

The National Implementation and Monitoring Committee (NIMC): Quarterly Report Analysis

Sharing the Vision Implementation Status Report: Quarter 1: 2023

May 2023

Introduction

The National Implementation Monitoring Committee (NIMC) welcomes this opportunity to provide an analysis of the seventh Implementation Status Report of Sharing the Vision (StV) (Q1 2023).

This is the fourth Implementation Status Report to be measured against the Sharing the Vision Implementation Plan 2022 – 2024 (published in March 2022). This implementation plan sets specific milestones and outlines the expected time-period for delivery of the 100 recommendations contained in Sharing the Vision. The publication of the Implementation Plan marks the beginning of the implementation time-period for all recommendations.

The attached Q1 2023 Sharing the Vision Implementation Status Report (Q1 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 19th May 2023. NIMC members analysed the Quarterly report for the first quarter of 2023, forming the basis for this Quarterly Report Analysis. Additionally, this Quarterly Report Analysis benefits from the Feedback Report of the Reference Group for the Q1 Report. The Reference Group provides the service user, family member and carer perspective, specifically in relation to Quarterly Reports.

Summary of statements

- **The NIMC noted progress made in several areas, such as recruitment of approved posts and establishment of clinical programme teams but was concerned about slow progress in recruitment for the Intensive Care Rehabilitation Unit (ICRU) in the National Forensic Mental Health Services in Portrane, given that this is a short-term recommendation.**
- **NIMC expressed concern about the high number of short-term recommendations that may not be achieved, given the short time left for implementation as set out in the *Sharing the Vision Implementation Plan 2022-2024*.**
- **The Committee remains concerned regarding the implementation status of some HSE related recommendations and urged the HSE Implementation Group (HIG) to remain focussed on progressive policy implementation.**
- **The NIMC looked forward to the forthcoming NIMC Mental Health, Human Resource, Recruitment and Workforce Planning Report, which was in development in Q1 2023. The Committee acknowledged the significant improvement this would bring in terms of the availability of relevant recruitment data. It was noted that recruitment and retention data and leaver data by CHO, work category and grade profile would be made available. The staff census data that this report will provide will allow the impact of recruitment to be seen more clearly. This will be presented in conjunction with retirement and replacement posts, making visible the net change in staffing levels.**
- **The NIMC remains committed to ensuring Sharing the Vision is a service user centred policy. In that regard, it discussed the potential for the Reference Group to engage with the HSE Mental Health Engagement and Recovery Service User Group to ensure there is a coordinated lived experience voice at the centre of STV implementation.**

- **The Reference Group sought and the NIMC committed to greater engagement in relation to the quarterly status reports. NIMC will explore ways to further enhance communication and facilitate more in-depth Reference Group Feedback on the implementation of StV.**
- **The importance of ensuring that the new RHA structures at both national and regional levels appropriately support the implementation of Sharing the Vision is emphasised by the NIMC.**
- **The NIMC underlines that it is necessary to ensure there is continued investment in StV so that the important and necessary changes outlined in StV can be realised. It is important that forthcoming Budget 2024 negotiations take account of this.**

Commentary and Analysis

Sharing the Vision (StV) Recommendation Status

The Implementation Status Report for Q1, 2023 outlines the current status of the implementation of all 100 recommendations as detailed in StV. This is the third domain-themed report. This quarter the focus is on Domain 2 (Part II) (Service area, coordination, and continuity of care) covering activity completed over the course of Q1, 2023. 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 II) will focus on activity relating to Mental Health Engagement and Recovery, Social Inclusion, Justice and Mental Health Services aligning with the thematic workstream structure established for implementation of HSE led recommendations.

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

Key areas of implementation progress include:

- **Recruitment of mental health staff:** In Q1 2023, 423.4 mental health posts out of the approved 784.1 posts were filled, and the remaining 360.8 posts are at various stages in the recruitment process.
- **Development of Dual Diagnosis services:** Recruitment is underway in CHO 4, and support services are in place. The recruitment process has also commenced in CHO 3, and related accommodation issues are being addressed. A partial team will be advertised shortly in CHO 9, in partnership with HSE Social Inclusion. (p.33)
- **Development of Crisis Resolution Services:** Three pilot sites now operational. Recruitment of teams progressing across remaining 2 funded sites
- **Implementation of Model of Care for Older Persons:** Four pilot sites identified, and recruitment is progressing. (p.33).
- **Development of Digital Mental Health Services:** Work progressing on the development of a comprehensive 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. (p.34)
- **Development of CAMHS Hubs Teams:** Recruitment progressing with 2 pilot sites complete, and 3 sites in process. (p.34)
- **Establishment of National Population Mental Health and Mental Health Services Research and Evaluation Strategy:** HRB received the letter of allocation for budget of €1.2 million for

StV research investments for 2023. The 5 funded projects are active and are being managed and monitored. (P.70)

- **Suicide Crisis Assessment Nurse (SCAN) recruitment:** Three of the six funded 2022 posts have successfully been recruited and are in post. Two are in the interview process and one is in the process of being reallocated to another service due to recruitment challenges. (p.45).
- **Acute Bed Capacity report:** A draft interim report was agreed, making recommendations on capacity reflective of emerging models of care, existing bed resources, and future demographic changes. The recommendations need to be encompassed as part of an overall multi-year capital plan. Major recruitment challenges have been experienced in the central mental hospital (CMH) at Portrane. The Intensive Care Rehabilitation Unit (ICRU) cannot be developed, or evaluated, until the CMH is sufficiently staffed. The NIMC urges the HSE to expedite all possible solutions to successfully open this essential service.

There was some discussion around the measuring of outcomes and implementation. The NIMC acknowledged the challenges faced by the HIG secretariat in this area, noting that recommendations are varied and that it is more challenging to measure outcomes for some recommendations than others. While concerns were raised about slow progress in some areas it was noted that the scale of change envisioned in *Sharing the Vision* is significant.

The NIMC noted progress made in several areas, such as recruitment of approved posts and establishment of clinical programme teams but was concerned about slow progress in recruitment for the ICRU in the National Forensic Mental Health Services in Portrane, given that this is a short-term recommendation.

Timelines for Implementation and Recommendations *Paused* and *Not Started*

NIMC expressed concern about the high number of short-term recommendations that may not be achieved, given the short time left for implementation as set out in the *Sharing the Vision Implementation Plan 2022-2024*. In addition, NIMC notes that there are:

- 6 recommendations with status *Not Started*
- 4 recommendations with status *Paused*
- 8 recommendations with status *Major Delivery Issue*.

Of these, 3 are short-term recommendations, and therefore due for completion in September 2023. Options for the development of adjusted timelines for implementation of relevant recommendations will be considered by the NIMC.

The HIG provided detailed information on recommendations with a status of *paused*, *not yet started* or with a *major delivery issue*. Plans to enhance progress were also presented. Some recommendations report their status as *not yet started* because work on them cannot begin until the HSE Mental Health Service Workstream is established. Others report their status as *not yet started* because work on them cannot begin until the Regional Health Areas (RHA) are established. The recent establishment of the HSE Mental Health Services Workstream (of the HIG) will enable related recommendations to progress. The Committee also received a report on the current state of establishment of the RHAs. **However, the Committee remains concerned regarding the implementation status of some HSE related recommendations and urged the HIG to remain focussed on progressive policy implementation.**

Impact of HSE restructuring on the implementation of Sharing the Vision

The NIMC received a report from the Department of Health on the current stage of implementation of the re-structuring of the HSE, with the proposed development of the RHAs. As reported, the objectives of RHAs are to improve clinical governance, to streamline corporate governance and accountability, to enable a population-based approach to service planning of defined populations, and to support the integration of care with geographically linked community and acute services. It is envisaged that most services will be planned and delivered locally, apart from highly specialised services, which will be delivered nationally. Funding will be allocated in accordance with this arrangement, and RHAs will have appropriate autonomy in deciding how budget will be spent and will also determine staffing needs for the relevant area. The HSE 'centre' will continue to provide frameworks, policies, procedures, protocols and guidelines for hiring etc.

It is envisaged that RHAs will commence operation from 1st January 2024 and that devolution of authority would continue across 2024 and 2025.

In the context of StV, recommendations 75 and 76 have not yet progressed. The development of RHAs is of relevance to these recommendations which relate to aligning mental health services with integrated care structures, including RHAs, under Sláintecare reforms, and re-balancing resources in mental health services to take account of population deprivation patterns. There was a shared concern amongst NIMC members that mental health services have not received much attention in the context of the Sláintecare reform process. **The importance of ensuring that the new RHA structures at both national and regional levels appropriately support the implementation of Sharing the Vision is emphasised by the NIMC.** It has also been noted that the restructuring of the HSE at the central level may have implications for the work of NIMC and the NIMC will seek an update from the CEO of the HSE about HSE central structure at a future meeting of the NIMC.

Recruitment

In previous Report Analyses, NIMC have identified that the implementation of StV is heavily dependent on adequate recruitment. NIMC 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 this, Budget 2021 allocated new development funding for an additional 155.4 posts and Budget 2022 allocated new development funding for 325 posts. This provided for an additional 784.1 posts across services. Significant progress was made in recruitment in 2022, and this continued in Q1 2023 with 53 new posts recruited in this quarter. There are 423.4 new posts in place, and the remaining 360.8 posts at various stages in the recruitment process. This is a significant recruitment challenge, resulting in underachievement in key aspects of StV implementation.

NIMC will continue to prioritise the issue of recruitment and will continue to focus on problems surrounding this issue and make informed recommendations. This is a standing item at meetings. In Q1 the secretariat of NIMC outlined plans to develop a comprehensive recruitment report and present to NIMC on a quarterly basis to help further inform the discussion. This report will be produced in conjunction with workforce planning colleagues in the Department of Health, HSE National HR colleagues and HSE Mental Health colleagues.

The NIMC looked forward to the forthcoming NIMC Mental Health, Human Resource, Recruitment and Workforce Planning Report, which was in development in Q1 2023. The Committee acknowledged the significant improvement this would bring in terms of the availability of relevant recruitment data. It was noted that recruitment and retention data and leaver data by CHO, work category and grade profile would be made available. The staff census data included in this report will allow the impact of recruitment to be seen more clearly. This will be presented in conjunction with retirement and replacement posts, making visible the net change in staffing levels.

HSE Mental Health Engagement and Recovery

The NIMC noted significant work progress associated with the Office of HSE Mental Health Engagement and Recovery (MHER). MHER works to enhance the lived experience voice at the centre of specialist mental health services by engaging with and gathering the experiences of service users, family, carers and supporters (FCS). In addition, they work to develop and support the implementation of Peer Support working, Recovery Education, and Individual Placement and Support (IPS). MHER also provide consultancy across a range of service improvement initiatives and lead on the implementation of 11 recommendations across StV. MHER StV Workstream Steering Group works to support and provide specialist expertise to the broader HSE StV implementation process.

The NIMC noted progress made in developing an FCS National Volunteer panel to support StV implementation. Members of the national panel will provide expertise in relation to areas of service delivery, service improvement, training, education and research. Progress made in relation to recommendations 27, 29, 71 and 72, was also noted.

The NIMC acknowledged this progress and discussed the potential for the Reference Group to interact with the HSE Mental Health Engagement and Recovery National Volunteer Panel for StV to ensure there is a coordinated lived experience voice at the centre of STV implementation.

Funding

Funding provided by successive budgets have contributed to commencing implementation of many of the recommendations of *Sharing the Vision*, including enhanced resources for community mental health teams, CAMHS hubs/teams, adult crisis resolution services, increased supports in employment, peer support workers, bereavement co-ordination, and dialectical behaviour therapy, among other things. Significant progress has been made on the implementation of *Sharing the Vision*, but there is still much work to be done. Continued resourcing of *Sharing the Vision* is essential to ensure momentum.

The NIMC underlines that it is necessary to ensure there is continued investment in StV so that the important and necessary changes outlined in StV can be realised. It is important that forthcoming Budget 2024 negotiations take account of this.

Reference Group

The NIMC welcomed the Reference Group Feedback Report for Q1 2023 (with a summary of same included at Appendix I). In particular, the NIMC acknowledged the positive impact the Reference Group Feedback was having over the longer term. It was also acknowledged that the Reference Groups deliver feedback on all 100 recommendations, providing valuable ongoing commentary on all recommendations.

As had been the case in Q4 2022, the Reference Group Feedback on individual recommendations from the Q4 2022 report was shared with all the relevant implementation leads so that it could be addressed in the updates provided for Q1 2023. This process allows the Feedback to support policy implementation at all levels. In addition, any requests for information and/or clarification can be addressed in the reports that follow, allowing for continuous improvement in reporting.

The relationship between NIMC and the Reference Group (RG) is a collaborative partnership. The NIMC benefits from the RG's experience, expertise and insight. This relationship between service users, services, and policy makers is important for the implementation of the policy as a whole. The NIMC supports the close working relationship between the NIMC and HIG secretariats through regular face-to-face engagements. This serves to address the Reference Group's requirement for information and context and also to develop this collaborative partnership.

The NIMC noted the RG Feedback regarding the importance of inclusivity and working to ensure diverse voices of communities and voices of frontline staff and their lived experiences are adequately represented in policy implementation. The NIMC was supportive of this goal and noted work by Mental Health Engagement and Recovery in this area, and the challenges experienced in achieving adequate representation.

In the interest of enhancing the collaborative partnership between the NIMC and the Reference Group, opportunities to enhance the quality of feedback mechanisms, communications, and engagement between the RG, the HIG and related workstreams, HSE and the NIMC were discussed.

The Chair proposed that a meeting with the RG Secretariat and some RG members, the NIMC and HIG Secretariats, and some NIMC members should be held as soon as possible to re-examine the RG reporting mechanisms and optimising engagement between the NIMC implementation monitoring structures.

The Reference Group sought and the NIMC committed to greater engagement in relation to the quarterly status reports. NIMC will explore ways to further enhance communication and facilitate more in-depth Reference Group Feedback on the implementation of StV.

Conclusion

The NIMC presents the StV Implementation Status Report for Q1, 2023, 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. NIMC is committed to continuously improving reporting. The NIMC seeks 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. NIMC acknowledges the progress to date across several service areas, while acknowledging barriers and challenges to implementation. NIMC also underlines the urgent need for the changes as set in the StV policy.

However, the NIMC urges implementation partners to remain focussed on implementation reflecting evidence of some slow or absent progress. Certain recommendations have unachievable timelines of implementation. The NIMC will need to consider this and offer recommendations regarding how this should be managed. The NIMC, in consultation with the RG, remains committed to highlighting and advocating for service improvement as laid out in policy.

Appendix I

NIMC Reference Group Feedback (Extract 'Overview' and 'Summary')

May 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 fifth feedback report produced by the Reference Group following on from previous reports in May, August and November 2022, and February 2023. This feedback report reviews implementation work undertaken on each of the 100 recommendations contained within Sharing the Vision in Q1 2023 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.1 2023. The RG is committed to providing advice and suggestions for improvement to NIMC on the implementation of each of the 100 recommendations contained within Sharing the Vision from the service user and family member perspective and views each and every recommendation as highly important.

Reference Group members devote considerable hours of voluntary time to reviewing and commenting on each quarterly report in the anticipated hope that the voice of lived experience is being heard across multiple stakeholders in the process. When our comments and suggestions are not acknowledged or responded to it dims the value of the work that we undertake.

As we complete our first report for 2023, we have reflected on the core values of Sharing the Vision – **Respect, Compassion, Equity and Hope**. These strong core values drew us towards this work and are at the forefront of why and how we consistently strive towards providing meaningful commentary and suggestions for every single recommendation. It cannot be emphasised strongly enough how important it is for all partners in this process to commit to and uphold these values in order to continue advancing a trust-based partnership between those responsible for the implementation of Sharing the Vision and the RG, on behalf of the people on use mental health services. Simply stated by one reference group member *"If our voice is not heard then the process is broken."*

The RG is pleased to note the increasing number of recommendations that are on track for completion within recommended timelines but are highly aware that this does not necessarily translate into practical improvements on the ground for people who use services. The process of measuring impact is one that requires further work and one that we eagerly look forward to being involved in. The Sharing the Vision Implementation Plan (2022 – 2024) provides details of risk monitoring and milestones and outputs that are helpful in reviewing and tracking progress. However, the application of the “best practices” in measurement of goals is lacking in many cases and for the RG the critical measurements are those in relation to impact for people who use services. In this report we have provided examples of how measurement of recommendations can be improved.

In our previous report (Q.4 2022), we stressed the importance of communication and in ensuring that front line staff are aware of, and involved in, the design and delivery of recommendations. Change cannot be effective without the knowledge and involvement of those who will be charged with managing new processes and service offerings. It is clear from the interactions that RG members have with frontline staff, both as colleagues and as service providers, that knowledge of, and participation in, StV recommendations is limited.

Continuing environmental impacts are being experienced by the broader population of Ireland particularly in relation to housing, cost of living and the refugee community. It is concerning that a number of recommendations appear to have stalled due to resourcing issues. At a time when the Irish Government is experiencing significant budgetary surplus the needs of people who depend on mental health and other health and social services should be prioritised. It is widely accepted that Vision for Change was not adequately resourced and that this impacted on the failure to implement its recommendations. We do not wish to see a single recommendation in Sharing the Vision fail for lack of resources. 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. As an example, Housing is mentioned across a number of recommendations and is a complex issue that will impact on the mental health outcomes for generations of adults and children, yet funding for Housing Coordinators who can take a key role in implementation of recommendations has not been identified and a decline in the number of housing coordinators across CHO's has been reported.

Again, we emphasize the ‘Leave No One Behind’ principle of the policy. We need to work harder to make sure Sharing the Vision addresses the needs of those priority groups faced with further challenges including LGBTQ+ community, the non-binary and transgender community, travellers, people from different religion, ethnicities and cultural backgrounds as well as people with learning challenges and different abilities. In this report we provide some examples of how the voice of the LGBTQ+ communities do not feel that Sharing the Vision includes them.

Areas of positive improvement

- The content update provided in some recommendations is very detailed and welcomed
- The number of recommendations that are on-track continues to increase.
- The ongoing development of an all of government approach
- The proposed completion of a number of recommendations
- Clearer definition of minor and major delivery issues and inclusion of mitigating factors

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
- Greater information is required on financing and resourcing of recommendations
- Communications strategy to ensure that all HSE staff are aware of Sharing the Vision and its recommendations and that they are involved in the design and delivery of implementation actions that are being carried out
- Screen-readers do not process graphics. Captions following graphics would enable greater access to information for people who use assistive technology