dedicated children and young people's workstream. A lead and co-lead for this workstream has now been appointed with recruitment of remaining core membership underway.                                       | HSE  Disabilities  HSE Primary Care  Operations via the Integrated Children's Services Forum (ICSF) | On Track             |
| 9<br>Medium  | All schools and centres for education will have initiated a dynamic Wellbeing Promotion Process by 2023, encompassing a whole-school/centre approach. Schools and centres for education will be supported in this process through the use of the Wellbeing Framework for practice and Wellbeing Resources which have been developed by the Department of Education and Skills   | The Directories of CPD and the Catalogues of Resources have been updated and published online. Work on improving the online resources is continuing. CPD for schools on wellbeing promotion is also being progressed.   | Department of<br>Education  | On Track             |
| 10<br>Medium | A protocol should be developed between the Department of Education and Skills and the HSE on the liaison process that should be in place between primary/post-primary schools, mental health services and supports such as NEPS, general practitioners  | The working group tasked with developing a protocol for the liaison process continues to meet. The group is made up of representatives from the Department of Education and the DoH and in Quarter 3, 2022 the membership was expanded to also include representatives from the HSE   | Department of<br>Education<br>Department of Health  | On Track             |

|              | (GPs), primary care services and specialist mental health services. This is needed to facilitate referral pathways to local services and signposting to such services, as necessary   | and from the Primary Care Section of the DoH. An outline protocol on the liaison process iss being drafted.  |  |                      |
|--------------|---|--|--|----------------------|
| 11<br>Medium | The National Mental Health Promotion Plan integrated with the Healthy Workplace Framework should incorporate actions to enhance the mental health outcomes of the working-age population through interventions aimed at mental health promotion in the workplace. This should consider environmental aspects of the working environment conducive to supporting positive mental health and wellbeing. | First meeting of the Oversight Group for National Mental Health Promotion Plan was held in September, 2022. Terms of Reference were accepted with some minor amendments and agreement was reached to meet approximately monthly thereafter to progress this and other related recommendations  | Department of Health<br>Healthy Ireland                      | Minor Delivery Issue |
| 12<br>Short  | A range of actions designed to achieve the goals of the National Positive Ageing Strategy for the mental health of older people should be developed and implemented, supported by the inclusion of mental health indicators in the Healthy and Positive Ageing Initiative's research programme  | Resource constraints are reported as a problem for the development and implementation of actions designed to achieve the goals of the National Positive Ageing Strategy for the mental health of older people. To mitigate, this issue has been escalated through the DoH Older People's Strategy Unit and Human Resources department. | Older People Strategy<br>Unit Department of<br>Health        | Minor Delivery Issue |
|              | Domain 2   S  | Service access, Coordination and Continuity of care  |  |                      |
|              | Recommendation  | Quarter 3, 2022 Update   | Owner  | Status               |
| 13<br>Short  | Directories of information on VCS supports should be provided to staff working in primary care and CMHTs to ensure they are aware of and inform service users and FCS about all supports available including those from Voluntary and Community Sector organisations in the local area  | The Mental Health Promotion and Digital Mental Health Workstream has convened and is developing its work programme to include this recommendation.  The new mental health literacy campaign, 'Making the Connections' is increasing visibility of all services including voluntary and community sector supports. A new page on        | HSE<br>Mental Health<br>Integrated Care Team<br>Primary Care | On Track             |
|              |   | supports and services features on the redeveloped mental   |  |                      |

|        |  | health pages https://www2.hse.ie/mental-health/services-   |                     |                       |
|--------|--|--|---------------------|-----------------------|
|        |  | support/supports-services/   |                     |                       |
| 14     | Where Voluntary and Community Sector   | * Q2 Connecting for Life (CfL) NGO <u>quarterly reports</u>  | HSE                 | On Track              |
| Medium | organisations are providing services aligned to the  | <u>received and reviewed</u>   | Mental Health       |                       |
|        | outcomes in this policy, operational governance and funding models should be secure and sustainable        | * Q2 NGO report completed, disseminated to CfL Cross   | Operations          |                       |
|        | runumg models should be secure and sustamable  | Sectoral Implementation Group and published on CfL   | National Office for |                       |
|        |  | website  | Suicide Prevention  |                       |
|        |  | * NGO call continues to be facilitated monthly   | Saloide Frevention  |                       |
|        |  | ·  |                     |                       |
| 15     | Social prescribing should be promoted nationally as an effective means of linking those with mental health | A Social Prescribing Advisory Group has been established and held its first meeting on the 20th September. Scoping | HSE                 | On Track              |
| Short  | difficulties to community-based supports and   | work is currently underway to develop a new measure of   | Health & Wellbeing  |                       |
|        | interventions, including those available through local   | 'social connectedness', a key outcome for social   |                     |                       |
|        | Voluntary and Community Sector supports and  | prescribing. Focus groups and interviews have taken place  |                     |                       |
|        | services.  | with social prescribing link workers and service users to  |                     |                       |
|        |  | inform its development. There is continued engagement with the Office of the Chief Information Officer to progress |                     |                       |
|        |  | procurement of a software solution for social prescribing.   |                     |                       |
|        |  |  |                     |                       |
| 16     | Access to a range of counselling supports and talk   | As part of the mental health in primary care specialist  | HSE                 | Minor Delivery Issues |
| Medium | therapies in community/primary care should be available on the basis of identified need so that all        | group and workstream, terms of reference have been agreed for a talk therapies working group. Work is now          | Primary Care        |                       |
|        | individuals, across the lifespan, with a mild-to-  | progressing to identify required subject matter expertise  |                     |                       |
|        | moderate mental health difficulty can receive prompt   | to progress this work and confirm membership. In the   |                     |                       |
|        | access to accessible care through their GP/ Primary  | interim, a synopsis has been prepared for a position paper   |                     |                       |
|        | Care Centre. Counselling supports and talk therapies   | outlining layered care service model for talk therapies.   |                     |                       |
|        | must be delivered by appropriately qualified and accredited professionals.                                 | Meanwhile, procurement has been completed to ensure continuing access to guided online CBT services.               |                     |                       |
|        | accredited professionals.  | continuing access to guided offilite CBT services.   |                     |                       |

| 17               | The mental health consultation/liaison model should   | As part of the mental health in primary care specialist  | HSE  | On Track        |
|------------------|---|--|--|-----------------|
| Short            | continue to be adopted to ensure formal links between CMHTs and primary care with the presence of, or in-reach by, a mental health professional as part of the primary care team or network.  | group and workstream, terms of reference have been agreed for a shared care working group, tasked with progressing recommendations 17, 18 and 19. An initial meeting was held in September 2022, which included the newly appointed GP Lead for Mental Health with the aim of further scoping the expected 'end-products'.   | Primary Care<br>Mental Health<br>Operations                    |                 |
| 18<br>Short      | An implementation plan should be developed for the remaining relevant recommendations in Advancing the Shared Care Approach between Primary Care & Specialist Mental Health Services (2012) in order to improve integration of care for individuals between primary care and mental health services in line with emerging models and plans for Community Health Networks and Teams. | As part of the mental health in primary care specialist group and workstream, terms of reference have been agreed for a shared care working group, tasked with progressing recommendations 17, 18 and 19.  An initial meeting of this working group was held in September 2022 and in preparation of this meeting, a review of Advancing the Shared Care approach between Primary Care and Specialist Mental Health Services (2012) report was completed to assess its implementation and prepare an outline for an implementation plan for those outstanding recommendations that are still relevant. | HSE Primary Care Mental Health Operations                      | On Track        |
| 19<br>Short      | The physical health needs of all users of specialist mental health services should be given particular attention by their GP. A shared care approach is essential to achieve the best outcomes.   | As part of the mental health in primary care specialist group and workstream, terms of reference have been agreed for a shared care working group, tasked with progressing recommendations 17, 18 and 19. An initial meeting was held in September 2022, which included the newly appointed GP Lead for Mental Health with the aim of further scoping the expected 'end-products'.   | HSE Community Operations Primary Care Mental Health Operations | On Track        |
| 20 (a)<br>Medium | There should be further development of early intervention and assessment services in the primary care sector for children with <b>ADHD</b> and autism to include comprehensive multi-disciplinary and paediatric assessment and mental health consultation  | A post has been advertised for a national lead role. The national lead will assemble a working group to support development of a model of care for children with ADHD  | HSE Primary Care Mental Health Operations                      | Not Started Yet |

| 20 (b)<br>Medium | with the relevant community mental health team where necessary. (ADHD Only)  There should be further development of early intervention and assessment services in the primary  | As part of the ongoing pilot of a protocol for assessment and intervention for children and adults with autism,  | Disabilities  National Clinical  Programmes  HSE  Primary Care              | On Track  |
|------------------|--|--|---|---|
|                  | care sector for children with ADHD and <b>autism</b> to include comprehensive multi-disciplinary and paediatric assessment and mental health consultation with the relevant CMHT where necessary. (Autism Only)  | tracking, evaluation and field work has now been completed. An interim draft report has been provided, we await the final report which is expected by the end of October 2022. Site conference calls took place in Quarter 3 and site visits are taking place in Quarter 4, 2022.  | Mental Health<br>Operations<br>Disabilities                                 |   |
| 21<br>Medium     | Dedicated community-based Addiction Service Teams should be developed/enhanced with psychiatry input, as required, and improved access to mental health supports in the community should be provided to individuals with co-existing low-level mental health and addiction problems. | This recommendation will be reviewed by the Social Inclusion workstream which is in the process of being established. The work required to implement this recommendation needs to be better defined. Community Operations have appointed a chair of the working group to initiate discussions between Mental Health & Social Inclusion in relation to a number of actions within Sharing the Vision. | HSE   | Not Started Yet  Need to complete recruitment of workstream in Q4 |
| 22<br>Short      | The provision of appropriate environments for those presenting at emergency departments who additionally require an emergency mental health assessment should be prioritised.  | The audit of assessment rooms form has been updated in line with revised standards and sent to all services for completion and return of audit form by Mid October.  | HSE Acute Hospitals  Department of Health  Clinical Programmes  (Self Harm) | On Track  |
| 23<br>Medium     | There should be continued investment in, and implementation of, the National Clinical Care Programme for the Assessment and Management of Patients Presenting to Emergency Departments Following Self-Harm.  | Nurse Lead for the National Clinical Programme commenced at end of August 2022. An online meeting was completed with sites selected for Suicide Crisis Assessment Nurse (SCAN) posts. Recruitment of the 6 SCAN posts across 4 sites is ongoing. It is anticipated that they will be filled by year end. Of the 2019 Programme For   | HSE<br>Clinical Programmes<br>(Self Harm)                                   | On Track  |

|              |  | Government funded Clinical Nurse Specialist posts in emergency department, 6 out of 8 posts have been recruited and taken up post. The remaining 2 posts have been offered to panels.  |   |   |
|--------------|--|--|---|---|
| 24<br>Short  | Out-of-hours crisis cafe's should be piloted and operated based on identified good practice. Such cafe's should function as a partnership between the HSE and other providers/organisations.       | <ul> <li>National Crisis Resolution Services Steering Group established, nine meetings held to date</li> <li>Draft 4 of the National Crisis Resolution Services SOP at edit stage and will be finalised in October for circulation to National Steering Group for review and sign off.</li> <li>Pilot sites agreed with six Crisis Resolution Teams and five Crisis Café sites.</li> <li>Sub working group on Café Standard Operating Procedure established and two meetings held in August to review SOP and work through operational requirements for implementation.</li> </ul> | HSE<br>Mental Health<br>Integrated Care Team  | On Track  |
| 25<br>Medium | The multi-disciplinary CMHT as the cornerstone of service delivery in secondary care should be strengthened through the development and agreed implementation of a shared governance model.        | This recommendation has not been sufficiently progressed in Quarter 3, 2022 due to competing operational priorities.   | HSE<br>MH Integrated Care<br>Team             | Not Started Yet  Need to complete  recruitment of  workstream in Q4 |
| 26<br>Medium | CMHTs' outreach and liaison activities with VCS partners in the local community should be enhanced to help create a connected network of appropriate supports for each service user and their FCS. | There has been a delay in recruiting HSE expertise to join the working group but this has been brought to the mental health engagement and recovery workstream and will be resolved in Quarter 4, 2022.  | HSE<br>Mental Health<br>Engagement & Recovery | Paused Planned resumption Q4  |
| 27<br>Medium | An individualised recovery care plan, co-produced with service users and/or Families, Carers and Supporters, where appropriate, should be in place for,  | Literature review progressed and completed. Engagement with the research team was conducted mainly by email and telephone over the summer months.  | HSE   | Minor Delivery Issue  |

|              | and accessible to, all users of specialist mental health services.  |  | Mental Health<br>Engagement and<br>Recovery                          |   |
|--------------|---|--|--|---|
| 28<br>Short  | All service users should have a mutually agreed key worker from the CMHT to facilitate coordination and personalisation of services in line with their coproduced recovery care plan.                             | This recommendation will be progressed as part of an integrated service user journey programme of work, which will also incorporate reference to other related recommendations. Scoping has commenced, building on recommendations from a recent national service improvement initiative aimed at developing a standardised care pathway for service users journeying through general adult community mental health services.  | HSE<br>Mental Health<br>Operations                                   | Paused  Need to conclude scoping of an integrated programme of work in Q4     |
| 29<br>Short  | Further training and support should be put in place to embed a recovery ethos among mental health professionals working in the CMHTs as well as those delivering services elsewhere in the continuum of services. | All recovery education services were requested to conduct a local review of facilitators' experiences and of those who attended the workshops. Two areas have carried out an indepth review including service provider engagement, and presented their findings September, 2022. The information gathered will be used to support the development of the new Recovery Principles and Practice. A review of Recovery Principles and Practice Workshop 1 was completed 29 – 30 September and resulted in clearly identified actions to progress this recommendation. | HSE<br>Mental Health<br>Engagement and<br>Recovery                   | Minor Delivery Issue  |
| 30<br>Medium | CMHTs and sessional contacts should be located, where possible and appropriate, in a variety of suitable settings in the community, including non-health settings   | This recommendation will be progressed as part of an integrated service user journey programme of work, which will also incorporate reference to other related recommendations   | HSE  Mental Health Engagement and Recovery  Mental Health Operations | Paused  Will resume with recommencement of Service User Journey project in Q4 |

| 31<br>Medium<br>32<br>Medium | The potential for digital health solutions to enhance service delivery and empower service users should be developed.  The composition and skill mix of each CMHT, along with clinical and operational protocols, should take into consideration the needs and social circumstances | The Digital Mental Health Specialist group continues to meet monthly and has been developing the layered care framework through identification of existing resources and of gaps in current service provision.  The procurement process for the provision of online CBT has been successfully completed and a contract for services is being developed between the HSE and the successful tenderer.  This recommendation will be progressed by a dedicated mental health services workstream. A lead for this work stream has now been confirmed and work is due to | HSE  MH Integrated Care  Team  HSE  MH Integrated Care | On Track  Minor Delivery Issue                       |
|------------------------------|---|---|--|--|
|                              | of its sector population and the availability of staff with relevant skills. As long as the core skills of CMHTs are met, there should be flexibility in how the teams are resourced to meet the full range of needs, where there is strong population-based needs assessment data. | commence to identify remaining core group members and to develop a planned work programme.  There has been significant progress with respect to the implementation of the model of care for talking therapies in mental health services and recruitment has progressed for Community Mental Health Teams in all CHO pilot sites and for the Talking Therapies Hubs. The working and steering groups have reconvened and are meeting on a monthly basis.   | Team   |  |
| 33<br>Medium                 | The shared governance arrangements for CMHTs as outlined in AVFC 2006–16 should be progressed, including further rollout of Team Coordinators.  | This recommendation will be progressed by a dedicated mental health services workstream. A lead for this work stream has now been confirmed and work is due to commence to identify remaining core group members and to develop a planned work programme.   | HSE<br>Mental Health<br>Operations                     | Paused  Need to complete  recruitment of  workstream |
| 34<br>Medium                 | Referral pathways to all CMHTs should be reviewed and extended by enabling referrals from a range of other services (as appropriate) including senior primary care professionals in collaboration with GPs  | This recommendation will be progressed as part of an integrated service user journey programme of work, which will also incorporate reference to other related recommendations. Scoping has commenced on this programme of work, which will build on recommendations  | HSE<br>Mental Health<br>Operations                     | Paused  Need to conclude  scoping of an  integrated  |

|             |  | from a recent national service improvement initiative aimed at developing a standardised care pathway for service users journeying through general adult community mental health services.  |  | programme of work in<br>Q4 |
|-------------|--|---|--|----------------------------|
| 35<br>Short | A comprehensive specialist mental health out-of-hours response should be provided for children and adolescents in all geographical areas. This should be developed in addition to current ED services.   | <ul> <li>National CAMHs Hub Steering Group established, eight meetings held to date, literature review and logic model completed, webinar held in April. Draft 2 of the National CAMHs Hub Standard Operating Procedure at edit stage and will be finalised October for circulation to National Steering group for review and sign off.</li> <li>Pilot sites agreed with 5 CAMHs Hub pilot sites as follows:         <ul> <li>CHO 2 (2021 funding) – operational</li> </ul> </li> <li>CHO 3 (2021 funding) – recruitment of posts progressing.</li> <li>CHO 6 (2022 funding) – recruitment of posts progressing.</li> <li>CHO 8 (2022 funding) – recruitment of posts progressing.</li> </ul> | HSE<br>Mental Health<br>Integrated Care Team               | On Track                   |
| 36<br>Short | Appropriate supports should be provided for on an interim basis to service users transitioning from CAMHS to General Adult Mental Health Services (GAMHS). The age of transition should be moved from 18 to 25 and future supports should reflect this | Workstream 1 has drafted a template for implementation plan of draft 'Enhanced Transitions' recommendations.  Consultation has taken place with young people on their experience of transition from CAMHS to AMHS and of their review of draft 'Enhanced Transitions' recommendations.  Findings to be analysed and report prepared by the Royal College of Surgeons Ireland.  A contract with University of Galway has been finalised to carry out research to support Workstream 2 (providing   | HSE<br>Mental Health<br>Operations<br>Department of Health | On Track                   |

|             |  | appropriate mental health supports up to age 25yrs) with delivery due end January 2023.   |  |                      |
|-------------|--|---|--|----------------------|
| 37<br>Short | Nationally agreed criteria should be developed to govern and resource individualised support packages for the specific needs of a small cohort of children and young people who have complex needs.                                | Each CHO / Tusla Area continue to progress their agreed implementation plans.  This recommendation will be further progressed through a dedicated children and young people's workstream. A lead and co-lead for this workstream has now been appointed with recruitment of remaining core membership underway.   | HSE  Mental Health  Operations  Disabilities       | On Track             |
| 38<br>Short | In the exceptional cases where child and adolescent inpatient beds are not available, adult units providing care to children and adolescents should adhere to the CAMHS inpatient Code of Governance.                              | A children and young people's workstream has been established with the appointment of a lead and co-lead. Recruitment of core membership is ongoing. Overview of implementation of this recommendation will be provided by the workstream.  A submission has been made by Mental Health Operations to the HSE Healthcare Audit Unit have an audit of 'Compliance with the Mental Health Commission Code of Practice Relating to Admission of Children under the Mental Health Act 2001' included in the National 2023 Healthcare Audit Plan | HSE<br>Mental Health<br>Operations                 | On Track             |
| 39<br>Short | The HSE should consult with service users, FCS, staff, and those supporting priority groups to develop a standardised access pathway to timely mental health and related care in line with the individuals' needs and preferences. | A series of meetings with service users, family members and HSE staff have taken place in Quarter 3, 2022 as part of the Mental Health Engagement and Recovery engagement process. A report is being prepared to inform this recommendation.  | HSE<br>Mental Health<br>Engagement and<br>Recovery | Minor Delivery Issue |

| 40           | Sufficient resourcing of home-based crisis resolution  | The National Crisis Resolution Services Steering Group  | HSE   | On Track  |
|--------------|--|---|---|---|
| Medium       | teams should be provided to offer an alternative response to inpatient admission, when appropriate.  | <ul> <li>continues to meet with nine meetings held to date.</li> <li>Draft 4 of the National Crisis Resolution Services Standard Operating Procedure at edit and will be finalised in October for circulation to National Steering Group for review and sign off.</li> <li>Pilot sites agreed with six Crisis Resolution teams and five Crisis Café sites.</li> <li>Sub Working Group on Café Standard Operating Procedure established and two meetings held in August to review this document and work through operational requirements for implementation.</li> </ul> | Mental Health<br>Integrated Care Team   |   |
| 41<br>Medium | A Standard Operating Guideline should be developed to ensure that sufficiently staffed day hospitals operate as effectively as possible as an element of the continuum of care and as an alternative to inpatient admission.                 | This recommendation will be progressed by a dedicated mental health services workstream. A lead for this work stream has now been confirmed and work is due to commence to identify remaining core group members and to develop a planned work programme.   | HSE<br>Mental Health<br>Integrated Care Team  | Not Started Yet  Need to complete  recruitment of  workstream in Q4 |
| 42<br>Short  | Individuals who require specialist Mental Health Services for Older People (MHSOP) should receive that service regardless of their past or current mental health history. People with early onset dementia should also have access to MHSOP. | Work is underway to implement the Model of Care for<br>Older Persons. Funding has been granted for three pilot<br>sites - a national lead is in place, pilot sites were identified,<br>job descriptions for the pilot sites have been completed   | Clinical Care Programme<br>for Mental Health<br>Services for Older<br>People / HSE Mental<br>Health Integrated Care<br>Team | On Track  |
| 43<br>Short  | The age limit for MHSOP should be increased from 65 years to 70 years supported by joint care arrangements between GAMHS and MHSOP teams for individuals who require the expertise of both.  | The scope of this recommendation needs to be considered as part of a workplan which will be detailed as part of the work of the clinical programmes workstream for StV, led by the National Clinical and Group Lead - Mental Health.  | Clinical Care Programme<br>for Mental Health<br>Services for Older<br>People / HSE Mental<br>Health Integrated Care<br>Team | Minor Delivery Issue  |

| 44<br>Short  | GPs, mental health service prescribers and relevant stakeholders should collaborate to actively manage polypharmacy.  | Work is yet to commence on this recommendation.   | HSE  | Not Started Yet  Need collaboration with newly appointed GP Lead for Mental Health to define work programme |
|--------------|---|---|--|---|
| 45<br>Medium | HSE should collate data on the number and profile of delayed discharges in acute mental health inpatient units and develop appropriately funded responses.  | The development of responses to address delayed discharges from acute mental health units will be progressed by a dedicated mental health services workstream. A lead for this work stream has now been confirmed and work is due to commence to identify remaining core group members and to development of a planned work programme, recommendation and associated actions. | HSE<br>Mental Health<br>Operations   | Paused Until Acute Bed Capacity report is available in Q4 2022  |
| 46<br>Short  | An Expert Group should be set up to examine Acute Inpatient (Approved Centre) bed provision (including PICUs) and to make recommendations on capacity reflective of emerging models of care, existing bed resources and future demographic changes, with such recommendations being aligned with Sláintecare. | Work is underway through the Expert Group to finalise a report and recommendations on Acute Bed Capacity. In line with 2022 milestones, this report is expected completed by Quarter 4, 2022.   | HSE<br>Mental Health<br>Operations   | On Track  |
| 47<br>Long   | Sufficient PICUs should be developed with appropriate referral and discharge protocols to serve the regions of the country with limited access to this type of service.   | This recommendations will be progressed in parallel with recommendation 46 through the Acute Bed Capacity Expert Group. The Expert Group is finalising a report and recommendations, which is expected completed by Quarter 4, 2022.  | HSE<br>Mental Health<br>Operations   | On Track  |
| 48<br>Short  | A cross-disability and mental health group should be convened to develop national competence in the commissioning, design and provision of intensive supports for people with complex mental health   | National Placement Oversight and Review Team (NPORT) continues to evaluate day services and out of area placements and reports back to senior management in the   | HSE<br>Mental Health and<br>Intellectual Disability<br>Clinical Care Programme | On Track  |

| 49<br>Long   | difficulties and intellectual disabilities and to develop a set of criteria to govern the provision of this service.  Intensive Recovery Support (IRS) teams should be provided on a national basis to support people with complex mental health needs in order to avoid inappropriate, restrictive and non-recovery-oriented settings. | disability division. Current work to review day services and planned work in relation to CHO3 placements  The development of IRS teams and supports, which is a long-term recommendation, will be progressed by a dedicated mental health services workstream. A lead for this work stream has now been confirmed and work is due to commence to identify remaining core group members and to develop a planned work programme. | HSE  Mental Health Operations  Mental Health Engagement and Recovery | <b>Not Yet Started</b> Long Term  Recommendation |
|--------------|---|---|--|--|
| 50<br>Medium | The development of a national network of MHID teams and acute treatment beds for people of all ages with an intellectual disability should be prioritised.  | Development of CAMHS-ID Model of Service  Reviews of multidisciplinary team appointments nationally  Model of Service launched 9/9/2022  https://www.hse.ie/eng/services/list/4/mental-health- services/camhs/camhs-id-model-of-service/camhs-id- model-of-service.pdf  | HSE  | On Track   |
| 51<br>Medium | SLT should be core members of the Adult-ID and CAMHS-ID teams.  | Ongoing liaison with CHOs nationally who were allocated funding to recruit speech and language therapists   | HSE  Mental Health  Operations  Disability                           | On Track   |

| 52<br>Long       | Investment in the implementation of the Model of Care for Early Intervention Psychosis (EIP), informed by an evaluation of the EIP demonstration sites, should be continued.   | The TCD evaluation report was launched by Minister Butler on 22nd September, 2022 and can alongside the NCAP National report for Ireland: Early Intervention in Psychosis (EIP) Audit be found on the HSE website.  Recruitment of 11.2 Whole Time Equivalents (WTEs) for across 5 EIP teams 2022 are in active recruitment a number of posts have been filled.  | HSE Early Intervention in Psychosis Clinical Care Programme | On Track |
|------------------|--|--|---|----------|
| 53 (a)<br>Medium | The National Mental Health Clinical Programmes for Eating Disorders, Adults with ADHD and the Model of Care for Specialist Perinatal Mental Health Services should continue to have phased implementation and evaluation.        | A focus group was arranged by the national clinical programme in partnership to discuss improvements needed to the HSE Self Care app. However, focus group participation was lower than expected and work is underway to meet and look at involving clinical teams directly in recruiting participants. An organisation is yet to be identified to complete an evaluation of the Model of Care. Work is ongoing with ehealth and procurement to get this project approved. An ICT number has now been allocated and an identified person in procurement. | HSE Clinical Care<br>Programme (for Eating<br>Disorders)    | On Track |
| 53 (b)<br>Medium | The National Mental Health Clinical Programmes for Eating Disorders, <b>Adults with ADHD</b> and the Model of Care for Specialist Perinatal Mental Health Services should continue to have phased implementation and evaluation. | Delphi study completed for the development of ADHD App and feedback focus group session on Adult ADHD App took place. Planned launch day for November 2022.  Developed bespoke job descriptions for Clinical Nurse Specialist MH and Senior OT campaigns  Draft report now complete on 3rd level institutions and supports in place for students with ADHD   | HSE Clinical Programme<br>(for ADHD)                        | On Track |

|                  |   | Evaluation of Adult ADHD teams continues with 2/3 sites providing data to UCD School of Psychology  CHO3 Consultant Psychiatrist for Adult ADHD service appointed and took up duty on 25th July, 2022  First National Oversight Implementation Group meeting took place on 20th July, 2022 and had representation from all three sites.   |  |   |
|------------------|---|---|--|---|
| 53 (c)<br>Medium | The National Mental Health Clinical Programmes for Eating Disorders, Adults with ADHD and the Model of Care for Specialist Perinatal Mental Health Services should continue to have phased implementation and evaluation. | A number of National Oversight Implementation Group meetings took place in Quarter 3, 2022  Meeting took place with the University College Cork National Epidemiology Perinatal Centre on developing a data collection system  A number of options were explored to capture patient feedback including Your Voice Matters and Patient-rated Outcome and Experience Measure  A candidate Advanced Nurse Practitioner and candidate Advanced Midwife Practitioner were approved for one hub site  Steady recruitment progress took place with the appointment of Senior Occupational Therapists in two Hub sites  Specialist Perinatal Mental Health training continued for teams based in Hub and Spoke Sites. | HSE Clinical Programme<br>(for Perinatal Mental<br>Health) | On Track  |
| 54<br>Medium     | Every person with Mental Health Difficulties coming into contact with the forensics system should have access to comprehensive stepped (or tiered) mental health support that is recovery-oriented and based on           | Membership of a Justice workstream is being recruited and project support has been identified.  | HSE<br>Mental Health<br>Operations                         | Not Started Yet  Need to complete  recruitment of  workstream in Q4 |

|              | integrated co-produced recovery care plans supported by advocacy services as required   |  | National Forensic<br>Mental Health Service<br>(NFMHS)                  |   |
|--------------|---|--|--|---|
| 55<br>Medium | There should be ongoing resourcing of and support for diversion schemes where individuals with mental health difficulties are diverted from the criminal justice system at the earliest possible stage and have their needs met within community and/or nonforensic mental health settings.   | Membership of a Justice workstream is being recruited and project support has been identified.   | HSE Mental Health<br>Operations  | Not Started Yet  Need to complete  recruitment of  workstream in Q4 |
| 56<br>Medium | The development of further ICRUs should be prioritised following successful evaluation of operation of the new ICRU on the Portrane Campus.   | The plan to open the Portrane site is at an advanced stage with the move to the site planned for Quarter 4, 2022   | HSE  Mental Health Operations  National Forensic Mental Health Service | On Track  |
| 57<br>Medium | a) A tiered model of integrated service provision for individuals with a dual diagnosis (e.g. substance misuse with mental illness) should be developed to ensure that pathways to care are clear*  b) Similarly, tiered models of support should be available to people with a dual diagnosis of intellectual disability and / or autism and a mental health difficulty^  ^covered under other recommendation. | During Quarter 3, 2022 we continued to develop and enhance the governance of the National Clinical Programme by working on specific areas. This approach ensured the Model of Care progresses, the implementation blocks and barriers are addressed, the evaluation framework is developed, with local and national systems in place, and the organisational capacity to provide training to core support staff is built. In addition to this the programme manager is engaging with numerous community projects seeking to develop a response to Dual Diagnosis. This collaboration is critical to ensure where possible local initiatives are being developed in a way that will support the roll out of the specialist teams. | HSE  Clinical Care Programmes Dual Diagnosis *a) only                  | On Track  |

| 58           | In order to address service gaps and access issues, a   | Recruitment for outreach team progressed. Once   | HSE  | Minor Delivery Issue  |
|--------------|---|--|--|---|
| Medium       | stepped model of integrated support that provides mental health promotion, prevention and primary intervention supports should be available for people experiencing homelessness. | complete, this will enable development of mental health<br>care pathways and approach to ensure integration across<br>CHO areas. This recommendation will be progressed in<br>parallel with recommendation 59  | Mental Health Operations Primary Care Operations Social Inclusion        |   |
| 59<br>Medium | Assertive outreach teams should be expanded so that specialist mental healthcare is accessible to people experiencing homelessness.   | This recommendation is progressed in parallel with recommendation 58. As stated, recruitment for outreach team was progressed in the past quarter. Once complete, this will enable development of mental health care pathways and approach to ensure integration across CHO areas.   | HSE  Mental Health Operations  Primary Care Operations  Social Inclusion | Minor Delivery Issue  |
| 60<br>Medium | Continued expansion of Liaison Mental Health<br>Services for all age groups should take place in the<br>context of an integrated Liaison Mental Health Model<br>of Care.          | Following engagement with multi agency stakeholders, a final draft model of care for liaison mental health services has been prepared and plans are underway for clinical review and editing of the document in Quarter 4, 2022  | HSE  | On Track  |
| 61<br>Medium | The HSE should maximise the delivery of diverse and culturally competent mental health supports throughout all services.  | The lead for the social inclusion workstream has taken up the role and the group is in the process of being established.   | HSE<br>Social Inclusion<br>Mental Health<br>Operations                   | Not Started Yet  Need to complete  recruitment of  workstream in Q4 |
| 62<br>Short  | Building on service improvements already in place, individuals who are deaf should have access to the full suite of mental health services available to the wider population.     | This recommendation will be progressed through a social inclusion workstream, tasked with examining current access to mental health services for the deaf community, and required steps to consistent service delivery by appropriately trained staff. A lead has been confirmed for this workstream and work is now underway to confirm | HSE<br>Mental Health<br>Operations                                       | Not Started Yet  Need to complete  recruitment of  workstream in Q4 |

|              |  | remaining core membership and to develop a detailed work plan for recommendations within its remit.   |  |   |
|--------------|--|---|--|---|
| 63<br>Medium | Persons in Direct Provision and refugees arriving under the Irish refugee protection programme should have access to appropriate tiered mental health services through primary care and specialist mental health services. | This recommendation will be progressed by a dedicated social inclusion workstream. A workstream lead has taken up the role and the core group is in the process of being established. Separately, and as part of the HSEs response to the humanitarian crisis following the war in Ukraine, a working group is being stood up to scope and design a future 'whole-of-organisation' service delivery model to meet the health and social care needs of the incoming displaced Ukrainian and migrant populations. The social inclusion workstream will align with work on this overarching service model. | HSE Social Inclusion Mental Health Operations      | On Track  |
| 64<br>Medium | Appropriately qualified interpreters should be made available within the mental health service and operate at no cost to the service user.   | This recommendation will be reviewed and defined by the social inclusion workstream once convened.  | HSE  Mental Health  Operations  Social Inclusion   | Not Started Yet  Need to complete  recruitment of  workstream in Q4 |
| 65<br>Medium | The HSE should ensure that access to appropriate advocacy supports can be provided in all mental health services.  | Work to be completed within the given time frame was underestimated. The recruitment campaign to commission an independent source to conduct a gap analysis of advocacy services across all mental health services went live on the 29th of September, 2022.  | HSE<br>Mental Health<br>Engagement and<br>Recovery | Minor Delivery Issue  |

|              | Domain 3   Social Inclusion   |   |  |   |
|--------------|---|---|--|---|
|              | Recommendation  | Quarter 3, 2022 Update  | Owner  | Status                                    |
| 66<br>Medium | Tailored measures should be in place in relevant government departments to ensure that individuals with mental health difficulties can avail, without discrimination, of employment, housing and education opportunities and have an adequate income.             | A broad perspective is being adopted regarding the alignment of this recommendation with related government policy areas, including Housing, Social Protection etc., with a view to developing a position paper for NIMC's review, to agree a policy implementation approach for this recommendation. | Department of Health                                       | On Track                                  |
| 67<br>Long   | Local authorities should liaise with statutory mental health services in order to include the housing needs of people with complex mental health difficulties as part of their local housing plans.   | The work on the Implementation Plan for the National Housing Strategy for Disabled People 2022 - 2027 is ongoing with the Department of Housing, Local Government and Heritage liaising with other departments on the actions.  | Housing Agency/ Local<br>Authorities                       | On Track                                  |
| 68<br>Short  | Department of Health and Department of Housing, Planning and Local Government, in consultation with relevant stakeholders, should develop a joint protocol to guide the effective transition of individuals from HSE-supported accommodation to community living. | The DoH and HSE is collaborating to agree terms of reference and stand up a working group to progress the development of a joint protocol that can guide the effective transition of individuals from HSE-accommodation to community living.  | Department of Housing,<br>Local Government and<br>Heritage | On Track                                  |
| 69<br>Medium | In conjunction with supports provided by HSE including Intensive Recovery Support teams, sustainable resourcing should be in place for tenancy-related/independent living supports for service users with complex mental health difficulties.                     | In those CHO areas where substantial housing co-ordinator posts weren't funded, services asked to include these as part of the 2023 estimates process. Awaiting outcome of same to see if funding requests have been successful.  | HSE  Mental Health  Operations  MH Housing Group           | Minor Delivery Issu                       |
| 70<br>Short  | The housing design guidelines published by the HSE and the Housing Agency in 2016 to promote independent living and mental health recovery should be a reference point for all housing-related actions in this policy.  | The new National Housing Strategy for Disabled People 2022-2027 was published earlier this year. The Department of Housing is taking the lead role in organising the new multi-agency group that will be tasked with providing oversight on the implementation of the Strategy.                       | HSE<br>Mental Health<br>Operations                         | On Track  Plan to move to  complete in Q4 |

|              |  | The Housing Design Guidelines (2016) will be included in the implementation plan. A HSE Mental Health nomination has been sought for membership of the Implementation Oversight Group. It is expected this recommendation will be reported as 'Complete' in Q4, 2022, pending completion of quality assurance and NIMC review   | Mental Health Housing<br>Group                     |          |
|--------------|--|---|--|----------|
| 71<br>Medium | A sustainable funding stream should be developed to ensure agencies can work effectively together to get the best outcomes for the individual using the Individualised Placement Support model, which is an evidence-based, effective method of supporting people with complex mental health difficulties to achieve sustainable, competitive employment where they choose to do so.   | The draft Standard Operating Procedure for the Individualised Placement Support model is at an advanced stage and further expansion of the model has been sought through Programme for Government funding for 2023. A work programme has been finalised to include learning sets for Occupational Therapist managers, Employment Coordinators and Employment Specialists  | HSE<br>Mental Health<br>Engagement and<br>Recovery | On Track |
| 72<br>Medium | The current HSE funding provided for day centres should be reconfigured to provide individualised supports for people with mental health difficulties and be consistent with the New Directions policy.  | A working group has met and agreed a work plan to progress evaluation of current day service provision and includes development of a data mapping tool to categorise all day services and their functions across the CHOs.  A potential learning site for the national project has been identified.   | HSE<br>Mental Health<br>Engagement and<br>Recovery | On Track |
| 73<br>Medium | In line with the strategic priorities of the Comprehensive Employment Strategy for People with Disabilities, the way people come on/off income supports should be streamlined to maximise entry or re-entry to the workforce with confidence and security. This should happen without threat of loss of benefit and with immediate restoration of benefits where they have an episodic condition or must leave a job because of their mental health difficulty | Following the commencement of the roll out of 'Early Engagement' in July, Intreo case officers are currently sending Easy-to-Read letters inviting persons aged 18 to 22 (in receipt of Disability Allowance) to avail of Intreo services - to help them enter or return to employment. At the end of September some 2,000 people had received a call from a case officer. 15% have expressed an interest in availing of Intreo supports. Work was undertaken in Quarter 3, 2022 in preparation for a two-week national media campaign, promoting Early Engagement due to commence Mid-October. | Department of Social<br>Protection                 | On Track |

| 74<br>Short &<br>Medium | The HSE should continue to develop, fund and periodically evaluate existing and new peer-led/ peer-run services provided to people with mental health difficulties across the country. | employment. Work has commenced on the 'strawman' with a public consultation to be undertaken in due course.  Researchers for the evaluation in place and terms of reference agreed and sent to Maynooth University. Work plan for scoping exercise as part of phase 1 this evaluation completed with a view to carry this out in Quarter 4, 2022 while awaiting resolution of ethics approval. | HSE  Mental Health Engagement and Recovery  Mental Health Operations | Minor Delivery Issue |
|-------------------------|--|--|--|----------------------|
|                         | Domain 4   | 1   Accountability and Continuous Improvement  |  |                      |
|                         | Domain 4 Recommendation  | 4   Accountability and Continuous Improvement  Quarter 3, 2022 Update  | Owner  | Status               |

| 76<br>Medium  | Implementation of this policy over the next ten years should achieve a re-balancing of resources and take account of population deprivation patterns in planning, resourcing and delivering mental health services.   | Awaiting national direction on plans for Regional Health Areas and mapping requirements across function areas.   | HSE<br>Mental Health<br>Integrated Care Team                  | Not Started Yet Awaiting national direction on Regional Health Area plans |
|---------------|---|--|---|---|
| 77<br>Medium  | A standardised set of performance indicators (PIs) directly aligned with the desired outcomes in <i>StV</i> and agreed standards of care and quality frameworks should be developed by the Department of Health and the National Implementation Monitoring Committee accounting for quantitative and qualitative delivery of intended outcomes. | The DoH Mental Health Unit is developing a formal application for the HRB Evidence Brief service through the DoH Research Services selection process, with a view to developing an international evidence review of similar large population outcome indicators for mental health policy implementation. This is a critical required output to support the implementation of this recommendation.                            | Department of Health  | On Track  |
| 78<br>Medium  | Regular surveys of service users and FCS should be independently conducted to inform assessments of performance against PIs and target outcomes in <i>StV</i> .   | The project lead has met with personnel involved in the design of the Acute Patient Journey Experience and the Staff Engagement for National HR office. The process and learning from these programmes will inform work to deliver recommendation 78.  | HSE<br>Mental Health<br>Engagement and<br>Recovery            | Minor Delivery Issue  |
| 79<br>Short   | Information on the process of making a complaint, including necessary contact details, should be visible, accessible and widely available in a variety of media, languages and formats for maximum accessibility in all mental health service settings and in other fora.   | Mental Health site visits have been deferred to Quarter 4, 2022. Feedback from the patients/service user's survey conducted through the Partnering with People who Use Health Services Programme office has been collated and reflected in the guidance manual.  | HSE<br>National Complaints<br>Governance and<br>Learning Team | Minor Delivery Issue  |
| 80<br>Ongoing | A culture of open disclosure to support patient safety is embedded in mental health services.   | The Quality Assurance Framework Workstream was launched in September, and has met on one occasion to agree on its function, terms of reference and membership. The group is still progressing a nomination from the HSE's Open Disclosure Team for the workstream. It is hoped that a representative from this team will join the workstream group in Quarter 4, 2022 to support the discovery work for this recommendation. | HSE<br>Quality Patient Safety<br>(QPS)                        | On Track  |

| 81           | Training should be provided for services users and  | The Quality Assurance Framework Workstream was  | HSE   | On Track |
|--------------|---|---|---|----------|
| Short        | staff on making and dealing with complaints.  | launched in September, and has met on one occasion to agree on its function, terms of reference and membership.  Plans are in place to commence the work on the high-level plan for this recommendation in the next quarter as part of developing the workstream blueprint.   | Mental Health Operations  Mental Health Engagement and Recovery  National Complaints Governance and Learning Team |          |
| 82<br>Short  | Mental health services should ensure that the principles set out in the National Healthcare Charter, You and Your Health Service, are embedded in all service delivery.   | The Quality Assurance Framework Workstream was launched in September, and has met on one occasion to agree on its function, terms of reference and membership. Plans are in place to commence work on a high-level plan for this recommendation in the next quarter as part of developing the workstream blueprint. | HSE  Mental Health Operations  Mental Health Engagement and Recovery  | On Track |
| 83<br>Medium | Future updates of the Quality Framework, the Judgement Support Framework and the Best Practice Guidance should be consistent with the ambition and the specific outcomes for the mental health system set out in Sharing the Vision.  | The Quality Assurance Framework Workstream was launched in September, and has met on one occasion to agree on its function, terms of reference and membership. Plans are in place to commence work on a high-level plan for this recommendation in the next quarter as part of developing the workstream blueprint. | HSE<br>Mental Health<br>Operations  | On Track |
| 84<br>Medium | The relevant bodies should come together to ensure that the measures for the Quality Framework, the Judgement Support Framework, the Best Practice Guidance, Sharing the Vision PIs and performance system and any future measurement systems are aligned and that the required data is derived, where possible, from a single common data set. | The Quality Assurance Framework Workstream was launched in September, and has met on one occasion to agree on its function, terms of reference and membership. Plans are in place to commence work on a high-level plan for this recommendation in the next quarter as part of developing the workstream blueprint. | HSE<br>Mental Health<br>Operations  | On Track |

| 85           | The work underway at national level to develop a cost   | The Integrated Finance Management System (IFMS)   | HSE   | Minor Delivery Issue |
|--------------|---|---|---|----------------------|
| Short        | and activity database for health and social care in Ireland should prioritise mental health services to leverage developmental work already underway and support the evolution of outcome-based resource allocation.  | project has been delayed due to issues with changing systems integrator (SI), a new SI has now been approved and has commenced work on the project in conjunction with the overall HSE IFMS project team in July 2022. The system is currently in the design validation phase with built and test phase expected to be completed by Quarter 1, 2023. The first phase of project implementation is expected to deploy to the Eastern region (i.e. CHO's 6, 7 and 9) in Quarter 2 of 2023 with all HSE statutory areas expected to be deployed to IFMS by end of Quarter 2, 2025.                                     | Mental Health<br>Integrated Care Team   |                      |
| 86<br>Medium | A national mental health information system should be implemented within three years to report on the performance of health and social care services in line with this policy.  | The Integrated Community Case Management System, an information management system that will include collating data for mental health, has received approval by the Executive Management Teams of the HSE, DGOU / DPER. A Public Sector Code Business case is being developed as is a requirement for all IT projects with a cost in excess of 5 million euro.   | HSE  Community Operations (Integrated Community Case Management System (ICCMS)) | On Track             |
| 87<br>Medium | The Department of Justice and the Implementation Monitoring Committee, in consultation with stakeholders, should determine whether legislation needs to be amended to allow for greater diversion of people with mental health difficulties from the criminal justice system. | The High Level Task Force (HLTF) Chair, Kathleen Lynch presented the report and its recommendations to the Ministers for Justice and Health. The HLTF report was published on the 30 <sup>th</sup> of September, 2022, following Cabinet approval. The Chair of NIMC received an advanced copy of the report prior to its publication. In total the report makes 67 recommendations, including recommendations relating to the need for legislative change. The DoH continue to liaise with the Department of Justice to establish a steering group tasked with the implementation of the report's recommendations. | Department of Justice   | On Track             |

| 88<br>Short | Training and guidance should be provided to staff on the practice of positive risk-taking, based on the principles of the Assisted Decision-Making (Capacity) Act 2015, where the value of promoting positive risk-taking is recognised by the regulator.                                      | A survey was circulated to all CHOs and voluntary sector providers through the reference group established to develop knowledge in Assisted Decision Making (ADM) across mental health services. The outcome of the survey highlighted a deficit of knowledge on the Act and its interface with mental health service provision. The reference group recommended a training event specifically focussed on ADM and mental health services. | HSE Mental Health<br>Operations<br>HSE National Office for<br>Human Rights and<br>Equality Policy | On Track   |
|-------------|--|--|---|--|
| 89<br>Short | Access to safeguarding teams and training should be provided for staff working in statutory and non-statutory mental health services in order to apply the national safeguarding policy.   | A representative from the National Safeguarding Office has joined the Quality Assurance Framework Workstream and agreed to lead on this recommendation. Work will be undertaken to review the HSEs safeguarding policy, upon completion of the national adult safeguarding policy for the health and social care sector  | HSE<br>Safeguarding Office  | Major Delivery Issue Current safeguarding policy excludes mental health services |
| 90<br>Short | The Justice and Health sectors should engage with the coroners, the Garda Síochána, the National Office for Suicide Prevention, the CSO and research bodies in relation to deaths in custody, recording deaths by suicide and open verdicts, to further refine the basis of suicide statistics | Discussion held between DoJ and NOSP to progress this work with a view to finalising an approach before the end of the year  Next CSO liaison group to be held on the 19th October, 2022.  | Department of Justice & Department of Health  | On Track   |
| 91<br>Short | Significant improvements are required in the monitoring and reporting of levels and patterns of self-harm and suicidality among people attending mental health services to inform a comprehensive and timely service response to effectively reduce levels of harm and death.                  | Consultation process has taken place with working group members and their respective teams. Document amended based on feedback received. Wider consultation with relevant stakeholders has been pushed out to Quarter 4, 2022 to facilitate improved presentation of draft document and to ensure that engagement process with key stakeholders takes place in advance of consultation exercise.   | HSE  Mental Health Operations  National Office for Suicide Prevention                             | Minor Delivery Issue  Consultation timeline extended                             |

| 92                  | In keeping with the evolving understanding of human   | In Quarter 3, 2022 the Department worked intensively   | DoH                      | Minor Delivery Issue |
|---------------------|---|--|--------------------------|----------------------|
| Short               | rights, particularly the UN Convention on the Rights of Persons with Disabilities, it is recommended that involuntary detention should be used on a minimal basis. A range of advocacy supports including both peer and representative advocacy should be available as a right for all individuals involved with the mental health services | with the Attorney General's Office to address legal issues raised in the General Scheme, particularly on the interaction between the Mental Health Act and the Assisted Decision-Making (Capacity) Act 2015 and its amending Bill. The Office of Parliamentary Counsel has signalled that the Mental Health Bill will not be ready for publication by year-end. The Department wrote to the Attorney General's Office to request that any outstanding legal advices on the General Scheme be prioritised and returned to the Department and that the drafting of the Bill itself be prioritised. | Mental Health Unit       |                      |
| 93<br>Short         | A National Population Mental Health and Mental Health Services Research and Evaluation Strategy should be developed and resourced to support a portfolio of research and evaluation activity in accordance with priorities identified in the research strategy  | In Quarter 3, draft Terms of Reference (ToR) have been developed and a longlist of names and expertise collated for proposed membership of the Expert Group, pending agreement with NIMC/DoH. Sanction has been secured to recruit a Programme Manager with dedicated time to coordinate all activities to advance recommendation 93. ToR and membership of the Expert Group will be formally agreed in Quarter 4, 2022, with the group convening to begin work in early 2023 (when the Programme Manager is in post).   | Health Research Board    | Minor Delivery Issue |
| 94<br>Not Specified | In order to bring about change, a strategic approach is required involving the necessary skills in change management. This approach has been developed in the former HSE Mental Health Division (MHD) Strategic Portfolio and Programme Management Office and should be mainstreamed and embedded in the wider HSE.                         | As part of reform of the HSE 'Centre' a Change and Innovation Directorate has been established. An Assistant National Director for Change and Innovation has been employed to drive change in Mental Health and Disability Services.   | HSE Community Operations | On Track             |

| 95           | The initiatives under the former Mental Health   | Recruitment of additional resources to support the   | HSE   | On Track  |
|--------------|--|--|---|---|
| Short        | Division Strategic Portfolio and Programme Management Office (SPPMO) and the ongoing Social Reform Fund (SRF) should be gathered together and made available both to encourage further innovation and to avoid duplication in the public service and NGO sectors.                                | implementation of change management initiatives is now up and running. Two additional service improvement leads have been recruited, and there is an active recruitment campaign to recruit more. All will support new change initiatives across Community Operations. | Community Operations  |   |
| 96<br>Medium | Innovations which have good evidence for clinical and/or social and cost effectiveness should be rolled out nationally. This will require the changing of practices and modification or cessation of services which are superseded by the new form of delivery.                                  | HSE reforms bringing the new Change & Innovation for Mental Health and Community Operations Improvement and Change (CHOIC) online, will now adopt the remit of driving forward cost effective innovations as part of business as usual.                                | HSE Community Health Operations Improvement & Change (CHOIC) Mental Health Integrated Care Team | On Track  |
| 97<br>Medium | Mental health services should make use of other non-<br>mental health community-based physical facilities,<br>which are fit for purpose, to facilitate community<br>involvement and support the implementation of the<br>outcomes in this policy.  | It has been agreed with the HIG that recommendation 97 will be led by the Mental Health Engagement and Recovery workstream. A project lead has been identified to progress this recommendation.  | HSE  Mental Health Operations  Mental Health Engagement and Recovery                            | Not Started Yet  Need to complete  recruitment of  workstream in Q4 |
| 98<br>Long   | Capital investment should be made available to redesign or build psychiatric units in acute hospitals which create a therapeutic and recovery supportive environment. It is essential that all stakeholders are involved in a structured service design process for all redesigns or new builds. | Work progressed to incorporate capital planning in the<br>National Service Plan for 2023   | HSE<br>MH Integrated Care<br>Team   | Minor Delivery Issue  |
| 99<br>Short  | A national 'whole-of-government' Implementation<br>Committee should be established with strong service<br>user and VCS representation to oversee the   | The Department worked with colleagues in the HSE to develop domain themed reports, in an effort to improve the quality of the reports. This approach was approved by   | DoH   | On Track  |

|               | implementation of the recommendations in this policy and to monitor progress.   | the NIMC Steering Committee with the first domain themed report to cover activity in Quarter 3, 2022.  |  |          |
|---------------|---|--|--|----------|
| 100<br>Medium | A joint review of the two specialist training programmes by the College of Psychiatrists of Ireland and the Irish College of General Practitioners should be undertaken to develop an exemplar model of mental health medical training and integrated care. | A new GP Lead for Mental Health was appointed and has been in post since mid-September 2022. A meeting was recently held with the College of Psychiatrists and the Irish College of General Practitioners. The new GP Lead for Mental Health was also in attendance. This meeting was facilitated by the National Clinical Advisor and Group Lead (Mental Health) office in the HSE. | HSE National Clinical<br>Advisory and Group<br>Lead for Mental Health<br>DoH | On Track |