



Sharing the Vision

A Mental Health Policy for
Everyone

Policy Implementation

Status Report

Quarter 4, 2022

Executive Summary

This is the sixth 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 a need for a more focused, qualitative approach to reporting, the NIMC Steering Committee is continuing to trial, for the second time, a domain-themed report presentation, covering activity completed over the course of Quarter 4, 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 (Quarter 3, 2022)
- Report on Domain 2 (Part I) (Quarter 4, 2022)
- Report on Domain 2 (Part II) (Quarter 1, 2023)
- Report on Domain 4 (Quarter 2, 2023)

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 4, 2022 status report is the second report to follow this domain-themed format and will focus on Domain 2 (Part I). All recommendations in Domain 2 are HSE led and organisation of the Domain 2 (Part I) and Domain 2 (Part II) reports are based on thematic grouping of the recommendations. Domain 2 (Part I) will focus on Clinical Programmes, Mental Health Planning, Mental Health Promotion and Digital, Children and Young People and Primary Care aligning with the thematic workstreams structure being established for implementation of HSE led recommendations.

Report Content

Section 1: Report Overview

Section 2: Quarter 4, 2022 Progress at a Glance

Section 3: Highlights Report on Sharing the Vision (StV)
recommendations from Domain 2 (Part I)

Appendix A – HSE StV New service developments Quarter 4, 2022

Appendix B – Quarter 4, 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 and Monitoring Committee
- PICU – Psychiatric Intensive Care Unit
- StV – Sharing the Vision

Sharing the Vision

A Mental Health Policy for
Everyone

Section 1

Report Overview



Report Overview

This is the sixth status report on the implementation of *'Sharing the Vision: A Mental Health Policy for Everyone'* covering activity completed during Quarter 4, 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 established and 30% at advanced stage of initiation. 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 2 (Part I) and is organised thematically with a focus on Clinical Programmes, Mental Health Planning, Mental Health Promotion and Digital, Children and Young People and Primary Care. 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-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. In Quarter 4 2022, the template was modified to begin tracking work which contributes to 2023 milestones.

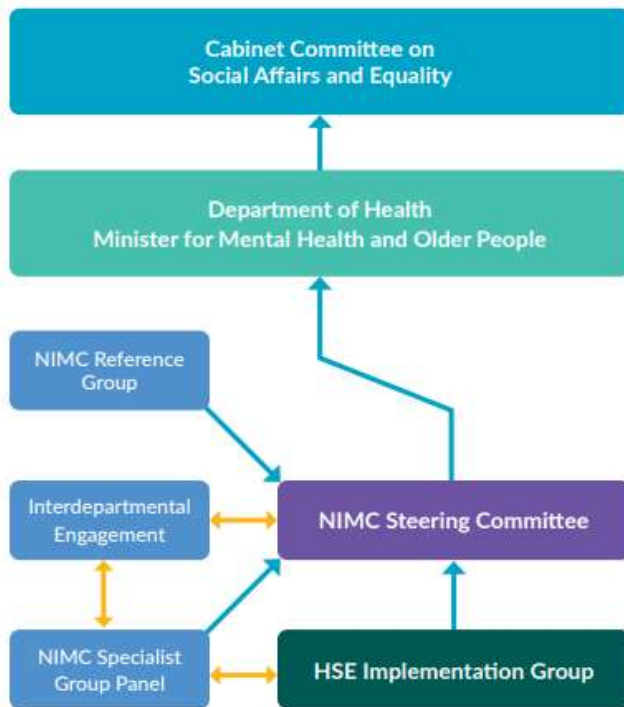
As detailed delivery plans are formed for each recommendation, metrics will also be developed and included in future reporting. For this report, implementation leads have indicated the status of their relevant recommendations in the following categories, as relevant:

- 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.”



Key: ↔ Relationship with → Reports to

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
 - 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 4, 2022

Progress at a Glance

Work of the NIMC and the HIG Quarter 4, 2022

NIMC Steering Committee and Secretariat

Established in December 2020, the NIMC Steering Committee meets monthly. At NIMC Steering Committee meetings held in Quarter 4 (October, November and December), the Committee discussed: the report of the High Level Taskforce, the work of the Acute Bed Capacity and Youth Mental Health Specialist Groups, the report of the Women's Mental Health Specialist Group, the implementation of Recommendation 66 (tailored measures in place in relevant government departments to ensure individuals with mental health difficulties can avail, without discrimination, of employment, housing and education opportunities and have an adequate income), mental health actions within the Traveller Mental Health Action Plan, recruitment and workforce planning and the Health and Social Care Workforce Planning Strategy, Action Plan and Planning Projection Model, and the Paediatric Liaison Psychiatry (PLP) in Children's Health Ireland submission to NIMC. 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 Q3 2022, taking into account the Reference Group Feedback, and published the NIMC Quarterly Report Analysis Quarter 3, 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 and a face-to-face workshop was held in 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.

In Quarter 4, the HIG and NIMC Secretariats worked together to align their meeting schedules and agendas for 2023 to support an ongoing collaborative approach to implementation monitoring.

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 3, 2022 Report to the NIMC Steering Committee at the meeting on 18 November 2022. In advance of the preparation of this status report on activity completed during Quarter 4, 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 met with the Reference Group on 11 November 2022 with a view to explore ways to further enhance communication and engagement on the implementation of StV, and more broadly to develop the collaborative partnership.

Specialist Groups

Youth Mental Health Transitions Specialist Group

In Quarter 4, 2022, recommendations to enhance transition and an associated implementation plan were drafted. External consultation with stakeholders, input from subject matter experts and consultation with young people have informed these and they will be presented to NIMC in Quarter 1 2023. A phased work plan and timeline for delivery (Quarter 4 2023) to develop recommendations to optimise mental health supports to the age of 25 has been agreed by the specialist group and NIMC. This phased work plan proposes stepped improvements in the short, medium and long-term. A review of best practice nationally and internationally in Youth Mental Health Service delivery is being undertaken, on behalf of the Specialist Group, by NUIG and the outputs will be available in Quarter 1 2023.

Primary Care Specialist Group

The Primary Care Specialist Group, which includes representation from the Irish College of General Practitioners, HSE Mental Health Operations, and HSE Primary Care Operations continued to progress its work in Q4 2022. Heads of Service for both Mental Health Operations and Primary Care now support this group as core members. By Q4 seven meetings of the Specialist Group had been held. In addition, two sub-groups are now also in place, focusing on Shared Care between Primary Care and Specialist Mental Health Services and on Talking Therapies in Primary Care and Community Settings. Emerging developments from the work of this group include: a plan to advance shared care between services; structured approach to the management of physical health needs amongst mental health service users; and, e-referral between GP and mental health services.

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. The group agreed a draft, interim report and will present to the NIMC in Quarter 1, 2023 and will submit a written interim report for comment.

Digital Specialist Group.

Set up May 2022, the Specialist Group on Digital Mental Health has held eight 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. The group continues to provide 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 yourmentalhealth.ie. In October the '*Making the Connections*' campaign was launched and further development of tailored online supports for common mental health difficulties is underway.

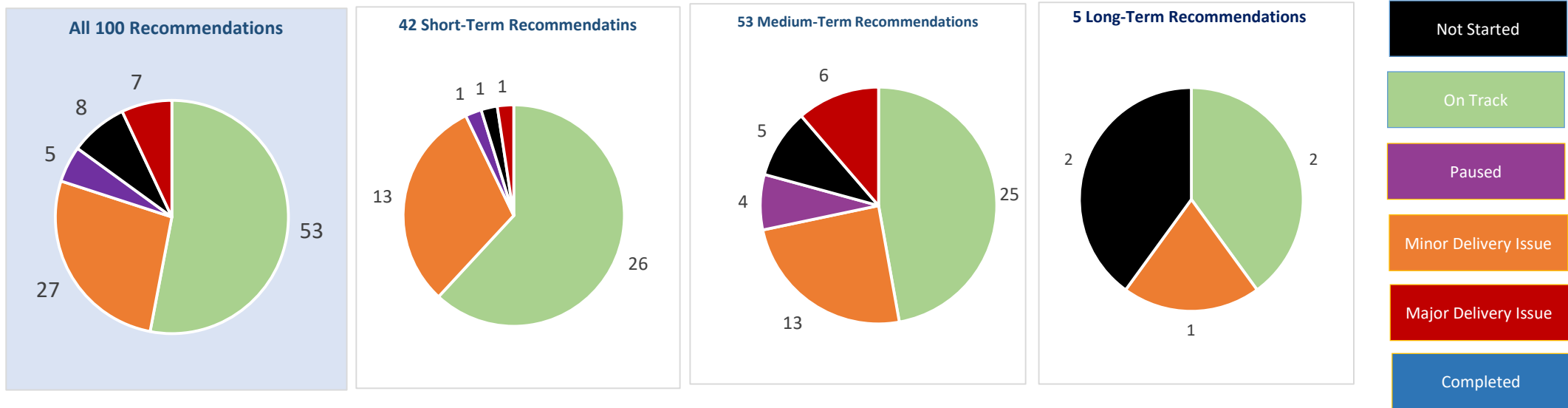
Women's Mental Health Specialist Group

The Specialist Group on Women's Mental Health, with support from its Consultation Group, finalised its report with recommendations to gender-proof the StV policy and support a focus on gender in its implementation. The Specialist Group presented the report to NIMC on 18 November 2022 and following incorporation of NIMC feedback the report was finalised. The report will be launched in Quarter 1, 2023.

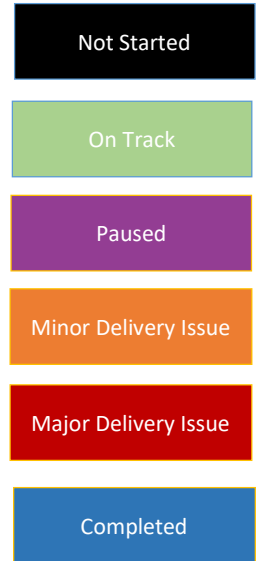
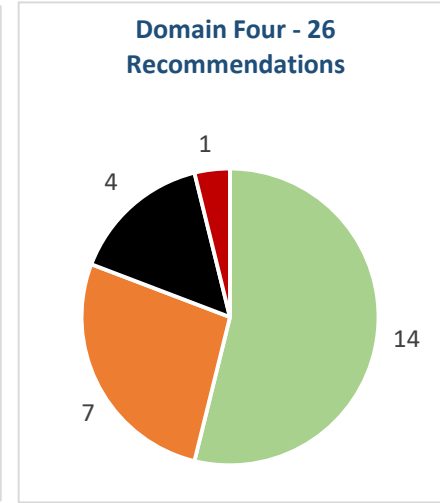
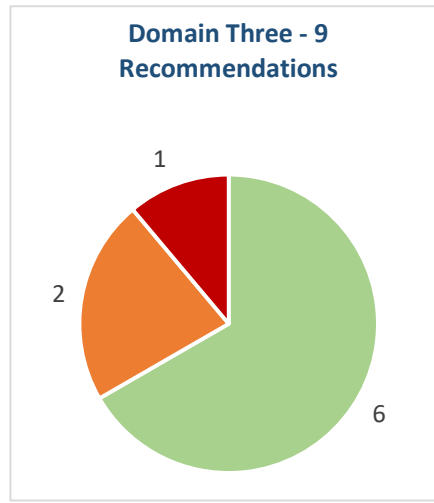
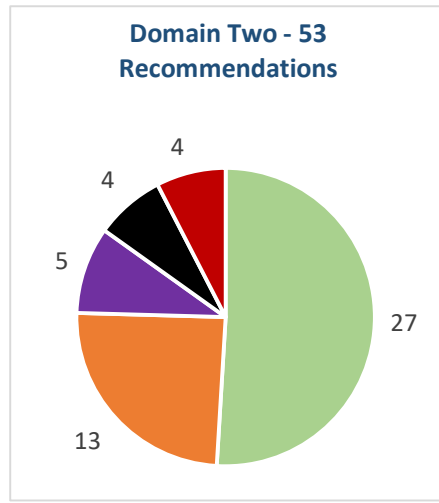
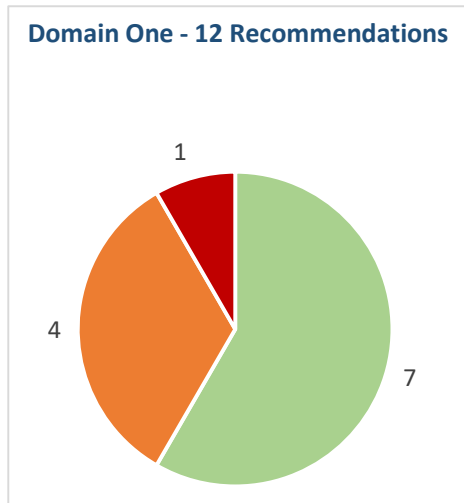
High Level Recommendation Status Summary

In Quarter 4, 2022, implementation leads have indicated the status of their relevant recommendations as illustrated below, based on timeframe for completion and domain respectively:

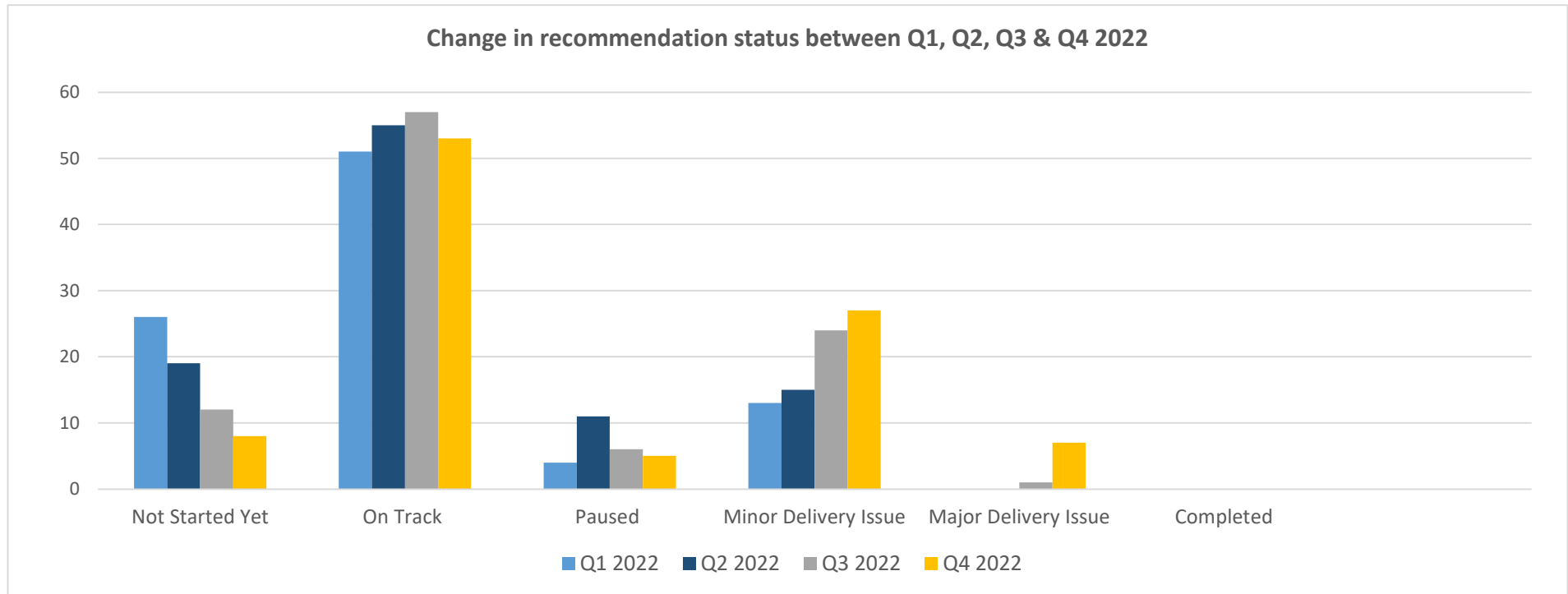
Recommendation status by timeframe



Recommendation status by domain

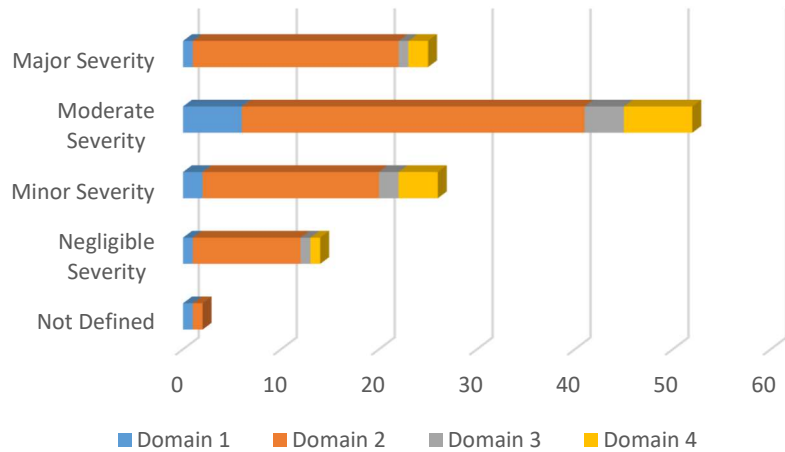


High Level Recommendation Status Summary

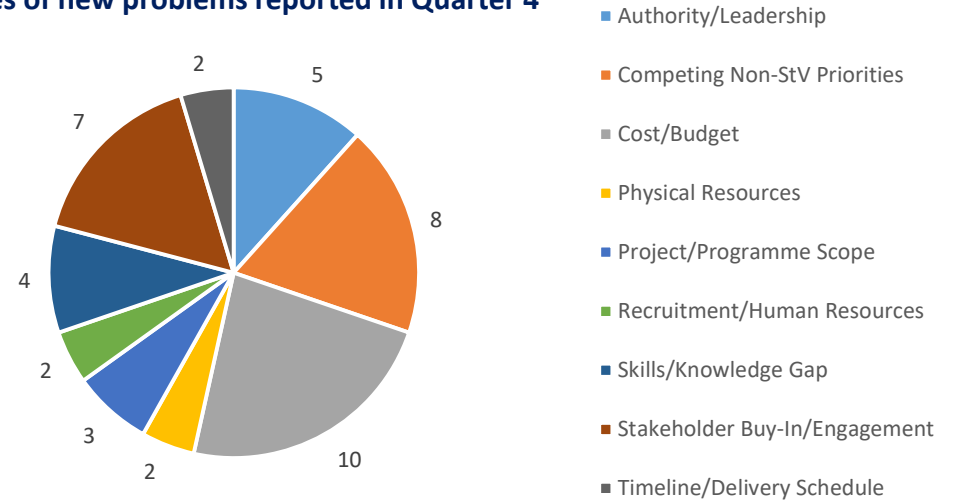


Reported Problems

Current Problem Severity by Domains



Categories of new problems reported in Quarter 4



The majority of implementation problems experienced in Quarter 4, 2022, relates to Cost/Budget, Competing Non-StV Priorities, Stakeholder Engagement and Authority/Leadership.



Sharing the Vision

A Mental Health Policy for Everyone

Section 3

**Highlights Report on
StV Recommendations
for Domain 2 (Part I)**

Domain 2 – Service Access, Coordination and Continuity of Care

Part I – 27 recommendations*

*(Note: includes 20 (a) & (b) and 53 (a), (b) & (c))

Thematic Groups	Clinical Programme	Mental Health Planning	Mental Health Promotion & Digital	Children & Young People	Primary Care
Outcomes	2a: All service users have access to timeline, evidence-informed interventions 2b: Service delivery is organised to enable increased numbers of people to achieve personal recovery 2c: Services are coordinated through a ‘stepped care’ approach to provide continuity of care that will deliver the best possible outcomes for each service user 2d: Health outcomes for people with dual diagnosis are improved by ensuring greater collaboration between mental health and other relevant services				
	2a, 2b, 2c, 2d	2a, 2b	2a, 2c	2a, 2b	2a, 2b, 2c
Recommendations	20 (a), 22, 23, 42, 48, 50, 51, 52, 53 (a), (b) & (c), 57	14, 24, 40	13, 15, 31	35, 36, 37, 38	16, 17, 18, 19, 20 (b)

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

Recommendations Overview, Domain 2 – Service Access, Coordination and Continuity of Care (Part I)

Background

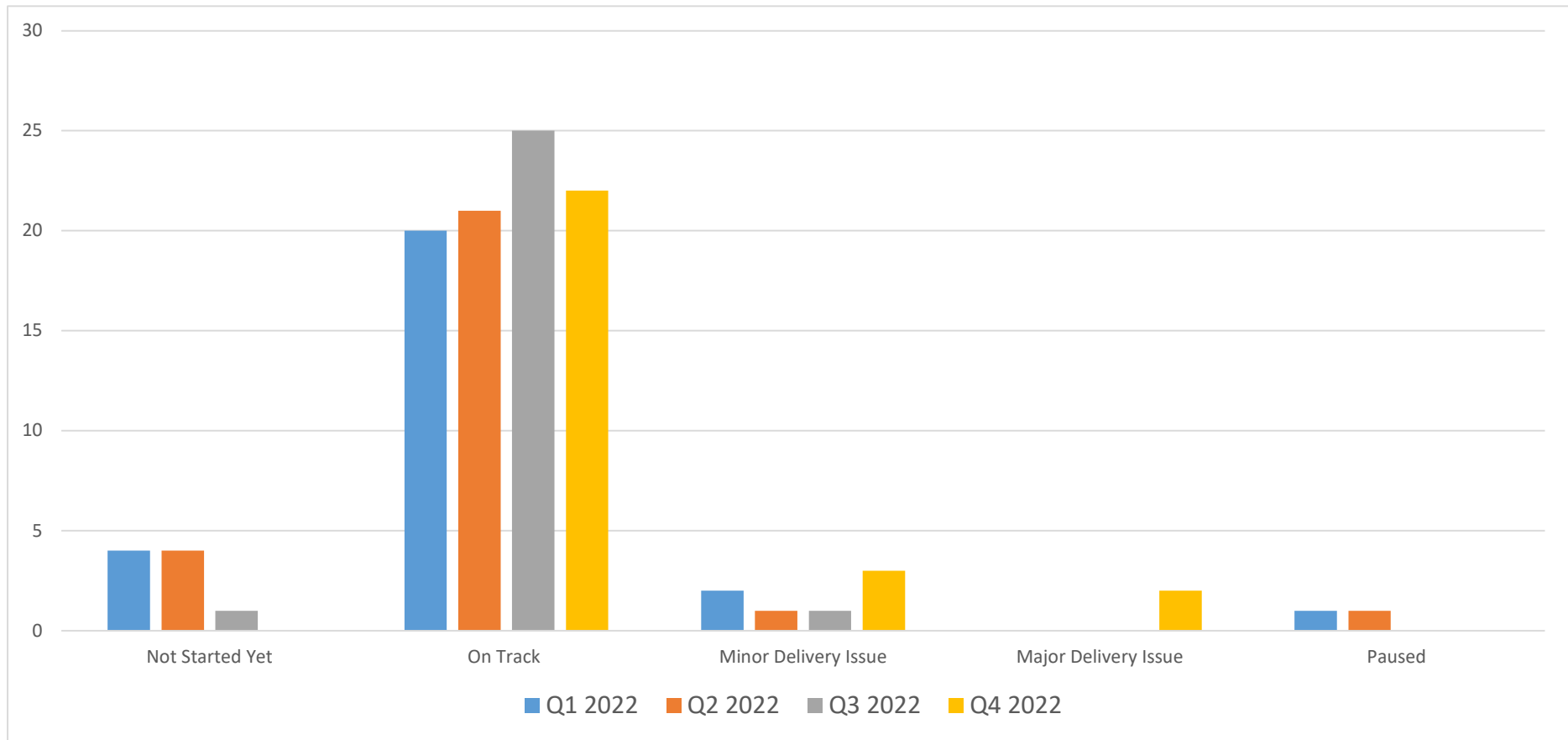
In this Domain, policy recommendations seek to promote:

- access to timely, evidence informed interventions for all service users
- organised service delivery to enable increased numbers of people to achieve personal recovery
- improved health outcomes for people across all settings ensuring greater collaboration between mental health and other relevant services
- a coordinated 'stepped care' approach to service to provide continuity of care that will deliver the best possible outcomes for each service user

Recommendations Overview, Domain 2 – Service Access, Coordination and Continuity of Care (Part I)

Recommendation status at a glance

Status of Recommendations in Domain 2 (Part 1) in 2022



Recommendations Overview, Domain 2 – Service Access, Coordination and Continuity of Care (Part I)

Progress Achieved

The *Making the Connections* campaign was launched on www.yourmentalhealth.ie. The campaign highlights the wide range of mental health supports that are available. Development work continues in relation to the development of an app / website plug-in to facilitate access to more personalised support options based on a users' needs.

Recommendation #13

Informed by desk research to assess implementation of the 'Advancing the shared care approach' (2012) report, an implementation plan has been drafted for relevant outstanding recommendations contained in this report.

Recommendation #18

Six Clinical Nurse Specialist posts for the development of Suicide Crisis Assessment Nurse (SCAN) posts in primary care were funded in 2022. At the end of December 2022 three of these posts had been recruited. The others are in the recruitment process.

Recommendation #23

The work of the Youth Mental Health Transitions Specialist Group continued in Q4 under two workstreams. For workstream 1, external consultation with stakeholders took place in October and informed the draft set of recommendations aimed at enhancing the transition from CAMHS to Adult Mental Health Services. An associated implementation plan has also been drafted with a plan to present to NIMC in Q1 2023.

Recommendation #36

A new role for Early Intervention in Psychosis services, an *Early Intervention in Psychosis (EIP) Key Worker*, has been established and approval granted by the Department of Health. The EIP key worker will enhance the multidisciplinary teams delivering EIP services.

Recommendation #52

In partnership with ADHD Ireland and the UCD School of Psychology, the HSE ADHD in Adults National Clinical Programme launched an ADHD App to support adults with ADHD. Within one month of the launch, the number of downloads was 4,010. The Adult ADHD app provides the public with up-to-date information on adult ADHD as well as services and interventions provided by adult ADHD teams and is a tool providing accurate information in real time.

Recommendation #53(b)

Recruitment is ongoing for Adult ADHD teams with a specific job description developed for Clinical Nurse Specialist (CNS) in ADHD, a recruitment campaign was carried out and two out of four Clinical Nurse Specialist posts are in place. Similarly, a job description for a Senior Occupational Therapist in ADHD was finalised and a campaign launched with short-listing due to take place in Q1 2023. Three out of four Consultant posts are in place in CHO 4 and 7 and the remaining vacant post in CHO 8 will be re-advertised in Q1 2023.

Recommendation #53(b)

Senior Occupational Therapist posts now filled in the National Maternity Hospital (1.0WTE) and Rotunda Hospital (0.6WTE). A new National Clinical Lead for specialist perinatal mental health services was appointed in December 2022 and will take up post in Q1 2023.

Recommendation #53(c)

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

Emerging Developments

Sláintecare funding has been secured to both sustain existing social prescribing services and scale up social prescribing service delivery nationally. 13 new services were mainstreamed ensuring country-wide coverage. To support delivery of social prescribing services, work has commenced on the development of a repository of resources for community social prescribing including online videos, elearning modules etc. Enhancing social connectedness for Older People has been a priority and support was provided to the Integrated Care Programme for Older People (ICPOP) community connector scheme in each CHO.

Recommendation #15

Consultation has taken place with key stakeholders to inform development of a social connectedness measurement tool with a plan to have the tool ready for piloting and validation in 2023. This will facilitate measurement of the impact and effectiveness of social connectedness interventions in the future.

Recommendation #15

In line with agreed terms of reference, membership of a shared care working group has been finalised. This working group continue to meet regularly and is in the process of scoping a work programme to ensure a consistent approach to the adoption of the consultation/liason model in mental health services. Mandated by the Mental Health in Primary Care Specialist Group/Workstream, the shared care working group has also commenced scoping of a proposal for a structured physical health programme in primary care for people with severe and enduring mental illness.

Recommendations #17 & #19

There is ongoing progress in relation to the Model of Care for Attention Deficit Hyperactivity Disorder (ADHD) for Children and Adolescents with steps taken to identify a National Clinical Lead. Interviews are scheduled to take place in

early February 2023. The national clinical lead will assemble a working group to support development of the model of care to progress this key area of early intervention and assessment services in the primary care sector.

Recommendation #20(a)

In order to assess current available environments for those presenting at emergency departments (ED) who additionally require mental health assessment, a re-audit of assessment rooms in EDs has been completed. The results of the audit are being analysed and a paper is being prepared for publication in 2023. The next steps will include preparation of written reports for each hospital on audit findings and associated recommendations to prioritise improvements.

Recommendation #22

There has been significant progress made in the design and development of the Model of Care (MOC) for Crisis Resolution Services, as projected for 2022. Pilot MOC to be completed and launched in Q1 2023. Stakeholder engagement process was commenced with key HSE stakeholders in November 2022 and feedback was incorporated into the MOC. A Service User engagement workshop is scheduled for January which is being supported by National Mental Health Engagement and Recovery. There are 4 established pilot sites across CHOs 1, 4 and 6 with pilot sites in CHO 3 and 5 being progressed. The pilot sites are being supported with meetings held and a pilot peer support group workshop scheduled for Q1 2023.

Recommendations #24 & #40

Good progress was made in Q4 2022 to implement this recommendation. Along with work on the strategic action plan, a number of digital resources and services were delivered and are ongoing, including guided online cognitive behavioural therapy (CBT). In 2022 there were 6,200 activations / licences used to access the Silvercloud online CBT service. In Q4 alone, there were 1,646 people beginning the programme - GPs remain as the single biggest referring group comprising nearly 90% of all referrals. Mental health outcomes are continuously monitored and positive change is being reported for anxiety (based on Generalised Anxiety Disorder Assessment (GAD 7) scale) and for depression (based on the Patient Health Questionnaire 9 (PHQ 9) scale).

Recommendation #31

Phase 1 the CAMHS Hubs model can provide a step-up brief intervention service for existing service users in acute crisis, within an agreed catchment area to an agreed number of CAMHS teams. Meetings were held with the five CAMHS Hub pilot sites in Q4 2022 – one CAMHS Hub is operational in CHO 2 and the remaining four are in pre-implementation phase with a pilot implementation team established. Each team is working to determine catchment area aligned to local data, recruiting CAMHS Hub staff, and developing the necessary pathways and referral processes to support implementation. There was a National CAMHS Hub Steering Group meeting held on 6th December 2022. Stakeholder engagement on the Standard Operating Procedure for CAMHS Hubs is underway and on-going. A tender was issued to HSE/Pass Procurement and Office of Government Procurement Framework for etenders in October.

Recommendation #35

The work of the Youth Mental Health Transitions Specialist Group continued in Q4 under two workstreams. In Workstream 2, a phased work plan and timeline for delivery (Quarter 4 2023) has been designed and agreed by the specialist group and NIMC. This phased work plan proposes stepped improvements to delivery of mental health services to young people in the short, medium and long-term. A review of best practice nationally and internationally in Youth Mental Health Service delivery is being undertaken, on behalf of the Specialist Group, by the National University of Galway and the research findings will inform the long-term plan. University of Galway presented an interim report to the specialist group on 30th November 2022.

Recommendation #36

A StV Children & Young Person Workstream has been established with the appointment of a lead and co-lead. Recruitment of core membership progressed in Q4 2022 with representation from Mental Health Change and Innovation, Disabilities and a Head of Service for Mental Health recruited to the group. Overview of the implementation of this recommendation will be provided by this workstream. The number of young people admitted to adult units has

been falling in recent years from 84 in 2018, trending consistently downwards to 20* in 2022. To assess adherence to the code of practice for admissions of young people to adult units, a successful submission has been made by Mental Health Operations to the HSE Healthcare Audit Unit for the inclusion of an audit of 'Compliance with the Mental Health Commission Code of Practice Relating to Admission of Children under the Mental Health Act 2001' in the National 2023 Healthcare Audit Plan.

*preliminary data available

Recommendation #38

In order to progress implementation of the Model of Care for Older Persons, four pilot sites have been identified (CHO1, CHO6, CHO7 and CHO8). With funding in place it has been possible to move forward with recruitment of multidisciplinary teams for these areas. In line with Sláintecare principles, key performance indicators for these pilot sites are being developed and this data will inform future service development. While these four pilot sites are being stood up, work is taking place, in parallel, to identify further pilot sites.

Recommendation #42

A report looking at the incidence of psychosis was progressed in December 2022 with mapping of incidence completed. The report will be published when new CSO census data to reflect current population increases is included. The census data will be available in April 2023 with a timeline to publish the Incidence of Psychosis report by Q3 2023.

Recommendation #52

There have been ongoing efforts to recruit staff and two Consultant Psychiatrists have been appointed to Specialist Eating Disorder teams. An Eating Disorder self-care app was launched for the first time in March 2020 which provides valuable information for those with or for people caring for someone with an eating disorder. This app is now undergoing improvements with a view to improving usability. A sub-group has been established and is working with the app developer.

Recommendation #53(a)

Design of a perinatal mental health app is underway with the aim of providing a tool with useful relevant information on mental health in the perinatal period including self-care tools. Women who are current or previous attenders of a perinatal mental health service were consulted in the design process.

Recommendation #53(c)

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

Problems

Recruitment

There were major recruitment challenges reported across some of the clinical programmes in Quarter 4 despite repeated recruitment campaigns. Workforce shortages nationally and lack of governance structures for some multidisciplinary team members reinforced the recruitment difficulties experienced. To mitigate this, within the HSE there is significant progress ongoing in the recruitment of staff (See *Appendix A HSE StV New Service Developments Quarter 4, 2022*). Additionally, an integrated Mental Health Care Team Working Group is established to track and report on progress of National Service Development posts within Mental Health services.

In a wider response to recruitment challenges, the HSE is undertaking the Recruitment Reform and Resourcing Programme led by the Assistant National Director of HR. The Programme will take a holistic view of workforce demand and supply and use relevant data, research and insights to analyse current and future workforce challenges. The output will be a Strategic Resourcing Plan per profession, with short-, medium- and long-term actions.

Separately, within DoH a Health and Social Care Workforce Planning Strategy, Action Plan and Planning Projection Model are currently being developed by the Strategic Workforce Planning Unit with technical support provided by the European Commission. The key outcome of the project, due for completion in Q3 2023, is that the Department will have the necessary tools, processes, and technical capacity to produce rolling health and social care workforce planning action plans and to implement targeted policy measures for health and social care workforce reform. Such an integrated approach will support the implementation of Sláintecare and Sharing the Vision.

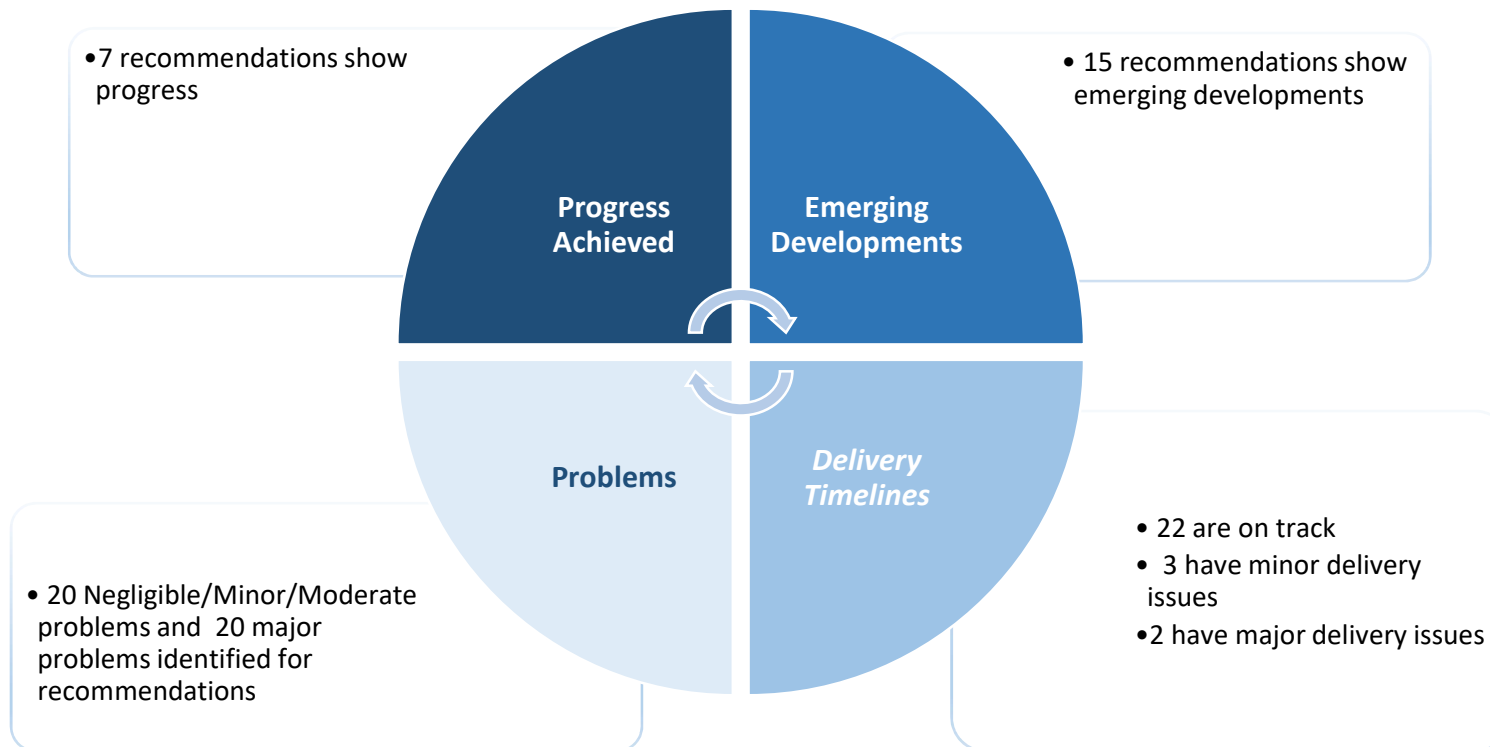
Recommendations #53 (a), 53 (c)

Project Resourcing & Scope

Major barriers to implementation reported by some clinical programmes pertained to limited programme management capacity to support roll-out of clinical programme workplans and shortages in programme enablers e.g. team accommodation and IT infrastructure were also reported as major challenges. To mitigate, the implementation leads have escalated these risks and issues within risk notification pathways locally and nationally. At a programme level, StV risk and issue management tracking systems continue to be developed with a commitment to developing a programme risk register and mitigation plans for those risks and issues that will impact on StV programme delivery.

Recommendations #23, #52, #53 (a), 53 (b), 53 (c)

Domain 2 (Part I) (27 Recommendations) Summary Health Status





Sharing the Vision

A Mental Health Policy for
Everyone

Appendix A

HSE StV New Service

Developments

Quarter 4, 2022

Executive Summary – National Service Plan

New Posts Quarter 4 2022 Update – Sharing the Vision Recommendations

- The HSE approved the release of 303.7 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 posts under new developments 2022, providing for an additional 780.1 staff across services.
- Significant progress continued in Quarter 4, 2022 in the recruitment of staff, with 369.3 in place, and the remaining 410.8 posts at various stages in the recruitment process.
- The shortfall in recruitment represents the challenges faced in
 - demand and availability of staff,
 - 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 HR. Recruitment systems are in transition to this new model, which will enhance the effectiveness and efficiency of recruitment activities.

National Service Plan - Quarter 4, 2022

Programme for Government Funding	⁴ Overall WTEs	⁶ Staff recruited to date Q.4 2022	Posts in process for recruitment e.g. advertising underway
National Service Plan Commitments associated with Programme for Government Funding 2022 • Further investment in all developments outlined under NSP 2021	322.0	76.9	245.1
National Service Plan Commitments associated with Programme for Government Funding 2021 <ul style="list-style-type: none"> • Clinical Programmes(R 50,51, 57) • CAMHS Hubs (R 35) • Crisis Resolution Services (R 24,40) • Individual Placement Service (R 71) • Recovery Education Programme (R 29) • Community Mental Health Teams (including Peer support) (R 32, 33, 34) 	154.4	103	51.4
Programme for Government Funding 2013-2019 (posts released to system 2021)	303.7	189.4	114.4
	780.1	369.3 (Q3: 336.9)	410.8 (Q3: 442.9)

⁴All posts are new and additional and **not** replacement

⁵The HSE approved the release of 303.7 previously held PFG posts for recruitment in December 2020 of which 189.4 posts are filled as of December 2022. An additional 154.4 posts were allocated as PFG 2021 of which 103 posts are filled as of December 2022

⁶Recruited means "in post" R= StV recommendation WTE = Whole Time Equivalents

Summary Developments under NSP 2021 – Q4 2022 Update

NSP Initiative Area	Recs	Q.4 Update
<p>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</p>	<p>50, 51, 57</p>	<ul style="list-style-type: none"> • CAMHS MHID Model of Care has been launched and completed and implementation planning is underway. • 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. • Model of Care for Older Persons plans progressing. 4 pilot sites identified, personal notification numbers have been issued and recruitment is progressing. • 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. • Dual Diagnosis: recruitment process underway in CHO 4. All support services in place. <u>CHO 3</u> recruitment process commenced, CHO addressing related accommodation issues. <u>CHO 9</u> Primary notifications for adolescent team have been issued and recruitment process will start in first quarter. Evaluation frameworks established and the local co researchers identified. • Mental Health Intellectual Disabilities (MHID) services: The National Placement Oversight and Review Team (NPORT) continues to work with people with Intellectual Disabilities who have complex needs and are reviewing day service provision and day opportunities. There is MHID representation on a National Group which is reviewing inpatient bed provision and overall bed capacity. • Since 2021, there have been 31 MDT staff that have been appointed to MHID teams nationally. Efforts are ongoing to recruit SLTs to MHID services.
<p>NSP Initiative Area</p>	<p>Recs</p>	<p>Q.4 Update</p>

Individual Placement Service- Mainstream implementation of the individual placement and support programme	71	<ul style="list-style-type: none"> Individual Placement Service posts mainstreamed as of 07.2021 in line with NSP.
Digital Developments- Implement agreed eMental health digital responses	2, 31	<ul style="list-style-type: none"> Work progressing on the development of a layered care model for delivery of digital mental health services. This will be published by the Digital Mental Health Specialist Group under StV as a national strategic action plan. The national public mental health literacy campaign, <i>Making the Connections</i> was launched in Q4 with a focus on additional, engaging online content addressing low mood, stress, sleep issues and anxiety (#Rec 2). Procurement processes for the contracting of guided online CBT were completed in Q4 and a preferred provider has been identified. In 2022, 6,200 people were supported through the existing SilverCloud online CBT service with 90% of referrals coming from GPs (#Rec 31).

NSP Initiative Area	Recs	Q.4 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 style="list-style-type: none"> • National Steering group established to progress development of Standard Operating Procedure. • Standard Operating Procedure at final review. • One CAMHS Hub pilot site operational in CHO 2, and remaining four pilot sites are in pre-implementation phase, with a pilot implementation team established. • Each team is working to determine catchment area aligned to local data, recruiting CAMHS Hubs staff, and developing the necessary pathways and referral processes to support implementation.
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 style="list-style-type: none"> • National Crisis Resolution Services Steering group established. • Standard Operating Procedure progressing to final review. • Three pilot sites have progressed to initial operations of Crisis Resolution Teams. • Each team is working to determine catchment area aligned to local data, recruiting Crisis Resolution Team staff, establishing the necessary pathway and referral processes locally, and working to identify suitable community partnership arrangements for the delivery of cafes.
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 style="list-style-type: none"> • Recruitment continues across CHO areas with progress made across posts. • Mental Health Integrated Care Team working closely with CHO areas to monitor recruitment progress.



Sharing the Vision

A Mental Health Policy for
Everyone

Appendix B

Quarter 4, 2022

Recommendation updates

Status Key	On Track	Minor Delivery Issue	Major Delivery Issue	Paused	Not Started Yet	Completed
-------------------	----------	----------------------	----------------------	--------	-----------------	-----------

Domain 1 Promotion, Prevention and Early Intervention				
	Recommendation	Quarter 4, 2022 Update	Owner	Current status
1 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.	A further meeting of the Oversight Group was held in December and Gregor Henderson, an international expert in mental health promotion, presented to the group on the challenges of working across government. University of Galway gave an update on the literature review and work is underway in scoping policy development both at national and international level.	DoH Health & Wellbeing Unit	Minor Delivery Issue
2 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.	In Q4 2022 the Making the Connections campaign was launched. The campaign focuses on mental health literacy and signposts people to new content on anxiety, low mood, stress and sleep issues. Creative advertising using outdoor, online and radio promotes access to the campaign material and promotes messaging regarding common mental health difficulties that people are sometimes slow to recognise or quick to dismiss. Further additional content provides information on a wider range of mental health supports while an app designed to provide more personalised support options is in development. Also in Q4 2022 the Digital Mental Health Specialist Group continued to meet and progress is being made on the development of a national strategic action plan for digital mental health.	HSE Mental Health Integrated Care Team	On Track

		Together All has been launched as an online peer support platform to support student mental health across Ireland.		
3 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 that mental health priorities and services are gender-sensitive and that women's mental health is specifically and sufficiently addressed in the implementation of policy.	There have been regular meetings of the Specialist Group on Women's Mental Health, finalising the report recommendations and implementation strategy. The Report was presented to a meeting of NIMC on 18 November 2022 and following incorporation of NIMC feedback the report was finalised and approved for publication.	DoH Women's Health Taskforce	On Track
4 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.	We established a Mental Health Promotion Practitioner Network with Health Promotion & Improvement (HP&I) Managers in Q4 2022. At the November 2022 meeting this Sharing the Vision action was discussed. Feedback from group focused on the need to work on increasing the operational ask and deliverables for HP&I Officers alongside action to amend job specification.	HSE Health & Wellbeing	On Track
5 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.	Insufficient capacity within Mental Health & Wellbeing team to progress Act Belong Commit Health Research Board Partnership award. Support and guidance was provided to Local Community Development Committees and Children and Young People's Services Committee Healthy Ireland Round 4	HSE Health & Wellbeing	Major Delivery Issue Due to insufficient capacity within team resources to progress Mitigation: other avenues of funding to be sourced to pilot this intervention
6 Short	The proposed National Mental Health Promotion Plan and the existing work of Connecting for Life should incorporate targeted mental health promotion and	A further meeting of the Oversight Group was held in December and Gregor Henderson, an international expert in mental health promotion, presented to the group on the challenges of working across government. University of	DoH Health & Wellbeing Unit	Minor Delivery Issue

	prevention actions that recognise the distinct needs of priority groups.	Galway gave an update on the literature review and work is underway in scoping policy development both at national and international level.		
7 Medium	A National Stigma-Reduction Programme (NSRP) 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.	A detailed work plan is being developed as part of the mental health promotion and digital mental health workstream. In the short term a review of existing evaluations of stigma reduction activities will be undertaken. This recommendation will also be progressed through the continued roll out of the Making The Connections campaign which has decreasing stigma as an objective.	HSE Mental Health Operations	On Track
8 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 cross-border programmes addressing the impact of Adverse Childhood Experiences (ACEs).	Under the <i>National Policy on Access to Services for Children & Young People with Disability & Developmental Delay</i> , access here , efforts are continuing to promote use of Individual Family Service Plans in Children's Disability Network Teams. Local collaboration between disability, primary care and CAMHS services is ongoing. A Children & Young Person Workstream has been established and will oversee progression of this recommendation. A Head of Service for Disabilities has been recruited to provide updates on activity for this recommendation in Quarter 4.	HSE Disabilities HSE Primary Care Operations via the Integrated Children's Services Forum (ICSF)	On Track
9 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	Face to face Incredible Years Teacher Classroom Management training for primary teachers in education centres commenced in Q4. The programme is delivered over 6 full-day workshops which are spaced approximately one month apart. Online training in the FRIENDS Resilience programmes ('Fun Friends', 'Friends for Life' and 'My Friends Youth')	Department of Education	On Track

		<p>commenced in Q4. NEPS is prioritising DEIS primary and post-primary schools.</p> <p>NEPS is providing support to individual post primary schools and clusters of schools aligned with NEPS teams throughout the country on establishing or reviewing their Student Support Teams (SST). A Student Support Team is a student-focused mechanism put in place by a school in order to coordinate supports for students and develop a whole-school approach to wellbeing promotion. NEPS has developed a range of workshops on the promotion of wellbeing and resilience in schools which includes trauma-informed approaches. NEPS have developed an eLearning course on Responding to Critical Incidents in Schools. NEPS have also developed webinars on understanding bereavement & loss & supporting children and young people. Training for school leaders and teachers from the Professional Development Service for Teachers (PDST) is continuing. The PDST are also facilitating follow up in school visits to support schools as they undertake their review of their wellbeing promotion process.</p>		
<p>10 Medium</p>	<p>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 (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</p>	<p>A meeting was held between the Department of Health and the HSE members of the working group to consider how to progress the work. Text has been provided by the Department of Health for inclusion in the protocol. NEPS has carried out a survey with all psychologists to get a picture of current practice in relation to engagement with CAMHS.</p>	<p>Department of Education Department of Health</p>	<p>Minor Delivery Issue</p>

<p>11 Medium</p>	<p>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.</p>	<p>A further meeting of the Oversight Group was held in December and Gregor Henderson, an international expert in mental health promotion, presented to the group on the challenges of working across government. University of Galway gave an update on the literature review and work is underway in scoping policy development both at national and international level.</p>	<p>Department of Health Healthy Ireland</p>	<p>Minor Delivery Issue</p>
<p>12 Short</p>	<p>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</p>	<p>Work is on-going in respect of a range of initiatives to 'support people as they age to maintain, improve or manage their [...] mental health' as envisaged in the National Positive Ageing Strategy. The Healthy Age Friendly Homes Programme (delivered by Age Friendly Ireland in partnership with the Department of Health) is a two-year pilot-project which has, since 2021, provided a new person-centric, robust, support co-ordination service which aims to support older people to live independently in their homes and communities for as long as possible. In addition, the HSE, in conjunction with ALONE, is continuing the roll-out of a Support Co-ordination Service across the country. This facilitates older persons' access to a range of practical supports, befriending, social prescribing, assistive technology, and also coordinates linkages to local community groups in the person's area. Under the National Dementia Strategy, the Department of Health released funding to the HSE in Q4 2022 for posts recruited under the 2022 National Service Plan to improve access to dementia assessment, diagnosis, post-diagnostic support and care of people with dementia. More broadly, the implementation of the Model of Care for Specialist Mental</p>	<p>Older People Strategy Unit Department of Health</p>	<p>Minor Delivery Issue</p>

		Health Services for Older People continues across pilot sites.		
Domain 2 Service access, Coordination and Continuity of care				
	Recommendation	Quarter 4, 2022 Update	Owner	Status
13 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 <i>Making the Connections</i> campaign (can be accessed here) was launched. The campaign highlights the wide range of mental health supports that are available. Development work continues in relation to the development of an app / website plug-in to facilitate access to more personalised support options based on a users' needs.	HSE Mental Health Integrated Care Team Primary Care	On Track
14 Medium	Where Voluntary and Community Sector organisations are providing services aligned to the outcomes in this policy, operational governance and funding models should be secure and sustainable	*Funding applications 2023 reviewed, Service Level Agreement meetings scheduled and completed with 22 National office for suicide prevention, Non-Government Organisation Change for Life funded partners. *Report prepared, final decisions will be communicated to Non-Government Organisations in Q1 2023 when budgets have been agreed.	HSE Mental Health Operations National Office for Suicide Prevention	On Track
15 Short	Social prescribing should be promoted nationally as an effective means of linking those with mental health difficulties to community-based supports and interventions, including those available through local Voluntary and Community Sector supports and services.	Bid to Department of Health via estimates process 2023 to sustain and scale all Sláintecare funded social prescribing services was successful. 13 new services were mainstreamed ensuring national coverage. Support was provided to Integrated Care Programme for Older Persons (ICPOP) community connector scheme in each CHO to enhance social connectedness in older people. Work commenced on the development of repository of community resources on Social Prescribing - videos,	HSE Health & Wellbeing	On Track

		elearning modules etc. Social connectedness measure developed in consultation with key stakeholders and ready for piloting and validation in 2023.		
16 Medium	Access to a range of counselling supports and talk therapies in community/primary care should be available on the basis of identified need so that all individuals, across the lifespan, with a mild- to-moderate mental health difficulty can receive prompt access to accessible care through their GP/ Primary Care Centre. Counselling supports and talk therapies must be delivered by appropriately qualified and accredited professionals.	In line with agreed terms of reference, membership of a talk therapies working group has been finalised. An inaugural meeting of this working group has been arranged for 19/01/23 with a view to plan mapping of current service provision and agree synopsis for a position paper a layered care service model.	HSE Primary Care	On Track
17 Short	The mental health consultation/liaison model should 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.	In line with agreed terms of reference, membership of a shared care working group has been finalised. This working group continue to meet regularly and is in the process of scoping a work programme to ensure a consistent approach to the adoption of the consultation/liaison model in mental health services.	HSE Primary Care Mental Health Operations	On Track
18 Short	An implementation plan should be developed for the remaining relevant recommendations in <i>Advancing the Shared Care Approach between Primary Care & Specialist Mental Health Services (2012)</i> 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.	Informed by desk research to assess implementation of the 'Advancing the shared care approach' (2012) report, an implementation plan has been drafted for relevant outstanding recommendations contained in this report.	HSE Primary Care Mental Health Operations	On Track

<p>19 Short</p>	<p>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.</p>	<p>Mandated by the Mental Health in Primary Care Specialist Group/Workstream, the shared care working group has commenced scoping of proposal for a structured physical health programme in primary care for people with severe and enduring mental illness.</p>	<p>HSE Community Operations Primary Care Mental Health Operations</p>	<p>On Track</p>
<p>20 (a) Medium</p>	<p>There should be further development of early intervention and assessment services in the primary care sector for children with ADHD and autism to include comprehensive multi-disciplinary and paediatric assessment and mental health consultation with the relevant community mental health team where necessary. (ADHD Only)</p>	<p>Progress ongoing in relation to the Model of Care for ADHD. Work is ongoing to identify a National Clinical Lead for Attention Deficit Hyperactivity Disorder (ADHD) in Children and Adolescents. Interviews for a National Clinical Lead for Attention Deficit Hyperactivity Disorder (ADHD) in Children and Adolescents are scheduled to take place in early February 2023.</p>	<p>HSE Primary Care Mental Health Operations Disabilities National Clinical Programmes</p>	<p>On Track</p>
<p>20 (b) Medium</p>	<p>There should be further development of early intervention and assessment services in the primary care sector for children with ADHD and autism to include comprehensive multi-disciplinary and paediatric assessment and mental health consultation with the relevant CMHT where necessary. (Autism Only)</p>	<p>Phase 1 report from the independent evaluators has been submitted to the SIP Board and Pilot Site Stakeholders (CHO 2 and CHO 9) for review and comment, a further recommendation in relation to engagement of Mental Health was received from the Expert Advisory Group which has also been submitted. Phase 2 Planning commenced and a preparation webinar recorded for all participating pilot sites. The contract for Phase 2 of the evaluation has also been awarded.</p>	<p>HSE Primary Care Mental Health Operations Disabilities</p>	<p>On Track</p>
<p>21 Medium</p>	<p>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</p>	<p>The Social Inclusion Workstream Group membership has been identified with the first workstream group meeting scheduled for February. The workstream group will advise on the most appropriate approach to this complex recommendation.</p>	<p>HSE</p>	<p>Paused Pending direction from the workstream</p>

	individuals with co-existing low-level mental health and addiction problems.			
22 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 in emergency departments has been completed. The results are being analysed and a paper is being prepared for publication in 2023. Prepare written report for each hospital on findings and request changes are made as per recommendations.	HSE Acute Hospitals Department of Health Clinical Programmes (Self Harm)	On Track
23 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.	6 Clinical Nurse Specialist posts for the development of Suicide Crisis Assessment Nurse (SCAN) posts in primary care were funded in 2022. At the end of December 2022 3 of these posts had been recruited. The others are in the recruitment process.	HSE Clinical Programmes (Self Harm)	On Track
24 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.	Stakeholder engagement process commenced with key HSE stakeholders in November and feedback incorporated. Service User engagement workshop scheduled in January supported by Mental Health Engagement and Recovery. Meetings held with all pilot sites and plans progressing. Pilot Peer support group workshop scheduled for the 9th of February. National Steering group meeting held on the 10th of November as scheduled. Next meeting scheduled for 17/01/2023. Tender issued to HSE/Pass Procurement and OGP Framework for etenders in October.	HSE Mental Health Integrated Care Team	On Track
25 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.	Work to achieve the activity has not progressed in the quarter due to competing operational demands although dedicated project management support for this workstream has been identified.	HSE MH Integrated Care Team	Not Started Yet Need to complete recruitment of workstream in Q4

<p>26 Medium</p>	<p>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.</p>	<p>Due to capacity issues the working group had limited meetings in Q4 2022 which are resolved and the work will recommence in Q1 2023.</p>	<p>HSE Mental Health Engagement & Recovery</p>	<p>Minor Delivery Issue</p>
<p>27 Medium</p>	<p>An individualised recovery care plan, co-produced with service users and/or Families, Carers and Supporters, where appropriate, should be in place for, and accessible to, all users of specialist mental health services.</p>	<p>Meetings held between Recovery Coordinators and Linkage Consultancy to support the mechanism for engagement and questionnaire distribution.</p> <p>A sub-group was identified to support Linkage with language and direction of questionnaire.</p> <p>A draft questionnaire and proposed plan were sent to the working group identified to support the roll out of the questionnaire.</p> <p>Ethical approval for engaging with stakeholders is being sought. The ethical application process was commenced but not completed.</p> <p>The draft report was completed at end of Q4 2022.</p>	<p>HSE Mental Health Engagement and Recovery</p>	<p>Minor Delivery Issue</p>
<p>28 Short</p>	<p>All service users should have a mutually agreed key worker from the CMHT to facilitate coordination and personalisation of services in line with their co-produced recovery care plan.</p>	<p>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. Scoping will also be informed by the current audit of the CAMHS Operational Guideline.</p>	<p>HSE Mental Health Operations</p>	<p>Paused Need to conclude scoping of an integrated programme of work in Q4</p>

<p>29 Short</p>	<p>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.</p>	<p>A working group has been established to review and edit existing Recovery Principles and Practice Workshop 1. Edits are currently being undertaken and a revised Recovery Principles and Practice Workshop 1 for sharing with all CHO areas will be completed.</p> <p>Recovery Principles and Practice Workshop 2 has been piloted in 1 CHO.</p> <p>Development of a National Recovery Education Strategy is continuing, and priorities have been identified in relation to Wellness Recovery Action Plan (WRAP) workshop Recovery Principles and Practice roll out. Through the activities of the working group, additional modules are being identified and the design and delivery of the Recovery Principles and Practice workshops.</p> <p>The StV Mental Health Engagement and Recovery (MHER) workstream reviewed and revised the 2023 milestones</p>	<p>HSE Mental Health Engagement and Recovery</p>	<p>Minor Delivery Issue</p>
<p>30 Medium</p>	<p>CMHTs and sessional contacts should be located, where possible and appropriate, in a variety of suitable settings in the community, including non-health settings</p>	<p>This recommendation was reviewed by the MHER workstream and it was decided the milestones and planned activity need to be reset to achieve the recommendations more effectively. Given the similarity of this recommendation to recommendation 97 it was agreed these 2 recommendations should be aligned and have one working group. The planned activity for Q4 was paused in light of this.</p>	<p>HSE Mental Health Engagement and Recovery Mental Health Operations</p>	<p>Paused</p>
<p>31 Medium</p>	<p>The potential for digital health solutions to enhance service delivery and empower service users should be developed.</p>	<p>Good progress was made in Q4 2022 to progress this recommendation. Along with work on the strategic action plan, a number of digital resources and services were delivered ongoing, including guided online cognitive behavioural therapy (CBT). In 2022 there 6,200 activations / licences used to access the Silvercloud online CBT service.</p>	<p>HSE MH Integrated Care Team</p>	<p>On Track</p>

		In Q4 alone, there were 1,646 people begin the programme - GPs remaining as the single biggest referring group with nearly 90% of all referrals. Mental health outcome is continuously monitored and positive change is being reported based on GAD 7 (for anxiety) and PHQ 9 (depression) scales.		
32 Medium	The composition and skill mix of each CMHT, along with clinical and operational protocols, should take into consideration the needs and social circumstances 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.	The Mental Health Services workstream is still being established - a lead is in place and senior project management resource is supporting the establishment of the steering group. The Model of Care for Talking Therapies in Mental Health Services is progressing.	HSE MH Integrated Care Team	Major Delivery Issue Mitigation: Dedicated project management support has been identified to support the workstream lead and work will accelerate in Q1 2023
33 Medium	The shared governance arrangements for CMHTs as outlined in AVFC 2006–16 should be progressed, including further rollout of Team Coordinators.	Work to achieve the activity has not progressed in the quarter due to competing operational demands although dedicated project management support for this workstream has been identified.	HSE Mental Health Operations	Paused Due to competing operational demands
34 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, 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. Scoping will also be informed by the current audit of the CAMHS Operational Guideline.	HSE Mental Health Operations	Minor Delivery Issue

<p>35 Short</p>	<p>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.</p>	<p><i>Part A: Specialist mental health out-of-hours model using a tiered approach:</i></p> <p>A Children & Young Person Workstream has been established and the plan for tiered out of hours model will be scoped within the workstream.</p> <p><i>Part B: Development of CAMHS Hubs</i></p> <p>Meetings held with pilot sites in Q4 2022</p> <p>National Steering Group meeting held 6th December 2022</p> <p>Stakeholder engagement underway and on-going.</p> <p>Tender issued to HSE/Pass Procurement and OGP Framework for etenders in October.</p>	<p>HSE Mental Health Integrated Care Team</p>	<p>Minor Delivery Issue Part A</p> <p>On Track Part B</p>
<p>36 Short</p>	<p>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</p>	<p>Workstream 1: External consultation with stakeholders took place on the 19th October 2022. 'Enhanced Transition' Recommendations and an associated implementation plan have been drafted with a plan to present to NIMC in Q1 2023.</p> <p>Workstream 2: A phased work plan and timeline for delivery (Quarter 4 2023) has been designed and agreed by the specialist group and NIMC. This phased work plan proposes stepped improvements in the short, medium and long-term. A review of best practice nationally and internationally in Youth Mental Health Service delivery is being undertaken, on behalf of the Specialist Group, by University of Galway and the outputs will inform the long-term plan. University of Galway presented an interim report to the specialist group on 30/11/2022.</p>	<p>HSE Mental Health Operations Department of Health</p>	<p>On Track</p>

<p>37 Short</p>	<p>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.</p>	<p>Each CHO/Tusla Area continue to progress their agreed implementation plans for the HSE/Tusla Joint Protocol (2021).</p> <p>A Children & Young Person Workstream has been established and will oversee progression of this recommendation. A Head of Service for Disabilities has been recruited to provide updates on activity for this recommendation in Quarter 4.</p>	<p>HSE Mental Health Operations Disabilities</p>	<p>On Track</p>
<p>38 Short</p>	<p>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.</p>	<p>A Children & Young Person Workstream has been established with the appointment of a lead and co-lead. Recruitment of core membership is ongoing. Overview of the 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. It has been confirmed that it will be included in the 2023 audit projects.</p>	<p>HSE Mental Health Operations</p>	<p>On Track</p>
<p>39 Short</p>	<p>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.</p>	<p>The establishment of a working group by HIG to implement the Service User Journey (SUJ) Framework was established in Q4 2022.</p>	<p>HSE Mental Health Engagement and Recovery</p>	<p>Minor Delivery Issue</p>
<p>40 Medium</p>	<p>Sufficient resourcing of home-based crisis resolution teams should be provided to offer an alternative response to inpatient admission, when appropriate.</p>	<p>Stakeholder engagement process commenced with key HSE stakeholders in November and feedback incorporated. Service User engagement workshop scheduled in January supported by Mental Health Engagement and Recovery.</p>	<p>HSE Mental Health Integrated Care Team</p>	<p>On Track</p>

		<p>Meetings held with all pilot sites and plans progressing. Pilot Peer support group workshop scheduled for the 9th of February.</p> <p>National Steering group meeting held on the 10th of November as scheduled. Next meeting scheduled for 17/01/2023.</p> <p>Tender issued to HSE/Pass Procurement and OGP Framework for etenders in October.</p>		
41 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.	Work to achieve the activity has not progressed in the quarter due to competing operational demands although dedicated project management support for this workstream has been identified.	HSE Mental Health Integrated Care Team	Not Started Yet Need to complete recruitment of workstream in Q4
42 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.	4 pilot sites have been identified (CHO1, CHO6, CHO7 and CHO8). Funding has been approved, Primary Notification numbers have been issued and recruitment is progressing. Key Performance Indicators for Pilot sites are being developed in consultation with the sites and will inform service development in line with Slaintecare principles. Further sites have been identified to develop this further in 2023 and 2024.	Clinical Care Programme for Mental Health Services for Older People / HSE Mental Health Integrated Care Team	On Track
43 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 will be further refined in consultation with the National Clinical Advisor and Group Lead, and the National Clinical Lead for Mental Health Services for Older People, who was appointed in Q4 2022.	Clinical Care Programme for Mental Health Services for Older People / HSE Mental Health Integrated Care Team	Minor Delivery Issue

44 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 Medium	HSE should collate data on the number and profile of delayed discharges in acute mental health inpatient units and develop appropriately funded responses.	Work is underway to finalise membership of a dedicated mental health services workstream, and subsequently develop a detailed delivery plan. The approach taken will be informed by the final report from the Acute Bed Capacity group.	HSE Mental Health Operations	Paused Until Acute Bed Capacity report is available in Q1 2023
46 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.	The interim report on Acute Bed Capacity for consideration by NIMC was finalised in Q4 2022. In Q1 2023 this will be presented to NIMC and feedback taken. A further report will be prepared in line with short and long-term capital budgets.	HSE Mental Health Operations	On Track
47 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 recommendation aligns with the work of the Acute Bed Capacity group. The interim report from that group has been finalised and a final report will be progressed in 2023.	HSE Mental Health Operations	On Track
48 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 difficulties and intellectual disabilities and to develop a set of criteria to govern the provision of this service.	There is now a national group which meets on a regular basis convened by one of the chief officers to discuss care provision for people with an intellectual disability (ID) and complex needs. Furthermore the National Placement and Oversight Review Team is currently reviewing day services for people with ID nationally	HSE Mental Health and Intellectual Disability Clinical Care Programme	On Track

<p>49 Long</p>	<p>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.</p>	<p>Work is underway to finalise membership of a dedicated mental health services workstream, and subsequently develop a detailed delivery plan.</p>	<p>HSE Mental Health Operations Mental Health Engagement and Recovery</p>	<p>Not Yet Started Long Term Recommendation</p>
<p>50 Medium</p>	<p>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.</p>	<p>Continuing engagement with Community Healthcare Organisations, National Clinical Advisor and Group Lead and Mental Health Operations. There has been significant recruitment in Mental Health Intellectual Disability teams in the last 24 months. 31 posts in total. Mental Health Intellectual Disability and Child and Adolescent Mental Health Services ID models of service have been launched and inpatient service review report is being completed.</p>	<p>HSE</p>	<p>Minor Delivery Issue Due to difficulties recruiting Consultant Psychiatrists</p>
<p>51 Medium</p>	<p>SLT should be core members of the Adult-ID and CAMHS-ID teams.</p>	<p>Ongoing prioritisation of Speech and Language Therapy recruitment</p>	<p>HSE Mental Health Operations Disability</p>	<p>Major Delivery Issue Due to resourcing difficulties Mitigation: Continue ongoing advocacy for SALT role in MHID teams</p>
<p>52 Long</p>	<p>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.</p>	<p>The Department of Health approved the establishment of new grade code for EIP key Worker in late December 2022. The incidence report was completed in December 22. Publication has been delayed until the provider has had an opportunity to include the new CSO data from the census and reflect the increased population. This data will be available from April 2023 and updated by Q3. The initial report has been shared internally within HSE.</p>	<p>HSE Early Intervention in Psychosis Clinical Care Programme</p>	<p>On Track</p>

<p>53 (a) Medium</p>	<p>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.</p>	<p>Self Care app: This is ongoing. A sub-group has been formed to work with the developer. 2) We have received permission to go to eTender for online collection tool for assessments. 3) Recruitment continued and is a challenge especially for consultants and dietitians. 4) In person training was provided to all teams in November.</p> <p>Detail on planned location of all teams can be found on pages 80 and 81 of the published Model of Care (2018), which can be accessed here</p>	<p>HSE Clinical Care Programme (for Eating Disorders)</p>	<p>Major Delivery Issue</p> <p>Due to recruitment and funding difficulties</p> <p>Mitigation: Proactive recruitment campaigns ongoing</p>
<p>53 (b) Medium</p>	<p>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.</p>	<p>The Adult ADHD App was launched by Minister Mary Butler on the 8th of November. Just one month following the launch, the number of downloads was 4,010.</p> <p>The Adult ADHD CNSMH national competition was launched on 12th September and closed 28th September. Interviews took place in October and the panel went live on 22nd November. Two of the four CNSMH posts from Programme for Government (PFG) 2022 funding are now filled.</p> <p>The Adult ADHD Senior Occupational Therapy competition was advertised on 7th of December and closed on 21st December.</p> <p>Meetings took place with the Mental Health Management Teams in Cork and Kerry in December 2022 to support the roll out of new services in these locations.</p>	<p>HSE Clinical Programme (for ADHD)</p>	<p>Minor Delivery Issue</p>
<p>53 (c) Medium</p>	<p>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.</p>	<p>Designed a questionnaire aimed to get a consensus of opinions on the essential topics that should be included in a perinatal mental health (PMH) app. The aim of which is to provide useful relevant information on mental health in the perinatal period including self-care tools.</p>	<p>HSE Clinical Programme (for Perinatal Mental Health)</p>	<p>On Track</p>

		<p>A questionnaire was designed and completed by women who are current attenders or had attended a PMH service and will inform the design of the PMH app.</p> <p>Senior Occupational Therapist posts now filled in the National Maternity Hospital (1.0WTE) and Rotunda Hospital (0.6WTE).</p> <p>Data advisory Group established with each HSE Hub site and each discipline represented. Several meetings have taken place both within Specialist Perinatal Mental Health Service (SPMHS) and with National Perinatal Epidemiological Centre (NPEC), UCC. A data form is in the final stages of development.</p> <p>On world mental health day a wellness day was organised by SPMHS at UMHL and was well attended by current and past patients of the SPMHS. Other HSE areas also had stands and provided information talks for women on perinatal mental health.</p>		
<p>54 Medium</p>	<p>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 integrated co-produced recovery care plans supported by advocacy services as required</p>	<p>A meeting of the Justice Workstream has been scheduled for the 11th January 2023. Representatives from Irish Prison Service, Probation Service, National Forensic Mental Health Service, Prison In-reach to agree the terms of reference of the group and to develop a work plan to address the following actions: 1. Complete Mental Health needs analysis of prison population. 2 Develop a comprehensive tiered mental health model of care (completed by National Forensic Mental Health Service 2019) 3. Deliver phased implementation of the tiered mental health service</p>	<p>HSE Mental Health Operations National Forensic Mental Health Service (NFMHS)</p>	<p>Minor Delivery Issue Due to resources being focused on the relocation of the Central Mental Hospital</p>

<p>55 Medium</p>	<p>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 non-forensic mental health settings.</p>	<p>As for Recommendation #54, a meeting of the Justice Work stream has been scheduled for the 11th January 2023 to agree the terms of reference of the group and to develop a work plan to address the following actions: 1. To provide ongoing resourcing and support for diversion schemes</p>	<p>HSE Mental Health Operations</p>	<p>On Track</p>
<p>56 Medium</p>	<p>The development of further ICRUs should be prioritised following successful evaluation of operation of the new ICRU on the Portrane Campus.</p>	<p>As for Recommendations #54 & #55, a meeting of the Justice Work stream has been scheduled for the 11th January 2023 to agree the terms of reference of the group and to develop a work plan to address the following actions: 1. to carry out an comprehensive evaluation of the Intensive Care Rehabilitation Unit on Portrane Campus, 2, Develop a national plan for the development of Intensive Care Rehabilitation Unit, 3. Undertake phased implementation of the national Intensive Care Rehabilitation Unit development plan.</p>	<p>HSE Mental Health Operations National Forensic Mental Health Service</p>	<p>Major Delivery Issue Due to recruitment difficulties Mitigation: Proactive recruitment campaigns ongoing and rolling in 2023</p>
<p>57 Medium</p>	<p>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.</p>	<p>Model of Care considered by the College of Psychiatrists in December. Publication of the Model currently being considered. CHO 3 location has been confirmed, capital works required. Grade IV to take up post in February 2023. Other team members to take up post Q2, this delay is because of the issues with the base location. Training identified and training available being considered. Evaluation framework in place. Both training and evaluation will be supported by the IV once in post. CHO 4 consultant post will be recruited by the Public Appointments Service supported by a head hunter. The location ready to move into, the remainder of the team will take up post once the consultant is identified. Primary Notifications for CHO 9 have been signed off, progress in</p>	<p>HSE Clinical Care Programmes Dual Diagnosis *a) only</p>	<p>On Track</p>

		early 2023. Women's Health project progressing very well with in excess of 65 women engaging in the programme.		
58 Medium	In order to address service gaps and access issues, a stepped model of integrated support that provides mental health promotion, prevention and primary intervention supports should be available for people experiencing homelessness.	Recruitment into outreach services has progressed in CHO 7 and CHO 9.	HSE Mental Health Operations Primary Care Operations Social Inclusion	Minor Delivery Issue
59 Medium	Assertive outreach teams should be expanded so that specialist mental healthcare is accessible to people experiencing homelessness.	Recruitment into outreach services has progressed in CHO 7 and CHO 9.	HSE Mental Health Operations Primary Care Operations Social Inclusion	Minor Delivery Issue
60 Medium	Continued expansion of Liaison Mental Health Services for all age groups should take place in the context of an integrated Liaison Mental Health Model of Care.	Clinical review of the draft model of care has taken place. Further refinement will be undertaken to take account of input from children and young people's liaison services, and to ensure interface between the model and the clinical programmes is addressed.	HSE	Minor Delivery Issue
61 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 membership identified. Project Support for the group has also been employed through MH Ops. Funding has also been provided for regional psychosocial response initiatives that assist in the implementation of this recommendation. It was agreed in Q4 2022 that the mental health actions under the Traveller Health Action Plan will be progressed by a separate	HSE Social Inclusion Mental Health Operations	On Track

		Traveller Mental Health Steering Group that will link with the Social Inclusion workstream.		
62 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 the social inclusion workstream, which has been stood-up and is developing a detailed work plan.	HSE Mental Health Operations	On Track
63 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.	The lead for the Social Inclusion Workstream has taken up the role and the group membership identified. Project Support for the group has also been employed through MH Ops. Funding has also been provided for regional psychosocial response initiatives that assist in the implementation of this recommendation.	HSE Social Inclusion Mental Health Operations	On Track
64 Medium	Appropriately qualified interpreters should be made available within the mental health service and operate at no cost to the service user.	The lead for the Social Inclusion Workstream has taken up the role and the group membership identified. Project Support for the group has also been employed through MH Ops. Training on working with interpreters has been provided to health services staff in relevant areas. In addition, HSE Social Inclusion have ensured Ukrainian and Russian interpretation services are in place for health services in the community and hospitals across Ireland (who do not currently have arrangements in place) for those displaced by the war in Ukraine.	HSE Mental Health Operations Social Inclusion	On Track
65 Medium	The HSE should ensure that access to appropriate advocacy supports can be provided in all mental health services.	Following an extensive recruitment campaign, the working group shortlisted three potential candidates for interview. Interviews took place on the 19th of December which identified a research consultant for this project. Subsequently the researcher has met with the sub-group and will meet with the overall working group later in January to present their plan.	HSE Mental Health Engagement and Recovery	Minor Delivery Issue

Domain 3 Social Inclusion				
	Recommendation	Quarter 4, 2022 Update	Owner	Status
66 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 proposed approach to monitoring the implementation of government policy areas, including Housing, Social Protection, Education, Employment, etc., which contained actions of relevance to this recommendation was presented to and approved by the National Implementation and Monitoring Committee.	Department of Health	On Track
67 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 will be completed and published, one of the actions is for the Housing and Disability Steering Groups to review their Local Strategic Plans to ensure that they are in line with the national strategy.	Housing Agency/ Local Authorities	Minor Delivery Issue
68 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.	National Housing Strategy for Disabled People Implementation Plan is currently with the Minister for approval. Draft Working Group Terms of Reference prepared. Draft Protocol prepared.	Department of Housing, Local Government and Heritage	On Track
69 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.	Meetings have taken place to try and resolve the issue of 5 areas without substantive Housing Coordinators being funded	HSE Mental Health Operations MH Housing Group	Major Delivery Issue Due to resourcing difficulties Mitigation: Consideration given to source alternative funding of Housing Coordinators

<p>70 Short</p>	<p>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.</p>	<p>This recommendation is complete and will undergo a Quality Assurance process to close it</p>	<p>HSE Mental Health Operations Mental Health Housing Group</p>	<p>On Track For Closure Pending NIMC Approval Quality Assurance process to complete recommendation being undertaken with Recommendation Implementation Lead</p>
<p>71 Medium</p>	<p>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.</p>	<p>The Standard Operating Procedure for the Individualised Placement Support (IPS) model is agreed. The re-tender process for an organisation to carry out a fidelity review was successful. Discussion with HIG on closure plan for project. The development of employer information leaflets is continuing with a review of current regional leaflets.</p>	<p>HSE Mental Health Engagement and Recovery</p>	<p>On Track</p>
<p>72 Medium</p>	<p>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.</p>	<p>Given the variety of models and understanding of day services received in the initial feedback from CHO's the working group decided to set a sub-group to identify appropriate questions to inform the data gathering. It was decided it was very important that both the service provider and service user perspective were captured. The sub-group is to report back to the main working group in Q1 2023. On review of the Community Healthcare West (CHW) day service review project it was decided that it would make a good pilot site and members of that project were invited onto the working group.</p>	<p>HSE Mental Health Engagement and Recovery</p>	<p>On Track</p>

<p>73 Medium</p>	<p>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</p>	<p>Early Engagement - In July 2022, the Department's <i>Intreo</i> service commenced a systematic approach to actively engaging with disabled persons, through a process agreed with the sector (following a public consultation). In 2022, invites were posted to people on Disability Allowance aged 18-22 using an easy-to-read letter, that explained the service/process. Almost 6,000 people received an invitation and by the end of year, over two thirds of those invited had received a call from an Employment Personal Advisor and were provided with advice and appointments were made as desired / appropriate. A national media campaign to promote Early Engagement ran for two weeks in mid-October.</p>	<p>Department of Social Protection</p>	<p>On Track</p>
<p>74 Short & Medium</p>	<p>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.</p>	<p>Discussions have taken place regarding ethics, guidelines to overcome ethical barriers and clarity regarding national basis for evaluation. Due to the multitude of ethics committees to be consulted if going the national route, it was agreed that ethical approval for one area is all that is required and have this area as a representative sample of all areas with peer led services in situ. Search for scoping review completed but not written up yet. Considering recruiting additional expertise for quantitative aspect of evaluation.</p>	<p>HSE Mental Health Engagement and Recovery Mental Health Operations</p>	<p>Minor Delivery Issue</p>
<p>Domain 4 Accountability and Continuous Improvement</p>				
	<p>Recommendation</p>	<p>Quarter 4, 2022 Update</p>	<p>Owner</p>	<p>Status</p>
<p>75 Medium</p>	<p>The organisation of mental health services should be aligned with emerging integrated care structures under Sláintecare reforms including the proposed six Regional Health Areas and within these the</p>	<p>Not started yet - Awaiting national direction on RHA plans and mapping requirements across function areas.</p>	<p>HSE Corporate</p>	<p>Not Started Yet Awaiting national direction on Regional Health Area plans</p>

	Community Health Networks corresponding to populations of about 50,000		Mental Health Integrated Care Team	
76 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 RHA plans and mapping requirements across function areas.	HSE Mental Health Integrated Care Team	Not Started Yet Awaiting national direction on Regional Health Area plans
77 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.	Submitted an application to DoH Research Services for a systematic review of available research evidence on outcomes measurement in mental health policy implementation. We are awaiting decision on when the review will be carried out and delivered.	Department of Health	Minor Delivery Issue
78 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> .	Due to capacity issues the working group had limited meetings in Q4 2022 but some engagement did take place with independent organisations and other stakeholders. The Terms of Reference and timeline for project was agreed.	HSE Mental Health Engagement and Recovery	Minor Delivery Issue
79 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.	Draft final policy circulated to Complaints Managers for Community Healthcare Organisations, Hospital Groups and National Services requesting final feedback prior to sign off. Deadline of mid-December provided for any final commentary. Due to resourcing issues the Mental Health onsite complaints review have been deferred to Q1 2023. However, the results of these will not impact on the publication of the revised policy / guidance as the feedback from Mental Health Service Users has been incorporated. The onsite review will identify variance with	HSE National Complaints Governance and Learning Team	Minor Delivery Issue Due to resourcing limitations

		Your Service Your Say policy which will be addressed through improvement plans with the individual sites, with any issues emerging as common across selected sites being highlighted to all Community Healthcare Organisations for checking.		
80 Ongoing	A culture of open disclosure to support patient safety is embedded in mental health services.	We now have a workstream member who works on the open disclosure team. Discovery work is continuing on the blueprint work plan. The workstream has created a number of subgroups who will work on developing the blueprint in relation to specific recommendations	HSE Quality Patient Safety (QPS)	On Track
81 Short	Training should be provided for services users and staff on making and dealing with complaints.	Discovery work is continuing on the blueprint work plan. The workstream has created a number of subgroups who will work on developing the blueprint in relation to specific recommendations	HSE Mental Health Operations Mental Health Engagement and Recovery National Complaints Governance and Learning Team	On Track
82 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.	As planned, the core members of the Quality Assurance Framework workstream have reviewed the requirements for this recommendation and undertaken discovery work to identify an approach for delivering on the recommendation outcomes.	HSE Mental Health Operations Mental Health Engagement and Recovery	On Track

<p>83 Medium</p>	<p>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.</p>	<p>As planned, the core members of the Quality Assurance Framework workstream have reviewed the requirements for this recommendation and undertaken discovery work to identify an approach for delivering on the recommendation outcomes.</p>	<p>HSE Mental Health Operations</p>	<p>On Track</p>
<p>84 Medium</p>	<p>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.</p>	<p>Discovery work is continuing on the blueprint work plan. The workstream has created a number of subgroups who will work on developing the blueprint in relation to specific recommendations</p>	<p>HSE Mental Health Operations</p>	<p>On Track</p>
<p>85 Short</p>	<p>The work underway at national level to develop a cost 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.</p>	<p>The IFMS project has been delayed due to issues with changing systems integrator, 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 Q1 2023. The first phase of project implementation is expected to deploy to the Eastern region (ie CHO's 6,7 & 9) in Q2 of 2023 with all HSE statutory areas expected to be deployed to IFMS by end of Q2 2025.</p>	<p>HSE Mental Health Integrated Care Team</p>	<p>Minor Delivery Issue</p>
<p>86 Medium</p>	<p>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.</p>	<p>Public Sector Spending Code Business Case (PSSCBC) first draft has been completed Peer Review Group (PRG) has been established Risk Assumptions Issues and Dependencies (RAID) Management Group has been established and risks have been baselined.</p>	<p>HSE Community Operations (Integrated Community Case Management System (ICCMS))</p>	<p>On Track</p>

		<p>Multi-Criteria Analysis has been completed and the short-listed options to proceed to the economic and financial evaluation have been selected</p> <p>Candidates for the following posts - 1x Grade VIII, 2x Grade VII and 2x Grade V have been identified and onboarding will be completed in Q1,2023.</p>		
87 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.	Inter-Departmental Steering Committee established in Quarter 4 2022 and first meeting held in December.	Department of Justice	On Track
88 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.	Webinar took place on 9th November, specifically for staff working in Mental Health. The webinar had a number of experts speaking on the Assisted Decision-Making (Capacity) Act 2015. A Question and Answer session was also facilitated.	HSE Mental Health Operations HSE National Office for Human Rights and Equality Policy	On Track
89 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.	Delayed as a result of staff absence	HSE Safeguarding Office	<p>Major Delivery Issue</p> <p>Current safeguarding policy excludes mental health services. Until this is revised there is a focus on ensuring that mental health staff are aware of signs and indicators of abuse and have mechanisms to report this</p>

<p>90 Short</p>	<p>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</p>	<p>Several discussions held between Department of Justice (DoJ) and National Office for Suicide Prevention (NOSP). Multiple strands of work agreed to progress this action - outlined below.</p> <ol style="list-style-type: none"> 1. DoJ to continue engagement through the CSO Liaison Group to enable reporting of various activities being undertaken in the area of suicide statistics 2. DoH to look at potential work on the refinement of the reporting of suicide statistics 3. NOSP to continue work on Irish Probable Suicide Deaths Study (IPSDS) for 2019 and 2020 4. DoJ and Irish Prison Service (IPS) to continue work on the production of Self Harm Assessment and Data Analysis (SADA), with support from NOSP, and also review reporting of deaths in custody 	<p>Department of Justice & Department of Health</p>	<p>On Track</p>
<p>91 Short</p>	<p>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.</p>	<p>Engagement process and wider consultation process with key stakeholders completed by end Q4.</p>	<p>HSE Mental Health Operations National Office for Suicide Prevention</p>	<p>Minor Delivery Issue</p>
<p>92 Short</p>	<p>In keeping with the evolving understanding of human 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</p>	<p>The Pre-Legislative Scrutiny (PLS) report from the Oireachtas Sub-Committee on Mental Health was published in October 2022, which contained a number of recommendations that the Department must consider before finalising the draft Bill. The report and recommendations of the report have been reviewed by the Department in Q4. In parallel, the Department continued to work with the Attorney General's Office</p>	<p>DoH Mental Health Unit</p>	<p>Minor Delivery Issue</p>

		(AGO) to address outstanding legal issues, particularly around provisions related to the 'compliant incapacitated' in the General Scheme. Following extensive work on this matter, legal advice was received in the Department in late December. This advice is now being considered by the Department and revised drafting instructions are expected to issue in light of same.		
93 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	Discussions were completed with DoH re: Estimates process 2023. 5 mental health awards were funded by the Health Research Board (HRB) using the 2022 allocation and a press release was issued by the Minister in December publicising these and noting that the HRB would establish an Expert group in early 2023 to prepare a Mental Health Research and Evaluation Strategy.	Health Research Board	Minor Delivery Issue
94 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.	This recommendation is complete and will undergo a Quality Assurance process to close it	HSE Community Operations	On Track For Closure Pending NIMC Approval Quality Assurance process to complete recommendation being undertaken with Recommendation Implementation Lead
95 Short	The initiatives under the former Mental Health 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.	This recommendation is complete and will undergo a Quality Assurance process to close it This recommendation is complete and will undergo a Quality Assurance process to close it	HSE Community Operations	On Track For Closure Pending NIMC Approval Quality Assurance process to complete recommendation being undertaken with

				Recommendation Implementation Lead
96 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.	This recommendation is complete and will undergo a Quality Assurance process to close it	HSE Community Health Operations Improvement & Change (CHOIC) Mental Health Integrated Care Team	On Track For Closure Pending NIMC Approval Quality Assurance process to complete recommendation being undertaken with Recommendation Implementation Lead
97 Medium	Mental health services should make use of other non-mental health community-based physical facilities, which are fit for purpose, to facilitate community involvement and support the implementation of the outcomes in this policy.	The StV Mental Health Engagement and Recovery workstream reviewed this recommendation and it was agreed that this recommendation is closely aligned with recommendation 30 and the Service User Journey Framework implementation. It was agreed that it would come under a joint working group with recommendation 30.	HSE Mental Health Operations Mental Health Engagement and Recovery	Not Started Yet
98 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.	Not started yet	HSE MH Integrated Care Team	Not Started Yet This is long term recommendation and the Mental Health Integrated Care Team have scheduled a meeting for the 24th of January 2023 to review and agree 2023 lead, milestones and deliverables and supports required to deliver on this.

<p>99 Short</p>	<p>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.</p>	<p>The first domain themed report was published for Q3 2022 on 8 December 2022. We met with the Reference Group on 11 November 2022 and provided more detail on the development of the Implementation Plan and more detail on our processes in developing the quarterly reports, and sought further feedback from the Reference Group. The meeting with the Chairs of the Specialist Groups, Chair of the Reference Group and the Chair of NIMC to discuss implementation progress, information sharing, and governance arrangements is scheduled for 26 January 2023.</p>	<p>DoH</p>	<p>On Track</p>
<p>100 Medium</p>	<p>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.</p>	<p>A meeting was recently held with the College of Psychiatrists and the ICGP (Irish College of General Practitioners). The new GP Lead for Mental Health was also in attendance. This meeting was facilitated by the NCAGL Mental Health office in the HSE.</p>	<p>HSE National Clinical Advisory and Group Lead for Mental Health DoH</p>	<p>On Track</p>