

The NIMC Quarterly Report Analysis

Sharing the Vision Implementation Status Report: Quarter 4: 2022

March 2023

Introduction

Background to this report analysis

The National Implementation Monitoring Committee (NIMC) welcomes this opportunity to provide an analysis of the sixth Implementation Status Report of Sharing the Vision (Q4 2022).

This is the fourth Implementation Status Report to be measured against the Sharing the Vision Implementation Plan 2022 – 2024, (published in March 2022) which sets specific milestones and the expected time period for delivery with the implementation time-period commencing from the publication of the Implementation Plan.

The attached Q4 2022 Sharing the Vision Implementation Status Report (Q4 Report) has been prepared by the joint secretariats of the NIMC and the HSE Implementation Group (HIG) and was submitted to the NIMC in advance of its meeting on Friday 24 February 2023. This Quarterly Report Analysis is an output of the analysis of the Q4 Report, by members of the NIMC. Additionally, this Quarterly Report Analysis benefits from the Feedback Report of the Reference Group for the Q4 Report. The Reference Group is tasked with providing the service user, family member and carer perspective, specifically in relation to Quarterly Reports.

Summary of statements

- **NIMC will focus on recommendations defined as *Not Started, Paused, or with Major Delivery Issues* in greater detail in Q1, 2023, with a specific focus on the short-term recommendations.**
- **NIMC would like to highlight that recruitment continues to be a critical issue in mental health services.**
- **NIMC requests quarterly recruitment reports that provide enhanced data on the net gain of posts in HSE mental health services (capturing replacement post and new post recruitment), and enhanced data on vacancies including reasons for vacancy.**
- **NIMC understands that the recruitment issues are not all within the control of the HSE and highlights again that cross-government action to address recruitment and workforce planning is needed.**
- **NIMC supports and appreciates the work of the Reference Group and will seek to explore ways to further enhance communication and facilitate more in-depth Reference Group understanding and feedback on the implementation of StV.**
- **NIMC endorses the need for future reports to incorporate greater detail on the involvement of people with lived experience in the various implementation groups associated with STV implementation; more detailed implementation status description on each recommendation; a clear definition on minor and major delivery issues; and, where relevant, more detailed information on delivery issues and mitigation measures.**
- **NIMC welcomes the Embedding Women's Mental Health in StV report and will put in place structures to ensure that the recommendations of the report are embedded in, and**

complement, existing monitoring and implementation structures already embedded in StV.

Commentary and Analysis

Sharing the Vision (StV) Recommendation Status

The Implementation Status Report for Q4, 2022 outlines the implementation status of all 100 recommendations as detailed in StV. For the second time it has been domain-themed, focusing on Domain 2 (Part I) (Service area, coordination, and continuity of care) covering activity completed over the course of Q4, 2022. 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.

This domain-themed format allows for a more focused, qualitative approach to reporting. In general, the Committee requested and welcomes this integrated report, providing an oversight of implementation across the HSE, government departments and relevant state agencies.

Key areas of implementation progress include:

- A new permanent grade 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 (p.23).
- Three of the six Clinical Nurse Specialist posts for the development of Suicide Crisis Assessment Nurse (SCAN) posts in primary care funded in 2022 have been recruited. The other three are in the recruitment process (p. 22).
- Recruitment is ongoing for Adult ADHD teams, two out of four Clinical Nurse Specialist posts are in place, three out of four Consultant posts are in place in CHO 4 and 7, the remaining vacant post in CHO 8 will be re-advertised in Q1 2023, and a campaign has been launched for a Senior Occupational Therapist in ADHD (p.23).
- Senior Occupational Therapist posts now filled in the National Maternity Hospital (1.0WTE) and Rotunda Hospital (0.6WTE), as part of the development of perinatal mental health services. A new National Clinical Lead for specialist perinatal mental health services was appointed in December 2022 and will take up post in Q1 2023 (p.23).
- Recruitment is underway in CHO3 and CHO4 for the National Clinical Programme (NCP) Dual Diagnosis, and recruitment process will start in Q1 2023 for CHO9 (p.34).
- One CAMHS Hub pilot site is operational in CHO 2, and the remaining four pilot sites in CHOs 3, 4, 6 and 8 are in pre-implementation phase, with pilot implementation teams established (p.36).
- Three Crisis Resolution Services pilot sites have progressed to initial operations, which involves 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 (p.36).
- The Youth Mental Health Transitions Specialist Group carried out external consultation with stakeholders which informed a draft set of recommendations aimed at enhancing the

transition from CAMHS to Adult Mental Health Services. An associated implementation plan is scheduled to be presented to NIMC in Q1, 2023. (p.22).

- The *Making the Connections* public information campaign was launched on www.yourmentalhealth.ie. The campaign focuses on mental health literacy and signposts people to new content on anxiety, low mood, stress and sleep issues (p. 22).
- 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. The 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 (p.23).
- An implementation plan has been drafted for the relevant outstanding recommendations in *Advancing the Shared Care Approach between Primary Care & Specialist Mental Health Services* (2012) in order to improve integration of care for individuals between primary care and mental health services in line with emerging models and plans for Community Health Networks and Teams (p. 22).
- 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 (p.34).

NIMC notes that there are 8 recommendations with status *Not Started*, 5 recommendations with status *Paused* and 7 recommendations with status *Major Delivery Issue*. Of these, 1 of each is a short-term recommendation, and therefore due for completion in September 2023. **NIMC will focus on these recommendations in greater detail in Q1, 2023, especially the short-term recommendations, in order to understand the implementation risks, and associated risk mitigation plans.**

Recruitment

In previous Report Analyses, NIMC have cited recruitment as existential to StV implementation and would like to highlight that recruitment continues to be an issue in mental health services.

NIMC notes that 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 posts across services. Progress in recruitment continued in Q4 2022 with 32.4 additional posts filled, resulting in 369.3 posts in place, and the remaining 410.8 posts at various stages in the recruitment process, which represents a significant recruitment challenge, resulting in underachievement in key aspects of StV implementation.

NIMC will continue to prioritise the issue of recruitment, which is a standing item at meetings, and will continue to focus on the complex problems surrounding the issue, in order to make informed recommendations. The secretariat of NIMC is liaising with workforce planning colleagues in the Department of Health, HSE National HR colleagues and HSE Mental Health HR colleagues to have a comprehensive 'whole of system' recruitment report presented to NIMC on a quarterly basis to help further inform the discussion.

In order to properly understand both the rate of attrition of staff and the impact of new posts on the system, NIMC requests the quarterly recruitment reports provide enhanced data on the net gain of posts in HSE mental health services (capturing replacement post and new post recruitment), and enhanced data on vacancies including reasons for vacancy.

NIMC understands that the recruitment issues are not all within the control of the HSE and highlights again that cross-government action to address recruitment and workforce planning is needed.

Reference Group Feedback

NIMC welcomes the Reference Group Feedback, with an extract of same included at Appendix I in this Analysis document. NIMC acknowledges in particular the longer-term impact of the Reference Group Feedback and that commentary is provided on each of the 100 recommendations which provides an on-going check on all recommendations.

For the first time, the Reference Group Feedback on individual recommendations from the Q3 2022 report was shared with all of the relevant implementation leads so that it could be addressed in the updates provided for Q4 2022. This process improvement will allow the Feedback to support policy implementation at all levels and for requests for information and/or clarification to be addressed through iterative reporting processes (i.e. each report will build on and refine previous reports, to ensure continuous improvement in reporting).

The relationship between NIMC and the Reference Group should be one of collaborative partnership, whereby the full potential of the Reference Group's experience, expertise and insight can be benefited from, reflecting the appropriate relationship model between service users, services and policy makers in the implementation of the policy as a whole. Reflecting this engagement model, the NIMC supports the close working relationship between the NIMC and HIG secretariats through regular face-to-face engagements, serving to, address the Reference Group's requirement for factual information and context, but more broadly to develop this collaborative partnership.

NIMC will seek to continue this engagement on a regular basis and explore ways to further enhance communication and facilitate more in-depth Reference Group Feedback on the implementation of StV.

Reports

The NIMC welcomes the improvements that have been made to the Q4 Report, noting that many of the most recent changes were prompted by the Feedback of the Reference Group. The Q4 report is the second report to be domain-themed, and this format allows for a more focused, qualitative approach to reporting. Future reports will similarly be organised thematically.

The NIMC will constantly seek to improve and enhance reports as a key aspect of policy implementation monitoring. While the Q4 Report provides the status of recommendations by category (*On-track, Minor delivery issue, Major delivery issue, Paused, Not started yet, Completed*), metrics will be developed for each recommendation and included in future reporting.

The NIMC specifically requests the following improvements to future reports:

- **More detailed, time-specific and measurable implementation status descriptions, on each recommendation.**

- **Greater detail on the involvement of experts by experience (people with lived experience and recovery experience of mental health challenges and family/supporters).**
- **A clear definition of minor and major delivery issues and, where relevant, more detailed information on delivery issues and mitigation measures.**

Embedding Women’s Mental Health in StV

NIMC welcomes the report, *Embedding Women’s Mental Health in Sharing the Vision*, from the Specialist Group on Women’s Mental Health, with support from its Consultation Group. The report contains recommendations to gender-proof the StV policy and support a focus on gender in its implementation. The Specialist Group presented the report to NIMC in Q4 2022 and following incorporation of NIMC feedback the report was finalised and approved for publication. The report will be launched in Q1, 2023. **NIMC will put in place structures to ensure that the recommendations of the report are embedded in, and complement, existing monitoring and implementation structures already embedded in StV.**

Conclusion

The NIMC presents the StV Implementation Status Report for Q4, 2022, and provides this Quarterly Report Analysis. The report gives detail on the implementation status of each of the 100 recommendations as detailed in the StV policy. Notwithstanding challenges and barriers to implementation, and the urgent need for the changes as set in the StV policy, NIMC acknowledges the progress to date across several service areas.

NIMC embraces the fact that reporting remains an iterative process, seeking to provide enhanced monitoring, greater transparency and more robust interrogation of data and information provided, by working with the secretariats and implementation leads to attain the highest standards in reporting.

Appendix I

NIMC Reference Group Feedback (Extract ‘Overview’ and ‘Summary’) February 2023

Overview

The NIMC Reference Group (hereon referred to as ‘the group’ or ‘RG’) is made up of twelve people with a range of personal, family and professional experiences, each one bringing to the group their own unique perspectives and skills. This is the fourth feedback report produced by the Reference Group following on from previous reports in May, August and November 2022. This feedback report reviews implementation work undertaken on each of the 100 recommendations contained within *Sharing the Vision* in Q.4 2022 and builds on the continuous improvement approach that all NIMC/*Sharing the Vision* stakeholders are developing.

The process of putting together this report included a survey of RG members to gather information on structure, language and overall thematic areas; a template to feedback on each recommendation; an in person workshop to discuss feedback, areas of progress, and ongoing challenges. As we move towards the completion of the first year of work the RG continues to hone in on the development and implementation of recommendations and seeks clarity in areas where

progress has not yet been made.

The RG acknowledges that significant work is ongoing within HSE services and with partner organisations across a number of recommendations and that time taken to engage multiple departments, service areas and various key leads has proven beneficial in the cohesive approach towards implementation of the 100 recommendations of Sharing the Vision.

Summary

The Reference Group (RG) would like to acknowledge the input of staff across the HSE and various government departments who were involved in submitting the update reports for Q.4 for continuing to take on board the comments and recommendations contained within our Q.3 feedback report. We would also like to acknowledge and commend the growing representation of the lived experience voice in activities associated with the development and implementation of recommendations. In this regard, there is still room for improvement in how the lived experience voice is being engaged to ensure that the implementation of this policy follows a person-centred approach.

The RG is committed to providing advice to NIMC on the implementation of each recommendation contained within Sharing the Vision from the service user and family member perspective and views all 100 recommendations as highly important. Given the current environmental impacts that are being experienced by the broader population of Ireland there is a growing sense of urgency that more progress needs to be achieved in certain key areas where people with mental health difficulties are reporting they are being most impacted at this time. These key areas include: Emergency services, Crises services, the development of Community Mental Health Teams, Child and Adolescent Mental Health Services, Disability, Eating Disorders, Acute services, Advocacy, Complaints mechanisms, Safeguarding and Monitoring and Reporting on self-harm and suicide.

Whilst acknowledging that many external factors impact on progress in key areas the RG feels that it is critical that resourcing of recommendations is confirmed as a priority to enable implementation of recommendations in a timely manner and to mitigate against issues that may arise.

It was helpful to see the addition of general notes on co-production and gender in the Q.4 report however, the RG feels that impact on the language contained in individual recommendations has not yet been seen and continues to encourage broader use of inclusive language as reporting progresses. In addition to ensuring that minority groups are included on paper and in language, it is not clear how protected space will be given in practice to the needs of minority and at-risk groups in the implementation of this policy. The RG looks forward to further developments in this regard.

The RG has previously commented on the improved design and content of the report and have made some additional comments in relation to ongoing improvements and clarity around the collaboration between the HSE, other Government Departments and the voluntary and charity sector. We continue to seek clarity in this area, particularly in relation to identifying workstream leads. The RG recommends that all delivery issues are clearly identified and explained in order to understand the barriers and to provide helpful commentary and advice.

The RG looks forward to continued collaboration with all stakeholders in the implementation of Sharing the Vision and reiterates their commitment to a culture of continuous improvement to

ensure that best possible outcomes are achieved for all people who use mental health services in Ireland.

Areas of positive improvement

- The content update provided in some recommendations is very detailed and welcomed
- The capacity building of knowledge and collaborations amongst Reference Group members
- The ongoing development of an all of government approach
- The increased reference to co-production
- The completion of a number of recommendations

Areas for improvement

- Clarity of updates and inclusion of reporting timelines especially on short term recommendations
- Clarity on the collaboration between the HSE and the voluntary and charitable organisations and more information on this would be welcomed
- More detailed information on delivery issues and mitigation measures
- Greater information is required on financing and resourcing of recommendations
- Internal HSE communications to ensure that all staff are aware of the recommendations and actions that are being carried out to progress them

Areas for continued progress

- Ensure that the RG are confident in the process that is being undertaken for the closure of recommendations and the impact of such for people who use mental health services
- The RG requires a clear definition of minor and major delivery issues to facilitate the reading of the report.
- The RG welcomes the effort to refer to gender inclusivity, including transgender, non-binary and gender non-conforming people but feels that work needs to move on from mentioning these groups to properly considering and addressing their needs.
- What structures are there to have people feed up from frontline like nurses, people 'on the ground' in services?