



# Sharing the Vision

A Mental Health Policy for  
Everyone

**Policy Implementation**

**Status Report**

**Quarter 1, 2023**

## Executive Summary

This is the seventh 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 third time, a domain-themed report presentation, covering activity completed over the course of Quarter 1, 2023.

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, reports will 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 1, 2023 status report will focus on Domain 2 (Part II). All recommendations in Domain 2 are HSE led and this report will cover 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.

## Report Content

Section 1: Report Overview

Section 2: Quarter 1, 2023 Progress at a Glance

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

Appendix A – HSE StV New service developments Quarter 1, 2023

Appendix B – Quarter 1, 2023 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
- FCS – Family, Carers and Supporters
- GP – general practitioner
- HIG – HSE Implementation Group
- HSE – Health Service Executive
- MHSOP – Mental Health Services for Older People
- NIMC – National Implementation and Monitoring Committee
- PICU – Psychiatric Intensive Care Unit
- StV – Sharing the Vision
- VCS – Voluntary and Community Sector



# Sharing the Vision

A Mental Health Policy for  
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## **Section 1**

### **Report Overview**



## Report Overview

This is the seventh status report on the implementation of *'Sharing the Vision: A Mental Health Policy for Everyone'* covering activity completed during Quarter 1, 2023. 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 all workstreams established. 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 II) and is organised thematically with a focus on Mental Health Engagement and Recovery, Social Inclusion, Justice and Mental Health Services. 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 2030

## 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 number of iterative improvements have been piloted and implemented over the past year. This has included modifying the reporting template to enable tracking of and additional detail on risk and issue categories, 'implementation problems' and mitigation plans. In Quarter 4, 2022, the template was modified to begin tracking work which contributes to 2023 milestones. In Quarter 1, 2023, a separate problem log has been created to enable improved accessibility in accessing information on 'implementation problems' including their categorisation and status.

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

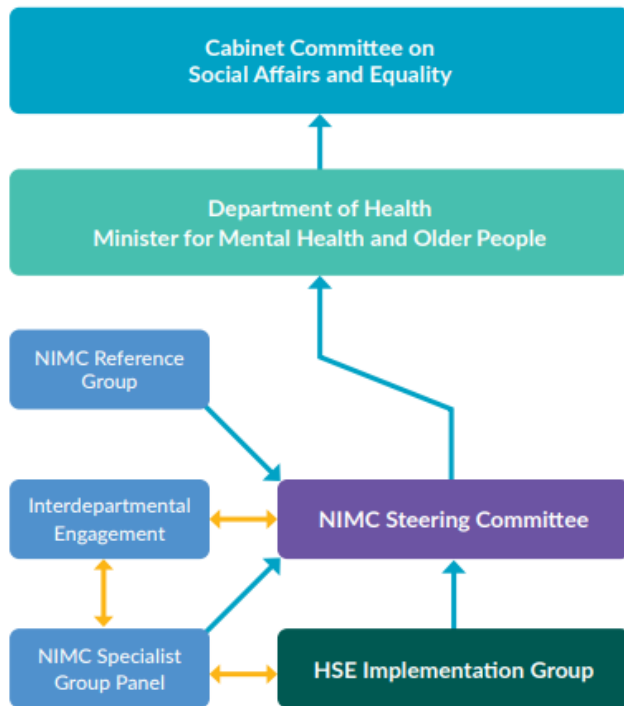
- On-track –The project/initiative is proceeding and is on track to achieve the milestones that the implementation lead has identified (This is aligned to delivery timeframe identified in StV Implementation Plan)
- Minor delivery issue – The project/initiative has a minor issue that is impacting, but 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.

In the past quarter, a quality assurance process was drafted and is currently being trialled for closing recommendations deemed completed.

## 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

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**Section 2**

**Quarter 1, 2023**

**Progress at a Glance**

## Work of the NIMC and the HIG Quarter 1, 2023

### NIMC Steering Committee and Secretariat

Established in December 2020, the NIMC Steering Committee meets monthly.

The NIMC met each month in Q1 2023, as scheduled. Minutes of these meetings can be found [here](#). It reviewed and published the [Q4 2022 Policy Implementation Status report](#) and [associated NIMC quarterly report analysis](#) with the significant input of the Reference Group. It approved the [final report of the Women's Mental Health Specialist Group](#) for publication.

The NIMC requested the development of a Quarterly Mental Health Human Resource, Recruitment and Workforce Planning Report, capturing relevant activity across the HSE and the Department of Health, to enable the NIMC to optimally understand and advocate for the provision of adequate human resources in the implementation of StV. This will be actioned in Q2 2023.

The NIMC also received a number of detailed implementation progress reports and presentations from the Acute Bed Capacity Specialist Group, the Youth Mental Health (Transitions) Specialist Group, as well as reports from the Digital Mental Health Workstream, and a presentation on HSE Child and Adolescent Mental Health Services (CAMHS) and paediatric emergency mental health services.

The NIMC agreed follow up actions as appropriate (for details please see published minutes [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 StV implementation plan 2022 – 2024. Following publication of the implementation plan in March 2022, a workstream model has been developed where HSE-led recommendations are grouped thematically to drive implementation and support collaboration. Reflecting this workstream model, and with the approval of NIMC, the HIG was reconstituted in Quarter 2, 2022. Its membership now includes workstream leads, as well as additional membership representing key support functions. The HIG meets regularly and its meeting schedules are aligned with those of NIMC to support the overall governance for policy implementation.

Marking the one-year anniversary of the launch of the StV implementation plan, a national in-person learning event was arranged for March 23rd, 2023. Attended by in excess of 120 delegates, including implementation leads and guest speakers, this event provided opportunities for networking as well as for sharing of individual experiences and learning.

## 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 enhancing the reporting processes associated with the Quarterly Policy Implementation 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 draft Quarter 4, 2022 Policy Implementation Status Report to the NIMC Steering Committee at the meeting on 24 February 2023, detail of which is provided in the [NIMC Quarterly Report Analysis Quarter 4 2022](#).

The NIMC agreed to support greater levels of engagement between the Reference Group and policy implementation leads, in particular, policy Workstream leads of the HIG, to assist the Reference Group in fulfilling its role. This engagement will be developed in Q2 2023.

## Specialist Groups

### Youth Mental Health Transitions Specialist Group

In February 2023, an 'Enhanced Transition Plan' with recommendations to support transition and an associated implementation plan were presented to NIMC at a face-to-face meeting. The 'Enhanced Transition Plan' was ratified by NIMC and presented by the specialist group Chair Mark Smyth at the national StV learning event on March 23<sup>rd</sup>. This output completes the work of workstream 1 of the specialist group.

The specialist group met on three occasions in Quarter 1 to begin to outline recommendations to optimise mental health supports to the age of 25. A review of best practice nationally and internationally in Youth Mental Health Service delivery was completed, on behalf of the Specialist Group, by NUIG and the findings were presented by NUIG to the specialist group on 8/03/23.

### Primary Care Specialist Group

The Mental Health in Primary Care Specialist Group was stood up in June 2022, tasked with delivering a thematic set of policy recommendation relating to the development of mental health supports in primary care settings, including talk therapies, as well as with promoting a shared care between primary and specialist mental health services. The Specialist Group meets approximately every 4-6 weeks and has stood up two working groups focusing on enhanced access to talk therapies and shared care respectively, in order to ensure timely delivery of these critical policy recommendations. Work is currently underway to finalise a shared care implementation plan and to scope a structured approach to meeting the physical health needs in primary care of those with severe and enduring mental illness, which will be informed by lived experience, as well as the experiences of staff, services and other key stakeholders

### **Acute Bed Capacity**

Established in 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 and agreed a draft, interim report which was presented to the NIMC in Quarter 1, 2023. The recommendations of the Acute Bed Capacity report will need to be encompassed as part of an overall multi-year Capital Plan which covers existing as well as additional facilities and capacity. A working group is to be established to both prioritise and oversee the capital plan for mental health with a remit to look at requirements over the next 10 years. In the past Quarter, draft terms of reference and proposed group membership of this working group were developed. Details of national oversight structures that any such group will report to remain to be clarified.

### **Digital Specialist Group.**

Set up May 2022, the Specialist Group on Digital Mental Health has 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.

In Quarter 1, a Digital Mental Health writing sub-group was established to scope and develop a Digital Mental Health Workplan, which has an 18-month delivery timeline. The aim of this plan will be to improve the management and delivery of existing digital mental health services, and to put in place the foundations for future digital mental health developments. An overarching objective of the plan is to develop a longer-term digital mental health strategy which will run until 2030. The workplan will be reviewed by the specialist group, and subsequently submitted to the HIG and NIMC. 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. Members of the specialist group attended the first meeting of the Digital Mental Health Research Exchange on March 9<sup>th</sup>, sharing learning and exploring future collaborations. The work of the Digital Mental Health Specialist Group was presented at this meeting and at the Sharing the Vision Learning Event March 23<sup>rd</sup>.

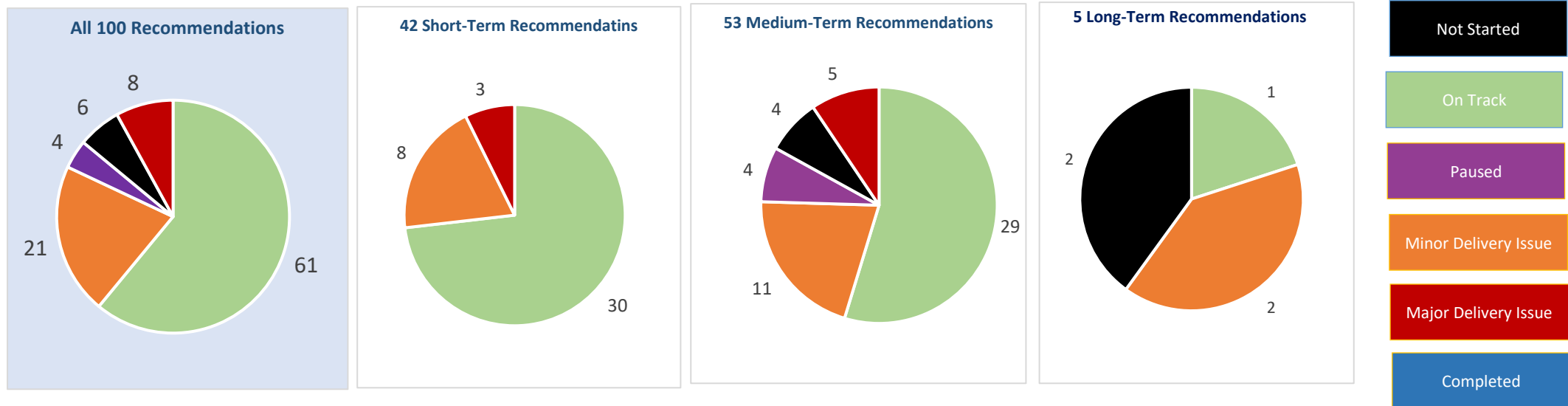
### **Women's Mental Health Specialist Group**

On March 11<sup>th</sup>, Ministers Donnelly and Butler launched *Embedding Women's Mental Health in Sharing the Vision – a report by the specialist group on women's mental health*. This represents a critical output of this Specialist Group, under the NIMC and *Sharing the Vision*.

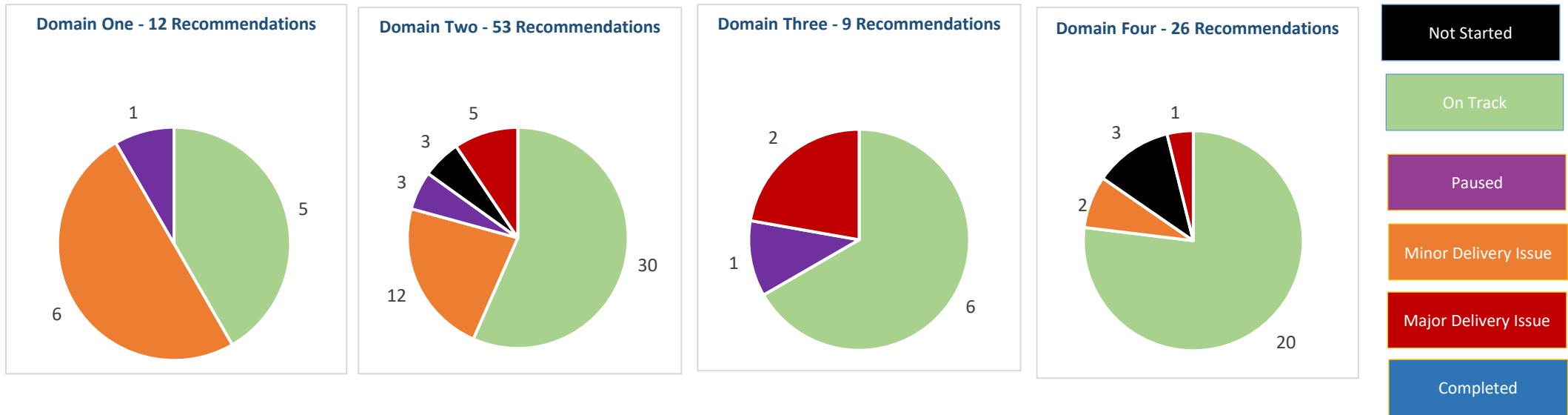
## High Level Recommendation Status Summary

In Quarter 1, 2023, implementation leads have indicated the status of their relevant recommendations as illustrated below, based on timeframe for completion and domain respectively:

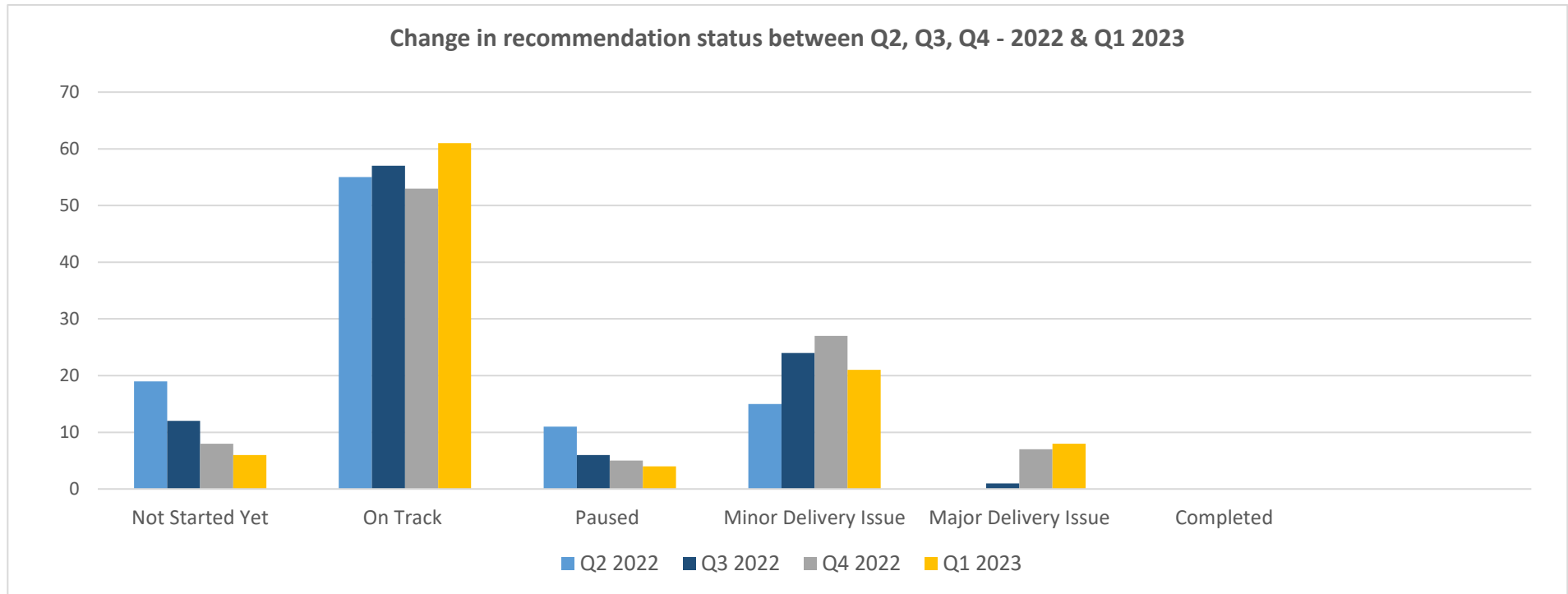
### Recommendation status by timeframe



## Recommendation status by domain

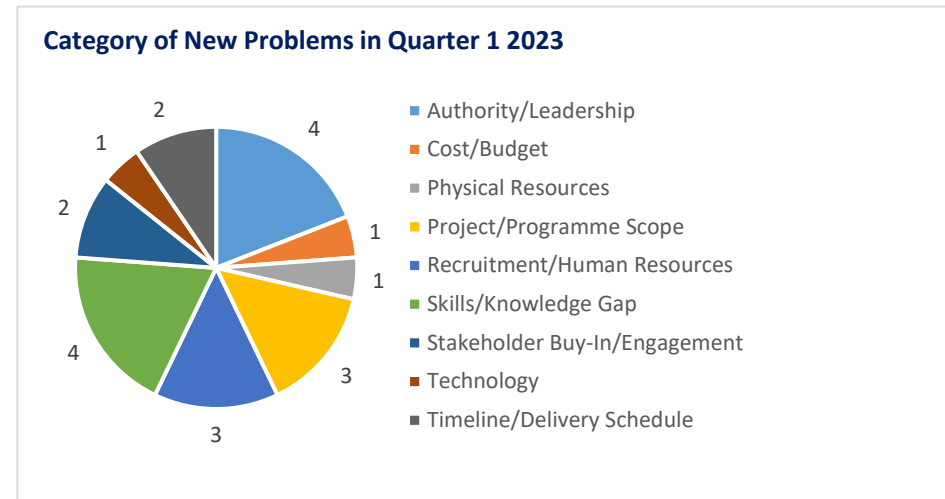
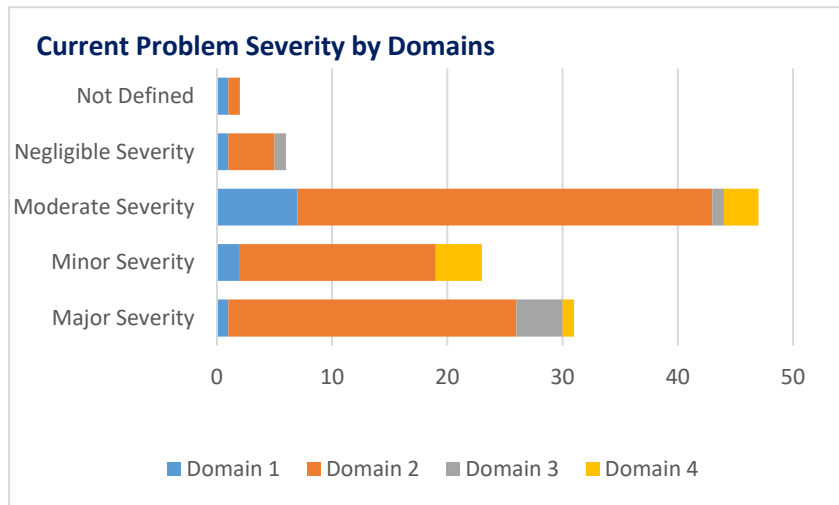


## High Level Recommendation Status Summary





## Reported Problems



The majority of new implementation problems experienced in Quarter 1, 2023, related to Authority/Leadership, Skills/Knowledge Gap, Project/Programme Scope and Recruitment/Human Resources



# Sharing the Vision

A Mental Health Policy for Everyone

## Section 3

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

## Domain 2 – Service Access, Coordination and Continuity of Care

### Part II – 26 recommendations

Thematic Groups	Mental Health Engagement and Recovery	Social Inclusion	Justice	Mental Health Services
<b>Outcomes</b>	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			
	2a, 2b	2a, 2b	2a, 2b	2a, 2b, 2c
<b>Recommendations</b>	26, 27, 29, 39, 65	61, 62, 63, 64	54, 55, 56	25, 28, 30, 32, 33, 34, 41, 43, 45, 46, 47, 49, 58, 59

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

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

### Background

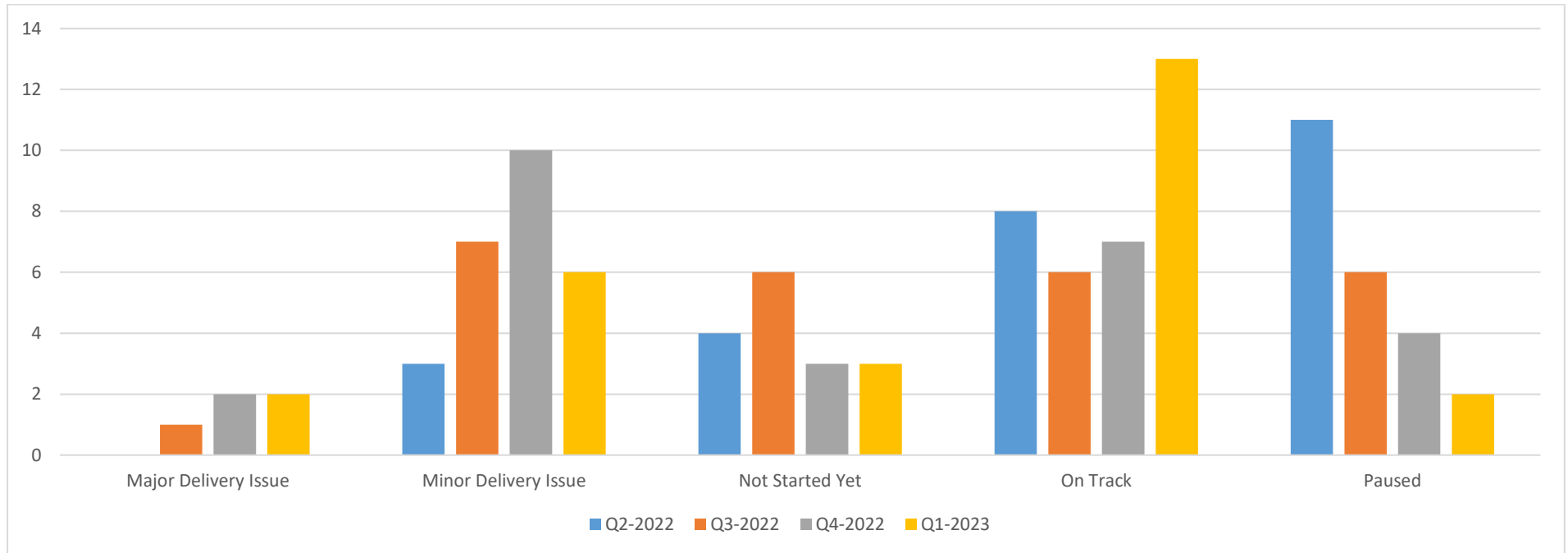
In this Domain, policy recommendations seek to promote:

- 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 II)

### Recommendation status at a glance

Status of Recommendations in Domain 2 (Part II) in 2022-2023



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

**Progress Achieved**

The Acute Bed Capacity (ABC) Specialist Group was set up to examine Acute Inpatient (Approved Centre) bed provision, including Psychiatric Intensive Care Units (PICUs). It agreed a draft, interim report making recommendations on capacity which was reflective of emerging models of care, existing bed resources and future demographic changes. This was presented to the NIMC in Quarter 1, 2023. Recommendations of the Acute Bed Capacity report need to be encompassed as part of an overall multi-year capital plan, which covers existing as well as additional facilities and capacity. A working group is being established to both prioritise and oversee the capital plan for mental health with a remit to look at requirements over the next 10 years. In Quarter 1, draft terms of reference were developed and proposed group membership agreed. Source of national oversight are yet to be clarified.

*(Recommendations #46 & #47)*

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

**Emerging Developments**

A working group was stood up to progress design of enhanced outreach and liaison activities between CMHTs and VCS partners. Its membership consists of representatives from HSE Mental Health Engagement and Recovery (MHER), Non-Governmental Organisations, service users and HSE management. The working group has developed a work plan

outlining key objectives which include i) developing regional engagement forum networks and ii) production of guidance for CMHTs in partnering, information sharing and signposting with VCS. Planning is underway to pilot a regional engagement forum, in collaboration with the Enhancing Engagement project. The Enhancing Engagement project is being delivered by HSE MHER in partnership with Genio and is reviewing the HSE mental health engagement model. Plans for delivery of recommendation 26 will also consider related recommendations, including #30, #39 and #97.

*(Recommendation #26)*

Recommendations arising from a literature review of best practices in recovery focused care planning and from consultation with Recovery Coordinators nationally were presented to the working group responsible for progressing recommendation 27. These recommendations were contained in a report prepared by an independent research team on behalf of the working group. The evidence does not support introduction of independent personal recovery plans at this time. On consideration of the evidence, it was agreed that the working group, which currently has representation from occupational therapy, nursing, recovery education and people with lived experience, should expand membership to increase representation from across all CHOs as some are not represented currently. The reconstituted group will be tasked with reviewing current training resources and documentation in use as the next step in planning implementation. Additionally, expressions of interest have been invited through the CHO Heads of Service for Mental Health to contribute to a 1-day event, to be held in May, showcasing quality initiatives in recovery planning. There will also be an opportunity on the day to workshop resources needed to support recovery focused care planning and practice from a frontline perspective.

*(Recommendation #27)*

There are two training modules in place to embed a recovery ethos among mental health professionals working in the CMHTs. Module 1 focuses on Recovery Principles and Practice with CMHTs and Module Two focuses on Advanced Recovery Practice. Following evaluation and feedback from recovery education services, there is an extensive revision underway of Module 1, with a final draft due to be completed by the end of Quarter 2, 2023. The revised Module 1 is taking into consideration the need to create additional workshops to support practical approaches to recovery and to

upskill recovery education staff. Continuous evaluation of the training takes place with copies of evaluation forms sent to HSE MHER for analysis every two years.

*(Recommendation #29)*

A reinvigoration of a previous service improvement project to improve the service user journey through CMHTs is underway. As part of this project, a draft Service User Journey Framework (SUJ Framework) was developed in early 2020, which outlines a standardised access pathway to timely mental health care, designed in consultation with services users, FCS, staff and those supporting priority groups. The project was paused due to re-prioritisation of resources in response to the Covid pandemic. A working group has now been convened and planning is underway to arrange a consultation workshop with staff and service users with a focus on reviewing the SUJ Framework document with a view to assessing how it meets policy requirements.

*(Recommendations #28,# 34,# 39)*

The demonstration of a Model of Care for adults accessing talk therapies while attending specialist mental health services is progressing well. In Quarter 1, 2023, a national learning network was established to provide opportunities for practical learning across CHO pilot sites. This will involve regular in-person learning events as well as an online repository wherein practical resources can be stored and shared. In parallel, work continues to stand up a dedicated StV Mental Health Services Workstream to progress remaining actions for this recommendation. In recognition of the importance of local operational input, a Head of Service for Mental Health has now been identified to jointly lead this workstream alongside national mental health operations.

*(Recommendation #32)*

Detailed implementation planning for Recommendation 54 has been scoped by the StV Justice Workstream. The workstream is made up of membership from the Irish Prison Service (IPS), Probation Service, National Forensic Mental Health Service and Prison In-Reach representatives. The initial priority identified by the workstream group is a requirement to analyse and quantify the mental health needs of the prison population. While data is available on



prisoners who meet the criteria for the threshold for forensic mental health treatment, this is a small population within the prison service and not reflective of the wider IPS prisoner population. As the current IPS information system cannot provide that level of analysis a decision to undertake a joint IPS/HSE analysis of the mental health needs of the full prison population has been taken. A tendering document is being prepared by the IPS and HSE to seek a third level institution to undertake the research. The length of the research and the methodology will be finalised in partnership with the successful tender recipient. In parallel, there has also been early progress made in developing a recovery focused tiered mental health model of care for the prison system with the [National Framework for Recovery in Mental Health](#) identified as an appropriate framework on which to base this planning.

*(Recommendation #54)*

Detailed planning for Recommendation 61 has commenced under the StV Social Inclusion workstream. In recognition of the many national initiatives underway in the area of cultural competency and diversity, an initial objective of the workstream group is to identify areas of activity that align with the actions of the recommendation. To deliver this, a mapping project is underway and includes national policies such as e.g. [Connecting for Life](#), [HSE Intercultural Strategy 2018-2023](#), [Stronger Together-HSE Health Promotion Plan 2022-2027](#), [National Traveller Health Action Plan 2022-2027](#) and [LGBTI+ Inclusion Strategy 2019-2021](#). Where areas of alignment are identified, efforts will be made to collaborate on these. Additionally the group has scheduled engagements with lead researchers of two research projects focusing on cultural competency and humility. There are being carried out by the Health Research Board and the University of Galway. In parallel, and to continue to deliver culturally appropriate mental health services, initial work has begun on enhancing existing translated video resources and on updating the 'My Health, My Language' repository on the HSE Social Inclusion website <https://www.hse.ie/eng/services/mhml/>. As part of the wider 'HSE Health Response for Refugees & Applicants Seeking Protection', a new regional psychosocial support service is in development, which will be delivered by nine community migrant health teams (one per CHO). Funding allocation is awaited from DoH and thereafter resources can be put in place and services stood up.

*(Recommendation #61)*

There is a National Specialist Mental Health Service for the deaf community located in CHO 9. There is a Consultant Psychiatrist leading the service alongside nursing and administration supports. The StV Social Inclusion workstream has engaged with the specialist service and this engagement will be key in designing an approach to evaluating the service. An evaluation will need to consider service demand and access requirements. Once an evaluation process is agreed, a request for tender to carry out the evaluation will be issued.

*(Recommendation #62)*

As part of a wider psychosocial response there are a number of initiatives underway to deliver on Recommendation 63. A *Psychosocial Support Guidance* document is being prepared under the governance of the StV Social Inclusion workstream, which will provide guidance for community migrant health teams as to how mental health supports should be delivered to this target population. This will ensure a consistent approach by psychosocial responders to the needs of refugees, regardless of which CHO they are residing in. In an effort to ensure that refugees are aware of accessible mental health services and supports, initial work has begun to enhance existing translated video resources. Work is also underway to establish regional psychosocial support services for refugees. This work is part of a wider HSE Migrant Health Response for Refugees & Applicants Seeking Protection. To ensure effective, meaningful engagement, the StV Social Inclusion workstream has begun consultation with existing frontline services working with refugees and international protection applicants and a representative from HSE MHER joined the workstream as a core member in March.

*(Recommendation #63)*

To ensure high quality interpreter services are consistently available to all HSE service users as required, HSE wide work is on-going in this area and is being coordinated by the HSE Social Inclusion Office. This includes a review of the Office of Government Procurement (OGP) Interpretation Framework and engagement with the provider of interpretation services through this framework. Scoping of HSE service requirements is also underway. Recommendation #64 is aligned with this work and the StV Social Inclusion workstream will be kept informed of and report on progress.

The StV Social Inclusion workstream has identified an additional need for training on use of interpreter services for staff working in mental health services. This training would need to focus on the importance of access to interpreters where needed, identifying when an interpreter is required, and how to work effectively with interpreters. The HSE Social Inclusion Office is currently planning to run previously provided training for working with Ukrainian and Russian speaking interpreters. There is also an identified need to support interpreters who work with mental health service users who have experienced trauma.

*(Recommendation #64)*

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

### **Problems**

Efforts are underway to support staff in delivery of recovery-oriented care through establishment of a process which would formally recognise recovery training undertaken. Securing Continuous Professional Development (CPD) and Continuing Education Units (CEU) Nursing Midwifery Board of Ireland (NMBI) points for Recovery Principles and Practice Workshops has been a challenge. Short courses such as this can offer staff additional credits, that are renewed every 2 years. The application process has begun but given specific requirements from the NMBI it is proving difficult. To mitigate this, consultation with a member of the Steering Group in NMBI has started and the application for continuing education points for Module 1 & 2 Recovery Principles and Practice is underway. An application has also been submitted to the College of Psychiatrists of Ireland and efforts are underway to engage with CORU.

*(Recommendation #29)*

A priority for the National Clinical Lead for Mental Health Services for Older People is implementation of the Specialist Mental Health Services for Older People National Clinical Programme for Older People: Part 2 with an initial focus on Recommendation #6 of that clinical programme i.e. *Priority should be given to establishing comprehensive specialist MHSOP where none currently exist. The data informing that programme of work pre-dates StV and reaches up to 65*

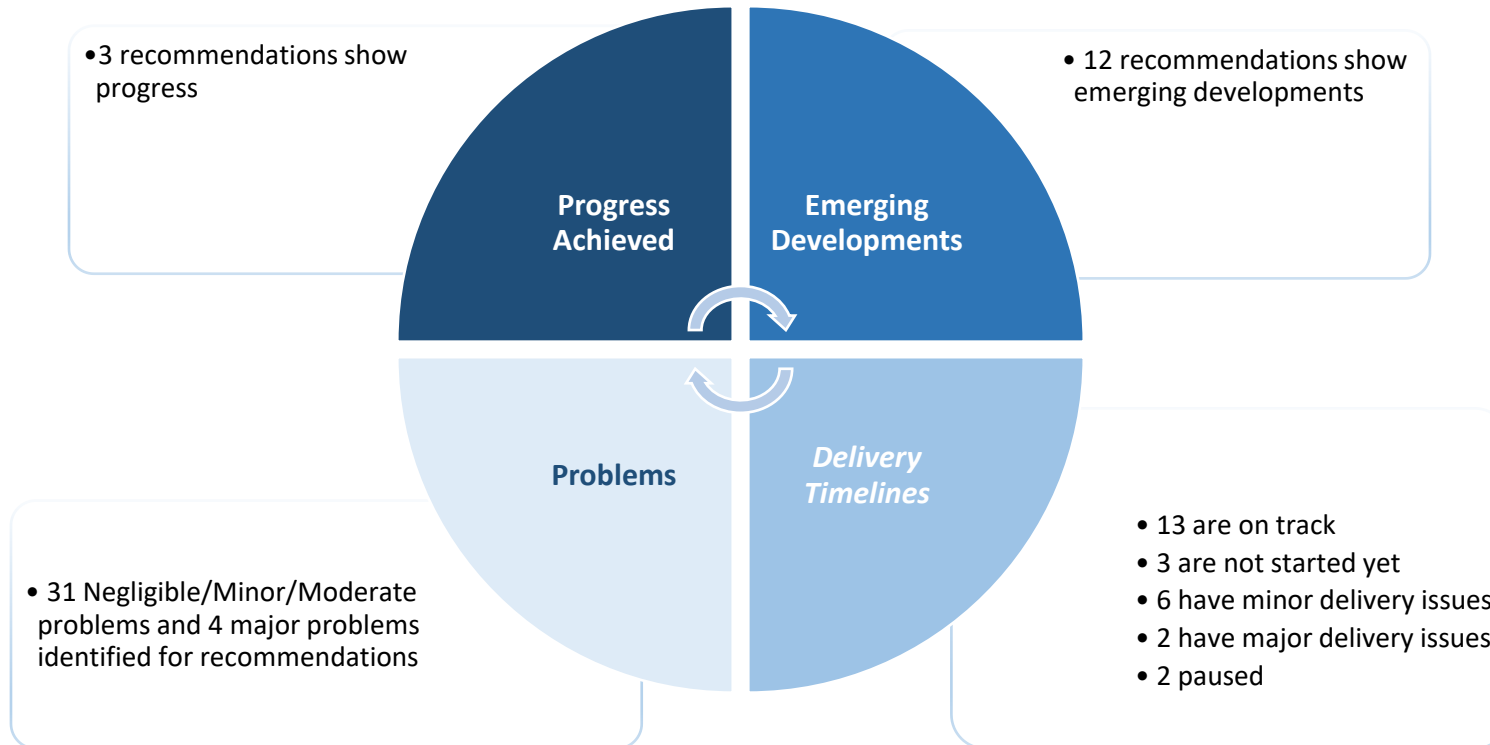
years. Revision of the age limit from 65 to 70 years is not part of the current programme of work. As a mitigating action, engagement has started between National Mental Health Operations and the National Clinical Advisor and Group Lead for Mental Health to begin to outline a plan to progress this and identify supporting resources required to do so.

*(Recommendation #43)*

Major recruitment challenges have been experienced in the central mental hospital (CMH) in Portrane. Until there is sufficient staffing in the CMH, development of the Intensive Care Rehabilitation Unit (ICRU) cannot be delivered and the service evaluated. To mitigate this, proactive recruitment campaigns continue to roll for 2023 and there have been some positive developments in recruiting to the CMH in Quarter 1 with 28 nurses recruited. Taking into consideration attrition rates, an additional 30 nurses are required to meet baseline staffing levels by the end of 2023. In light of current recruitment challenges impacting on the delivery timeline of this short-term recommendation the HIG will communicate with NIMC and a meeting is scheduled for Quarter 2.

*(Recommendation #56)*

## Domain 2 (Part II) (26 Recommendations) Summary Health Status





# Sharing the Vision

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**Appendix A**

**HSE StV New Service**

**Developments**

**Quarter 1, 2023**

## Executive Summary – National Service Plan

### New Posts Quarter 1 2023 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 155.4 posts under new developments in 2021 and 325 posts for new developments in 2022, providing for an additional 784.1 WTE across services.
- Significant progress continued in Quarter 1, 2023 in the recruitment of staff, with 423.4 posts in place, and the remaining 360.8 posts at various stages in the recruitment process.
- Total Mental Health Workforce increased in Q1 2023 by 134 WTE (whole time equivalents) to 10,588 WTE in March 2023. This equates to a total number of people (headcount) of 11,695, an increase of 239 during Q1 2023.
- Work will continue in 2023 to develop, support, retain and expand Mental Health workforce to ensure the continued provision of quality healthcare.
- The HSE Resourcing Strategy will address short, medium and long-term workforce requirements in Mental Health Services, across the professions with a particular focus on increasing clinical and support staffing numbers.
- Existing and new international recruitment frameworks will be developed to maximise available pools of qualified applicants across a range of professions to supplement domestic graduate recruitment.
- In 2023 there will also be a shared focus on retaining our existing workforce, as well as an expansion through recruitment capacity and recruitment planning utilising the devolved recruitment operating model.
- Strategic development and workforce planning will continue with further expansion of national datasets that will support services in developing and expanding workforce and enable an analytic and proactive approach to staffing needs of services.

## National Service Plan - Quarter 1, 2023

Programme for Government Funding	<sup>4</sup> Overall WTEs	<sup>6</sup> Staff recruited to date Q.1 2023	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	325	120.1	204.9
National Service Plan Commitments associated with Programme for Government Funding 2021 • 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)	155.4	105.4	50
Programme for Government Funding 2013-2019 (posts released to system 2021)	303.7	197.9	105.9
	<b>784.1</b>	<b>423.4</b> <b>(Q4: 369.3)</b>	<b>360.8</b> <b>(Q4: 410.8)</b>

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

<sup>5</sup>The HSE approved the release of 303.7 previously held PFG posts for recruitment in December 2020 of which 197.9 posts are filled as of March 2023. An additional 154.4 posts were allocated as PFG 2021 of which 105.4 posts are filled as of March 2023

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



## Summary Developments under NSP 2021 – Q1 2023 Update

NSP Initiative Area	Recs	Q.1 Update
<p><b>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</b></p>	<p>50, 51, 57</p>	<ul style="list-style-type: none"> <li>• <u>MHID services:</u> There is ongoing significant engagement with all CHOs to ensure that all possible steps are undertaken in terms of recruitment to strengthen existing community teams.</li> <li>• The National Placement oversight and review team (NPORT) continues to work with people with ID who have complex needs and are reviewing day service provision and day opportunities. There is MHID representation on the Acute Bed Capacity Specialist Group</li> <li>• There is an ongoing current project alongside the college learning disability psychiatry faculty and the disability division in relation to service and quality improvement</li> <li>• <u>Dual Diagnosis:</u> The Model of Care was approved by the HSE in April 2022 and is now endorsed by the College of Psychiatrists. Design and publication of the document ongoing with a view to launching it in mid-May 2023. Recruitment process underway in CHO 4. All support services in place. CHO 3 recruitment process commenced, CHO addressing related accommodation issues. For CHO 9, a partial team will be advertised shortly, in partnership with HSE Social Inclusion</li> <li>• Progress continues on the recruitment of staff to teams across Early Intervention in Psychosis, Eating Disorders, NCP ADHD in Adults and NCP Self Harm.</li> <li>• Model of Care for Older Persons plans progressing. Four pilot sites identified and recruitment is progressing.</li> </ul>
NSP Initiative Area	Recs	Q.1 Update

<b>Individual Placement Service- Mainstream implementation of the individual placement and support programme</b>	71	<ul style="list-style-type: none"> <li>• Individual Placement Service posts mainstreamed as of 07.2021 in line with NSP</li> <li>• Further funding was secured in PFG 2022 to further expand IPS services.</li> </ul>
<b>Digital Developments- Implement agreed eMental health digital responses</b>	2, 31	<ul style="list-style-type: none"> <li>• 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 Sharing the Vision as a national strategic action plan.</li> <li>• 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).</li> <li>• 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).</li> </ul>
<b>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.</b>	35	<ul style="list-style-type: none"> <li>• Standard Operating Procedure complete</li> <li>• Model of Care for CAMHS Hubs in development</li> <li>• Recruitment of CAMHS Hubs Teams progressing with 2 pilot sites complete, and 3 sites in process</li> <li>• Pilot Site implementation teams established</li> <li>• Pilot Site implementation plans in process</li> <li>• Monitoring and Evaluation Tender live</li> </ul>

NSP Initiative Area	Recs	Q.1 Update
<p><b>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</b></p>	24, 40	<ul style="list-style-type: none"> <li>• Standard Operating Procedure complete</li> <li>• Model of Care for Crisis Resolution Services at final development- anticipated April 2023</li> <li>• Branding identity developed and approved, and design materials in development for café initiative</li> <li>• CHO 4 Community Partner actively recruiting cafe staff</li> <li>• Standardised Cafe recruitment packs developed</li> <li>• Monitoring and Evaluation Tender live on eTenders</li> <li>• Three Crisis Resolution Teams pilot sites operational</li> <li>• Recruitment of teams progressing across remaining 2 sites</li> <li>• Pilot Site implementation teams established</li> <li>• Pilot Site implementation plans in process</li> <li>• CRS Community of Practice established</li> <li>• CRS Data working group established</li> </ul>
<p><b>Expansion of Community Mental Health Teams</b>  <b>Continue development of CAMHS and adult mental health teams in line with implementation priorities under Sharing the Vision</b></p>	25	<ul style="list-style-type: none"> <li>• Recruitment continues across CHO areas with progress made across posts</li> <li>• Mental Health Integrated Care Team working closely with CHO areas to monitor recruitment progress</li> </ul>



# Sharing the Vision

A Mental Health Policy for  
Everyone

**Appendix B**

**Quarter 1, 2023**

**Recommendation updates**

<b>Status Key</b>	On Track	Minor Delivery Issue	Major Delivery Issue	Paused	Not Started Yet	Completed
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Domain 1   Promotion, Prevention and Early Intervention				
	Recommendation	Quarter 1, 2023 Update	Owner	Current status
<b>1</b> <b>Short</b>	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.	Monthly meetings have been held and the draft plan is expected to be submitted to the Oversight Group in early May for consideration	DoH Health & Wellbeing Unit	Minor Delivery Issue
<b>2</b> <b>Medium</b>	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.	A writing sub-group of the Digital Mental Health Specialist Group was convened. An initial outline for the development of a short term workplan and longer-term strategy has been developed and shared with the Digital Mental Health Specialist Group. Collaboration across functions (Mental health Operations, Digital, Communications) is ongoing in the redevelopment of the yourmentalhealth.ie website and the development of 'Mindplan' (to be renamed) an online tool that supports users accessing appropriate tailored information and advice in relation to common mental health difficulties. <a href="#">Together All</a> was launched as an online peer support platform to support student mental health across Ireland.	HSE Mental Health Integrated Care Team	On Track
<b>3</b> <b>Short</b>	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-	Embedding Women's Mental Health in Sharing the Vision – a report by the specialist group on women's mental health was launched on 11 March 2023. The report has recommended the embedding in StV of Ireland's first ever Women's Mental Health Charter to enshrine and enhance the provision of mental health services and supports	DoH Women's Health Taskforce	On track

	sensitive and that women’s mental health is specifically and sufficiently addressed in the implementation of policy.	for women and girls in Ireland. An implementation monitoring process will now be developed to support implementation.		
<b>4</b> <b>Short</b>	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.	In Quarter 1, consultation with Heads of Service and Health Promotion and Improvement Managers took place to determine actions necessary to address capacity issues in relation to mental health promotion across Health Promotion and Improvement staff.	HSE Health & Wellbeing	On Track
<b>5</b> <b>Medium</b>	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.	Consultation took place with Heads of Service and Health Promotion and Improvement Managers to fully scope this recommendation and 2023 milestones. Agreed new set of milestones. Consultation with Healthy Ireland Leads across Local Authorities on current practice and needs in relation to community-based interventions designed to support community connectedness and engagement.	HSE Health & Wellbeing	Minor Delivery Issue Due to limited capacity within team resources to progress Mitigation: Examine existing supports and services available in the community
<b>6</b> <b>Short</b>	The proposed National Mental Health Promotion Plan and the existing work of Connecting for Life should incorporate targeted mental health promotion and prevention actions that recognise the distinct needs of priority groups.	Monthly meetings have been held and the draft plan is expected to be submitted to the Oversight Group in early May for consideration	DoH Health & Wellbeing Unit	Minor Delivery Issue Mitigation: Increased focus on importance of cross-departmental meetings
<b>7</b> <b>Medium</b>	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	This recommendation has been reviewed at length by the Mental Health Promotion and Digital Mental health workstream and it has been agreed that this is potentially a very significant programme of work. Implementation has been paused pending further discovery work, including planned engagement with colleagues in the Australian Mental Health Commission who are leading on a national stigma reduction programme there. Effectively, there are decisions to be made regarding the stigma reducing nature / outcomes arising	HSE Mental Health Operations	Paused

	associated outcomes and targets across related strands of work.	from the 'Making the Connections' campaign and the wider relevance of societal manifestations of stigma related to mental health difficulties.		
<b>8</b> <b>Medium</b>	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).	<p>Funded by the Department of Children, Disability, Equality and Integrations (DCDEI) under the <i>What Works</i> programme, <a href="https://whatworks.gov.ie/">https://whatworks.gov.ie/</a> there are a number of early intervention programmes in place. One of these, funded by Tusla's PPFS Programme, is an early intervention to ADHD programme called 'Changing Lives Initiative' <a href="https://changinglivesinitiative.com/">https://changinglivesinitiative.com/</a>. A national organisation that develops evidence-based programmes for children, young people, parents and professionals, <i>Archways</i> (<a href="http://www.archways.ie">www.archways.ie</a>) developed the programme and it was delivered by <i>The Genesis Programme</i> in Louth. Details of other ABC and PPFS programmes can be accessed <a href="#">here</a>.</p> <p>Implementation oversight for this recommendation is being provided by the StV Children &amp; Young Person Workstream. Representation from disabilities was identified in Quarter 4 however this person was not in a position to provide updates from a national implementation perspective. In Quarter 1 there was engagement National Disability Operations to identify a new national disabilities representative for the workstream.</p>	HSE Disabilities HSE Primary Care Operations via the Integrated Children's Services Forum (ICSF)	On Track
<b>9</b> <b>Medium</b>	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	An e-learning course Introducing a Trauma Informed Approach – The Stress Factor: Getting the Balance Right has been finalised and will be launched to all schools after the Easter break. Training on wellbeing promotion continues to be offered by the Professional Development Service for Teachers. Training is also continuing for schools on the FRIENDS resilience programme, the Incredible Years Classroom Management training, Student Support Teams in post primary schools and training for schools welcoming students from the Ukraine.	Department of Education	On Track

<p><b>10</b> <b>Medium</b></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 schedule of meetings has been agreed. Additional membership has been included from the HSE.</p>	<p>Department of Education Department of Health</p>	<p>Minor Delivery Issue</p>
<p><b>11</b> <b>Medium</b></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>Monthly meetings have been held and the draft plan is expected to be submitted to the Oversight Group in early May for consideration</p>	<p>Department of Health Healthy Ireland</p>	<p>Minor Delivery Issue</p> <p>Mitigation: engagement sought with Dept of Taoiseach to progress cross-departmental engagement and secure external expert guidance</p>
<p><b>12</b> <b>Short</b></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>Progress in respect of initiatives to 'support people as they age to maintain, improve or manage their [...] mental health' is continuing in 2023.</p> <p>1.The Age Friendly Homes Programme began in 2021 as a two-year pilot project's with the overall objectives to prevent early or premature admission to long-term residential care; enable older people to continue living in their homes or in a home more suited to their needs; help older people to live with a sense of independence and autonomy and support older people to be and feel part of their communities. It was announced in Budget 2023 that funding of €5.2</p>	<p>Older People Strategy Unit Department of Health</p>	<p>Minor Delivery Issue</p> <p>Mitigation: unit is engaging actively with local HR for additional resources, as well as engaging with other units to explore options for evaluation, monitoring and tracking of relevant ageing indicators.</p>



		<p>million has been allocated to roll-out the Healthy Age Friendly Homes Programme nationally in 2023.</p> <p>2. Additional funding was also secured in Budget 2023 for the continued implementation of the National Dementia Strategy in order to improve care-provision for people with dementia.</p> <p>3. Work has commenced on establishing the remit of the Commission on Care, currently the Department of Health anticipates that the Commission will examine various care and supports for older people in a modular fashion.</p>		
<b>Domain 2   Service access, Coordination and Continuity of care</b>				
	<b>Recommendation</b>	<b>Quarter 1, 2023 Update</b>	<b>Owner</b>	<b>Status</b>
<b>13 Short</b>	<p>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</p>	<p>The National Office for Suicide Prevention (NOSP) and Mental Health Operations in partnership with NGO representatives are developing a service information pack targeting GPs and practice nurses etc. The information pack will include details of HSE funded organisations that provide mental health supports and services. It will include details of the organisations including type of service (Phone/ Text support/ counselling (online/ face to face)/ support groups etc. It is being compiled on foot of a need identified by NOSP funded NGOs for the provision of information for GPs and practice nurses relating to services and supports available that they may wish to signpost or refer to. Separately, Mental Health Operations continue to work with HSE Digital to update the broader service listing on YourMentalHealth.ie.</p>	<p>HSE Mental Health Integrated Care Team Primary Care</p>	<b>On Track</b>

<p><b>14</b> <b>Medium</b></p>	<p>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</p>	<p>2023 funding has been confirmed for NOSP funded Non-Governmental Organisations (NGOs) and Service Level Agreements have been signed. The Quarter 4 2022 NGO report has been published on the Connecting for Life website. Monthly engagement meetings have been held with all NOSP funded NGOs.</p> <p>National Mental Health Operations are developing similar processes in relation to NGO engagement as those in use by the NOSP</p>	<p>HSE  Mental Health Operations  National Office for Suicide Prevention</p>	<p>On Track</p>
<p><b>15</b> <b>Short</b></p>	<p>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.</p>	<p>Nine services mainstreamed within HSE and grant aid agreement signed between host organisation and Health and Wellbeing at CHO level.</p> <p>Evaluation plan of social prescribing drafted.</p> <p>Development of social prescribing e-learning module for health professionals completed.</p> <p>Stakeholder engagement meeting between Recovery Colleges and social prescribing link workers took place in March 2023 with the aim of building connections between Recovery Education infrastructure and social prescribing.</p>	<p>HSE  Health &amp; Wellbeing</p>	<p>On Track</p>
<p><b>16</b> <b>Medium</b></p>	<p>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.</p>	<p>Incorporating subject matter expertise from primary and specialist mental health services, as well as from the community and voluntary sector, the talk therapies working group has finalised a synopsis for position paper on a layered care service delivery model. In parallel, this working group is in the process of completing a mapping of current talk therapy offerings alongside a review of recent evaluation reports into existing talk therapy services. The position paper will be informed by meaningful engagement with service users, family members and carers, as well as with service providers and talk therapy staff, and all other relevant stakeholders.</p>	<p>HSE  Primary Care</p>	<p>On Track</p>

<p><b>17</b> <b>Short</b></p>	<p>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.</p>	<p>In collaboration with a multi-disciplinary Shared Care Working Group, an outline for operational guidance has been drafted. Once complete, this document will provide a consistent approach to the implementation of the consultation/liaison model and support collaboration between primary care and specialist mental health services. The development of operational guidance will be guided by a review of the evidence base, best practice examples, and the lived experience of service users, family members, supporters and staff.</p>	<p>HSE Primary Care Mental Health Operations</p>	<p>On Track</p>
<p><b>18</b> <b>Short</b></p>	<p>An implementation plan should be developed for the remaining relevant recommendations in <i>Advancing the Shared Care Approach between Primary Care &amp; Specialist Mental Health Services</i> (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>	<p>Mandated by the Mental Health in Primary Care Workstream, a shared care working group has prepared a draft shared care implementation plan. This plan contains an analysis of progress made to date on the implementation of the '<a href="#">Advancing the shared care approach</a>' (2012) report. The analysis shows that significant progress has been made, but also that certain aspects are outdated and that a number of recommendations have been incorporated into subsequent policy documents published since 2012, including StV. Building on a review of alignment with the overarching StV implementation plan, the draft shared care implementation plan will present a proposed road map to deliver outstanding relevant recommendations. In Quarter 1, 2023, the workstream has agreed an approach for engagement with proposed action owners, as well as with people with lived experience and other key stakeholders. The stakeholder engagement will continue in Quarter 2, 2023.</p>	<p>HSE Primary Care Mental Health Operations</p>	<p>On Track</p>
<p><b>19</b> <b>Short</b></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>Recognising recommendation 19 has a short-term timeframe, the initial priority is the development of a national shared physical health care and prescribing framework, which will support a consistent approach for the development of local protocols between service providers. Working with a multi-disciplinary shared care working group, a synopsis for this framework has now been agreed. Work is underway to prepare for research to be commissioned, which will provide an overview of the evidence base and best practice examples, in Ireland and internationally. As part of the national</p>	<p>HSE Community Operations Primary Care Mental Health Operations</p>	<p>On Track</p>

		framework, and aligned with recommendation 18, a proposal for a structured physical health programme in primary care for people with severe and enduring mental illness is also being developed.		
<b>20 (a)</b> <b>Medium</b>	There should be further development of early intervention and assessment services in the primary care sector for children with <b>ADHD</b> and autism to include comprehensive multi-disciplinary and paediatric assessment and mental health consultation with the relevant community mental health team where necessary. <b>(ADHD Only)</b>	Interviews for the National Clinical Lead for Attention Deficit Hyperactivity Disorder (ADHD) in Children and Adolescents took place in February 2023. The National Clinical Lead has been identified as Professor Mulligan. Professor Mulligan has accepted the role and will be commencing this quarter. Professor Mulligan will commence work to develop an ADHD Model of Care for CAMHS.	HSE Primary Care Mental Health Operations Disabilities National Clinical Programmes	On Track
<b>20 (b)</b> <b>Medium</b>	There should be further development of early intervention and assessment services in the primary care sector for children with ADHD and <b>autism</b> to include comprehensive multi-disciplinary and paediatric assessment and mental health consultation with the relevant CMHT where necessary. <b>(Autism Only)</b>	Phase 1 of the piloting of an autism assessment and intervention protocol is complete. A final report on its evaluation containing recommendations for the next phase was received from the independent evaluation team. A full review of the protocol has been undertaken and amended where suggested, in line with the evaluation report. This programme requires integration across all services, including mental health, and work is underway to develop a pathway to address recommendations arising from phase 1 and ensure pilot site buy in for phase 2.	HSE Primary Care Mental Health Operations Disabilities	Major Delivery Issue Mitigation: Continued engagement with CHO 4, 7 and 9 addressing issues and concerns delaying progress to Phase 2
<b>21</b> <b>Medium</b>	Dedicated community-based Addiction Service Teams should be developed/enhanced with psychiatry input, as required, and improved access to mental health supports in the community should be provided to individuals with co-existing low-level mental health and addiction problems.	This complex recommendation will require an integrated response, involving primary care, addiction services, mental health and community and voluntary partners. The appropriate approach for its delivery will be considered with the StV social inclusion workstream. This workstream has now been stood up and work is now underway to draft blueprint documents and work plans for each recommendation under its remit	HSE	Paused

<p><b>22</b> <b>Short</b></p>	<p>The provision of appropriate environments for those presenting at emergency departments who additionally require an emergency mental health assessment should be prioritised.</p>	<p>The results from the audit of assessment rooms in emergency departments have been collated and a comparison with the previous audit in 2018 is being undertaken through SPSS.</p>	<p>HSE Acute Hospitals Department of Health  Clinical Programmes (Self Harm)</p>	<p>Minor Delivery Issue</p>
<p><b>23</b> <b>Medium</b></p>	<p>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.</p>	<p>An in-person education day for the National Clinical Programme for Self-Harm was arranged in March. It was well attended with over 75 delegates from both the Emergency Department (ED) and Suicide Crisis Assessment Nurse (SCAN) Service.</p> <p>Three of the six funded 2022 SCAN 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> <p>One service has developed the SCAN service from local CHO funding.</p> <p>A national SCAN steering group has been commissioned and is due to meet end of March. Draft TOR and national operational guidance documents have been developed.</p>	<p>HSE  Clinical Programmes (Self Harm)</p>	<p>On Track</p>
<p><b>24</b> <b>Short</b></p>	<p>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.</p>	<p>Standard Operating Procedure complete</p> <ul style="list-style-type: none"> <li>• Model of Care for Crisis Resolution Services at final development- anticipated to be completed by end of April 2023</li> <li>• Branding identity cafe developed and approved as "Solace Cafe" and design/branding materials in development</li> <li>• CHO 4 have agreed Community Partner and cafe site location and are actively recruiting cafe staff <ul style="list-style-type: none"> <li>• Standardised Cafe recruitment packs developed</li> </ul> </li> </ul>	<p>HSE  Mental Health Integrated Care Team</p>	<p>On Track</p>

		<ul style="list-style-type: none"> <li>Monitoring and Evaluation Tender live on eTenders and contract to be agreed in Q2 2023</li> </ul>		
<b>25</b> <b>Medium</b>	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.	<p>This recommendation will be progressed through a dedicated mental health services workstream. Effective delivery will require significant operational input nationally and locally. As a result, and to mitigate arising risks, a Head of Service for Mental Health has now been identified to jointly lead this workstream alongside national mental health operations.</p> <p>The approach to implementation of a shared governance model will be closely aligned with the roll out of team coordination in community mental health teams (StV recommendation 33)</p>	HSE MH Integrated Care Team	<b>Not Started Yet</b>
<b>26</b> <b>Medium</b>	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.	Mandated by the StV Mental Health Engagement and Recovery Workstream, a working group has been stood up to progress this recommendation. A work plan has been developed with the key objectives of developing regional engagement forum networks and production of guidance for CMHTs in partnering, information sharing and signposting with VCS. HSE MHER met with the Enhancing Engagement project and agreed to pilot a regional engagement forum in Quarter 3, 2023.	HSE Mental Health Engagement & Recovery	<b>On Track</b>
<b>27</b> <b>Medium</b>	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.	Recommendations arising from a literature review of best practices in recovery focused care planning and from consultation with Recovery Coordinators nationally were presented to the working group responsible for progressing recommendation 27. The consensus was that the evidence does not support introduction of independent personal recovery plans at this time. On consideration of the evidence, it was agreed that the working group which currently has representation from occupational therapy, nursing, recovery education and people with lived experience, should expand membership to increase representation from across all CHOs as some are not represented currently. The reconstituted group will be tasked with reviewing current training resources and documentation	HSE Mental Health Engagement and Recovery	<b>On Track</b>

		in use as the next step in planning implementation. Additionally, expressions of interest have been invited through an invitation issued to the CHO Heads of Service for Mental Health to contribute to a 1-day event, to be held in May, showcasing quality initiatives in recovery planning.		
<b>28</b> <b>Short</b>	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.	This recommendation will be progressed as part of an integrated work programme, reflecting the different stages in the service user journey, also incorporating four other related StV recommendations. A working group has been convened and an approach agreed for the delivery of this work programme, taking into account that recommendation 28 has a short-term timeframe for delivery. Planning is now underway to arrange a consultation workshop with staff and service users with a focus on a service user journey guidance document developed in 2020 and to assess to what extent it meets policy requirements.	HSE Mental Health Operations	Minor Delivery Issue
<b>29</b> <b>Short</b>	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.	There are two training modules in place to embed a recovery ethos among mental health professionals working in the CMHTs. Module 1 focuses on Recovery Principles and Practice with CMHTs and Module Two focuses on Advanced Recovery Practice. Extensive work has taken place to review and revise Module 1 and final draft will be completed in Quarter 2, 2023	HSE Mental Health Engagement and Recovery	On Track
<b>30</b> <b>Medium</b>	CMHTs and sessional contacts should be located, where possible and appropriate, in a variety of suitable settings in the community, including non-health settings	A project lead from within the HSE MHER office has been assigned to deliver Recommendation 30. A working group has been stood up and terms of reference drafted. The working group will convene in April. Recommendation 30 and 97 have been merged under the one programme of work	HSE Mental Health Engagement and Recovery  Mental Health Operations	On Track

<p><b>31</b> <b>Medium</b></p>	<p>The potential for digital health solutions to enhance service delivery and empower service users should be developed.</p>	<p>A writing sub-group of the Digital Mental Health Specialist Group was convened. An initial outline for the development of a short term workplan and longer term strategy has been developed and shared with the Digital Mental health Specialist Group. Extensive work has been done on a new contract and Service Level Agreement with SilverCloud to enable the continued and extended delivery of digital guided CBT over the next 3 years. Existing digital service delivery has been maintained.</p>	<p>HSE MH Integrated Care Team</p>	<p>On Track</p>
<p><b>32</b> <b>Medium</b></p>	<p>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.</p>	<p>The demonstration of a Model of Care for adults accessing talk therapies while attending specialist mental health services is progressing well. In Quarter 1, 2023, a national learning network was established to provide opportunities for practical learning across CHO pilot sites. This will involve regular in-person learning events as well as an online repository wherein practical resources can be stored and shared. In parallel, work continues to stand up a dedicated mental health services workstream to progress remaining actions under this workstream. In order to ensure required operational input locally, a Head of Service for Mental Health has now been identified to jointly lead this workstream alongside national mental health operations. To mitigate the delay in progressing this and other recommendations assigned to this workstream, priority will now be given to develop a prioritised and realistic programme of work.</p>	<p>HSE MH Integrated Care Team</p>	<p>Minor Delivery Issue Mitigation: A Head of Service for Mental Health has now been nominated as joint lead for the Mental Health Services Workstream. As a next step, a meeting will be arranged to identify remaining core membership and source of project management support</p>
<p><b>33</b> <b>Medium</b></p>	<p>The shared governance arrangements for CMHTs as outlined in AVFC 2006–16 should be progressed, including further rollout of Team Coordinators.</p>	<p>This recommendation will be progressed by a dedicated mental health services workstream, with an initial focus on CAMHS. A benchmark of current implementation of the team coordinator function in CAMHS is being established as part of the national audit of adherence to CAMHS Operational Guidelines (2019) COG audit. Once the COG audit report is finalised in Quarter2, 2023, a detailed delivery plan will be developed. This plan will also take into account outputs and learnings from previous service improvement projects</p>	<p>HSE Mental Health Operations</p>	<p>Paused Await COG audit report</p>



		to introduce a standardised approach to team coordination in mental health.		
<b>34</b> <b>Medium</b>	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	Recommendation 34 will be progressed as part of an integrated work programme, reflecting the different stages in the service user journey, from the point of referral to discharge from mental health services. This programme will also incorporate four other related StV recommendations. In Quarter 1, 2023, a working group was stood up and an approach agreed for the delivery of this work programme. As a next step, arrangements are being made for consultation with staff and service users to reflect on a 2020 service user journey guidance document to assess if it meets policy requirements and incorporate any required revisions.	HSE Mental Health Operations	Minor Delivery Issue
<b>35</b> <b>Short</b>	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><i>Part A – Specialist mental health out-of-hours model using a tiered approach</i></p> <p>A work plan has been scoped within the StV Children and Young People workstream outlining inputs required to progress the work</p> <p><i>Part B – Development of CAMHS Hubs</i></p> <ul style="list-style-type: none"> <li>• Standard Operating Procedure complete</li> <li>• Model of Care for CAMHS Hubs at final development- anticipated to be completed by the end of April 2023</li> <li>• Recruitment of CAMHS Hubs Teams progressing with 2 pilot sites complete, and 3 sites in process</li> <li>• Pilot Site implementation teams established across all five pilot learning sites</li> <li>• Pilot Site implementation plans in process</li> <li>• Monitoring and Evaluation Tender live and contract to be agreed in Q2 2023.</li> </ul>	HSE Mental Health Integrated Care Team	<p>Minor Delivery Issue</p> <p>Part A</p> <p>Mitigation: CAMHS Hubs not providing out of hours service – this has been escalated and there are acknowledged actions within Maskey Report</p> <p>On Track</p> <p>Part B</p>

<p><b>36</b> <b>Short</b></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: 'Enhanced Transition' recommendations and implementation plan were presented to and ratified by NIMC on 24th February. The 'Enhanced Transition Plan' was presented by Mr. Mark Smyth, Chair of the Youth Mental Health Transitions Specialist Group at the National StV Learning Event on 23/03/23</p> <p>Workstream 2: University of Galway completed a review of best practice in mental health service provision up to age 25 and presented it to the specialist group on 8th March 2023. The group met 3 times in Quarter 1, 2023 and have progressed short- and medium-term recommendations and commenced long-term recommendations to facilitate provision of age-appropriate mental health supports up to 25 years. Planning underway for youth and staff consultation on long term recommendations in Quarter 2 and Quarter 3m 2023.</p>	<p>HSE Mental Health Operations Department of Health</p>	<p>On Track</p>
<p><b>37</b> <b>Short</b></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>Implementation oversight for this recommendation is being provided by the <i>StV Children &amp; Young Person Workstream</i>. Representation from Disabilities was identified in Quarter 4, however this person was not in a position to provide updates from a national implementation perspective. In Quarter 1 there was engagement National Disability Operations to identify a new national disabilities representative for the workstream.</p> <p>Under a national programme, <i>Progressing Disabilities Services for Children and Young People</i>, where a child has complex needs, they can be referred to an Integrated Children's Services Forum (ICSF) locally. This is a meeting of relevant services and healthcare disciplines, and, where necessary, hospital service, Tusla, Education and others. The ICSF agrees the most appropriate service to meet the child's needs. This may include a shared care plan across a number of services agreed in the ICSF depending on the child's needs.</p>	<p>HSE Mental Health Operations Disabilities</p>	<p>On Track</p>

		Relevant information can be accessed here: <a href="http://www.hse.ie/eng/services/list/4/disability/progressing-disability/pds-programme/documents/">www.hse.ie/eng/services/list/4/disability/progressing-disability/pds-programme/documents/</a>		
<b>38</b> <b>Short</b>	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.	Awaiting date of audit to commence from HSE Healthcare Audit Unit.	HSE Mental Health Operations	On Track
<b>39</b> <b>Short</b>	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.	Following engagement with the StV Implementation Team and National Mental Health Operations, an approach has been agreed for the delivery of this recommendation. There will be a consultation process, based on outputs from the previous service improvement project to develop a standardised service user journey framework. A consultation workshop will be arranged with staff and service users to review the draft framework document and agree amendments. Once complete, the final service user journey framework will be published and shared with CMHTs. This work will commence in Quarter 2, 2023.	HSE Mental Health Engagement and Recovery	On Track
<b>40</b> <b>Medium</b>	Sufficient resourcing of home-based crisis resolution teams should be provided to offer an alternative response to inpatient admission, when appropriate.	Standard Operating Procedure complete <ul style="list-style-type: none"> <li>• Model of Care for Crisis Resolution Service (CRS) at final development- anticipated to be completed by end of April 2023</li> <li>• Three out of five pilot learning sites operational</li> <li>• Recruitment of teams progressing across remaining two pilot learning sites</li> <li>• Pilot Site implementation teams established across all five pilot learning sites</li> </ul>	HSE Mental Health Integrated Care Team	On Track

		<ul style="list-style-type: none"> <li>• Pilot Site implementation plans in process across all five pilot learning sites</li> <li>• CRS national pilot learning site Network/Community of Practice established and two meetings held</li> <li>• CRS Data working group established and two meetings held</li> <li>• Monitoring and Evaluation Tender live and contract to be agreed in Q2 2023</li> </ul>		
<b>41</b> <b>Medium</b>	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.	Recommendation 41 will be progressed through a mental health services workstream. In Quarter 1, 2023, a CHO Head of Service for Mental Health was identified to jointly lead this workstream alongside national mental health operations. Work is underway to convene a meeting and agree blueprint documents for recommendations within its remit.	HSE  Mental Health Integrated Care Team	<b>Not Started Yet</b>
<b>42</b> <b>Short</b>	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.	Recruitment across each of the four pilot sites continues. A first quarterly meeting was held by the National Clinical Lead. All sites attended. Work is also underway to establish a Model of Care Implementation Oversight Group for the National Clinical Programme for Older People, Part 2. This group is being convened to oversee a programme of work to implement the Model of Care, focusing initially on Recommendation 6 <i>Priority should be given to establishing comprehensive specialist MHSOP where none currently exist.</i>	Clinical Care Programme for Mental Health Services for Older People / HSE Mental Health Integrated Care Team	<b>On Track</b>
<b>43</b> <b>Short</b>	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 National Clinical Lead for Mental Health Services for Older People was appointed in Quarter 4, 2022. A priority area the Clinical Lead focused on in Quarter 1 was planning for implementation of the Specialist Mental Health Services for Older People National Clinical Programme for Older People: Part 2 <a href="https://www.hse.ie/eng/about/who/cspd/ncps/older-people/moc/specialist-mental-health-services-for-older-people-model-of-care.pdf">https://www.hse.ie/eng/about/who/cspd/ncps/older-people/moc/specialist-mental-health-services-for-older-people-model-of-care.pdf</a> . An initial focus has been on Recommendation #6	Clinical Care Programme for Mental Health Services for Older People / HSE Mental Health Integrated Care Team	<b>Major Delivery Issue</b> Revision of the age limit from 65 to 70 years is not part of the current programme of work and will need further planning and resourcing.

		<i>Priority should be given to establishing comprehensive specialist MHSOP where none currently exist. The first stage of reconfiguration is underway in one of four pilot sites through provision of an innovative specialist mental health service for older people in nursing homes and acute hospitals.</i>		Mitigation: Clinical Programmes and Mental Health Services Workstreams to engage and agree approach for delivery
<b>44</b> <b>Short</b>	GPs, mental health service prescribers and relevant stakeholders should collaborate to actively manage polypharmacy.	A small working group has been convened to scope an appropriate approach for the delivery of this critical, but complex recommendation. In Quarter 1, 2023, engagement has taken place with the Clinical Lead for the HSEs National Medication Safety Programme, including to explore how the ongoing analysis of outcomes from the <a href="#">iSIMPATY project</a> may provide insights into outcomes for participants with reported mental health comorbidities.	HSE	Minor Delivery Issue
<b>45</b> <b>Medium</b>	HSE should collate data on the number and profile of delayed discharges in acute mental health inpatient units and develop appropriately funded responses.	Informed by the Acute Bed Capacity Report, this recommendation will be progressed through a Mental Health Services Workstream, jointly led by National MH Operations and a CHO Head of Service. Workstream leads have been confirmed and work is underway to finalise workstream membership and develop a detailed delivery plan.	HSE Mental Health Operations	Paused
<b>46</b> <b>Short</b>	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.	In Quarter 1, 2023, the interim report on Acute Bed Capacity was presented to NIMC and feedback was subsequently incorporated into the report. Building on the work of the Expert Group, a dedicated working group is now being stood up to progress a multi-annual capital plan for mental health. This group will also consider capital requirements related to recommendations 45 and 47 in light of findings in the Acute Bed Capacity report.	HSE Mental Health Operations	On Track
<b>47</b> <b>Long</b>	Sufficient PICUs should be developed with appropriate referral and discharge protocols to	Building on the work of the Acute Bed Capacity Expert Group, a working group is being established, tasked with the development of a long-term capital plan, specifically focusing on mental health. This group will also consider capital requirements related to	HSE	Minor Delivery Issue

	serve the regions of the country with limited access to this type of service.	recommendations 45 and 46 within the context of the Expert Group's findings	Mental Health Operations	
<b>48</b> <b>Short</b>	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.	A meeting has taken place with the Chief Officer of CHO 9, representing the Chief Officers' group, in order to plan a workshop across disability and mental health divisions with a view to developing a set of roles and responsibilities for a substantive national placement oversight review team for complex and out of area placements.	HSE Mental Health and Intellectual Disability Clinical Care Programme	<b>On Track</b>
<b>49</b> <b>Long</b>	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.	This is a long-term recommendation, and it will be progressed through a dedicated Mental Health Services Workstream, jointly led by National Mental Health Operations and a CHO Head of Service. Workstream leads have been confirmed and work is underway to finalise workstream membership and develop a detailed delivery plan.	HSE Mental Health Operations Mental Health Engagement and Recovery	<b>Not Yet Started</b> Long Term Recommendation
<b>50</b> <b>Medium</b>	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.	As a national MHID service improvement, the Implementation Lead has continued to engage with all CHOs in relation to recruitment. There has been some progress in relation to some of the vacancies in the system but some recruitment issues remain, especially with consultant psychiatrists.	HSE	<b>Minor Delivery Issue</b> Due to difficulties recruiting Consultant Psychiatrists and in securing funding A priorities list to inform a national plan will be developed with CHOs
<b>51</b> <b>Medium</b>	SLT should be core members of the Adult-ID and CAMHS-ID teams.	Continued to work with CHOs to recruit SLTs. There are currently 2 in place in CHO 2 and CHO 7 and recruitment underway for one post in CHO 9	HSE Mental Health Operations Disability	<b>Major Delivery Issue</b> Due to resourcing difficulties

				Mitigation: SLT posts will be on list of priority posts in 2023
<b>52</b> <b>Long</b>	Investment in the implementation of the Model of Care for Early Intervention Psychosis (EIP), informed by an evaluation of the EIP demonstration sites, should be continued.	The National Centre for Clinical Audit (NCCA) and Mental Health Operations have agreed to fund the programme audit for 2023. On 24th February the 5 EIP teams attended an in-person training and learning event, members of Shine team were also present. The National Clinical Programme (NCP) EIP hosts a webinar each quarter to highlight evidence-based research and practice from international and national experts. The webinars have been extremely well attended. In March 2023 the topic was on Autism and psychosis and over 270 clinicians attended. A Point of Contact Tracing project, funded from once off funding, commenced in November 2023 across the 5 EIP teams. Evaluation of the project is been led by UCD.	HSE  Early Intervention in Psychosis Clinical Care Programme	<b>On Track</b>
<b>53 (a)</b> <b>Medium</b>	The National Mental Health Clinical Programmes for <b>Eating Disorders</b> , Adults with ADHD and the Model of Care for Specialist Perinatal Mental Health Services should continue to have phased implementation and evaluation.	<ol style="list-style-type: none"> <li>1. Regular meetings continue with CHO area management teams to progress recruitment for outstanding posts. Confirmation of funding for new posts awaited.</li> <li>2. International recruitment discussed with National Clinical Advisor and Group Lead (NCAGL) - agreed to readvertise relevant consultant posts once new consultant contract in place - 2 consultant posts in train to be re-advertised.</li> <li>3. Dataset for 2023 finalised and aligned with national mental health KPIs waiting times and circulated to all teams.</li> <li>4. National Eating Disorder webinar delivered to 500+ clinicians on 01/03/2023, ongoing supervision and training subgroup confirmed.</li> <li>5. Regular meeting on tender submission and progressing well</li> <li>6. Self-care App updates completed for Eating Disorder Awareness Week 2023</li> </ol>	HSE Clinical Care Programme (for Eating Disorders)	<b>Major Delivery Issue</b>  Due to recruitment and funding difficulties  Mitigation: Proactive recruitment campaigns ongoing with re-advertisement of posts and consideration given to international recruitment

		<p>7. Long-Eating Disorders (L-ED) working group convened first meeting (L-ED is a term for Long standing Eating Disorders also referenced in the literature as SEED (Severe and enduring eating disorders)).</p> <p>8. Subgroups established within Implementation Advisory Group (IAG) and due to start convening</p> <p>9. Identify partner for evaluation and update of MOC continues.</p>		
<p><b>53 (b)</b> <b>Medium</b></p>	<p>The National Mental Health Clinical Programmes for Eating Disorders, <b>Adults with ADHD</b> and the Model of Care for Specialist Perinatal Mental Health Services should continue to have phased implementation and evaluation.</p>	<p>The campaign for the supplementary Clinical Nurse Specialist will be advertised in early 2023.</p> <p>Interviews recently took place for the Senior Occupational Therapy posts, successful candidates have been offered the posts.</p> <p>The hard to fill CHO 8 Midlands/CHO 7 Kildare West Wicklow Consultant post is now going to be recruited internationally via the HSE Procurement Assisted Sourcing System process in Quarter2, 2023.</p> <p>Adult ADHD Service site visits have commenced; visits to Limerick and Cork have taken place.</p> <p>Funding to continue the rollout of Understanding and Managing Adult ADHD Programme for 2023 has been allocated. Two Workshops have taken place to date.</p> <p>The Adult ADHD App has been downloaded approximately 8,000 times. This will continue to be monitored.</p> <p>The Adult ADHD NCP National Oversight and Implementation Group continues to meet bi-monthly.</p>	<p>HSE Clinical Programme (for ADHD)</p>	<p>Minor Delivery Issue</p>



<p><b>53 (c)</b> <b>Medium</b></p>	<p>The National Mental Health Clinical Programmes for Eating Disorders, Adults with ADHD and the Model of Care for <b>Specialist Perinatal Mental Health</b> Services should continue to have phased implementation and evaluation.</p>	<p>New Clinical Lead for Perinatal Mental Health commenced in December 2022. The Clinical lead has visited all the hub sites and met with the teams. Several meetings with mental health senior management team in CHO 6 have taken place recently in order to progress the development plans for the mother and baby unit and a business case has been developed. Meetings are underway with Specialist Perinatal Mental Health Advisory Group before launch of pilot to use the new data collection form developed in conjunction with the National Perinatal Epidemiological Centre with two perinatal mental health Hub sites and 3 Spoke sites. Work is underway to develop HSE Land Module to develop a one-hour online tool for frontline staff working with women and families in the perinatal period. Work is also underway to establish a group to develop online tools for staff and the public through specific video development.</p>	<p>HSE Clinical Programme (for Perinatal Mental Health)</p>	<p>On Track</p>
<p><b>54</b> <b>Medium</b></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>Three meetings (monthly) have been held by the StV Justice Workstream group and consideration has been given to this recommendation. Following a review of the Irish Prison Service (IPS) information system, it has been agreed that this is not suitable to provide an analysis of the mental health needs of the prison population. While data is available on prisoners who meet the criteria for the threshold for forensic mental health treatment, this is a small population in contrast to the IPS prisoner population. It has therefore been agreed to undertake a joint IPS/HSE analysis of the mental health needs of the prison population. A tendering document is being prepared by the IPS and HSE to seek a Third Level /University to undertake the research. It has also been determined that the <a href="#">National Framework for Recovery in Mental Health</a> is suitable as the tiered model of care and the IPS are reviewing this framework to consider who this can be tailored for the IPS setting</p>	<p>HSE Mental Health Operations National Forensic Mental Health Service (NFMHS)</p>	<p>On Track</p>

<p><b>55</b> <b>Medium</b></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>Ongoing discussion has taken place within the StV Justice Workstream on the Prison In reach and Court Liaison Service (PICLS) in Cloverhill. Consideration has been given to the rolling out of the service nationally. However, scalability of this service to other areas across the country require further consideration. It is evident that information on PICLS in Cloverhill is well maintained, however data for other locations nationally is unclear. Options available to divert prisoners is also unclear throughout the country and the establishment of the Intensive Care Rehabilitation Units (ICRUs) or a variation of such facilities has been cited. A national meeting of the in reach services throughout the country has been agreed and this should take place before the end of May 2023. The purpose is to understand the services in other areas and to determine the needs and how these can be measured and developed into a national plan.</p>	<p>HSE Mental Health Operations</p>	<p><b>On Track</b></p>
<p><b>56</b> <b>Medium</b></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>Significant debate and planning have been underway to progress the recommendation. It is not possible to commence a comprehensive evaluation of the Intensive Care Rehabilitation Unit (ICRU) in Portrane as this facility will not come on stream until 2024 and this is subject to staff availability. On this basis it is not possible to develop further a national plan for ICRU's. Consideration was given and proposal submitted to the HSE National Office, Mental Health Services for the completion of a desktop literature review considering the experience of similar facilities in other jurisdictions. However, following further consideration, the findings of such a review process would not provide the recommendations that could be used as the comparison of other settings differs from the setting here in Ireland. A meeting between the HSE, representatives from DOH and the workstream lead is scheduled for April 2023 to determine if the recommendation can be amended to meet current</p>	<p>HSE Mental Health Operations National Forensic Mental Health Service</p>	<p><b>Major Delivery Issue</b></p> <p>Due to recruitment difficulties and ICRU not yet established on Portrane campus</p> <p><b>Mitigation:</b></p> <p>Ongoing, proactive recruitment campaigns</p> <p>Meeting scheduled 19th April 2023 with representatives of the DOH to address delivery issue for recommendation</p>

		and future needs as the recommendation has become moot due to the time delays experienced in opening the Portrane ICRU.		action to carry out evaluation of ICRU on Portrane campus
<b>57</b> <b>Medium</b>	<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*</p> <p>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^</p> <p>^covered under other recommendation.</p>	<p>The Model of Care was endorsed by the College of Psychiatrists of Ireland in March 2023. The launch of the Model of Care is planned on 23rd May 2023.</p> <p>As there were no applications for the Consultant post for the Dual Diagnosis team in CHO 4, an executive search internationally is planned through the Public Appointments Services. Other members of the Dual Diagnosis team in CHO 4 team are being recruited.</p> <p>The three posts approved for the Adolescent Dual Diagnosis team in CHO 9 are also being recruited.</p> <p>Significant progress has been made in the recruitment of team members for CHO 3 Adult Dual Diagnosis team and the commencement of the team will depend on the refurbishment of the building being completed.</p> <p>The proposal for collection of Dual Diagnosis data through the National Drug Treatment Reporting System governed by the Health Research Board is being proposed at present for approval by HSE Social Inclusion, HSE Health and Wellbeing and HSE Dual Diagnosis National Clinical Programme. Evaluation and training will commence one the services are ready to become operational.</p>	<p>HSE</p> <p>Clinical Care Programmes Dual Diagnosis</p> <p>*a) only</p>	Minor Delivery Issue
<b>58</b> <b>Medium</b>	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.	In line with a stepped and integrated model of support for people experiencing homelessness, development of outreach services continues. This and other related recommendations will be progressed through the Mental Health Services Workstream, jointly led by National Mental Health Operations and a CHO Head of Service.	<p>HSE</p> <p>Mental Health Operations</p> <p>Primary Care Operations</p>	Minor Delivery Issue

			Social Inclusion	
<b>59</b> <b>Medium</b>	Assertive outreach teams should be expanded so that specialist mental healthcare is accessible to people experiencing homelessness.	Continued recruitment into outreach teams in CHOs 7 and 9, in line with a stepped and integrated model of support for people experiencing homelessness.	HSE Mental Health Operations Primary Care Operations Social Inclusion	Minor Delivery Issue
<b>60</b> <b>Medium</b>	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.	Refinement of the draft Model of Care is ongoing. Work is ongoing to take account of input from children and young people's liaison services. There have been meetings with Clinical Leads across the Clinical Programmes to ensure there is interface between the Model of Care and the Clinical Programmes.	HSE	Minor Delivery Issue
<b>61</b> <b>Medium</b>	The HSE should maximise the delivery of diverse and culturally competent mental health supports throughout all services.	A StV Social Inclusion Workstream has been stood up and its initial planning work has identified/actioned: <ul style="list-style-type: none"> <li>• The need to establish a separate sub-group to define the scope and assist with the delivery of this recommendation.</li> <li>• Policy cross-over with other national policies including <a href="#">Connecting for Life</a>, <a href="#">HSE Intercultural Strategy 2018-2023</a>, <a href="#">Stronger Together-HSE Health Promotion Plan 2022-2027</a>, <a href="#">National Traveller Health Action Plan 2022-2027</a> and <a href="#">LGBTI+ Inclusion Strategy 2019-2021</a>. Any planned initiatives will need to align with work already underway and/or explore options to collaborate with other policy implementation initiatives.</li> <li>• Initial work has begun on enhancing existing translated video resources and establishing regional psychosocial support services for refugees.</li> </ul>	HSE Social Inclusion Mental Health Operations	On Track

		<ul style="list-style-type: none"> <li>The need for HSE MHER to join the workstream to ensure appropriate measures are taken on service user engagement.</li> </ul>		
<b>62</b> <b>Short</b>	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.	The StV Social Inclusion workstream has engaged with Mental Health Services in Dublin City North where the current specialist service is located to scope the current level of service delivery. This will form the basis of subsequent work to design an evaluation approach	HSE Mental Health Operations	On Track
<b>63</b> <b>Medium</b>	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.	<p>Initial work has begun on enhancing existing translated video resources and establishing regional psychosocial support services for refugees (part of a wider migrant health Initiative).</p> <p>A Psychosocial Support Guidance document is being prepared which will provide information to community migrant health teams as to how mental health supports will be directed to this target population. It will also serve to ensure a consistent approach by psychosocial responders to ensure that refugees have access to the same supports regardless of where they are location at a CHO level.</p> <p>Initial work has begun on enhancing existing translated video resources</p> <p>Consultation with existing frontline services working with refugees and international applicants.</p>	HSE Social Inclusion Mental Health Operations	On Track
<b>64</b> <b>Medium</b>	Appropriately qualified interpreters should be made available within the mental health service and operate at no cost to the service user.	<p>A HSE wide level of service provision is currently being planned for that will ensure that high quality interpreter services will be consistently available to all HSE service users as required, including mental health service users. This includes a review of the Office of Government Procurement (OGP) Interpretation Framework and engagement with the provider of interpretation services through the OGP Interpretation Framework</p> <p>Additional issues that need to be considered have been identified. These include education of staff on the need and importance of</p>	HSE Mental Health Operations Social Inclusion	On Track

		interpreters, training for staff on working with interpreters and the self-care requirements for interpreters working with individuals who have experienced trauma. The HSE Social Inclusion Office is currently planning to run previously provided training for working with Ukrainian and Russian speaking interpreters.		
<b>65</b> <b>Medium</b>	The HSE should ensure that access to appropriate advocacy supports can be provided in all mental health services.	A research plan with the independent researcher for a gap analysis of advocacy supports. Ethics approval has been applied for and approval expected early in Quarter 2, 2023. A new project lead for the recommendation has been appointed, which will increase capacity to ensure its timely delivery	HSE  Mental Health Engagement and Recovery	On Track
<b>Domain 3   Social Inclusion</b>				
	<b>Recommendation</b>	<b>Quarter 1, 2023 Update</b>	<b>Owner</b>	<b>Status</b>
<b>66</b> <b>Medium</b>	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.	The Mental Health Unit have been assigned an additional human resource to support the implementation of this recommendation, in the context of a broader mental health data enhancement project within the Unit. Recruitment for this post progressed to an advanced stage during this quarter.	Department of Health	On Track
<b>67</b> <b>Long</b>	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 Implementation Plan has not yet been published by the Department of Housing. The plan is with the Minister for Housing and once sign-off is received it will be forwarded to the Department of Health and Department of Children for sign-off by the respective Ministers.	Housing Agency/ Local Authorities	Minor Delivery Issue
<b>68</b> <b>Short</b>	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	A number of meetings were held to advance both the draft Terms of Reference and draft protocol both of which have been circulated.  Draft delivery plan also prepared with further discussion required.	Department of Housing, Local Government and Heritage	On Track

	transition of individuals from HSE-supported accommodation to community living.			
<b>69</b> <b>Medium</b>	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.	The number of Housing Coordinators in post continues to drop due to lack of funding in 2023 to replace and develop these posts across all 9 CHO's. There are currently 3.5 whole time equivalents (WTEs) in post with 0.5 WTE in CHO 5 due to retire, which will bring the total number to 3 WTE's. These roles play a significant part both in terms of StV implementation as it relates to housing, as well as the new <a href="#">Housing Strategy for Disabled People</a> . The issue has been escalated to the relevant StV implementation groups.	HSE Mental Health Operations MH Housing Group	<b>Major Delivery Issue</b> <b>Due to resourcing difficulties</b>  Mitigation: Continue discussions to source alternative funding of Housing Coordinators
<b>70</b> <b>Short</b>	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.	Quality assurance process is underway to complete recommendation	HSE Mental Health Operations Mental Health Housing Group	<b>On Track</b> <b>For Closure Pending NIMC Approval</b>
<b>71</b> <b>Medium</b>	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.	Data for Quarter 4 2022 four has been gathered from Individualised Placement Support sites and will be published in Quarter 2, 2023. The <a href="#">National Service Plan</a> for 2023 has been signed off with additional funding secured for the further expansion and integration of Individualised Placement Support services in 2023. A further 12 sites will be established in 2023. The draft Standard Operating Procedure was circulated to Heads of Service for feedback with a few to sign off in Quarter 2, 2023.	HSE Mental Health Engagement and Recovery	<b>On Track</b>
<b>72</b> <b>Medium</b>	The current HSE funding provided for day centres should be reconfigured to provide individualised supports for people with mental health difficulties and be consistent with the New Directions policy.	A data collection tool to identify the types of services to be covered by the recommendation is completed, pending workstream sign-off. The working group developing the data tool identified the need for additional information on day services, supported by a short template. Initial planning for the service user experience survey on	HSE Mental Health Engagement and Recovery	<b>On Track</b>

		day services was completed. The Heads of Service for Mental Health were briefed on the plan for delivery of recommendation 72.		
<b>73</b> <b>Medium</b>	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>Early Engagement is continuing for people on Disability Allowance aged 18-22, and at the beginning of March it was expanded to those aged 22-25. Currently there are just over 1,000 of these customers working with an Employment Personal Advisor. Early Engagement is currently being provided across all areas of the country.</p> <p>Early Engagement is currently supported by 13 Designated Disability Employment Personal Advisors (DDEPA) and 53 Employment Personal Advisors, all of whom have received appropriate training. The Department are continuing to train more Employment Personal Advisors to support Intreo’s engagement with people with disabilities.</p> <p>In relation to the Comprehensive Employment Strategy, currently the Department of Children, Equality, Disability, Integration and Youth is working with the CES-IG to design the third action plan under the Strategy.</p> <p>The Strawman is based on a commitment under the Roadmap for Social Inclusion to develop and consult on a ‘strawman’ proposal for the restructuring of long-term disability payments. The Strawman also intends to simplify the system and take account of the concerns expressed in the Make Work Pay report, the Pathways to Work report and the findings of the Cost of Disability Report.</p> <p>Work on the Strawman is at an advanced stage and is expected to be published during Quarter 2, 2023. It is intended to carry out a wider consultation process with all stakeholders and advocacy groups following publication.</p>	Department of Social Protection	<b>On Track</b>



<p><b>74</b> <b>Short &amp; Medium</b></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>The researchers originally involved in this evaluation had to withdraw interest due to work commitments. As a result, no progress has been made on this recommendation during this quarter.</p>	<p>HSE  Mental Health Engagement and Recovery  Mental Health Operations</p>	<p><b>Major Delivery Issue</b>  Mitigation: Develop, advertise and award tender and create a Research Advisory Group</p>
<p><b>Domain 4   Accountability and Continuous Improvement</b></p>				
	<p><b>Recommendation</b></p>	<p><b>Quarter 1, 2023 Update</b></p>	<p><b>Owner</b></p>	<p><b>Status</b></p>
<p><b>75</b> <b>Medium</b></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 (RHS's) and within these the Community Health Networks corresponding to populations of about 50,000</p>	<p>This recommendation has been discussed at the HIG and with the Mental Health Integrated Care Team and there is consensus that it is not feasible to progress planning for recommendations 75 and 76 until a national agreement on RHA's population and resource allocation is concluded.</p>	<p>HSE  Corporate  Mental Health Integrated Care Team</p>	<p><b>Not Started Yet</b>  Awaiting national direction on Regional Health Area plans</p>
<p><b>76</b> <b>Medium</b></p>	<p>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.</p>	<p>Please see above</p>	<p>HSE  Mental Health Integrated Care Team</p>	<p><b>Not Started Yet</b>  Awaiting national direction on Regional Health Area plans</p>
<p><b>77</b> <b>Medium</b></p>	<p>A standardised set of performance indicators (PIs) directly aligned with the desired outcomes in StV 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.</p>	<p>The Mental Health Unit have developed and submitted an evidence synthesis review application to the Department's Research Unit, the outcome of which is likely in early April 2023. This evidence synthesis is looking to assess the evidence base aligning the existing Sharing the Vision outcome indicators with commonly utilised large population mental health outcome/performance indicators, to support the development of a prioritised list of relevant indicators, as per this recommendation.</p>	<p>Department of Health</p>	<p><b>On Track</b></p>

<b>78</b> <b>Medium</b>	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> .	A project lead has been appointed by the MHER office and this person will collaborate with a co-production group already set up to review this recommendation.	HSE  Mental Health Engagement and Recovery	On Track
<b>79</b> <b>Short</b>	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.	The mental health complaints review by National Complaints Governance and Learning Team (NCGLT) was deferred to Quarter 4, 2023 due to resourcing issue. Recommend that Mental Health Services within CHOs take on this function. The onsite review will identify variance with Your Service Your Say (YSYS) policy <a href="https://www.hse.ie/eng/about/who/complaints/ysysguidance/ysys-feedback-policy-guidance.pdf">https://www.hse.ie/eng/about/who/complaints/ysysguidance/ysys-feedback-policy-guidance.pdf</a> . CHOs can then develop improvement plans to address issues. NCGLT can provide an audit template to assist services undertake this piece of work. The revised YSYS policy is currently with the Health Service Trade Unions who have requested a meeting to clarify some questions that have arisen. That meeting is expected to take place by end of April 2023. No further progress regarding publication can be made until the Unions sign-off.	HSE  National Complaints Governance and Learning Team	Minor Delivery Issue  Due to resourcing limitations  Mitigation: Recommended that mental health services within CHOs undertake this audit. NCGLT can provide an audit template to assist.
<b>80</b> <b>Ongoing</b>	A culture of open disclosure to support patient safety is embedded in mental health services.	Workplan, deliverables and outcomes reviewed and agreed. On track for closure within timescale	HSE  Quality Patient Safety (QPS)	On Track
<b>81</b> <b>Short</b>	Training should be provided for services users and staff on making and dealing with complaints.	A representative from consumer affairs now involved in the working group, which has enabled progression towards completion	HSE  Mental Health Operations  Mental Health Engagement and Recovery	On Track

			National Complaints Governance and Learning Team	
<b>82</b> <b>Short</b>	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.	A position paper with revised milestones and a work plan has been drafted by the StV Quality Assurance Frameworks Workstream. It is current in review with workstream members. Once finalised, the paper will be presented to the HIG and NIMC for ratification.	HSE  Mental Health Operations  Mental Health Engagement and Recovery	On Track
<b>83</b> <b>Medium</b>	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.	Engagement meeting with the Mental Health Commission (MHC) held. MHC is reviewing work plan to align with launch of revised 'quality framework for mental health services in Ireland'.	HSE  Mental Health Operations	On Track
<b>84</b> <b>Medium</b>	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.	Initial engagement with all relevant stakeholders completed. Work plan reviewed, to be signed off by group at next meeting	HSE  Mental Health Operations	On Track
<b>85</b> <b>Short</b>	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.	Phase 1 of the Integrated Financial Management System implementation is on track to be rolled out from July 2023. National mental health costings will not become available until the whole of mental health services are implemented on this new system.	HSE  Mental Health Integrated Care Team	On Track

<p><b>86</b> <b>Medium</b></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>The ICCMS Programme received formal confirmation from the Digital Government Oversight Unit that the Preliminary Public Spending Code Business Case has been approved and that the programme can now proceed to the procurement phase.</p> <p>A National Requirements Gathering workshop took place on the 8th March where over 160 representatives attended the event. The purpose of this national requirements gathering workshop was to review and validate further the ICCMS functional requirements, and gather further feedback from clinical, administrative, and operational colleagues across national community services. The programme team is currently developing the overall Requirements Gathering Approach and Findings for the ICCMS programme which will be approved in April.</p>	<p>HSE  Community Operations (Integrated Community Case Management System (ICCMS))</p>	<p>On Track</p>
<p><b>87</b> <b>Medium</b></p>	<p>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.</p>	<p>Inter-Departmental Steering Committee established in Quarter 4, 2022 and second meeting held on 29th March 2023.</p>	<p>Department of Justice</p>	<p>On Track</p>
<p><b>88</b> <b>Short</b></p>	<p>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.</p>	<p>Mental Health Specific Webinar for staff now available on HSEland Mental Health Hub. Associated FAQ document also hosted on HSEland as a live document to be updated as implementation of the Act progresses</p>	<p>HSE Mental Health Operations  HSE National Office for Human Rights and Equality Policy</p>	<p>On Track</p>
<p><b>89</b> <b>Short</b></p>	<p>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.</p>	<p>Review of the implementation and work plan and recommendations for amendments, in advance of presentation to HIG. 2,562 learners from mental health services have completed the safeguarding e-learning from 2020 (launch) to March 2023</p>	<p>HSE  Safeguarding Office</p>	<p>Major Delivery Issue  Current safeguarding policy excludes mental health services. Plan to develop a</p>

				Standard Operating Procedure on safeguarding within mental health to include support from local safeguarding teams and National Safeguarding Office (NSO)
<b>90 Short</b>	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	Several discussions held between Department of Justice (DoJ) and NOSP.  1. DoJ engaged through the CSO Liaison Group to enable reporting of various activities being undertaken in the area of suicide statistics  2. NOSP has continued its work on Irish Probable Suicide Deaths Study (IPSDS) for 2019 and 2020  3. DoJ and IPS have continued to work on the production of SADA, with support from NOSP, and also review reporting of deaths in custody	Department of Justice & Department of Health	On Track
<b>91 Short</b>	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.	1) Governance approval given by National Director, Community Operations for pilot project of draft guidance on review of community deaths by suspected suicide within community setting. 2) 5 CHOs now participating in pilot project. 3) Support provided by Community QPS Team for duration of pilot - 3-month period. 4) Pilot evaluation format planned.	HSE  Mental Health Operations  National Office for Suicide Prevention	On Track
<b>92 Short</b>	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	The Mental Health Bill received priority for drafting in the spring legislative session. Department is engaged in ongoing discussions with parliamentary drafters who are progressing the text of the Bill, providing feedback and answers to drafting queries on a continuous basis. Engagement with legal advisors on various issues related to the Bill continued in Quarter 1. Overall, good progress has been	DoH  Mental Health Unit	Minor Delivery Issue

	individuals involved with the mental health services	made in Quarter 1 on the drafting of the Bill, with good momentum created for continued work in Quarter 2, 2023.		
<b>93</b> <b>Short</b>	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	HRB received the letter of allocation for 2023, which has confirmed a budget of 1.2 million for Sharing the Vision investments. The 5 projects that are currently funded are active and are being managed and monitored. HRB have developed a draft Terms of Reference for the establishment of an Expert Group who will support the development of the national mental health research strategy. The draft Terms of Reference have been discussed with DoH, and work is at an advanced stage in finalising membership of the Expert Group and identifying a Chair for the group.	Health Research Board	On Track
<b>94</b> <b>Not Specified</b>	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.	Quality Assurance process underway to complete recommendation	HSE Community Operations	On Track For Closure Pending NIMC Approval
<b>95</b> <b>Short</b>	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.	Quality Assurance process underway to complete recommendation	HSE Community Operations	On Track For Closure Pending NIMC Approval
<b>96</b> <b>Medium</b>	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.	As a result of the Mental Health Planning Workstream integrating into the work of the Mental Health Integrated Care Team, it has been agreed that the team will also become the Implementation Lead for Recommendation #96. It has been agreed that demonstrating ongoing work on this recommendation is linked to innovative programmes linked to other recommendations in the	HSE Community Health Operations Improvement & Change (CHOIC)	On Track

		<p>policy e.g. recommendations 24 &amp; 40 (Crisis Resolution Services) and recommendations 22, 52, 53 &amp; 57 (Clinical Programmes).</p> <p>Based on the above it has been agreed that an additional annual report will be included in the StV Quarter Report at the end of each year (Q4). This report will provide a more detailed overview of the innovative programmes being implemented across mental health services. As such, this recommendation (#96) will remain open. The updates in the forthcoming Q1, Q2 &amp; Q3 quarter reports will reference the pending annual update expected in the Q4 report.</p>	Mental Health Integrated Care Team	
<b>97</b> <b>Medium</b>	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.	Recommendation 97 and 30 are closely linked and therefore these recommendations have been merged under the one Project/Working Group.	HSE Mental Health Operations Mental Health Engagement and Recovery	On Track
<b>98</b> <b>Long</b>	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.	A number of meetings with key stakeholders have been held this quarter with key stakeholders to begin to develop a mental health capital plan.	HSE MH Integrated Care Team	Not Started Yet
<b>99</b> <b>Short</b>	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.	The NIMC have agreed that a 3 year retrospective review of the work of the NIMC (and associated structures), and implementation progress of the Policy, will be prepared by the joint NIMC/HIG secretariats for review and approval of the NIMC, aligning with the independent nature of the NIMC. This is the agreed approach for the achievement of the 2023 milestone associated with this	DoH	On Track

		recommendation. This will be completed in 2023, aligning with the term of office of the current NIMC (2021-2023).		
<b>100</b> <b>Medium</b>	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.	The NCAGL Mental Health has facilitated a meeting between the College of Psychiatry and the Irish College of General Practitioner. There will be further meetings to support meeting the 2023 milestone, however to date, the NCAGL Mental Health has not had visibility of further meetings that have taken place since the initial meeting.	HSE National Clinical Advisory and Group Lead for Mental Health  DoH	<b>On Track</b>