



Sharing the Vision

A Mental Health Policy for
Everyone

Policy Implementation

Status Report

Quarter 4, 2023

Executive Summary

This is the tenth 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 National Implementation Monitoring Committee (NIMC) Steering Committee and Reference Group, and a need for a more focused, qualitative approach to reporting, this report is formatted around policy domains and covers activity completed over the course of Quarter 4, 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 have been organised thematically in the following order:

- Report on Domain 2 (Part II) (Quarter 1, 2023)
- Report on Domain 4 (Quarter 2, 2023)
- Report on Domain 1 and 3 (Quarter 3, 2023)
- Report on Domain 2 (Part I) (Quarter 4, 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 continue to be provided on a quarterly basis for all one hundred recommendations and reported in Appendix B of this document.

The Quarter 4, 2023 status report focuses on Domain 2 (Part I). All recommendations in Domain 2 are HSE-led and the recommendations covered by this report are progressed through the HSEs thematic workstreams for Clinical Programmes, Mental Health Planning, Mental Health Promotion & Digital Mental Health, Children & Young People and Mental Health in Primary Care.

In Quarter 1, 2024, the NIMC Steering Committee will conduct a planned evaluation of the current reporting structure, including reporting frequency and format. This evaluation will be informed by findings from an independent review of StV implementation structures conducted over the course of Quarter 4, 2023, on behalf of the Department of Health (DoH).

Report Content

Section 1: Report Overview

Section 2: Quarter 4, 2023 Progress at a Glance

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

Appendix A – HSE StV New Service Plan developments Quarter 4, 2023

Appendix B – Quarter 4, 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
- MHC – Mental Health Commission
- MHSOP – Mental Health Services for Older People
- NCAGL – National Clinical Advisor and Group Lead (For Mental Health)
- NGO – Non-Governmental Organisation
- NIMC – National Implementation Monitoring Committee
- NOSP – National Office for Suicide Prevention
- NSP – National Service Plan
- PICU – Psychiatric Intensive Care Unit
- StV – Sharing the Vision
- VCS – Voluntary and Community Sector



Sharing the Vision

A Mental Health Policy for Everyone

Section 1

Report Overview

Report Overview

This is the tenth status report on StV implementation covering activity completed during Quarter 4, 2023. The report has been prepared by the joint NIMC Steering Committee and HIG secretariats and measures progress against milestones set out in the [2022 – 2024 StV Implementation Plan](#), which was published in March 2022.

The implementation of StV involves numerous stakeholders with extensive 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 eighteen 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.

The NIMC Steering Committee has established five Specialist Groups to address specific policy priorities or particularly complex recommendations. Section 2 contains an update on each of these Specialist Groups. Building on the StV Implementation Plan, the HIG has formed ten thematic workstreams, each tasked with progressing a cluster of HSE led policy recommendations. These workstreams will incorporate outputs developed by the NIMC Specialist Groups, as they conclude the work they have been assigned. The HIG workstreams are supporting the development of detailed delivery plans for individual recommendations, against which 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 of this report is Domain 2 (Part I) and it is organised thematically with a focus on service access, coordination and continuity of care. Highlights are summarised under the following headings: - *Progress Achieved, Emerging Developments, and Implementation Problems.*

Appendix A to this status report details HSE National Service Plan developments, specifically around the recruitment of new posts to ensure the commencement and implementation 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. For some recommendations, it has not been possible to include an update for Quarter 4, 2023, due to current industrial action. Where this is the case, it has been noted under the relevant recommendation.

In order to further enhance quality of reporting, the joint HIG and NIMC secretariats have, in advance of the Quarter 4, 2023 policy implementation status report, prepared a guidance document, as a support for those involved in completing the quarterly returns.

Report Overview

Report Content

This status report highlights timeframes associated with each recommendation (short-term, medium-term and long-term), as defined in StV and referenced in the StV Implementation Plan. The policy in its entirety is to be delivered by 2030.

Following a review by the NIMC Steering Committee of how implementation timeframes are defined, the DoH has advised streamlining the timeline for completion of short-term recommendations with the StV Implementation Plan 2022 – 2024. Providing a clear focus for the current implementation plan, short-term recommendations are as a result expected to be delivered by December 2024. The timeline for delivery of medium- and long-term recommendations will be considered by the DoH as part of the development of future implementation plans.

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 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. Section 3 provides an overview of major or critical problems reported in Quarter 4, 2023, for recommendations within Domain 2 (Part I).

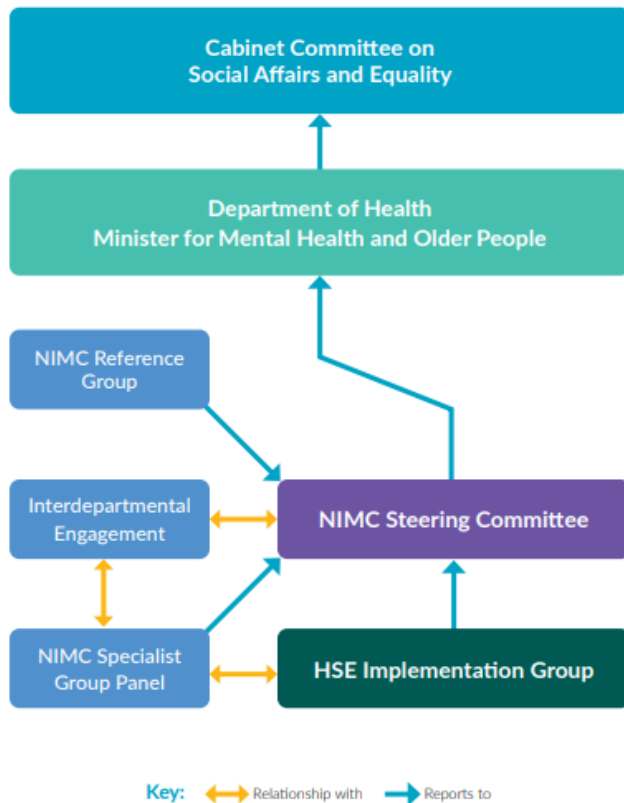
As detailed delivery plans are finalised for each recommendation, metrics are also developed and included in reporting. For this report, implementation leads have indicated the status of their relevant recommendations in the following categories, as relevant:

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

Oversight and Implementation Structures

StV Recommendation 99

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



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

- The Steering Committee, which oversees implementation progress (Established December 2020)
- The HIG, tasked with implementation of HSE led recommendations (Established May 2021)
- A Reference Group to provide the service user, family and carer perspective (Established March 2022)
- Specialist Groups to address specific policy priorities or 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. The 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. As a support for implementation leads, work is underway to develop a guidance document, including principles for embedding lived experience in StV implementation, methods and available supports. To support the process of co-production at a strategic level, the HSE's Mental Health Engagement and Recovery (MHER) office has established a National Panel for Co-Production. This panel currently consists of 21 people with a broad range of interests and skill sets who represent their stakeholder group. MHER will continue to recruit volunteers in 2024 and will offer a volunteer support package which is similar to the approach of employee assistance programmes.

A note on gender

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



Sharing the Vision

A Mental Health Policy for
Everyone

Section 2

Quarter 4, 2023

Progress at a Glance

Work of the NIMC and the HIG Quarter 4, 2023

NIMC Steering Committee and Secretariat

NIMC Steering Committee and Secretariat

Established in December 2020, the NIMC Steering Committee meets monthly. The NIMC Steering Committee met in October, November and December 2023, as scheduled. Minutes of these meetings can be found [here](#). It reviewed and published the Quarter 3, 2023, Policy Implementation Status Report and associated NIMC quarterly report analysis with the significant input of the Reference Group which can be found [here](#). The NIMC Steering Committee received progress reports and presentations in relation to updates from the Youth Mental Health Transitions Specialist Group, NIMC/HSE Mental Health Human Resource, Recruitment and Workforce Planning, the Position Paper on “Embedding Women’s Mental Health in *Sharing the Vision*”, and a discussion of HSE Regional Health Restructuring and Mental Health with CEO of HSE Mr Bernard Gloster. The NIMC agreed follow up actions as appropriate. The NIMC Secretariat continued in its work of supporting the NIMC Steering Committee and co-ordinating the 18 non-HSE recommendations. The membership of the second term of NIMC Steering Committee was confirmed and new members appointed, including a new Chairperson, on foot of Ministerial decision, with its term to commence in January 2024. The independent process review of the NIMC was completed by the contracted organisation, with its final report to be presented to the NIMC Steering Committee at its January 2024 meeting. In addition, the NIMC finalised its end-of-term analysis report which is published [here](#).

HSE Implementation Group (HIG)

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. Following a review of the HIGs meeting structure in Quarter 2, 2023, the HIG secretariat has implemented a schedule of focused engagement sessions with workstream leads and relevant stakeholders. These engagements ensure attention is given to recommendations that require additional support, including where implementation problems have been identified. The HIG has in Quarter 4, 2023, conducted a status review of each of the HSE-led policy recommendations with a short-term timeframe for delivery, in order to assess timelines for expected completion and to appropriately address any major implementation problems.

Reference Group

Reference Group

The Reference Group (RG) provided significant input in relation to the Q3 2023 Policy Implementation Status report, which was agreed and published [here](#) (see Appendix I of Quarterly Implementation Status Analysis document for summary of feedback). The NIMC, HIG and RG secretariats continued their joint work to enhance communication and engagement between these structures in conjunction with and between the quarterly reporting cycles. There was further engagement between NIMC and HIG Secretariats and the Reference Group with members of the NIMC Steering Committee in attendance, to improve engagement processes and provide the RG with as much information on implementation of individual recommendations as possible, in order to maximise the role and function of the RG. Further engagement is planned for 2024.

Specialist Groups

Youth Mental Health Transitions Specialist Group

In December 2023, the Specialist Group finalised a draft reconfiguration plan 'Youth Mental Health Services in Ireland: A New Model' (working title) for the provision of age-appropriate specialist mental health services up to age 25. This brought conclusion to a work plan, overseen by NIMC, which included stakeholder mapping, academic engagement in commissioned research, multiple consultation events and a co-production approach with young people. This plan will be presented to the NIMC Steering Committee for consideration in Quarter 1, 2024.

The 'Enhanced Transition Plan' also developed by the Specialist Group was reviewed by the designated implementation lead, the Child and Youth Mental Health Office, in Quarter 4, 2023, in order to assess how to best operationalise the recommendations contained in this report. Informed by the wider service improvement programme for child and youth mental health, and by the short-term timelines for implementation, adjustments were made to the implementation plan and the final draft 'Enhanced Transition Plan' will be presented to the NIMC for consideration in Quarter 1, 2024.

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 recommendations relating to the development of mental health supports in primary care settings, including talk therapies, as well as with promoting a shared care approach between primary and specialist mental health services.

The Specialist Group meets regularly 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, develop a position paper for a layered care approach to talk therapies in primary care and community settings, and devise a national framework for shared physical health care. In order to inform the most effective approach to delivering these policy recommendations, the Specialist Group has commissioned external researchers to establish the evidence base and best practice examples of shared care between primary care and specialist mental health services. This research has now been completed and a report summarising research findings is currently being formatted. Outputs will also 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. The Specialist Group presented an interim report to the NIMC in Quarter 1, 2023.

This report has been formally submitted to the HSE's Mental Health Capital Planning Group for their consideration. The Planning Group was established by the HSE's Chief Operating Officer to develop a costed and time bound plan for mental health facilities to address key priorities over an initial three-year period and to review and prioritise capital commitments in the medium term.

Digital Specialist Group

Set up in May 2022, the Specialist Group on Digital Mental Health was tasked with developing access to evidence-based digital mental health solutions and with increasing use of digital channels for information on supports and services.

In Quarter 4, 2023, a business case proposal for the Organisation for the Review of Care and Health Apps (ORCHA) was jointly developed by the Digital Health Clinical Safety Lead and Mental Health Operations, for the deployment of an app baseline review, formulary and library to support digital mental

health services on a 'proof-of-concept' basis for the Irish health system. Budget has been provisionally identified and it is expected that this project will commence in Quarter 1, 2024.

HSE digital updates continue with ongoing work on yourmentalhealth.ie to reconfigure the information architecture of the website to improve search and find options. Work on My Mental Health Plan, an online interactive tool to help support and improve mental health and self-care is also progressing well. The tool is expected to go live in Quarter 1, 2024. There are plans for further promotion of the mental health literacy campaign in February 2024, which will also integrate with promotion of My Mental Health Plan.

There was a presentation on the Integrated Community Case Management System (ICCMS) to the Digital Mental Specialist Group. Colleagues from community and voluntary sector organisations had opportunities to ask questions on integration with their services.

Mental Health Reform and HSE MHER launched the [Digital Inclusion and Access to Mental Health Services report](#) in Quarter 4, 2023. This report will inform both the current Digital Mental Health Work Plan and the longer-term Digital Mental Health Strategy 2025-2030.

Women's Mental Health Specialist Group

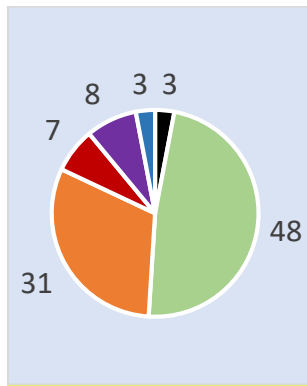
Following on from the launch of [Embedding Women's Mental Health in Sharing the Vision](#) – a report by the Women's Mental Health Specialist Group – in Quarter 1, 2023, a position paper was developed between the HIG and NIMC Secretariats and presented to the NIMC in Quarter 4, 2023. The paper offered immediate opportunities for progressing recommendations contained in the report. It also proposed further work, including scoping and commissioning the development of a toolkit to be made available to workstreams, policy implementation leads and supporting partners to embed the Women's Mental Health Charter into StV implementation. The monitoring of outputs will be undertaken by workstream leads, the HIG and by the NIMC, through the regular quarterly progress reporting on StV implementation and through the Implementation Plan 2025-2027. Following discussion and agreement on the follow up actions, NIMC agreed to the closure of Recommendation 3 and as the work of the Specialist Group on Women's Health was considered to be complete, based on the relevant terms of reference, this Specialist Group was dissolved.

High Level Recommendation Status Summary

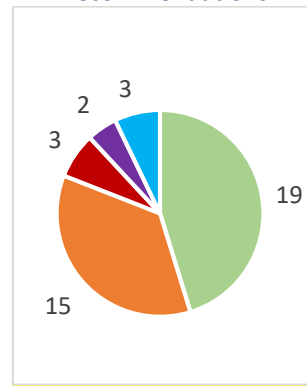
In Quarter 4, 2023, implementation leads have indicated the status of their relevant recommendations as illustrated below, based on the timeframe for completion and domain respectively:

Recommendation Status by Timeframe:

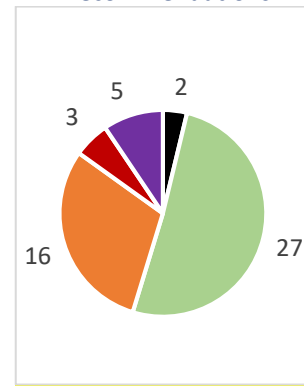
All 100 Recommendations



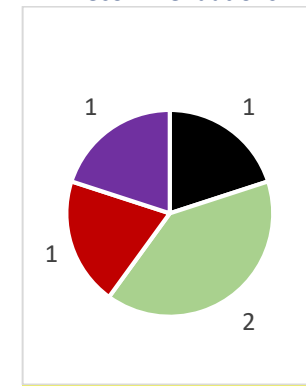
42 Short-Term Recommendations



53 Medium-Term Recommendations



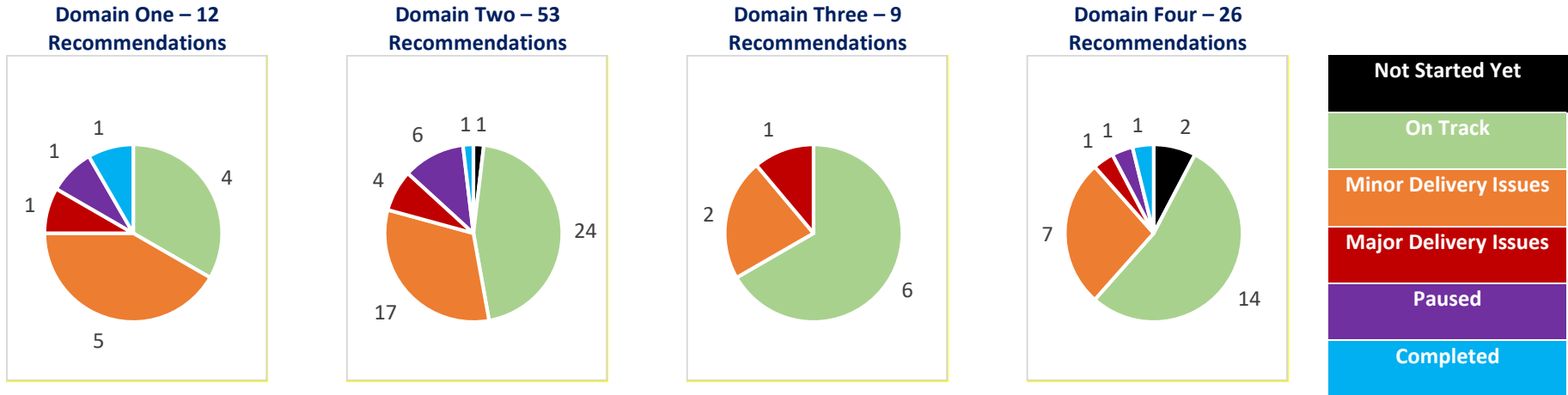
5 Long-Term Recommendations



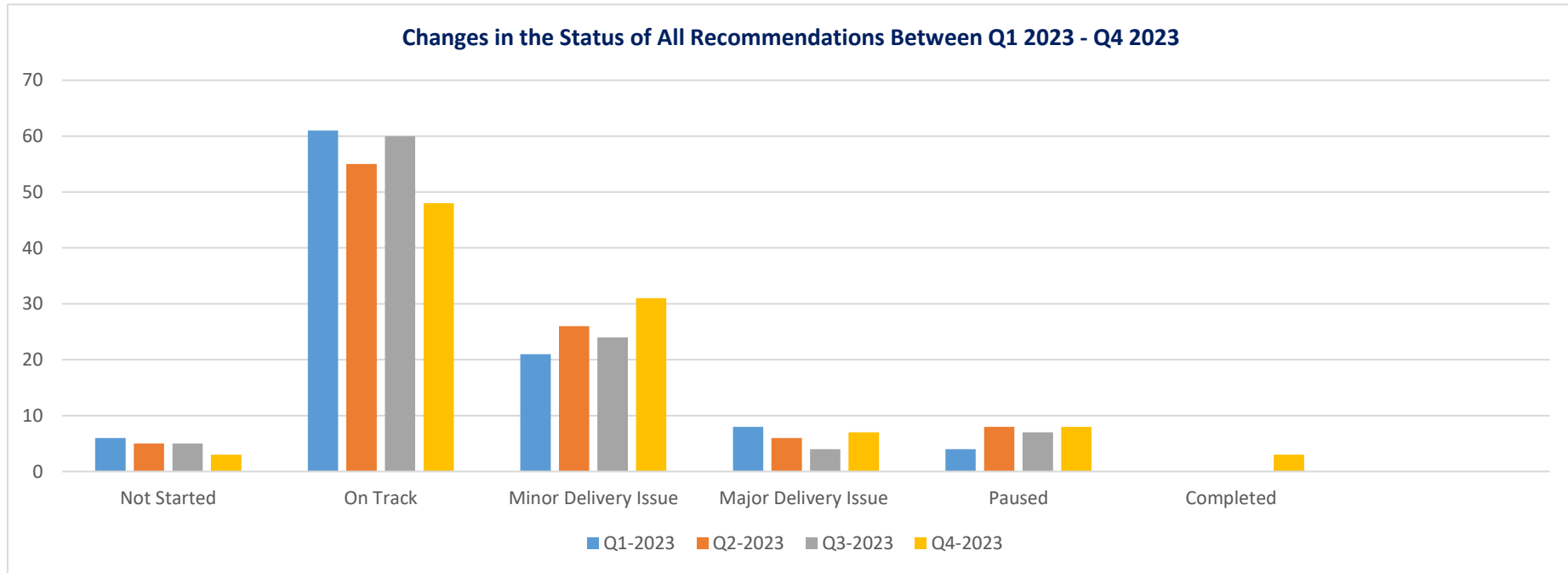
As can be seen above, out of the 100 policy recommendations, 48 were reported as 'On-Track', 31 as experiencing 'Minor Delivery Issues', while 7 were reported as having 'Major Delivery Issues'. Eleven recommendations were either reported as 'Paused' or 'Not Started Yet', while three recommendations are 'Completed'.

Recommendation Status by Domain:

As illustrated below, progress is being made across the policy domains, while ‘Major Delivery Issues’ also are reported for a small number of recommendations in all of the four policy domains in Quarter 4, 2023.

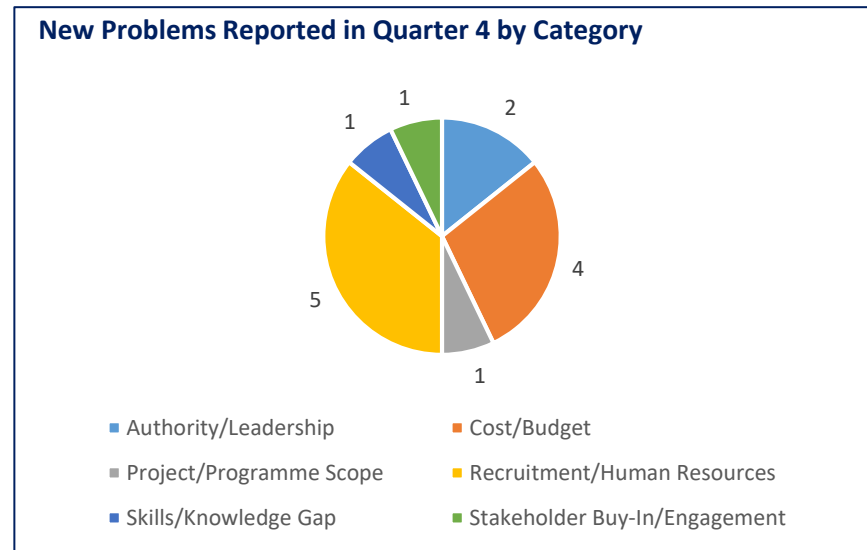
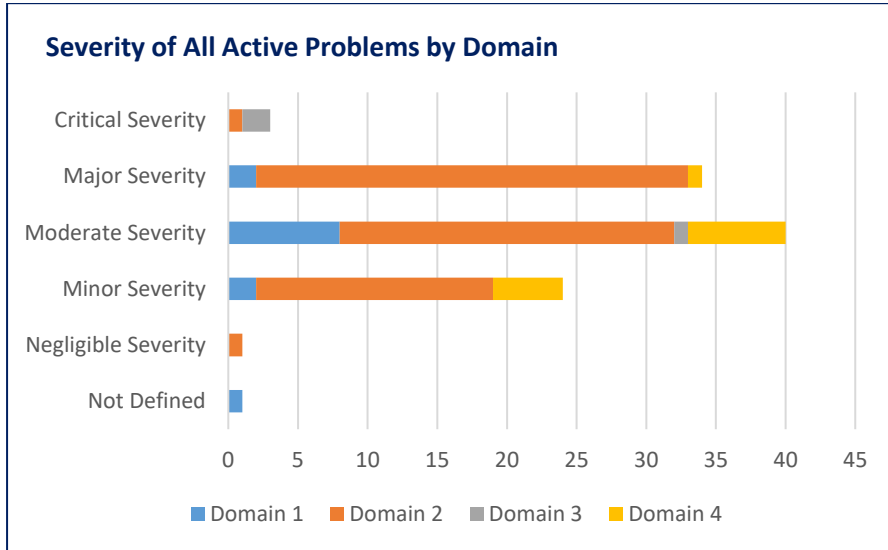


High Level Recommendation Status Summary



The above chart illustrates change in recommendation status from Quarter 1, 2023 through to Quarter 4, 2023. As can be seen, fewer recommendations are reported as 'Not Yet Started', while three recommendations have been completed. There has been a small increase in the number of recommendations reported as having delivery issues, reflecting that implementation have commenced on the vast majority of policy recommendations.

Reported Problems



Information provided by implementation leads show that two-thirds of all new problems reported in Quarter 4, 2023, were related to either Recruitment/Human Resources or Budget. This trend has continued in the latter half of 2023.



Sharing the Vision

A Mental Health Policy for Everyone

Section 3

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

Recommendations Overview

Domain 2 – Service Access, Coordination and Continuity of Care

Part I - 27 Recommendations*

*(Note: includes 20 (a) & (b), 35 (a) & (b) and 53 (a), (b) & (c))

The StV Programme has a number of outcomes linked to each domain. The outcomes for Domain 2 (Part I), and the recommendations they are aligned to, are as follows:

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

Recommendations Overview, Domain 2 (Part I)

Background

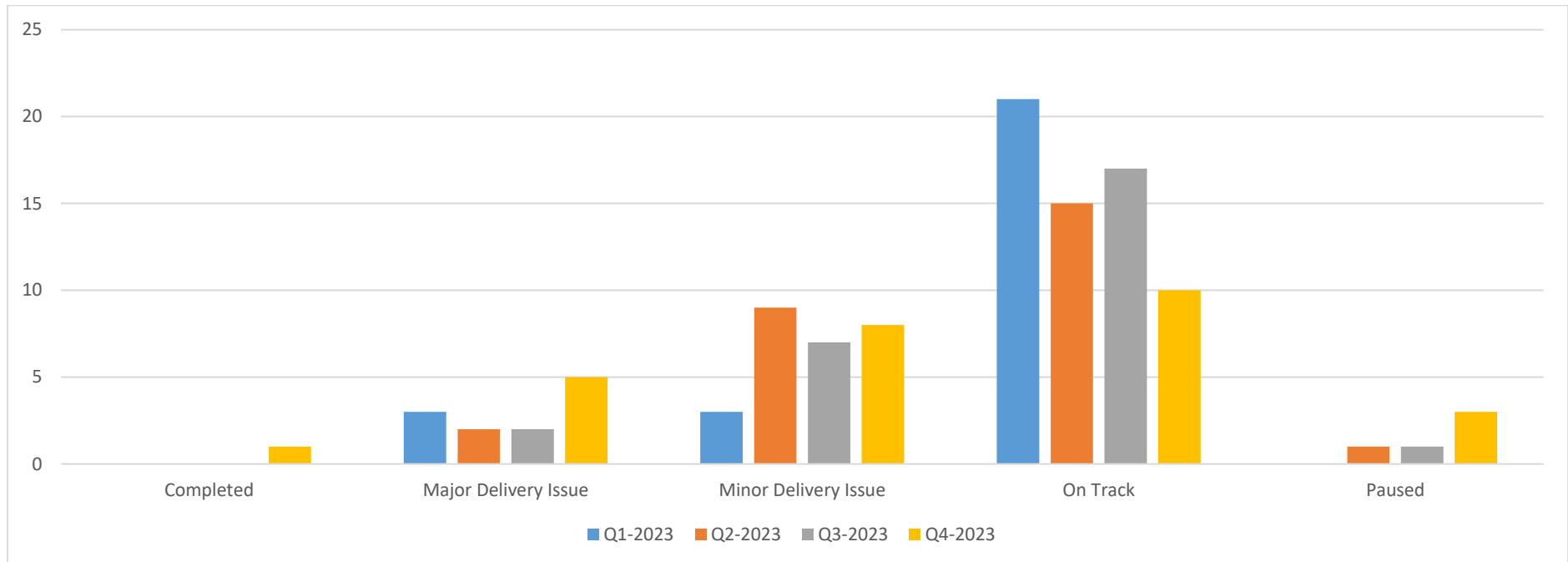
In Domain 2, the policy recommendations focus on the following areas:

- 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 services to provide continuity of care that will deliver the best possible outcomes for each service user

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

Recommendation Status at a Glance

Change in overall status of recommendations in Domain 2 (Part I) over the last 12 months:



Recommendations Overview

Progress Achieved

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

The directory for GP practices, featuring mental health supports from HSE funded partners, has been finalised and is now accessible on the [Connecting for Life website](#). Plans are underway to arrange for the distribution of the directory and for adapting it as a resource for Community Mental Health Teams. Collaborative efforts continue with HSE Digital to enrich content related to supports and services on YourMentalHealth.ie.

(Recommendation #13)

Building on an analysis of implementation of the [Advancing the shared care approach \(2012\)](#) report, a draft shared care implementation plan has been developed, as a basis for consultation with relevant stakeholders and proposed action owners. In Quarter 4, 2023, a focus group was arranged with members of the National Co-Production Panel in order to appropriately reflect lived experience in the implementation of the shared care approach. Arrangements have also been made for the establishment of a consultative forum with the relevant professional bodies. Once the final outstanding stakeholder engagement events have concluded, a final shared care implementation plan will be produced and shared for consideration.

(Recommendation #18)

Funding has been granted for a temporary post to support the office of the NCAGL for mental health to develop a Model of Care for Children and young people with ADHD. A candidate has been identified from within a CHO for the position and in Quarter 4, 2023, work was undertaken to address the backfill of this candidate's permanent post. This has now been resolved and the Clinical Lead is due to commence in Quarter 1, 2024. Once the person has taken up post, consideration will be given to service demand and required enhancements, as part of the development of a Model of Care.

(Recommendation #20a)

Findings in the audit report of assessment rooms in Emergency Departments (EDs) were reviewed and validated by the Clinical Lead and Nurse Lead for the National Clinical Programme for Self-Harm and Suicide Related Ideation. This involved phoning individual services and assessing rooms during onsite visits. The completed audit report was subsequently submitted to the HSE's Chief Clinical Officer and approved. In addition, a paper has been prepared summarising the audit results, which will be submitted to the Irish Journal of Psychological Medicine in Quarter 1, 2024.

(Recommendation #22)

The National Clinical Programme for Self-Harm and Suicide Related Ideation hosted a two day training and education event in Dublin, which was attended by 70+ clinicians. A calendar of online training seminars was developed for all clinicians delivering the programme and a 5-year report covering data for each ED service is being finalised for circulation in Quarter 1, 2024.

(Recommendation #23)

The Crisis Resolution Team in Sligo/Leitrim received a [2023 HSE Excellence award](#) and were requested to present at a Sláintecare webinar.

(Recommendation #24)

In Quarter 4, 2023, following extensive discussion, drafting and consultation, a Digital Mental Health Work Plan was finalised. This will provide structure and tangible actions for this important area of work in 2024. In tandem with new developments, digital mental health supports continue to be offered through the HSE partnership with SilverCloud, with additional programmes under consideration.

(Recommendation #31)

In line with the [Model of Care for CAMHS Hubs](#), continued progress was made in the first part of Quarter 4, 2023, on recruitment for CAMHS Hubs Teams with 2 pilot sites complete (CHOs 2 and 6).

(Recommendation #35b)

The Youth Mental Health Specialist Group finalised a plan for 'Transforming Youth Mental Health Services in Ireland: A New Model', which includes recommendations for the provision of age-appropriate specialist mental health services up to age 25. This reconfiguration plan will be presented alongside a plan for enhanced transitions between CAMHS and adult mental health services to the NIMC in Quarter 1, 2024 and will be incorporated as part of the HSE's Child and Youth Mental Health Improvement Programme.

(Recommendation #36)

Building on the recently completed HSE Internal Audit of compliance with the Mental Health Commission Code of Practice Relating to Admission of Children, level of assurance provided following that audit, and submission of documentation, the NIMC approved completion of recommendation 38. There has been a significant reduction in the number of child admissions to adult units as part of a continuing downward trend over a number of years.

(Recommendation #38)

A national Early Intervention in Psychosis (EIP) network webinar was successfully delivered in collaboration with the Irish Psychosis Research Network 150+ clinicians from across the country attending. Three WTE addiction workers were funded for CHO 1, 6 and 4.

(Recommendation #52)

In addition to the existing five operational adult ADHD teams, a sixth partial service commenced in Quarter 4, 2023 (CHO 7). The decision to proceed with a partial service in this CHO should be seen within the context of the HSEs current position to pause further staff recruitment. A full-time consultant post for Kerry/West Cork was submitted to the Consultant Applications Advisory Committee and is due to be considered Quarter 1, 2024.

(Recommendation #53b)

The postnatal multidisciplinary clinic supporting women following a traumatic birth experience at the Lavender Clinic, University Maternity Hospital Limerick won a [HSE Service Excellence Awards 2023](#) in the Improving Patient Experience category.

(Recommendation #53c)

Recommendations Overview

Emerging Developments

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

Meetings were held between the HSE and each HSE funded organisation providing Mental Health supports and services as part of the end of year reviews. Activities taken place in 2023 and priorities for 2024 were reviewed, ensuring that StV priorities are reflected in annual work plans.

(Recommendation #14)

A pilot of wellbeing and community connectedness measurement tools is underway across a number of HSE-funded social prescribing services. Conducted by Trinity College Dublin on behalf of the HSE, this study will inform a decision on the most appropriate measures for use across all Social Prescribing services. Data collection has commenced in three CHOs with training provided to participating social prescribing link workers in Quarter 4,

2023. In parallel, the University of Galway was awarded an 18 month research contract to conduct an evaluation of HSE-funded social prescribing services. The aim of the study is to understand how social prescribing works in an Irish context, for whom it works and under what circumstances.

(Recommendation #15)

Informed by a mapping of current talk therapy offerings and a review of recent evaluations of existing services, significant progress was made on the development of a principles paper for a layered care talk therapy service model for those experiencing mild to moderate mental health difficulties. In parallel, work continued to support the rollout of [online guided CBT provided by SilverCloud](#) on behalf of the HSE. This included a service improvement workshop in November 2023 and exploring possible additional programmes related to sleep, perinatal mental health and young people's mental health.

(Recommendation #16)

Research to establish the evidence base and best practice examples of shared care between primary care and specialist mental health services, including implementation of the consultation - liaison model, has been completed. A report summarising research findings is currently being formatted, which will inform the approach to delivery of recommendations 17 and 19. The report will incorporate a number of case studies and highlight common barriers and enablers for promoting the shared care approach.

(Recommendations #17 and 19)

Following appointment of an external consultant to facilitate evaluation of Crisis Resolution Services (incorporating both Crisis Resolution Teams and Solace Cafés), the development of a monitoring and evaluation plan is now underway. As part of this process, an Evaluation Advisory Group has been established and a first meeting held. A submission for ethical approval is also being drafted. Ongoing support provided to learning sites to progress recruitment of Crisis Resolution Teams and to progress partnership arrangements, in order to establish crisis cafés. CHOs 1, 3, and 5 are finalising identification of café partners, following a tender/Expression of Interest process.

(Recommendations #24 and 40)

Following a procurement process, an independent evaluation team was contracted to undertake an evaluation of the CAMHS Hub pilot learning sites. Facilitated by this team, plans for conducting this evaluation were progressed in Quarter 4, 2024.

(Recommendation #35b)

The National Placement Oversight and Review Team continues to work with people with intellectual disabilities who have complex needs and are reviewing day service provision and day opportunities. In Quarter 4, 2023, a Placement Improvement Group (PIG) was established, and has met twice. A

joint initiative between disability services and mental health services, the PIG will have a particular focus on out of area placements and will also examine service provision for people with intellectual disabilities.

(Recommendation #48)

A business case for a National Clinical Audit of Psychosis was signed off and submitted to the HSE National Steering Group for Clinical Audit. The Early Intervention in Psychosis (EIP) teams are registered to participate in this international audit again in 2024.

(Recommendation #52)

In collaboration with Bodywhys, significant progress has been made on the establishment of a reference group for people with lived experience of an eating disorder. Bodywhys has received a large number of applications to join the reference group, which will be convened in Quarter 1, 2024.

(Recommendation #53a)

Progress has been made on a referral triage process for adult ADHD services, which has included distribution of a GP referral form by Primary Care Network Managers across three CHO areas.

(Recommendation #53b)

Following approval of funding for a feasibility study of plan to develop Elm Mount Unit at St. Vincent's University Hospital, an outline plan has been developed for the proposed Mother and Baby Unit. This plan will involve building a third floor onto Elm Mount Unit. A full feasibility report is currently being finalised. Separately, a Patient Perinatal Mental Health App is currently in development in collaboration with a private contractor.

(Recommendation #53c)

Work to develop shared working commenced between adolescent addiction teams in CHOs 9 and 6 to ensure consistent service enhancements, in line with the provisions of the [Model of Care for Dual Diagnosis Services](#). Meanwhile, progress is being made in collaboration with the National Drug Treatment Reporting System to enhance data collection. The National Clinical Programme is participating in the European Monitoring Centre for Drugs and Drug Addiction Advisory Group in order to support development of dual diagnosis services at a European level. A full public and lived experience Involvement approach being taken in the implementation and evaluation of the programme, with people with lived experience working with the team in the development of both.

(Recommendation #57)

Recommendations Overview

Problems

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

A bid for additional funding in 2024 to mainstream three existing social prescribing services, develop a national software solution and ensure appropriate salary remuneration for social prescribing link worker was unsuccessful. The issue of remuneration for social prescribing link workers presents particular risks in terms of ensuring retention of skilled workers. In order to mitigate potential impact on service provision, there will be planned engagements in Quarter 1, 2024, with each of the funded host organisations for social prescribing

(Recommendation #15)

Progress to pilot an autism assessment and intervention protocol has been significantly impacted by the industrial action that is presently occurring across the HSE. While there has been ongoing use of the newly developed Autism Assessment Tool nationally by those CHOs that have already adopted it, additional deployment to other CHOs has been significantly limited compared with what was originally planned. The issue of industrial action has also limited the project's ability to carry out the planned phase 2 evaluation of the tool as the project has not been able to give the external evaluators access to the data from the 120 assessments completed so far.

(Recommendation #20b)

The audit report of assessment rooms found that eight EDs do not have a dedicated room in line with agreed standards. This impacts on quality of care delivered to service users who require a mental health assessment. In order to mitigate, the Clinical Lead and Nurse Lead for the National Clinical Programme for Self-Harm and Suicide Related Ideation are engaging directly with the relevant hospital groups to ensure improvement plans are in plans. Progress is being to address deficits in five of these EDs with the remaining three posing significant challenges. These mitigating actions will be delivered in collaboration with the NCAGL – Mental Health and the Emergency Medicines Programme.

(Recommendation #22)

Providing a comprehensive specialist mental health out of hour's service will require additional investment to support recruitment of staff and delivery of on-call services. This presents a significant service improvement programme, which cannot be fully completed within the assigned short-term timeframe

for delivery. Following escalation and engagement with the HIG, it has been agreed that this recommendation will be led by the HSEs Child and Youth Mental Health Office and considered as part of the HSEs Child and Youth Mental Health Improvement Programme. As part of this process, detailed implementation planning will be undertaken, which will provide greater clarity in how to achieve the outcomes associated with the recommendation.

(Recommendation #35a)

The Implementation Oversight Group (IOG) for the Model of Care for Specialist Mental Health Services for Older People continues to meet regularly with 3 meetings held to date. The IOG and the National Clinical Advisor and Group Lead for Mental Health will require additional programme management resource(s) to lead the implementation of the Model of Care, including devising and delivering a programme of work. The acquisition of such resource(s) is currently constrained by the HSEs position on the recruitment of new staff. This recommendation is placed on pause until such resources are in place and a work plan can be devised.

(Recommendation #42)

As part of ongoing efforts to recruit additional staff to strengthen Mental Health Intellectual Disability community teams, recruitment of previously approved Consultant posts continue. However, work to fill further multi-disciplinary posts is currently on hold, as a result of the HSEs position on the recruitment of new staff.

(Recommendation #50 and 51)

Lack of access to suitable premises and insufficient funding for new teams, programme management support, training and education and data collection systems present risks (to varying extent) for the continued implementation of a number of National Clinical Programmes. The relevant Clinical Leads continue to engage with the NCAGL – Mental Health to mitigate the impact of these risks to implementation.

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

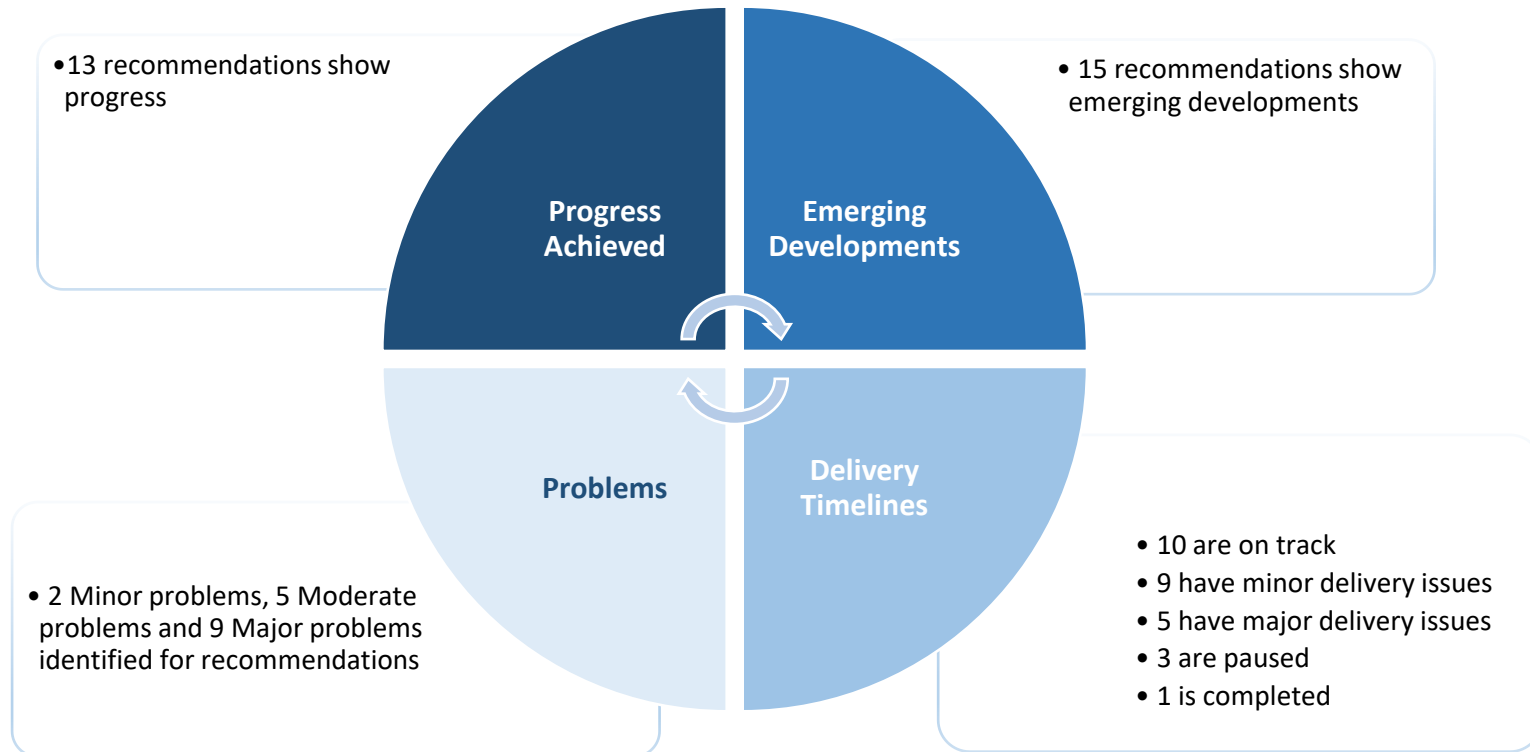
Lack of suitable premises and establishment of a Mother and Baby Unit present risks to the implementation of the National Clinical Programme. The Clinical Lead continues to engage with the NCAGL – Mental Health to mitigate the impact of these risks, including through completion of a feasibility study and inclusion in mental health capital planning.

(Recommendation #53c)

Funding to enable continued delivery of the Seeking Safety programme has not yet been secured for 2024. Along with a loss of previously approved but unfilled posts and the temporary recruitment pause in the HSE, this presents risks for the implementation of this National Clinical Programme. Mitigation measures are being considered with the NCAGL – Mental Health.

(Recommendation #57)

Domain 2 (Part I) - Summary Health Status





Appendix A
HSE StV New Service Plan
developments
Quarter 4, 2023

Executive Summary – National Service Plan (NSP)

New Posts Quarter 4, 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 325.5 posts for new developments in 2022, providing for an additional 784.6 staff across services.
- Significant progress continued in Quarter 4, 2023 in the recruitment of staff, with an additional 93.6 posts filled. Of the funded development posts, 616.4 are now in place with the remaining 168.6 posts at various stages in the recruitment process.
- In Quarter 4, 2023, a review of previously approved, but yet unfilled, posts was undertaken in order to establish if some of these posts should potentially be reconfigured or de-commissioned. The outcome of this review will be reflected in the implementation status report for Quarter 1, 2024.
- Services are experiencing a range of social, environmental and service impacts that are significantly increasing the demand for services and for a qualified healthcare workforce, while simultaneously managing a tightening of the supply of this workforce in local and international markets.
- The HSE Recruitment, Reform and Resourcing (RRR) Programme was established in June 2022 to address these challenges. Following extensive engagement with services, the [HSE Resourcing Strategy](#) was launched in June 2023.
- The Resourcing Strategy introduces a focused capacity to grow our workforce and support our services to meet projected workforce demand while ensuring that staff are enabled to work to maximise delivery of healthcare services.
- The Recruitment Operating Model, under the umbrella of the Recruitment, Reform and Resourcing Programme, works to reduce the time it takes to recruit and to bring the selection decisions and control closer to the services.
- In 2023 there will also be a shared focus on retaining the existing HSE workforce, as well as expanding through recruitment capacity and recruitment planning utilising the devolved Recruitment Operating Model.

National Service Plan – Quarter 4, 2023

Programme for Government Funding	⁴ Overall WTEs	⁶ Staff recruited to date Q4, 2023	Posts in process for recruitment e.g. advertising underway
National Service Plan Commitments associated with Programme for Government Funding 2022 <ul style="list-style-type: none"> • Further investment in all developments outlined under NSP 2021 	325.5	241.6	83.9
National Service Plan Commitments associated with Programme for Government Funding 2021 <ul style="list-style-type: none"> • Clinical Programmes (R 50,51, 57) • CAMHS Hubs (R 35) • Crisis Resolution Services (R 24, 40) • Individual Placement Service (R 71) • Recovery Education Programme (R 29) • Community Mental Health Teams (including Peer support) (R 32, 33, 34) 	155.4	134.9	20.5
⁵ Programme for Government Funding 2013-2019 (posts released to system 2021)	303.7	229.9	63.9
	784.6	616.4 (Q3: 522.8)	168.3 (Q2: 261.4)

Summary Developments under NSP 2021/22 - Quarter 4, 2023 Update

NSP Initiative Area	Recommendation	Quarter 4, 2023 Update
Mental Health Clinical Programmes - Continue to progress development and implementation of the agreed clinical programmes and new models of care- Mental Health Intellectual Disabilities, and pilot site development for Dual Diagnosis	50, 51, 57	<ul style="list-style-type: none"> • <u>Mental health services for people with an intellectual disability (MHID)</u>: There was ongoing engagement with CHOs to ensure that all possible steps are undertaken in terms of recruitment to strengthen existing MHID community teams. In Quarter 4, 2023, further progress was made with an additional 5.8 WTE posts filled, leaving 7 WTE posts still in recruitment. Two Speech and Language Therapists (SLTs) are currently in post (CHO 7 and CHO 2), while an SLT post was advertised on a number of occasions in CHO 9 with no interested candidate. On that basis, that post was reconfigured and successfully filled in Quarter 4, 2023. While recruitment of 2 WTE Consultant posts will continue, further enhancement of MHID community teams is on hold, as a result of the HSEs current position on recruitment of staff. • As of December 2023, there were 19 adult MHID teams in place with an additional 8 services not yet meeting the criteria of a starter team. Meanwhile, there were 4 CAMHS MHID teams in place with an additional 7 services not yet meeting the criteria of a starter team.

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

⁵The HSE approved the release of 303.7 previously held PFG posts for recruitment in December 2020 of which 229.9 posts are filled as of December 2023. An additional 155.4 posts were allocated as PFG 2021 of which 134.9 posts are filled as of December 2023

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

		<ul style="list-style-type: none"> • <u>Dual Diagnosis</u>: In line with the Model of Care for Dual Diagnosis, initial base locations have been identified and recruitment of teams is underway with 14 WTE posts filled as of December 2023. • The CHO3 and CHO4 sites for adult teams will commence accepting referrals in Quarter 2, 2024. The CHO 9 site (adolescent team) is currently accepting referrals.
Individual Placement Service- Mainstream implementation of the individual placement and support programme	71	<ul style="list-style-type: none"> • Development of 11 Individual Placement Service (IPS) sites are in process. In Quarter 4, 2023, there was a caseload of 385 people across all IPS sites of which 96 are currently in employment. In the past quarter, 55 people exited the IPS programme into employment.
Digital Developments- Implement agreed eMental health digital responses	2, 31	<ul style="list-style-type: none"> • A short term work plan to enhance the management and delivery of existing digital mental health services has been completed for presentation to the NIMC Steering Committee in Quarter 1, 2024. In addition to identifying immediate priorities, this plan will also put in place the foundations for future digital mental health developments. • The national public mental health literacy campaign, 'Making the Connections' is being further developed with a focus on an interactive online tool, providing personalised information and guidance to users. Entitled <i>My Mental Health Plan</i>, this tool has now been user tested, with a view to launch in Quarter 1, 2024 (StV recommendation 2). • Guided online Cognitive Behaviour Therapy (CBT) has been mainstreamed following the agreement of a three-year contract for services with Silvercloud. In Quarter 4, 2023, there were 3,772 referrals into the service and 2,080 activations (representing increases of 26% and 18% respectively on Q3). Mental health outcomes, measured by the PHQ-9 and GAD-7, are reported to the HSE monthly and results remain very positive (StV recommendation 31). <p>Further data analysis is underway to document value for money and the return on investment for guided online CBT.</p>

NSP Initiative Area	Recommendation	Quarter 4, 2023 Update
<p>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.</p>	35	<ul style="list-style-type: none"> • Pilot sites in CHOs 3, 4 and 8 are progressing their implementation plans. • Recruitment of posts across CHO 3, 4 and 8 on hold due to the HSEs temporary pause on staff recruitment. • Monitoring and evaluation plan now in development to incorporate HSE and SJOG Ethics Submission and Data Privacy Impact Assessment.
<p>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</p>	24, 40	<ul style="list-style-type: none"> • Four Crisis Resolution Teams sites operational (CHO 1, CHO 4, CHO 5 and CHO 6) with a fourth site (CHO 3) currently on hold due to HSEs current position on recruitment. • CHO 4 Solace Café operational. CHO 1, 3 and 5 continue to progress community partner arrangements. CHO 6 has identified partner, finalising leasing arrangement and progressing to recruitment of café staff. • Monitoring and evaluation plan now in development to incorporate HSE and SJOG Ethics Submission and Data Privacy Impact Assessment.
<p>Expansion of Community Mental Health Teams Continue development of CAMHS and adult mental health teams in line with implementation priorities under Sharing the Vision</p>	32	<ul style="list-style-type: none"> • Efforts to fill previously approved posts has been impacted by the HSEs current position on recruitment of new staff • The HSEs Mental Health Integrated Care Team is working closely with CHO areas to monitor recruitment progress



Sharing the Vision

A Mental Health Policy for Everyone

Appendix B
Quarter 4, 2023
Recommendation updates

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

Domain 1 Promotion, Prevention and Early Intervention				
	Recommendation	Quarter 4, 2023 Update	Owner	Current status
1 Short	Healthy Ireland already has a remit for improved mental health and wellbeing. To further strengthen this, a dedicated National Mental Health Promotion Plan should be developed and overseen within Healthy Ireland implementation frameworks, with appropriate resourcing. The plan should be based on the principles and scope described in Chapter 2 of Sharing the Vision.	Work continued throughout Quarter 4, 2023, to finalise the National Mental Health Promotion Plan. Cross-government engagement proved more challenging in some areas than expected. Launch has now been postponed until Quarter 1, 2024.	DoH Health and Wellbeing Unit	Minor Delivery Issue
2 Medium	Evidence-based digital and social media channels should be used to the maximum to promote mental health and to provide appropriate signposting to services and supports.	In Quarter 4, 2023, following extensive discussion, drafting and consultation, a Digital Mental Health Work Plan was finalised. This will provide structure and tangible actions for this important area of work in 2024. The proposed plan was presented to the HIG in December, 2023. The HSEs ongoing Mental Health Literacy Campaign on sleep, low mood, stress and anxiety was promoted in October 2023 via radio, digital display and social media. In collaboration with HSE Digital, work continued to update yourmentalhealth.ie, including improved search and find options.	HSE Mental Health Integrated Care Team	On Track

		<p>HSE Communications conducted research in December 2023 on young people accessing mental health supports/services and information on yourmentalhealth.ie, in order to help younger people accessing trusted mental health content. Findings have been shared widely amongst relevant internal stakeholders to inform ongoing work.</p> <p>Proposed questions related to mental health, with a focus on digital supports, were submitted to the DoH for inclusion in the Healthy Ireland Survey.</p>		
3 Short	<p>The Department of Health Women's Health Taskforce and the National Implementation Monitoring Committee will undertake a joint project within 12 months to outline an effective approach to the mental health of women and girls. The project should ensure that mental health priorities and services are gender-sensitive and that women's mental health is specifically and sufficiently addressed in the implementation of policy.</p>	<p>Following on from the Embedding Women's Mental Health in Sharing the Vision – a report by the Women's Mental Health Specialist Group, a position paper for embedding the report's recommendations was presented to the NIMC Steering Committee in Quarter 4, 2023. The paper identified immediate opportunities for progressing recommendations and proposed further work to scope and commission the development of a toolkit. Once complete, this toolkit will be made available to workstreams, policy implementation leads and supporting partners with a view to embed the Women's Mental Health Charter into implementation of StV. The NIMC Steering Committee approved the position paper and associated actions, agreed to the closure of Recommendation 3 and the Specialist Group on Women's Health was dissolved.</p>	<p>DoH Women's Health Taskforce</p>	Completed
4 Short	<p>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.</p>	<p>As a result of industrial action, this action has not progressed in Quarter 4, 2023. Additional information regarding capacity and resourcing needs will be sought from CHOs when industrial action has ceased. A Steering Group for Stronger Together – The HSE Mental Health Promotion Plan 2022 - 2027 with representation from lead partners across the 27 actions meets quarterly to review progress across the plan nationally and locally. However, scheduled meetings in Quarter 3 and 4, 2023, were cancelled as a result of industrial action.</p>	<p>HSE Health and Wellbeing</p>	<p>Major Delivery Issue Upon conclusion of industrial action, engagement to identify capacity and resourcing</p>

		<p>Meanwhile, work is ongoing with lead partners to support delivery of key services across CHOs including Social Prescribing, Minding your Wellbeing, Stress Control, parenting programmes in Sláintecare Healthy Communities, school based mental health promotion programmes.</p> <p>Significant challenges as a result of lack of Health Promotion & Improvement Officers dedicated to mental health promotion continue to impact on capacity to delivery and expansion of services nationally.</p>		needs will recommence
5 Medium	<p>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.</p>	<p>The University of Galway (UoG) have been contracted to conduct a feasibility study to scope how Act Belong Commit could be implemented in the Irish context. A Memorandum of Understanding has been signed with Curtin University in Western Australia for a one year license for the study. The feasibility study will focus on two communities initially – one of which will be a Sláintecare Healthy Communities site. Meath in CHO 8 is one of the two sites, which will be included in the feasibility study.</p> <p>UoG have separately been contracted to conduct a review of community based mental health promotion programmes and identify best practice nationally and internationally. Contract currently being signed with UoG for this five month piece of research.</p>	HSE Health and Wellbeing	On Track
6 Short	<p>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.</p>	<p>Work continued throughout Quarter 4, 2023, to finalise the National Mental Health Promotion Plan. Cross-government engagement proved more challenging in some areas than expected. Launch has now been postponed until Quarter 1, 2024.</p>	DoH Health and Wellbeing Unit	Minor Delivery Issue
7 Medium	<p>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</p>	<p>It has been agreed that this recommendation will be formally referenced in the forthcoming cross-government national mental health promotion strategy. Through both strategies, a business case for the resources required to implement a programme will be sought.</p>	HSE Mental Health Operations	Paused

	strategic plan, with associated outcomes and targets across related strands of work.			
8 Medium	Learning from innovations in improving outcomes for children and young people should be identified and should inform relevant mainstream service provision. This includes learning from prevention and early intervention programmes such as Tusla's Area Based Childhood (ABC) and Prevention, Partnership and Family Support (PPFS) Programme as well as cross-border programmes addressing the impact of Adverse Childhood Experiences (ACEs).	There is requirement to identify an assigned resource from within HSE Disabilities to lead and report on this recommendation. Delivery of this recommendation will be closely coordinated with the HSEs Child & Youth Mental Health Improvement Programme.	HSE Disabilities HSE Primary Care Operations via the Integrated Children's Services Forum	Minor Delivery Issue
9 Medium	All schools and centres for education will have initiated a dynamic Wellbeing Promotion Process by 2023, encompassing a whole-school/centre approach. Schools and centres for education will be supported in this process through the use of the Wellbeing Framework for practice and Wellbeing Resources which have been developed by the Department of Education and Skills	Every school is required to use the School Self Evaluation (SSE) process to initiate a wellbeing promotion review and development cycle by 2025. Schools are being supported via seminars and in-schools supports. In Quarter 4, 2023, 158 applications for support were received from Primary schools (out of a capacity for 225). Post Primary applications will open for booking in December 2023 with capacity for 70 schools. Primary Seminars opened for booking in September 2023 and by December 2023, 90 seminars have taken place. 1676 teacher Continuing Professional Development (CPD) interactions were recorded. Post Primary seminars opened for booking in December 2023 with 17 seminars scheduled to run in January/February 2024.	Department of Education	On Track
10 Medium	A protocol should be developed between the Department of Education and Skills and the HSE on the liaison process that should be in place between primary/post-primary schools, mental health services and supports such as NEPS, general	As part of a meeting held in November 2023, feedback and suggested changes on the draft protocol were considered. A 'Referral Pathway' Diagram similar to those in the 2017 HSE Joint Working Protocol for Primary Care, Disability and Child and Adolescent Mental Health Services was agreed as a good solution for developing a coherent policy with	Department of Education Department of Health	On Track

	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	agreed referral pathways between services. A further meeting is scheduled for January 2024.		
11 Medium	The National Mental Health Promotion Plan integrated with the Healthy Workplace Framework should incorporate actions to enhance the mental health outcomes of the working-age population through interventions aimed at mental health promotion in the workplace. This should consider environmental aspects of the working environment conducive to supporting positive mental health and wellbeing.	Work continued throughout Quarter 4, 2023, to finalise the National Mental Health Promotion Plan. Cross-government engagement proved more challenging in some areas than expected. Launch has now been postponed until Quarter 1, 2024.	Department of Health Healthy Ireland	Minor Delivery Issue
12 Short	A range of actions designed to achieve the goals of the National Positive Ageing Strategy for the mental health of older people should be developed and implemented, supported by the inclusion of mental health indicators in the Healthy and Positive Ageing Initiative's research programme	<p>On 14 December 2023 the Minister for Health Stephen Donnelly and Minister for Mental Health and Older People Mary Butler announced the appointment of Professor Alan Barrett, Chief Executive Officer of the Economic and Social Research Institute, as the Chairperson of the Commission on Care for Older People.</p> <p>Before the formal commencement of the Commission of Care for Older People and as part of the preparatory phase, the DoH is seeking to engage research services for a 12-month period to provide support to the Commission throughout modules 1 (Current Services and Learnings for the Future) and 2 (Options for the Future). The work of the Commission will be comprised of three modules, which will be undertaken consecutively. A tender for these research services is currently live and due to close in Quarter 1, 2024.</p>	Older People Strategy Unit Department of Health	Minor Delivery Issue

Domain 2 Service access, Coordination and Continuity of care				
	Recommendation	Quarter 4, 2023 Update	Owner	Current status
13 Short	Directories of information on VCS supports should be provided to staff working in primary care and CMHTs to ensure they are aware of and inform service users and FCS about all supports available including those from Voluntary and Community Sector organisations in the local area	The directory for GP practices, featuring mental health supports from HSE funded partners, has been finalised and is now accessible on the Connecting for Life website . Plans are underway to arrange for the distribution of the directory and for adapting it as a resource for Community Mental Health Teams. Collaborative efforts continue with HSE Digital to enrich content related to supports and services on YourMentalHealth.ie .	HSE Mental Health Integrated Care Team Primary Care	On Track
14 Medium	Where Voluntary and Community Sector organisations are providing services aligned to the outcomes in this policy, operational governance and funding models should be secure and sustainable	Meetings were held between the HSE and each HSE funded organisation providing Mental Health supports and services as part of the end of year reviews. Activities taken place in 2023 and priorities for 2024 were reviewed, ensuring that StV priorities are reflected in the annual work plans.	HSE Mental Health Operations National Office for Suicide Prevention	On Track
15 Short	Social prescribing should be promoted nationally as an effective means of linking those with mental health difficulties to community-based supports and interventions, including those available through local Voluntary and Community Sector supports and services.	A pilot of wellbeing and community connectedness measurement tools is underway across a number of HSE-funded social prescribing services. Conducted by Trinity College Dublin on behalf of the HSE, this study will inform a decision on the most appropriate measures for use across all Social Prescribing services. Data collection has commenced in three CHOs with training provided to participating social prescribing link workers in Quarter 4, 2023. In parallel, the University of Galway was awarded an 18 month research contract to conduct an evaluation of HSE-funded social prescribing services. The aim of the study is to understand how social prescribing	HSE Health and Wellbeing	Minor Delivery Issue

		<p>works in an Irish context, for whom it works and under what circumstances.</p> <p>A bid for additional funding in 2024 to mainstream three existing social prescribing services, develop a national software solution and ensure appropriate salary remuneration for social prescribing link worker was unsuccessful. The issue of remuneration for social prescribing link workers presents particular risks in terms of ensuring retention of skilled workers. In order to mitigate potential impact on service provision, there will be planned engagements in Quarter 1, 2024, with each of the funded host organisations for social prescribing.</p>		
<p>16 Medium</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>Informed by a mapping of current talk therapy offerings and a review of recent evaluations of existing services, significant progress was made on the development of a principles paper for a layered care talk therapy service model for those experiencing mild to moderate mental health difficulties. As part of this work, consideration has been given to an applied definition of talk therapy, eligibility to deliver talk therapies, and alignment with relevant models of care.</p> <p>The qualifications and professional accreditations/registrations identified will provide assurance that the approaches and interventions being used have the required evidence base, and therefore are considered safe and effective. It is intended that the particular approach or intervention used by a service provider will be chosen based on assessment and formulation, and will reflect the preferences, unique circumstances and experiences of the service user. The agreed standards and principles that the paper will include will provide the basis for the future evaluation, approval and monitoring of service providers, on both an organisational and individual basis.</p> <p>In parallel, work continued to support the rollout of online guided CBT via the SilverCloud suite of programmes from Amwell. This included a service improvement workshop in November 2023 and exploring possible</p>	<p>HSE Primary Care</p>	<p>Minor Delivery Issue</p>

		additional programmes related to sleep, perinatal mental health and young people's mental health.		
17 Short	The mental health consultation/liaison model should continue to be adopted to ensure formal links between CMHTs and primary care with the presence of, or in-reach by, a mental health professional as part of the primary care team or network.	Research to establish the evidence base and best practice examples of shared care between primary care and specialist mental health services, including implementation of the consultation - liaison model, has been completed. A report summarising research findings is currently being formatted, which will inform the approach to delivery of recommendations 17 and 19. The report will incorporate a number of case studies and highlight common barriers and enablers for promoting the shared care approach.	HSE Primary Care Mental Health Operations	On Track
18 Short	An implementation plan should be developed for the remaining relevant recommendations in <i>Advancing the Shared Care Approach between Primary Care and Specialist Mental Health Services (2012)</i> in order to improve integration of care for individuals between primary care and mental health services in line with emerging models and plans for Community Health Networks and Teams.	Building on an analysis of implementation of the Advancing the shared care approach (2012) report , a draft shared care implementation plan has been developed, as a basis for consultation with relevant stakeholders and proposed action owners. In Quarter 4, 2023, a focus group was arranged with members of the National Co-Production Panel in order to appropriately reflect lived experience in the implementation of the shared care approach. Arrangements have also been made for the establishment of a consultative forum with the relevant professional bodies. Once the final outstanding stakeholder engagement events have concluded, a final shared care implementation plan will be produced and shared for consideration.	HSE Primary Care Mental Health Operations	On Track
19 Short	The physical health needs of all users of specialist mental health services should be given particular attention by their GP. A shared care approach is essential to achieve the best outcomes.	In collaboration with a multi-disciplinary shared care working group, work is underway to draft a discussion paper on shared physical healthcare between primary care and specialist mental health services. Once finalised, this discussion paper will provide a starting point for engagement with the relevant stakeholders. As outlined under the update for recommendation 17, research to establish the evidence base and best practice examples of shared care between primary care and specialist mental health services, has been completed. A report	HSE Community Operations Primary Care Mental Health Operations	On Track

		summarising research findings is currently being formatted, which will inform the approach to delivery of recommendations 17 and 19. The report will incorporate a number of case studies and highlight key learnings, including commonly reported barriers and enablers for promoting the shared care approach.		
20 (a) Medium	There should be further development of early intervention and assessment services in the primary care sector for children with ADHD and autism to include comprehensive multi-disciplinary and paediatric assessment and mental health consultation with the relevant community mental health team where necessary. (ADHD Only)	Funding has been granted for a temporary post to support the office of the NCAGL for mental health to develop a Model of Care for Children and young people with ADHD. A candidate has been identified from within a CHO for the position and in Quarter 4, 2023, work was undertaken to address the backfill of this candidate's permanent post. This has now been resolved and the Clinical Lead is due to commence in Quarter 1, 2024. Once the person has taken up post, consideration will be given to service demand and required enhancements, as part of the development of the Model of Care.	HSE Primary Care Mental Health Operations Disabilities National Clinical Programmes	Minor Delivery Issue
20 (b) Medium	There should be further development of early intervention and assessment services in the primary care sector for children with ADHD and autism to include comprehensive multi-disciplinary and paediatric assessment and mental health consultation with the relevant CMHT where necessary. (Autism Only)	Progress to pilot an autism assessment and intervention protocol has been significantly impacted by the industrial action that is presently occurring across the HSE. While there has been ongoing use of the newly developed Autism Assessment Tool nationally by those CHOs that have already adopted it, additional deployment to other CHOs has been significantly limited compared with what was originally planned. The issue of industrial action has also limited the project's ability to carry out the planned phase 2 evaluation of the tool as the project has not been able to give the external evaluators access to the data from the 120 assessments completed so far. In response, dialogue is underway with relevant stakeholders in the hope of overcoming this issue so that an exception plan could be developed to keep the project moving. However, it has not been possible to reach an agreement to date, and as a result, forecast when these planned tasks will be achieved.	HSE Primary Care Mental Health Operations Disabilities	Major Delivery Issue

<p>21 Medium</p>	<p>Dedicated community-based Addiction Service Teams should be developed/enhanced with psychiatry input, as required, and improved access to mental health supports in the community should be provided to individuals with co-existing low-level mental health and addiction problems.</p>	<p>A draft position paper was prepared with input from colleagues involved in the National Clinical Programme for Dual Diagnosis, in order to determine the most effective approach for delivering this recommendation. Further work will be undertaken in Quarter 1, 2024, to assess how implementation of the Model of Care for Dual Diagnosis Services and the Strategic Action Plan for the National Drugs Strategy 2023-2024 can contribute to the delivery of recommendation 21.</p>	<p>HSE</p>	<p>Minor Delivery Issue</p>
<p>22 Short</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>Findings in the audit report of assessment rooms in Emergency Departments (EDs) were reviewed and validated by the Clinical Lead and Nurse Lead for the National Clinical Programme for Self-Harm and Suicide Related Ideation. This involved phoning individual services and assessing rooms during onsite visits. The completed audit report was subsequently submitted to the HSEs Chief Clinical Officer and approved. In addition, a paper has been prepared summarising the audit results, which will be submitted to the Irish Journal of Psychological Medicine in Quarter 1, 2024.</p> <p>The audit report found that eight EDs do not have a dedicated room in line with agreed standards. This impacts on quality of care delivered to service users who require a mental health assessment. In order to mitigate, the Clinical Lead and Nurse Lead for the National Clinical Programme are engaging directly with the relevant hospital groups to ensure improvement plans are in plans. Progress is being to address deficits in five of these EDs with the remaining three posing significant challenges.</p>	<p>HSE Acute Hospitals Department of Health Clinical Programmes (Self Harm)</p>	<p>Minor Delivery Issue</p>
<p>23 Medium</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>The National Clinical Programme for Self-Harm and Suicide Related Ideation hosted a two day training and education event in Dublin, which was attended by 70+ clinicians. A calendar of online training seminars was developed for all clinicians delivering the programme and a 5-year</p>	<p>HSE Clinical Programmes (Self Harm)</p>	<p>Minor Delivery Issue</p>

		<p>report covering data for each service is being finalised for circulation in Quarter 1, 2024.</p> <p>Clinicians completed training in Dialectical Behavioural Therapy modules 1 (20) & 2 (17), Train the Trainer (12) and Self-Harm Assessment and Management programme for General Hospitals (3)</p> <p>Nurse Lead presented at the Office of the Nursing and Midwifery Services Director (ONMSD) Mental Health Nursing Conference in November 2023</p> <p>Clinical Lead presented at the HSE Clinical Design conference in November</p>		
24 Short	Out-of-hours crisis cafes should be piloted and operated based on identified good practice. Such cafes should function as a partnership between the HSE and other providers/organisations.	<p>Following appointment of an external consultant to facilitate evaluation of Crisis Resolution Services (incorporating both Crisis Resolution Teams and Solace Cafés), the development of a monitoring and evaluation plan is now underway. As part of this process, an Evaluation Advisory Group has been established and a first meeting held. A submission for ethical approval is also being drafted.</p> <p>Ongoing support provided to learning sites to progress recruitment of Crisis Resolution Teams and to progress partnership arrangements, in order to establish crisis cafés.</p> <p>The Crisis Resolution Team in Sligo/Leitrim received a 2023 HSE Excellence award and were requested to present at a Sláintecare webinar.</p>	HSE Mental Health Integrated Care Team	On Track
25 Medium	The multi-disciplinary CMHT as the cornerstone of service delivery in secondary care should be strengthened through the development and agreed implementation of a shared governance model.	This recommendation will be progressed through a dedicated mental health services workstream, which has been tasked with delivering a thematic set of policy recommendations. In Quarter 4, 2023, the workstream completed a review of all recommendations under its remit and their prioritisation according to complexity, dependencies, and estimated timeframes. As recommendation 25 resonates with priorities for the HSEs Child & Youth Mental Health Improvement Programme,	HSE MH Integrated Care Team	On Track

		initial discussions has taken place with the HSEs Office for Child and Youth Mental Health regarding implementation. A survey to all Community Mental Health Teams is being planned for Quarter 1, 2024, which will incorporate information relating to this policy recommendation		
26 Medium	CMHTs' outreach and liaison activities with VCS partners in the local community should be enhanced to help create a connected network of appropriate supports for each service user and their FCS.	A draft guidance document to support collaborative working between statutory mental health services and community/voluntary sector partners was shared with stakeholders for comment. Ensuring a positive impact for service users, family members/carers and supporters is central to all actions within this guidance document. Consideration will be given to the 'Triangle of Care' model, as proposed by the Reference Group.	HSE Mental Health Engagement and Recovery	On Track
27 Medium	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.	This recommendation is delivered by the HIG's Mental Health Engagement and Recovery Workstream in collaboration with a working group, which includes people with lived experience. The working group have met twice in Quarter 4, 2023, to progress the development of a policy for co-production of recovery focused care plans with further meetings scheduled in Quarter 1, 2024. This will involve drafting a Standard Operating Procedures document, which can be adopted by Community Mental Health Teams across HSE regions.	HSE Mental Health Engagement and Recovery	Minor Delivery Issue
28 Short	All service users should have a mutually agreed key worker from the CMHT to facilitate coordination and personalisation of services in line with their co-produced recovery care plan.	Along with other policy recommendations, this recommendation will be progressed as part of an integrated work programme, reflecting the different stages in the service user journey. In Quarter 4, 2023, a dedicated working group was established and tasked with reviewing an existing framework for the 'Service user's journey through General Adult Community Mental Health Teams (2020)' and bringing it in line with StV. This framework document is an output from a previous service improvement project. A revised draft has been completed and has been shared with stakeholders for comment, while work to develop an associated implementation guide and checklist has commenced.	HSE Mental Health Operations	On Track

<p>29 Short</p>	<p>Further training and support should be put in place to embed a recovery ethos among mental health professionals working in the CMHTs as well as those delivering services elsewhere in the continuum of services.</p>	<p>Following a pilot run through of the training workshop, the working group has agreed on all changes and final edits to content and graphic design have been made. The workshop carries four Continuous Professional Development (CPD) points endorsed by the Nursing and Midwifery Board of Ireland, College of Psychiatrists of Ireland. Members of CORU follow the assigned protocols for acquisition of CPD points. This workshop does not hold a mandatory status, however, some areas designate the workshop as highly recommended.</p>	<p>HSE Mental Health Engagement and Recovery</p>	<p>Minor Delivery Issue</p>
<p>30 Medium</p>	<p>CMHTs and sessional contacts should be located, where possible and appropriate, in a variety of suitable settings in the community, including non-health settings</p>	<p>This recommendation is being progressed in collaboration with a dedicated working group, which includes lived experience. In Quarter 4, 2023, a mapping template was circulated for completion by Community Mental Health Teams in order to gather information on the use of non-mental health community-based facilities, integration with Primary Care and infrastructure.</p> <p>The Working Group is currently awaiting remaining returns, some of which are delayed as a result of current industrial action.</p>	<p>HSE Mental Health Engagement and Recovery Mental Health Operations</p>	<p>Minor Delivery Issue</p>
<p>31 Medium</p>	<p>The potential for digital health solutions to enhance service delivery and empower service users should be developed.</p>	<p>In Quarter 4, 2023, following extensive discussion, drafting and consultation, a Digital Mental Health Work Plan was finalised. This will provide structure and tangible actions for this important area of work in 2024. The proposed plan was presented to the HIG in December, 2023.</p> <p>A business case proposal for the Organisation for the Review of Care and Health Apps (ORCHA) was jointly developed by the Digital Health Clinical Safety Lead and Mental Health Operations, for the deployment of an app baseline review, formulary and library to support digital mental health services on a 'proof-of-concept' basis for the Irish health system.</p> <p>The interactive guidance and signposting tool 'My Mental Health Plan' is undergoing final quality assurance and accessibility tasks, with the intention to go live in Quarter 1, 2024.</p> <p>Additional online guided CBT programmes in the areas of sleep and perinatal mental health have been evaluated. Also under consideration</p>	<p>HSE MH Integrated Care Team</p>	<p>On Track</p>

		is the potential use of programmes for young people in partnership with a voluntary sector organisation.		
32 Medium	The composition and skill mix of each CMHT, along with clinical and operational protocols, should take into consideration the needs and social circumstances of its sector population and the availability of staff with relevant skills. As long as the core skills of CMHTs are met, there should be flexibility in how the teams are resourced to meet the full range of needs, where there is strong population-based needs assessment data.	<p>This recommendation will be progressed through a dedicated mental health services workstream, which is supported by a dedicated project management resource. In Quarter 4, 2023, the workstream has completed a review of all recommendations under its remit and their prioritisation according to complexity, dependencies, and estimated timeframes. A survey to all Community Mental Health Teams is being planned for Quarter 1, 2024, which will incorporate information relating to this policy recommendation.</p> <p>In Quarter 4, 2024, the Steering Group for the Model of Care for adults accessing talk therapies while attending specialist mental health services met with staff from each of the demonstration sites to receive an update and identify local success and challenges. In addition, the Steering Group met with the National Suicide Research Foundation to discuss the report arising from the first phase of their research. These engagements will inform a new approach to the implementation of the Model of Care that will cover the following areas: National and local structures; training and supervision; monitoring and evaluation; recruitment and resourcing; other supports required. This approach will take account of the fact that the submission for a dedicated resource made as part of the estimates process in 2023 was unsuccessful.</p>	HSE MH Integrated Care Team	On Track
33 Medium	The shared governance arrangements for CMHTs as outlined in AVFC 2006–16 should be progressed, including further rollout of Team Coordinators.	This recommendation will be progressed through a dedicated mental health services workstream, which is supported by a dedicated project management resource. In Quarter 4, 2023, the workstream has completed a review of all recommendations under its remit and their prioritisation according to complexity, dependencies, and estimated timeframes. This will inform development of a detailed work plan.	HSE Mental Health Operations	On Track

<p>34 Medium</p>	<p>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</p>	<p>Along with other policy recommendations, this recommendation will be progressed as part of an integrated work programme, reflecting the different stages in the service user journey. In Quarter 4, 2023, a dedicated working group was established and tasked with reviewing an existing framework for the ‘Service user’s journey through General Adult Community Mental Health Teams (2020)’ and bringing it in line with StV.</p> <p>This framework document is an output from a previous service improvement project.</p> <p>A revised draft has been completed and has been shared with stakeholders for comment, while work to develop an associated implementation guide and checklist has commenced. If applied in practice by services, this will achieve the requirements of this recommendation. It is expected that rollout will begin in Quarter 4, 2024.</p> <p>The document does not currently address the issue of referral agents and broadening the range of health professionals who can make a referral. This issue will be considered in a final draft that will issue for wider consultation.</p>	<p>HSE Mental Health Operations</p>	<p>On Track</p>
<p>35 (a) Short</p>	<p>A comprehensive specialist mental health out-of-hours response should be provided for children and adolescents in all geographical areas. This should be developed in addition to current ED services.</p>	<p>Providing a comprehensive specialist mental health out of hour’s service will require additional investment to support recruitment of staff and delivery of on-call services. This presents a significant service improvement programme, which cannot be fully completed within the assigned short-term timeframe for delivery. Following escalation and engagement with the HIG, it has been agreed that this recommendation will be led by the HSEs Child and Youth Mental Health Office and considered as part of the HSEs Child and Youth Mental Health Improvement Programme. As part of this process, detailed implementation planning will be undertaken, which will provide greater clarity in how to achieve the outcomes associated with the recommendation.</p>	<p>HSE Mental Health Integrated Care Team</p>	<p>Major Delivery Issue Will be considered as part of the HSEs Child and Youth Mental Health Improvement Programme</p>

<p>35 (b) Short</p>	<p>A comprehensive specialist mental health out-of- hours response should be provided for children and adolescents in all geographical areas. This should be developed in addition to current ED services.</p>	<p>In line with the Model of Care for CAMHS Hubs, continued progress was made in the first part of Quarter 4, 2023, on recruitment for CAMHS Hubs Teams with 2 pilot sites complete (CHOs 2 and 6). However, the HSEs temporary pause on staff recruitment has delayed commencement of operations in the remaining 3 sites (CHOs 3, 4 and 8).</p> <p>Following a procurement process, an independent evaluation team was contracted to undertake an evaluation of the CAMHS Hub pilot learning sites. Facilitated by this team, plans for conducting this evaluation were progressed in Quarter 4, 2024.</p>	<p>HSE Mental Health Integrated Care Team</p>	<p>Minor Delivery Issue</p>
<p>36 Short</p>	<p>Appropriate supports should be provided for on an interim basis to service users transitioning from CAMHS to General Adult Mental Health Services (GAMHS). The age of transition should be moved from 18 to 25 and future supports should reflect this</p>	<p>The Youth Mental Health Specialist Group finalised a plan for 'Transforming Youth Mental Health Services in Ireland: A New Model', which includes recommendations for the provision of age-appropriate specialist mental health services up to age 25. This brought conclusion to a work plan, overseen by NIMC, which included stakeholder mapping, academic engagement in commissioned research, multiple consultation events and a co-production approach with young people.</p> <p>The 'Enhanced Transition Plan' also developed by the Specialist Group was reviewed by the designated implementation lead, the Child and Youth Mental Health Office, in Quarter 4, 2023, in order to assess how to best operationalise the recommendations contained in this report. Informed by the wider service improvement programme for child and youth mental health, and by the short-term timelines for implementation, adjustments were made to the implementation plan.</p> <p>The reconfiguration plan and plan for enhanced transitions between CAMHS and adult mental health services will be presented to the NIMC in Quarter 1, 2024 and incorporated as part of the HSEs Child and Youth Mental Health Improvement Programme.</p>	<p>HSE Mental Health Operations Department of Health</p>	<p>On Track</p>

<p>37 Short</p>	<p>Nationally agreed criteria should be developed to govern and resource individualised support packages for the specific needs of a small cohort of children and young people who have complex needs.</p>	<p>Delivery of this recommendation will be closely coordinated with the HSEs Child & Youth Mental Health Improvement Programme. In order to progress its delivery, there is requirement to identify an assigned resource from within HSE Disabilities that can engage with the HSEs Office for Child and Youth Mental Health as appropriate.</p>	<p>HSE Mental Health Operations Disabilities</p>	<p>Minor Delivery Issue</p>
<p>38 Short</p>	<p>In the exceptional cases where child and adolescent inpatient beds are not available, adult units providing care to children and adolescents should adhere to the CAMHS inpatient Code of Governance.</p>	<p>Building on the recently completed HSE Internal Audit of compliance with the Mental Health Commission Code of Practice Relating to Admission of Children, level of assurance provided following that audit, and submission of documentation, the NIMC approved completion of recommendation 38. There has been a significant reduction in the number of child admissions to adult units as part of a continuing downward trend over a number of years.</p> <p>HSE Internal Audit applies a pre-determined methodology, as well as a standardised description of how outcomes are reported and the terminology used to measure said outcomes (e.g. 'satisfactory', 'not satisfactory'). The findings and recommendations as contained within the final audit report have been actioned and implemented fully by the identified action owner.</p>	<p>HSE Mental Health Operations</p>	<p>Completed</p>
<p>39 Short</p>	<p>The HSE should consult with service users, FCS, staff, and those supporting priority groups to develop a standardised access pathway to timely mental health and related care in line with the individuals' needs and preferences.</p>	<p>Along with other policy recommendations, this recommendation will be progressed as part of an integrated work programme, reflecting the different stages in the service user journey. In Quarter 4, 2023, a dedicated working group was established and tasked with reviewing an existing framework for the 'Service user's journey through General Adult Community Mental Health Teams (2020)' and bringing it in line with StV. This framework document is an output from a previous service improvement project, which was informed through an extensive consultation process with service users, family members and carers/supporters, as well as with staff working in community mental health services.</p>	<p>HSE Mental Health Engagement and Recovery</p>	<p>Minor Delivery Issue</p>

		A revised draft has been completed and has been shared with stakeholders for comment, while work to develop an associated implementation guide and checklist has commenced. If applied in practice by services, this will achieve the requirements of this recommendation. It is expected that rollout will begin in Quarter 4, 2024.		
40 Medium	Sufficient resourcing of home-based crisis resolution teams should be provided to offer an alternative response to inpatient admission, when appropriate.	<p>Following appointment of an external consultant to facilitate evaluation of Crisis Resolution Services (incorporating both Crisis Resolution Teams and Solace Cafés), the development of a monitoring and evaluation plan is now underway. As part of this process, an Evaluation Advisory Group has been established and a first meeting held. A submission for ethical approval is also being drafted.</p> <p>Ongoing support provided to learning sites to support implementation. Four out of five Crisis Resolution Teams are now operational. CHO 3 is particularly affected by the HSEs current position on recruitment of staff.</p>	HSE Mental Health Integrated Care Team	On Track
41 Medium	A Standard Operating Guideline should be developed to ensure that sufficiently staffed day hospitals operate as effectively as possible as an element of the continuum of care and as an alternative to inpatient admission.	This recommendation will be progressed through a dedicated mental health services workstream, which has been tasked with delivering a thematic set of policy recommendations. In Quarter 4, 2023, the workstream completed a review of all recommendations under its remit and their prioritisation according to complexity, dependencies, and estimated timeframes. The HSEs Mental Health Engagement and Recovery Office (MHER) is also supporting the implementation of this specific recommendation and in Quarter 4, 2023, MHER worked with regional services to assess the range of day services available across the country.	HSE Mental Health Integrated Care Team	On Track
42 Short	Individuals who require specialist Mental Health Services for Older People (MHSOP) should receive that service regardless of their past or current mental health history. People with early onset dementia should also have access to MHSOP.	The Implementation Oversight Group (IOG) for the Model of Care for Specialist Mental Health Services for Older People continues to meet regularly with 3 meetings held to date. The IOG and the National Clinical Advisor and Group Lead for Mental Health will require additional programme management resource(s) to lead the implementation of the Model of Care, including devising and delivering a programme of work. The acquisition of such resource(s) is currently constrained by the HSEs	Clinical Care Programme for Mental Health Services for Older People / HSE Mental	Paused

		position on the recruitment of new staff. This recommendation is placed on pause until such resources are in place and a work plan can be devised. Consideration is being to request the timeframe for delivery is changed to medium-term in line with the expected timeline for delivering on this recommendation.	Health Integrated Care Team	
43 Short	The age limit for MHSOP should be increased from 65 years to 70 years supported by joint care arrangements between GAMHS and MHSOP teams for individuals who require the expertise of both.	<p>Recommendations 42 and 43 both require additional programme management resource(s). The acquisition of such resource(s) is currently constrained by the HSEs position on the recruitment of new staff. This recommendation is placed on pause until such resources are in place and a work plan can be devised.</p> <p>The implementation lead have engaged with the HIG on the implications of increasing the age limit from 65 to 70 and further discussions are scheduled to take place. Consideration is being to request the timeframe for delivery is changed to medium-term in line with the expected timeline for delivering on this recommendation.</p>	Clinical Care Programme for Mental Health Services for Older People / HSE Mental Health Integrated Care Team	Paused
44 Short	GPs, mental health service prescribers and relevant stakeholders should collaborate to actively manage polypharmacy.	Following engagement with the HSEs National Clinical Lead for Integrated Care, National Clinical Group Leads for Mental Health and Primary Care and with Public Health, it has been agreed to form a dedicated group with senior clinical representation to progress this complex, but critical recommendation. To that end, terms of reference and proposed membership have been drafted and are currently under consideration. It is expected this group will oversee an evidence review to establish how to best address polypharmacy and the development of a plan detailing specific actions and named leads within the HSE.	HSE	Minor Delivery Issue
45 Medium	HSE should collate data on the number and profile of delayed discharges in acute mental health inpatient units and develop appropriately funded responses.	This recommendation will be progressed through a dedicated mental health services workstream, which has been tasked with delivering a thematic set of policy recommendations. In Quarter 4, 2023, the workstream completed a review of all recommendations under its remit and their prioritisation according to complexity, dependencies, and estimated timeframes	HSE Mental Health Operations	On Track

		The work plan for this recommendation will be informed by current local practices in monitoring and managing delayed discharges and the group will be guided by a local CHO representative in this regard. The workstream group will also consider how to incorporate the lived experience of service users, family members and carers/supporters in the implementation of this recommendation.		
46 Short	An Expert Group should be set up to examine Acute Inpatient (Approved Centre) bed provision (including PICUs) and to make recommendations on capacity reflective of emerging models of care, existing bed resources and future demographic changes, with such recommendations being aligned with Sláintecare.	This recommendation will be progressed through a dedicated mental health services workstream. Work will be undertaken to prioritise its completion with the report prepared by the Acute Bed Capacity Group formally submitted to the HSE's Mental Health Capital Planning Group for their consideration. The Capital Planning Group was established by the HSE's Chief Operating Officer to develop a costed and time bound plan for mental health facilities to address key priorities over an initial three-year period and to review and prioritise capital commitments in the medium term.	HSE Mental Health Operations	On Track
47 Long	Sufficient PICUs should be developed with appropriate referral and discharge protocols to serve the regions of the country with limited access to this type of service.	This recommendation will be progressed through a dedicated mental health services workstream, which has been tasked with delivering a thematic set of policy recommendations. In Quarter 4, 2023, the workstream completed a review of all recommendations under its remit and their prioritisation according to complexity, dependencies, and estimated timeframes. As part of this process, it has been decided that this recommendation will remain paused, taking into consideration its long-term timeframe for delivery.	HSE Mental Health Operations	Paused
48 Short	A cross-disability and mental health group should be convened to develop national competence in the commissioning, design and provision of intensive supports for people with complex mental health difficulties and intellectual disabilities and to develop a set of criteria to govern the provision of this service.	The National Placement Oversight and Review Team (NPORT) continues to work with people with intellectual disabilities who have complex needs and are reviewing day service provision and day opportunities. In Quarter 4, 2023, a Placement Improvement Group (PIG) was established, and has met twice. A joint initiative between disability services and mental health services, the PIG will have a particular focus on out of area	HSE Mental Health and Intellectual Disability Clinical Care Programme	On Track

		placements and will also examine service provision for people with intellectual disabilities.		
49 Long	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 recommendation will be progressed through a dedicated mental health services workstream, which has been tasked with delivering a thematic set of policy recommendations. In Quarter 4, 2023, the workstream completed a review of all recommendations under its remit and their prioritisation according to complexity, dependencies, and estimated timeframes. As part of this process, it has been decided that this recommendation will be prioritised as part of successor StV implementation plans, taking into consideration its long-term timeframe for delivery.	HSE Mental Health Operations Mental Health Engagement and Recovery	Not Yet Started Long Term Recommendation
50 Medium	The development of a national network of MHID teams and acute treatment beds for people of all ages with an intellectual disability should be prioritised.	As part of ongoing efforts to recruit additional staff to strengthen Mental Health Intellectual Disability (MHID) community teams, recruitment of previously approved Consultant posts continue. However, work to fill further multi-disciplinary posts is currently on hold, as a result of the HSEs position on the recruitment of new staff. There is continuing engagement with the NCAGL – Mental Health to mitigate the impact of this implementation problem.	HSE	Paused
51 Medium	Speech and Language Therapists should be core members of the Adult-ID and CAMHS-ID teams.	As part of ongoing efforts to recruit additional staff to strengthen Mental Health Intellectual Disability (MHID) community teams, two Speech and Language Therapists (SLTs) are currently in post (CHO 7 and CHO 2), while an SLT post was advertised on a number of occasions in CHO 9 with no interested candidate. On that basis, that post was reconfigured and successfully filled in Quarter 4, 2023. As there is no additional funding available in 2024, no further recruitment is currently planned. This recommendation is placed on pause until such resources are in place and a work plan can be devised.	HSE Mental Health Operations Disability	Paused

<p>52 Long</p>	<p>Investment in the implementation of the Model of Care for Early Intervention Psychosis (EIP), informed by an evaluation of the EIP demonstration sites, should be continued.</p>	<ul style="list-style-type: none"> • The HSE Quality Improvement Team delivered an in person workshop with all five EIP teams, including on methodologies for implementing service improvements. • A business case for a National Clinical Audit of Psychosis was signed off and submitted to the HSE National Steering Group for Clinical Audit. The Early Intervention in Psychosis (EIP) teams are registered to participate in this international audit again in 2024. • A national EIP network webinar was successfully delivered in collaboration with the Irish Psychosis Research Network 150+ clinicians from across the country attending. • While no additional funding was received for new EIP teams in 2024, 3 WTE addiction workers were funded for CHO 1, 6 and 4 from the Social Inclusion budget. • Confirmation awaited on potential recurring funding for a CAMHS/ Youth Psychosis service, which in 2023 received funding from the Women’s Health Fund • Further discussions with unions on EIP Key Worker grade code were delayed due to FORSA industrial action. • Insufficient funding for new EIP teams, programme management support, training and education presents a risk for the continued implementation of the National Clinical Programme. The Clinical Lead continues to engage with the NCAGL – Mental Health to mitigate the impact of this risk to implementation. 	<p>HSE Early Intervention in Psychosis Clinical Care Programme</p>	<p>Major Delivery Issue Clinical Lead continues to engage with the NCAGL – Mental Health to mitigate impact of risk to implementation</p>
<p>53 (a) Medium</p>	<p>The National Mental Health Clinical Programmes for Eating Disorders, Adults with ADHD and the Model of Care for Specialist Perinatal Mental Health Services should continue to have phased implementation and evaluation.</p>	<ul style="list-style-type: none"> • There are currently ten operational Eating Disorder teams (5 CAMHS and 5 Adult), however, not yet to the full requirements of the Model of Care for Eating Disorder Services. Further work to fill funded posts is currently on hold, as a result of the HSEs position on the recruitment of new staff. • In collaboration with Bodywhys, significant progress has been made on the establishment of a reference group for people with lived experience of an eating disorder. Bodywhys has received a large 	<p>HSE Clinical Care Programme (for Eating Disorders)</p>	<p>Major Delivery Issue Clinical Lead continues to engage with the NCAGL – Mental Health to mitigate impact</p>

		<p>number of applications to join the reference group, which will be convened in Quarter 1, 2024.</p> <ul style="list-style-type: none"> • Planning is underway for an online Eating Disorders Conference as part of Eating Disorders Awareness Week. • Continued delivery of training in line with recommendations in the Model of Care • Data collection from services continues with a report on activity up to Quarter 3, 2023, prepared and presented to the teams. • Insufficient funding for new ED teams, programme management support, training and education, and lack of suitable premises, present risks for further implementation of the National Clinical Programme. The Clinical Lead continues to engage with the NCAGL – Mental Health to mitigate the impact of these risks to implementation. 		of risk to implementation
53 (b) Medium	The National Mental Health Clinical Programmes for Eating Disorders, Adults with ADHD and the Model of Care for Specialist Perinatal Mental Health Services should continue to have phased implementation and evaluation.	<ul style="list-style-type: none"> • In addition to the existing five operational adult ADHD teams, a sixth partial service commenced in Quarter 4, 2023 (CHO 7). The decision to proceed with a partial service in this CHO should be seen within the context of the HSEs current position to pause further staff recruitment. • A full-time consultant post for Kerry/West Cork was submitted to the Consultant Applications Advisory Committee and is due to be considered in Quarter 1, 2024. • Progress has been made on a referral triage process, which has included distribution of a GP referral form by Primary Care Network Managers across three CHO areas. • Work continuing on activity data refinement with up-date now completed and new format in use. • The HSEs pause on further recruitment is, alongside inadequate programme management support, unexpected high referral rates, lack of data collection system and access to suitable premises, 	HSE Clinical Programme (for ADHD)	Major Delivery Issue Clinical Lead continues to engage with the NCAGL – Mental Health to mitigate impact of risk to implementation

		presenting risks for further implementation of the National Clinical Programme. The Clinical Lead continues to engage with the NCAGL – Mental Health to mitigate the impact of these risks to implementation.		
53 (c) Medium	The National Mental Health Clinical Programmes for Eating Disorders, Adults with ADHD and the Model of Care for Specialist Perinatal Mental Health Services should continue to have phased implementation and evaluation.	<ul style="list-style-type: none"> Following approval of funding for a feasibility study of plan to develop Elm Mount Unit at St. Vincent’s University Hospital, an outline plan has been developed for the proposed Mother and Baby Unit. This plan will involve building a third floor onto Elm Mount Unit. A full feasibility report is currently being finalised. A Patient Perinatal Mental Health App is currently in development in collaboration with a private contractor. In order to inform development of a data collection form, a pre-pilot of a new data collection system was carried out across three sites. The National Perinatal Epidemiology Centre is now developing an app to facilitate data collection. A full pilot is due to commence in Quarter 1, 2024. The postnatal multidisciplinary clinic supporting women following a traumatic birth experience at the Lavender Clinic, University Maternity Hospital Limerick won a HSE Service Excellence Awards 2023 in the Improving Patient Experience category. Lack of suitable premises and establishment of a Mother and Baby Unit present risks to the implementation of the National Clinical Programme. The Clinical Lead continues to engage with the NCAGL – Mental Health to mitigate the impact of these risks, including through completion of a feasibility study and inclusion in mental health capital planning. 	HSE Clinical Programme (for Perinatal Mental Health)	Minor Delivery Issue
54 Medium	Every person with Mental Health Difficulties coming into contact with the forensics system should have access to comprehensive stepped (or tiered) mental health support that is recovery-oriented	<ul style="list-style-type: none"> A tendering process was completed by the Irish Prison Service (IPS) in conjunction with the HSE and the Probation Service to select a suitable vendor to undertake a mental health needs analysis of the prison population. A committee representing the three services was established to review the tender in line with selection and 	HSE Mental Health Operations	Minor Delivery Issue

	and based on integrated co-produced recovery care plans supported by advocacy services as required	<p>recommendation processes. The committee determined that the submission fell short of the requirements of the tender. IPS have agreed to re- tender in early 2024 in line with procurement policies.</p> <ul style="list-style-type: none"> IPS are in the process of finalising the tiered model of care for the Prison Service and a presentation on the overarching model to be presented to the Justice Workstream members in Quarter 1, 2024. The delivery of the tiered model of care has to be set out and this is expected to be finalised in Quarter 2, 2024. 	National Forensic Mental Health Service (NFMHS)	
55 Medium	There should be ongoing resourcing of and support for diversion schemes where individuals with mental health difficulties are diverted from the criminal justice system at the earliest possible stage and have their needs met within community and/or non-forensic mental health settings.	Project team identified and put in place through external contracted support. Meetings undertaken with external stakeholders advising on business case requirements. Project Clarification Document drafted and approved by the Justice Workstream in Quarter 4, 2023.	HSE Mental Health Operations	On Track
56 Medium	The development of further ICRUs should be prioritised following successful evaluation of operation of the new ICRU on the Portrane Campus.	Time line reviewed with regard to the implementation of this recommendation. Submission to be made in Quarter 1, 2024, to the CEO of the HSE on the approval to recruit staff for the opening of the facility following the recruitment embargo placed on the HSE nationally.	HSE Mental Health Operations National Forensic Mental Health Service	Paused
57 Medium	<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</p>	<ul style="list-style-type: none"> In line with the Model of Care, continued progress was made on recruitment for the three initial site areas in the first part of Quarter 4, 2023. However, further efforts to fill approved posts was later put on hold, as a result of the HSEs position to temporarily pause recruitment. Issues with premises in CHO 3 are being resolved and local contingency plans have been agreed. 	HSE Clinical Care Programmes Dual Diagnosis *a) only	Minor Delivery Issue

	<p>diagnosis of intellectual disability and / or autism and a mental health difficulty^</p> <p>^covered under other recommendation.</p>	<ul style="list-style-type: none"> • Work to develop shared working commenced between adolescent addiction teams in CHO 9 and 6 to ensure consistent service enhancements, in line with the provisions of the Model of Care. • Continued collaboration with the National Drug Treatment Reporting System to enhance data collection. <ul style="list-style-type: none"> • Work with HSELand developers progressing well • Full Public and lived experience Involvement approach being taken in the implementation and evaluation of the clinical programme, with people with lived experience working with the team in the development of both. <ul style="list-style-type: none"> • Final training for peer researchers continuing. • Participation in the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) Advisory Group in order to support development of dual diagnosis services at a European level <ul style="list-style-type: none"> • Funding to enable continued delivery of the Seeking Safety programme has not yet been secured for 2024. Along the temporary recruitment pause in the HSE, this present risks for the implementation of this National Clinical Programme 		
<p>58</p> <p>Medium</p>	<p>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.</p>	<p>This recommendation will be progressed through a dedicated mental health services workstream, which is now being supported by a dedicated project resource. Further planning and scoping of the work required to achieve this recommendation took place in Quarter 4, 2023.</p> <p>In addition, the new Inclusion Mental Health Team (IMHT) for people experiencing homelessness in Dublin South City began accepting referrals in July 2023. This service operates in addition to the existing homeless mental health team in the area and consists of in-reach, outreach, a recovery service and a research function. In terms of the overall development of this service, 70% of the current caseload require Assertive Community Treatment and Engagement (ACET). The rest have progressed to a mix of scheduled outpatient care and ACET. The team</p>	<p>HSE</p> <p>Mental Health Operations</p> <p>Primary Care Operations</p> <p>Social Inclusion</p>	<p>Minor Delivery Issue</p>

		<p>has completed training in the Recovery Star model of patient-led goal-setting and care-planning and this is being rolled out to all patients of the service. The IMHT provide hospital In-reach and post-hospital care programmes and to date 100% of patients in receipt of these interventions have managed to remain engaged with the team in the community. The service also continues to offer case-by-case support to people with severe and complex mental disorder, who are leaving prison to homelessness. An Advanced Nurse Practitioner was recently appointed to the services and a Community Liaison service is now up and running, providing rapid access specialist support and advice to primary care, acute hospital and voluntary sector clinicians/nurses looking after homeless people with mental illness.</p>		
<p>59 Medium</p>	<p>Assertive outreach teams should be expanded so that specialist mental healthcare is accessible to people experiencing homelessness.</p>	<p>This recommendation will be progressed through a dedicated mental health services workstream, which is now being supported by a dedicated project resource. Further planning and scoping of the work required to achieve this recommendation took place in Quarter 4, 2023.</p> <p>In addition, the new Inclusion Mental Health Team (IMHT) for people experiencing homelessness in Dublin South City began accepting referrals in July 2023. This service operates in addition to the existing homeless mental health team in the area and consists of in-reach, outreach, a recovery service and a research function. In terms of the overall development of this service, 70% of the current caseload require Assertive Community Treatment and Engagement (ACET). The rest have progressed to a mix of scheduled outpatient care and ACET. The team has completed training in the Recovery Star model of patient-led goal-setting and care-planning and this is being rolled out to all patients of the service. The IMHT provide hospital In-reach and post-hospital care programmes and to date 100% of patients in receipt of these interventions have managed to remain engaged with the team in the community. The service also continues to offer case-by-case support to people with severe and complex mental disorder, who are leaving prison</p>	<p>HSE Mental Health Operations Primary Care Operations Social Inclusion</p>	<p>Minor Delivery Issue</p>

		to homelessness. An Advanced Nurse Practitioner was recently appointed to the services and a Community Liaison service is now up and running, providing rapid access specialist support and advice to primary care, acute hospital and voluntary sector clinicians/nurses looking after homeless people with mental illness.		
60 Medium	Continued expansion of Liaison Mental Health Services for all age groups should take place in the context of an integrated Liaison Mental Health Model of Care.	The Model of Care (MOC) for Liaison Psychiatry was presented to the National Forum for Clinical Programmes in December 2023. The forum has provided certain recommendations on the MOC, which will be incorporated in Quarter 1, 2024.	HSE	Minor Delivery Issue
61 Medium	The HSE should maximise the delivery of diverse and culturally competent mental health supports throughout all services.	<ul style="list-style-type: none"> Stakeholder engagement continued with internal and external stakeholders to gather service provider feedback regarding culturally competent mental health supports. Meetings were held with: HSE Traveller Mental Health Coordinators, Regional Psychosocial Leads for Migrant Health and funded partner organisations who provide resources and services to support Recommendation 61. A survey was developed in consultation with funded partner organisations and distributed in December. The purpose of the survey is to find out what work funded agencies may already be undertaking in this area and how the HSE can provide diverse and culturally competent supports across all services as per the recommendation. The survey will assist in identifying gaps and addressing them. Scripts for three Roma mental health videos (with captions) for the My Health, My Language website were developed and approved in partnership with HSE Social Inclusion. The three videos are in Czech, Slovak and Romanian as these are the three most widely spoken languages by the Roma community in Ireland. New mental health content was developed and approved for inclusion in the HSE guide "About the Irish Health System- A guide for refugees and 	HSE Social Inclusion Mental Health Operations	On Track

		<p>other migrants” (available in 21 languages) as part of a wider review of this guide.</p> <ul style="list-style-type: none"> • Draft content was developed for inclusion in a new sub-section of the HSE Social Inclusion Website. • Funding was approved for Cultural Competency Training and Imagery Re-scripting (trauma intervention aimed reducing distressing intrusive memories) training for mental health staff to be provided by the Woodfield Trauma Service. 		
62 Short	Building on service improvements already in place, individuals who are deaf should have access to the full suite of mental health services available to the wider population.	A plan for the evaluation of the specialist mental health services for the deaf community has been drafted and agreed with stakeholders. This will involve the commissioning of an external evaluation of the service, which will inform future service improvement work.	HSE Mental Health Operations	On track
63 Medium	Persons in Direct Provision and refugees arriving under the Irish refugee protection programme should have access to appropriate tiered mental health services through primary care and specialist mental health services.	<p><i>NOTE: Much of the work undertaken in relation to this recommendation is aligned with recommendation 61 activities.</i></p> <ul style="list-style-type: none"> • Stakeholder engagement continued with internal and external stakeholders. Meetings were held with: Regional Psychosocial Leads for Migrant Health and funded partner organisations who provide resources and services to support Recommendation 63 • A survey was developed in consultation with partner organisations and distributed. The purpose of the survey is to find out what work funded agencies may already be undertaking in this area and how the HSE can ensure that refugees and protection applicants have access to specialist mental health services, as required, and that these supports are tailored and culturally appropriate as per recommendation 63. 	HSE Social Inclusion Mental Health Operations	On Track

		<ul style="list-style-type: none"> • New mental health content was developed and approved for the HSE guide “About the Irish Health System- A guide for refugees and other migrants” (available in 21 languages). • Draft content was developed for inclusion in a new mental health sub-section of the HSE Social Inclusion Website. • Funding was approved for Cultural Competency Training and Imagery Re-scripting (trauma intervention aimed reducing distressing intrusive memories) training for mental health staff to be provided by the Woodfield Trauma Service. 		
64 Medium	Appropriately qualified interpreters should be made available within the mental health service and operate at no cost to the service user.	<ul style="list-style-type: none"> • A draft Standard Operating Procedure (SOP) for the procurement of interpretation services through the designated national provider has been completed and circulated internally for comments. The SOP will incorporate an evaluation and monitoring process. Existing local arrangements for accessing interpreters remain in place until the SOP is signed-off and implemented. The national SOP does not cover Irish Sign Language Services (ISL). ISL services are accessed as requested by mental health services at the CHO level. • Cork Kerry Social Inclusion Psychology services have agreed to share the ‘Working with Interpreters’ webinar delivered by Dr Veronica Byrne June 2022. The link for the webinar and another resource “Tips on working with Interpreters” also developed by Cork Kerry Social Inclusion Psychology service is available here. 	HSE Mental Health Operations Social Inclusion	On Track
65 Medium	The HSE should ensure that access to appropriate advocacy supports can be provided in all mental health services.	An independent research consultant is currently finalising a gap analysis of mental health advocacy services in Ireland, which will inform service improvements in this area. There has been a delay in completing this report, which was originally due in Quarter 3, 2023. A draft report was received in draft December 2023 and comments are now being incorporated.	HSE Mental Health Engagement and Recovery	Minor Delivery Issue

Domain 3 Social Inclusion				
	Recommendation	Quarter 4, 2023 Update	Owner	Current status
66 Medium	Tailored measures should be in place in relevant government departments to ensure that individuals with mental health difficulties can avail, without discrimination, of employment, housing and education opportunities and have an adequate income.	The DoH continued to support the work of the Implementation Group for the National Housing Strategy for Disabled People . The agreed reporting process to monitor implementation of this recommendation was further scoped and a detailed work plan was progressed.	Department of Health	On Track
67 Long	Local authorities should liaise with statutory mental health services in order to include the housing needs of people with complex mental health difficulties as part of their local housing plans.	Reporting on this action under the National Housing Strategy for Disabled People will be completed by end of January 2024 and available for the Quarter 1, 2024, StV progress report.	Housing Agency/ Local Authorities	On Track
68 Short	Department of Health and Department of Housing, Planning and Local Government, in consultation with relevant stakeholders, should develop a joint protocol to guide the effective transition of individuals from HSE-supported accommodation to community living.	A full working protocol to guide the effective transition of individuals from HSE-supported accommodation to community living has been drafted. Consultation was undertaken over the course of Quarter 4, 2023, which will inform the final document.	Department of Housing, Local Government and Heritage	Minor Delivery Issue
69 Medium	In conjunction with supports provided by HSE including Intensive Recovery Support teams, sustainable resourcing should be in place for tenancy-related/independent living supports for service users with complex mental health difficulties.	This service is supported by Housing Coordinators employed by CHO mental health services, but working in close collaboration with local authorities and other agencies/bodies. As there are currently a number of CHO areas without Housing Coordinators, funding were sought for additional posts in 2024 to address these gaps. However, this bid was not successful. In the absence of Housing Coordinators, the HSE will struggle to meet its commitments under the current Housing Strategy, specifically in terms of coordination, planning, implementation and reporting.	HSE Mental Health Operations MH Housing Group	Major Delivery Issues Engagement with areas without Housing Coordinators to mitigate impact

70 Short	The housing design guidelines published by the HSE and the Housing Agency in 2016 to promote independent living and mental health recovery should be a reference point for all housing-related actions in this policy.	As part of the quality assurance process, closure documentation is being revised for consideration by the NIMC Steering Committee.	HSE Mental Health Operations Mental Health Housing Group	On Track For Closure Pending NIMC Approval
71 Medium	A sustainable funding stream should be developed to ensure agencies can work effectively together to get the best outcomes for the individual using the Individualised Placement Support model, which is an evidence-based, effective method of supporting people with complex mental health difficulties to achieve sustainable, competitive employment where they choose to do so.	Overseen by the reconstituted National Individual Placement Service (IPS) Steering Group, HSE procurement were engaged with and a process is in place to devise a tender process for a Fidelity Review process. Following the IPS Community of Practice held in Quarter 3, 2023, the Steering Group reviewed feedback, devised a work plan and established a National IPS Strategy Working Group. Regarding the wording of this recommendation "sustainable funding stream" means that the funding for current posts is secured and an application for yearly funding for these posts is not required. The funding for 60 IPS is sustainable and is in local annual budgets.	HSE Mental Health Engagement and Recovery	On Track
72 Medium	The current HSE funding provided for day centers should be reconfigured to provide individualised supports for people with mental health difficulties and be consistent with the New Directions policy.	The initial mapping of existing day services completed in Quarter 3, 2023, across all nine CHO areas identified a need for collection of further detailed information on the current level of service provision in day centres (e.g. staffing, service user profile, models of recovery). The Mental Health Engagement and Recovery (MHER) Workstream Steering Group will seek the additional information in Quarter 1, 2024, directly from the contacts provided by the CHO Heads of Service – Mental Health. Once collected, this information will also inform a request for tender to include a detailed analysis, a service user and staff survey on their	HSE Mental Health Engagement and Recovery	Minor Delivery Issue

		experience of day centres, a literature review of best practice and recommendations on the reconfiguration of existing day centres.		
73 Medium	In line with the strategic priorities of the Comprehensive Employment Strategy for People with Disabilities, the way people come on/off income supports should be streamlined to maximise entry or re-entry to the workforce with confidence and security. This should happen without threat of loss of benefit and with immediate restoration of benefits where they have an episodic condition or must leave a job because of their mental health difficulty	<p>Updates on Early Engagement:</p> <p>Summary of Outcomes for the Early Engagement Process - 1st January 2024</p> <p>A total of 23,797, customers in receipt of Disability Allowance were identified for engagement under the Early Engagement process, 90% (21,309) phone appointment were made before 1st January 2024.</p> <p>As of the 1st January 2024:</p> <ul style="list-style-type: none"> • 90% appointment were made (21,309 of 23,797) <ul style="list-style-type: none"> • 56% took a call (12,001 of 21,309) • 14% indicated that they were interested in the service (1,667 of 12,001) <ul style="list-style-type: none"> • 12% are now on caseloads (1,495 of 12,001) • 11% were referred on to various employment support Options (1,312 of 12,001) <p>732 people who engaged with the Early Engagement Process were no longer in receipt of a Disability Allowance payment at the end December 2023. 65% of this total are people aged between 18 – 22 years.</p> <p>From November 2023 engagement with age-related cohorts ceased and was expanded to include customers who have been in receipt of a Disability Allowance payment for between 6 and 12 months regardless of age. 4,540 customers have been identified for engagement on the latest list of customers.</p>	Department of Social Protection	On Track

		<p>80 Employment Personal Advisers and Job Coaches are trained and available to provide access to employment supports for People with Disabilities across Intreo Employment Services.</p> <p>Updates on the Green Paper on Disability Reform</p> <p>A stakeholder event was held in October to brief disability organisations on the Green Paper and seek their feedback. A series of consultation events were held in November. The main event was held in Dublin Castle, with regional workshop-based events in Cork and Athlone and an online event also.</p> <p>The Green Paper is designed for public consultation and no final decisions have been taken. The consultation period has been extended to 15th March 2024 to ensure all individuals and groups who wish to make a submission have sufficient time to do so.</p>		
74 Short and Medium	The HSE should continue to develop, fund and periodically evaluate existing and new peer-led/ peer-run services provided to people with mental health difficulties across the country.	Tendering process completed for an evaluation of peer-led and peer-run services for people experiencing mental health difficulties. Dublin City University were successful and an initial meeting with the Research Advisory Group and researchers was arranged where responsibilities of all parties and deliverables were agreed. Contract in the process of development. Researchers commenced work December 2023.	HSE Mental Health Engagement and Recovery Mental Health Operations	On Track
Domain 4 Accountability and Continuous Improvement				
	Recommendation	Quarter 4, 2023 Update	Owner	Current status
75 Medium	The organisation of mental health services should be aligned with emerging integrated care structures under Sláintecare reforms including the proposed six Regional Health Areas (RHA's) and within these the	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 the RHA's population and resource allocation is concluded.	HSE Corporate	Not Started

	Community Health Networks corresponding to populations of about 50,000	Following publication of the implementation plan for RHAs in Quarter 3, 2023, further work was undertaken in Quarter 4, 2023, to finalise the model of health and social care delivery for each of the six health regions.	Mental Health Integrated Care Team	
76 Medium	Implementation of this policy over the next ten years should achieve a re-balancing of resources and take account of population deprivation patterns in planning, resourcing and delivering mental health services.	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 the RHA's population and resource allocation is concluded.	HSE Mental Health Integrated Care Team	Not Started
77 Medium	A standardised set of performance indicators (PIs) directly aligned with the desired outcomes in <i>StV</i> and agreed standards of care and quality frameworks should be developed by the Department of Health and the National Implementation Monitoring Committee accounting for quantitative and qualitative delivery of intended outcomes.	The final Health Research Board report ' <i>Mental health-related indicators for measuring performance and impact of mental health policy: an evidence brief</i> ' was presented to the NIMC Steering Committee, the Minister for Mental Health and Older People and the Reference Group, and published on the DoH website . The DoH's bid to access support under the EU Technical Support Instrument 2024 was unsuccessful; however, alternative options for support are under active consideration.	Department of Health	Minor Delivery Issue
78 Medium	Regular surveys of service users and FCS should be independently conducted to inform assessments of performance against PIs and target outcomes in <i>StV</i> .	Following a meeting held in Quarter 3, 2023, between the National Care Experience Programme (NCEP) and a working group, comprising of Mental Health Engagement and Recovery (MHER), HSE managers and a peer educator, it was clarified that the survey will be created by the Health Information and Quality Authority (HIQA) for NCEP to distribute and collate responses. Further work on this recommendation has been paused until HIQA liaised with MHER on the survey questionnaire.	HSE Mental Health Engagement and Recovery	Paused
79 Short	Information on the process of making a complaint, including necessary contact details, should be visible, accessible and widely available in a variety of media, languages and formats for maximum	The mental health complaints review by National Complaints Governance and Learning Team (NCGLT) has been deferred to 2024 due to resourcing issue. Opportunities for mental health services within CHOs / Regional Health Areas to take on this function are currently being explored.	HSE National Complaints Governance and Learning Team (NCGLT)	Minor Delivery Issue

	accessibility in all mental health service settings and in other fora.	<p>NCGLT can provide an audit template to assist services undertake this piece of work. The revised Your Service Your Say (YSYS) policy is still with the Health Service Trade Unions and a meeting to progress approval is still awaited.</p> <p>Updating of the promotional material for YSYS and its translation into 24 languages has now been completed and all materials are available to order from https://www.healthpromotion.ie/ Communication has issued to services to advise them of the above.</p> <p>Work is still continuing with HSE Digital to revise YSYS content on the HSE website. This will continue into the first half of 2024. Easy read versions for each stage of the YSYS process have been developed and signed off by Inclusion Ireland and are now available on the HSE website.</p>		
80 Ongoing	A culture of open disclosure to support patient safety is embedded in mental health services.	The National Open Disclosure Framework (2023) was launched at the National Patient Safety Conference by the DoH in Quarter 4, 2023. This was shared with the workstream group and is available here .	HSE Quality Patient Safety (QPS)	On Track
81 Short	Training should be provided for services users and staff on making and dealing with complaints.	<p>In Quarter 4, 2023, a detailed work plan for recommendation 81 was agreed. As detailed under recommendation 79, the Your Service Your Say (YSYS) leaflet is now available for download from healthpromotion.ie. The design of the leaflet was informed by lived experience, which will also be reflected in any training.</p> <p>Education and training in complaints handling continue to be available to HSE staff, including a full one-day extensive training course for Complaints Officers, including those working in mental health services, covering all aspects of feedback and complaints management.</p>	HSE Mental Health Operations Mental Health Engagement and Recovery National Complaints Governance and Learning Team	Minor Delivery Issue

<p>82 Short</p>	<p>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.</p>	<p>The work for ensuring that the principles set out in the National Healthcare Charter are embedded in all mental health service delivery will be achieved through the implementation of the new Mental Health Engagement and Recovery (MHER) Strategic Plan 2023 - 2026.</p> <p>In Quarter 4, 2023, a draft meaningful engagement framework was produced and will be under consultation in Quarter 1, 2024. Work continues with both internal and external stakeholders on each StV recommendation with multiple targets being met.</p>	<p>HSE</p> <p>Mental Health Operations</p> <p>Mental Health Engagement and Recovery</p>	<p>On Track</p>
<p>83 Medium</p>	<p>Future updates of the Quality Framework, the Judgement Support Framework and the Best Practice Guidance should be consistent with the ambition and the specific outcomes for the mental health system set out in Sharing the Vision.</p>	<p>A comparison of the HSEs best practice guidance for mental health services, with the Judgement Support Framework (JSF) has been completed. The Mental Health Commission have advised that they will instigate a review of the JSF, which will bring a focus on quality improvement. Any draft or published review will inform the 2024 work plan for this recommendation.</p>	<p>HSE</p> <p>Mental Health Operations</p>	<p>On Track</p>
<p>84 Medium</p>	<p>The relevant bodies should come together to ensure that the measures for the Quality Framework, the Judgement Support Framework, the Best Practice Guidance, Sharing the Vision PIs and performance system and any future measurement systems are aligned and that the required data is derived, where possible, from a single common data set.</p>	<p>This recommendation is being progressed by a dedicated Quality Assurance Frameworks Workstream. A representative from the Mental Health Commission (who have sole responsibility for the Judgement Support Framework and the Quality Standards) has in Quarter 4, 2023, joined the workstream, which will contribute to the successful alignment of any future audit and compliance management systems. Research on an appropriate system has begun, which is likely to be a system that both the HSE and Mental Health Commission already use in order to promote consistency. A decision was made not to work towards the use of the upcoming Integrated Community Care Management System (ICCMS), as this process is only entering procurement and will not be available in the lifetime of this recommendation. Other systems for data collection and reporting will be explored as an interim measure, which will be adopted by ICCMS as it becomes operational.</p>	<p>HSE</p> <p>Mental Health Operations</p>	<p>On Track</p>

<p>85 Short</p>	<p>The work underway at national level to develop a cost and activity database for health and social care in Ireland should prioritise mental health services to leverage developmental work already underway and support the evolution of outcome-based resource allocation.</p>	<p>Training in the Integrated Financial Management System (IFMS) for implementation group 1 (i.e. East Coast) has been completed and familiarisation with the system is still ongoing. There are still issues around backdated supplier invoices, which is leading to delays in payments on the new system. The HSEs Chief Financial Officer has commissioned additional support to help alleviate the backlog, which is still being worked through. The roll out of the project is still on track and will progress into the next phase in 2024.</p>	<p>HSE Mental Health Integrated Care Team</p>	<p>Minor Delivery Issue</p>
<p>86 Medium</p>	<p>A national mental health information system should be implemented within three years to report on the performance of health and social care services in line with this policy.</p>	<p>The Integrated Community Case Management System (ICCMS) programme of work has continued to progress its planned activities:</p> <p>Procurement Evaluation Group (PEG) is progressing stage 1 (Request to Participate) and 2 (Invitation to Participate in Dialogue) of the procurement process</p> <p>A campaign for a Medical Lead and HSCP Lead was successfully completed, but recruitment of remaining posts was unable to progress due to the HSEs current recruitment pause. A paper outlining resource requirements for 2023/2024 has been drafted and is currently under review.</p> <p>The programme team has continued to engage with the dedicated Communications Lead to deliver planned activities, including an article for the Health Matters Winter edition, participation in the ‘Better Together for Digital Healthcare’ conference and presentation to the Digital Mental Health Specialist Group</p> <p>Service mapping activities continue and a draft data strategy was completed</p> <p>Draft Terms of Reference for a Clinical and Data Standards and Procedures Programme Board is complete including co-chair</p>	<p>HSE Community Operations (Integrated Community Case Management System (ICCMS))</p>	<p>On Track</p>

		arrangements. A standardisation workshop took place in December 2023 to discuss the approach and scope of work.		
87 Medium	The Department of Justice and the Implementation Monitoring Committee, in consultation with stakeholders, should determine whether legislation needs to be amended to allow for greater diversion of people with mental health difficulties from the criminal justice system.	The first annual progress report for Ministers regarding the High Level Taskforce on Mental Health and Addiction was completed at the end of Quarter 4 2023. This report is expected to be published in Q1 2024.	Department of Justice	On Track
88 Short	Training and guidance should be provided to staff on the practice of positive risk-taking, based on the principles of the Assisted Decision-Making (Capacity) Act 2015, where the value of promoting positive risk-taking is recognised by the regulator.	<p>The Assisted Decision Making (ADM) Reference Group continued to meet and agreed objectives for work in 2024, including a plan for delivering StV recommendation.</p> <p>The original plan for the mentorship programme was discussed at length with the HSE ADM Transitional Oversight Group, which includes membership from disabled persons organisations (DPOs) and advocacy organisations. The meetings of the Transitional Oversight Group is updated about the mentorship programme, which includes feedback from participants, and has the opportunity to comment on the future development of the programme. The HSE ADM Disability Working Group and the HSE ADM Mental Health Working Group are also both updated at their meetings on the mentorship programme.</p> <p>There are mentors and mentees on the group with lived experience who work in the HSE and in HSE funded services. It is hoped this can be expanded for Year 2 of the programme to those who are members of DPOs. The programme content included the voice of a person with lived experience.</p> <p>The HSE National Office for Human Rights and Equality Policy places a high value on the importance of people’s lived experience when developing any training in relation to the Act, including webinars, e-</p>	HSE Mental Health Operations HSE National Office for Human Rights and Equality Policy	On Track

		learning and the mentorship programme. All eLearning programmes have been co-designed with people with lived experiences. Forthcoming training on the assessment of capacity involves people with lived experiences.		
89 Short	Access to safeguarding teams and training should be provided for staff working in statutory and non-statutory mental health services in order to apply the national safeguarding policy.	<p>As previously reported, there is a requirement to up-date the existing HSE safeguarding policy as it references 'the social care division' and excludes mental health. The timeline for publication of a revised HSE safeguarding policy that will incorporate mental health is yet to be confirmed and this represents a challenge in terms of achieving the intended outcome for this recommendation within the assigned timeframe. In order to mitigate the impact of this implementation problem, Mental Health Operations continue to explore alternative methods to progress safeguarding across mental health services.</p> <p>As part of this process to explore alternative methods, colleagues from CHO 5 presented on work completed to raise awareness amongst staff, service users and supporters on safe guarding. All materials were coproduced. Workshops were co-facilitated and were attended by both staff and those with lived experience</p>	HSE Safeguarding Office	Major Delivery Issue Implementation problem mitigated by exploring alternative methods to progress safeguarding across mental health services
90 Short	The Justice and Health sectors should engage with the coroners, the Garda Síochána, the National Office for Suicide Prevention, the CSO and research bodies in relation to deaths in custody, recording deaths by suicide and open verdicts, to further refine the basis of suicide statistics	The Department of Justice (DoJ) has continued in its role as part of the CSO Liaison Group. DoJ provided feedback on the CSO Summary of Suicide Statistics published in November 2023. DoJ and the Irish Prison Service have continued to work on the Self-Harm Assessment and Data Analysis (SADA) , with the continued support and guidance of the National Office for Suicide Prevention.	Department of Justice and Department of Health	On Track
91 Short	Significant improvements are required in the monitoring and reporting of levels and patterns of self-harm and suicidality among people attending mental health services to	The three month pilot phase for Guidance document 'Using the HSE Incident Management Framework to Review Deaths reported as	HSE Mental Health Operations	Minor Delivery Issue

	inform a comprehensive and timely service response to effectively reduce levels of harm and death.	Suspected Suicide within the Community Mental Health Setting - A Guide for Staff' was completed in Quarter 3, 2023. In Quarter 4, 2023, the Steering Group met to discuss smart survey results/feedback on the guidance document. The document is due to be finalised and final version to be signed off imminently.	National Office for Suicide Prevention	
92 Short	In keeping with the evolving understanding of human rights, particularly the UN Convention on the Rights of Persons with Disabilities, it is recommended that involuntary detention should be used on a minimal basis. A range of advocacy supports including both peer and representative advocacy should be available as a right for all individuals involved with the mental health services	<p>The DoH had good engagement with the Attorney General's Office and the Office of Parliamentary Counsel in Quarter 4, 2023, with both drafts of new sections received, as well as further iterations of already drafted provisions. Department officials met with the Attorney General in Quarter 4, 2023, to resolve a significant legal issue with the Bill and continued to work with his officials on other outstanding legal questions.</p> <p>There were a number of external factors beyond the DoH's control throughout the drafting process this year, including several complex legal challenges that required in depth analysis by the Attorney General's Office (which have now been mostly resolved), limited drafting resources available at times due to competing Government priorities, and the Bill not being selected for the priority for publication list. The DoH continues to dedicate significant resources to the Bill and this will continue through to the publication of the Bill and its progress through the Oireachtas. Expectation is that a final draft of the Bill will be ready shortly after Easter and be published thereafter.</p>	DoH Mental Health Unit	Minor Delivery Issue
93 Short	A National Population Mental Health and Mental Health Services Research and Evaluation Strategy should be developed and resourced to support a portfolio of research and evaluation activity in	The National Mental Health Research Strategy Expert Group held two further meetings in Quarter 4, 2024. In October, the Expert Group discussed the strategy timeline and scope. In November, the discussion focused on the vision, values, terminology, thematic areas, and relevant frameworks for the research strategy. Regarding research funding, in 2023 the Health Research Board used funding that was allocated from the DoH specifically for StV to support 7 research projects.	Health Research Board	On Track

	accordance with priorities identified in the research strategy			
94 Not Specified	In order to bring about change, a strategic approach is required involving the necessary skills in change management. This approach has been developed in the former HSE Mental Health Division (MHD) Strategic Portfolio and Programme Management Office and should be mainstreamed and embedded in the wider HSE.	As part of the quality assurance process, closure documentation was presented to the NIMC Steering Committee and this recommendation was subsequently approved as completed.	HSE Community Operations	Complete
95 Short	The initiatives under the former Mental Health Division Strategic Portfolio and Programme Management Office (SPPMO) and the ongoing Social Reform Fund (SRF) should be gathered together and made available both to encourage further innovation and to avoid duplication in the public service and NGO sectors.	As part of the quality assurance process, closure documentation was presented to the NIMC Steering Committee and feedback is now being incorporated in order to complete this recommendation.	HSE Community Operations	On Track For Closure Pending NIMC Approval
96 Medium	Innovations which have good evidence for clinical and/or social and cost effectiveness should be rolled out nationally. This will require the changing of practices and modification or cessation of services which are superseded by the new form of delivery.	Update to be provided in Quarter 1, 2024 as part of an annual report	HSE Community Health Operations Improvement and Change (CHOIC) Mental Health Integrated Care Team	On Track

<p>97 Medium</p>	<p>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.</p>	<p>Alongside StV recommendation 30, this recommendation is being progressed in collaboration with a dedicated working group, which includes lived experience. A mapping template was circulated to the Heads of Service – Mental Health in order to collate information on the use of non- mental health community-based facilities, integration with Primary Care and infrastructure. There are a number of late returns due to current industrial action.</p>	<p>HSE Mental Health Operations Mental Health Engagement and Recovery</p>	<p>Minor Delivery Issue</p>
<p>98 Long</p>	<p>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.</p>	<p>A Mental Health Capital Planning Group was established in Quarter 3, 2023, tasked with developing a 10 year Capital plan for mental health within the following context:</p> <ul style="list-style-type: none"> • Identifying and prioritising mental health capital requirements within the domains of StV, existing and future service need and regulatory requirements. • Development of a Capital Plan that is cognisant of financial allocations, while providing as much detail as possible of expected capital costs to address the Capital Plan in the short, medium and long term. <ul style="list-style-type: none"> • Providing advice on the development of the future financial architecture of the HSE-mental health in terms of capital expenditure, including design of capital programmes and changes to the approach to pricing. • Taking the implementation of the Regional Health Authorities into account when planning for Mental Health Infrastructure over lifetime of the Plan. 	<p>HSE MH Integrated Care Team</p>	<p>On Track</p>
<p>99 Short</p>	<p>A national ‘whole-of-government’ Implementation Committee should be established with strong service user and VCS representation to oversee the</p>	<p>The membership of the second term of NIMC was confirmed and new members appointed, including a new Chairperson, on foot of Ministerial decision.</p>	<p>DoH</p>	<p>On Track</p>

	implementation of the recommendations in this policy and to monitor progress.	<p>A final draft of the NIMC end-of-term analysis report was prepared with input from NIMC members, for approval and publication in Quarter 1, 2024. The report can be found here.</p> <p>The independent process review of the NIMC was completed by the contracted organisation, with its final report to be presented to the NIMC at its January 2024 meeting.</p>		
100 Medium	A joint review of the two specialist training programmes by the College of Psychiatrists of Ireland and the Irish College of General Practitioners should be undertaken to develop an exemplar model of mental health medical training and integrated care.	<p>Meeting took place between Irish College of General Practitioners (ICGP) and College Of Psychiatrists (COP) on 30.11.2023. Actions include undertaking a joint review to ensure registered practitioners receive appropriate training. Collaboration areas between ICGP & COP were identified, focusing on curriculum, assessment, and accreditation. Notable points included the need for Balint* group facilitators in GP and potential for co-consultations of trainees to assess risk behavior. Further collaboration was agreed upon, covering Balint training, simulation, health promotion, relationship-building, workforce planning, curriculum, assessment, and accreditation. Going forward, meetings are scheduled for every 8 weeks and next meeting will focus on recruitment, teaching and simulation, and curriculum.</p> <p><i>*Balint: A method used in the medical field, particularly in general practice, which emphasises the relationship between patients and healthcare providers. Balint groups are small group sessions where healthcare professionals can discuss and reflect on their interactions with patients to improve communication, empathy, and overall patient care.</i></p>	HSE National Clinical Advisory and Group Lead for Mental Health DoH	On Track