

INDEPENDENT REVIEW

National Implementation and Monitoring Committee

Summary Report 2024



The purpose of this report is to provide a summary of the independent review of the National Implementation and Monitoring Committee (NIMC) conducted by Prospectus Management Consultants (Prospectus) in Q3 and Q4 2023.

The Department of Health (DoH) commissioned Prospectus to conduct an independent review of the operations and processes of the NIMC related structures, specifically focusing on the efficiency, effectiveness, and responsiveness, guided by the objectives outlined in its terms of reference. The review was initiated in response to recommendation no. 99 of the Sharing the Vision (StV) policy, which mandates independent reviews of the StV implementation every three years.

ABOUT STV AND THE NIMC

StV is Ireland's mental health policy for 2020-2030, it's aim is to tailor services to individual needs with a focus on early intervention and social inclusion. It promotes community-based support, improved accessibility, and a primary carecentered approach to potentially decrease reliance on specialised services. Rooted in values of respect, compassion, equity, and hope, the policy emphasises dignified service delivery and empowerment.

Further information on StV can be accessed here

To oversee the implementation of StV, the NIMC was formed in December 2020, following Recommendation 99 of StV, by the Minister for State for Mental Health and Older People. The NIMC's role is to support, monitor, and evaluate the policy's implementation effectively and efficiently, aiming to enhance and personalise recovery paths for mental health service users and their families, thereby ensuring service adaptability and continuous improvement.

The NIMC's structure is multi-layered, facilitating its aims through reporting and supporting relationships. It comprises of the Steering Committee, Specialist Groups, the Reference Group of Service Users and Families, and the HSE Implementation Group (HIG), each playing a crucial role in the policy's implementation and oversight.

Further information on the NIMC terms of reference, reports and publications are available here



OBJECTIVES OF THE REVIEW

The objectives of the review were as follows:

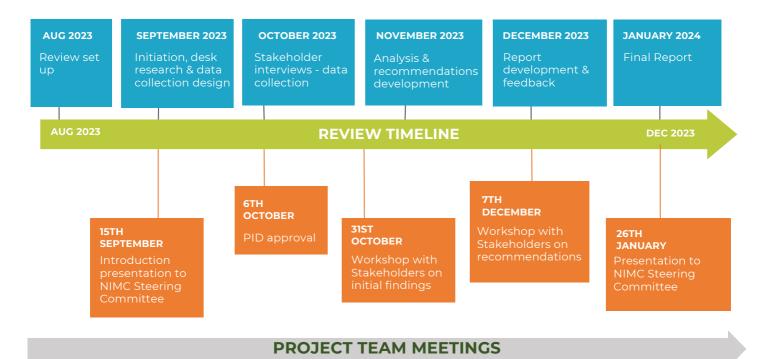
- 1.To document a short narrative description to capture the history and story of the NIMC from its inception in 2020.
- 2.To conduct a diagnostic current state analysis involving data gathering through desk research and a set of engagements with key stakeholders.
- 3.To conduct a future state analysis to describe potential areas that require improved alignment to enable NIMC structures function successfully.
- 4.To document a final report that clearly describes the review process, findings, conclusions and recommendations.

METHODOLOGY

The review methodology included four phases as follows:

- 1. Project Initiation: Established agreements, scope, roles, and responsibilities. An initiation meeting was held with sponsors and stakeholders to confirm the project initiation document (PID).
- 2. Data Collection and Analysis: Gathered relevant information, conducted interviews and focus group sessions. Presented findings to stakeholders for feedback.
- 3. Future State Analysis: Evaluated potential outcomes beyond 2024, analysed current workflows for strengths, improvements, gaps, developed recommendations and presented findings to stakeholders for feedback. Developed a prioritisation matrix and high-level roadmap.
- 4. Final Report: Documented a comprehensive final report detailing methodology, findings, conclusions and recommendations. The final report was submitted to the DoH and presented to the NIMC Steering Committee.

The following diagram illustrates the review stages in blue and the key milestones of the review in orange:





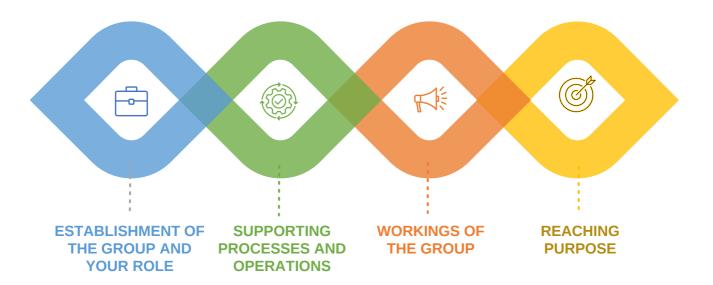
STAKEHOLDER ENGAGEMENT

A total of 28 interviews and 1 focus group was conducted with stakeholders including the Minister of State for Mental Health and Older People, the Assistant Secretary for Social Care, Mental Health, Drugs Policy, and Unscheduled Care, the Steering Committee and Secretariat, the HIG and its Secretariat, the HSE National Director for Community Operations, members of the Reference Group, and the chairs of the Specialist Groups. The DoH solicited nominations from within the NIMC structures to participate, aiming for the best representative coverage within the project's scope and schedule.

As part of the review's engagement strategy, two workshops were carried out with stakeholders.. Regular status meetings with the Mental Health Unit, DoH provided a vital communication link and ensuring the project's alignment with its goals. These meetings were used to track the review's progress and address any issues. The engagement was further strengthened by the participation of a representative from the HSE's Policy Implementation Team, bringing additional insights and expertise, underscoring the collaborative approach of the review.

DATA COLLECTION AND ANALYSIS

Data collection primarily consisted of qualitative methods, specifically semi-structured interviews and focus groups, to ensure comprehensive coverage of relevant topics and capture diverse perspectives. Four main themes relating to the review's objectives were explored during these engagements.



Subsequent analysis involved transcription and thematic analysis to identify strengths, areas for development, and potential improvements. Validation through triangulation with existing documentation was conducted. A set of workshops with stakeholders who participated in the review were carried out to cross check and validate findings and subsequent recommendations for accuracy and discussion. The final workshop conducted an exercise to develop a prioritisation matrix, assessing the recommendations based on criteria of effort and impact, which facilitated the development of a high-level implementation roadmap.

FINDINGS



Findings derived from consultations and desk-based research underwent thematic analysis, revealing strengths and areas for improvement. Findings are summarised below as follows:

- While clarity of roles in NIMC improved over time, further clarity is needed on specific group functions, NIMC's title, and updating terms of reference for alignment with the next cycle's purpose.
- While current hybrid meetings are deemed effective, there is a call for increased face-to-face interactions and inperson meetings.
- The NIMC has effectively fulfilled its initial establishment purpose and has made significant progress since its inception. It now has opportunities to focus on broader strategic elements.
- There is a need to diversify meeting agendas to include both strategic and regular operational discussions to strike a balance between the two.
- Monthly meetings and reporting frequencies require realignment and the need to transition to dvnamic dashboards and cloud systems.
- There is a call for alignment with Sláintecare and other 06 health policies, evaluate policy impact from the user perspective, and prioritise service improvement.

RECOMMENDATIONS

A key deliverable of the review was to propose recommendations to the NIMC to be implemented in the next cycle. Based on the identified strengths and areas for improvement, 25 recommendations were formulated and documented (See Appendix A). A summary of these key recommendations is provided below.

- Update Terms of Reference to provide clarity on the various group roles to support the next cycle and consider the title of NIMC.
- Focus on broader strategic topics and impact while balancing with operational monitoring 02 responsibilities. Enhance reports to
- Transition the NIMC reporting cycle to bi-annual and realign supporting processes to enable that change including digitisation. Maintain secretariat role to support and provide consistency.

- face meeting, building cohesion, user feedback mechanism.
- Adopt a flexible approach to meetings and agendas including regional and workshop type duration of meetings based on content to be addressed.
- Linking with other national policies and building awareness 06 across different government departments, staff and the public.

CONCLUSION

The independent review of the NIMC conducted in Q3 and Q4 2023 produced 25 recommendations aimed to maintain and improve the NIMC as it enters its second cycle.

Reflecting on this unique review, there are some key learnings that have emerged. Specifically, we recognise that the review was strengthened by the level of engagement and time the stakeholders gave to the process. We acknowledge the support of the Mental Health Unit, DoH for their regular communication and guidance. Prospectus are pleased to have had the opportunity to conduct this independent review and to have contributed to the important work of the NIMC.





ESTABLISHMENT OF THE GROUP AND YOUR ROLE		
Recommendation 1	Update the Terms of Reference of the NIMC to provide further clarity on the roles and responsibilities of the Steering Committee, HIG, Reference Group, and the Specialist Groups to fulfil its purpose for the next cycle. Additionally, it is timely to reconsider the title of the NIMC and review members understanding of the title, to reflect the responsibilities of the NIMC in the Terms of Reference in a clearer way.	
Recommendation 2	Develop ways within the governance and role of the Steering Committee to allow for broader strategic input and contributions as well as operational monitoring. The balance between operational monitoring and strategic input to be addressed.	
Recommendation 3	Continue and enhance the practice of onboarding meetings for new members of all groups, especially at the start of a new term, to familiarise on roles, functions, objectives, and procedures and agree on a charter that encapsulates the group's ethos and working guidelines.	
Recommendation 4	Maintain the NIMC's current governance structure and collaborative leadership style as the NIMC enters a new term, ensuring the chairperson's active engagement and strategic guidance remain central to the committee's operations.	
Recommendation 5	Maintain the DoH's secretariat role in its current capacity for the upcoming term to uphold the operational integrity and continuity of the NIMC, ensuring smooth transitions for new and continuing members and providing consistency throughout the 10-year period.	
Recommendation 6	Enhance the collective role of the Steering Committee, and build collaborative purposeful objectives which will build knowledge of the group as a whole. Options may include presentations or group work.	
Recommendation 7	Establish a formalised process for the Steering Committee to declare conflicts of interest. This will support the group's governance and collective decision making.	



SUPPORTING PROCESSES AND OPERATIONS	
Recommendation 8	Transition the NIMC reporting cycle from quarterly to biannual. This adjustment aligns with the slower progress of medium and long-term objectives and reduces administrative pressure, enabling members to engage more comprehensively with the content. Additionally, refocus sections of content to concentrate primarily on key strategic issues and challenges in implementation. Alongside this, introduce a smaller, more focused quarterly report specifically for monitoring short-term objectives and to ensure that any immediate issues or key challenges are reported as needed to facilitate timely responses and adjustments.
Recommendation 9	Improve digitisation which may include transition to cloud-based systems with a live dashboard for real-time data management, and to establish a structured feedback mechanism that actively acknowledges and integrates responses to reports, ensuring effective communication and transparency.
Recommendation 10	Enhance the current practice of providing summaries and interpretations in reports to link data with practical implications, providing strategic insights and real-world relevance.
Recommendation 11	Building on the work already being conducted on existing KPIs and outcome measures; describe and interpret clear performance indicators that reflect the overall implementation progress, performance, and impact, along with transparent RAG status indicators to ensure understanding and clarity on overall progress of the policy.
Recommendation 12	Maintain the proactive scheduling and distribution of meeting materials in advance by the Secretariat to sustain well-prepared and informed discussions in NIMC meetings.
Recommendation 13	Aligning with the proposed biannual reporting cycle, extend the lead time for document distribution beyond one week to allow members more time for thorough review and effective preparation, enhancing meeting productivity.
Recommendation 14	Focus on changes in progress by presenting new data, substantial evidence-based updates, and key developments within NIMC reports to reduce the repetition of unchanged data, making the reports more dynamic and relevant to current developments.



WORKINGS OF THE GROUP	
Recommendation 15	Prioritise the strategic focus within the committee's workings, concentrating on evaluating the impact and effectiveness of mental health policies, ensuring that their implementation aligns with the overarching objectives of national mental health care.
Recommendation 16	Retain monthly meetings for at least the first six months of 2024, then transition to bi-monthly meetings. This aligns with the implementation group's recommended six-monthly reporting cycle, to ensure that discussions are informed by recent developments and allow for more in-depth strategic discussions.
Recommendation 17	Increase the frequency of in person only face-to-face meetings to two meetings per year to foster deeper engagement and more dynamic discussions, while continuing with some hybrid meeting format to maintain inclusivity and flexibility.
Recommendation 18	Incorporate varied meeting formats like workshops and regional meetings to cater to different member preferences, enhancing engagement and leveraging the diverse expertise and knowledge in discussions.
Recommendation 19	Adopt a flexible approach to meeting duration, tailoring the length of meetings based on agenda complexity. This would enable meetings to extend beyond the standard two-hour limit when necessary, ensuring comprehensive discussion of critical topics without making the meetings overly lengthy.
Recommendation 20	Meeting agenda should address operational tasks and strategic discussions to ensure comprehensive coverage of both areas. Prioritise urgent issues, particularly risks and challenges, in the meeting agenda to ensure they receive focused attention and detailed discussion. Allocate dedicated time in meetings particularly focusing on addressing and resolving discrepancies, such as delays in deliverables.



REACHING PURPOSE	
Recommendation 21	Examine additional opportunities that can be delivered through the implementation plan over the next cycle utilising the full skillset of the Steering Committee to achieve outcomes e.g. Linking to other national policies such as Sláintecare.
Recommendation 22	Undertake service user involvement feedback mechanism within each bi-annual reporting cycle to examine the impact of the policy implementation from a service users' lived experience.
Recommendation 23	Develop a communication strategy to ensure the progress and benefits of the implementation of the StV policy are communicated effectively. Increase awareness and dissemination of progress within government departments, mental health service providers and the general public.
Recommendation 24	Set up a working group to examine opportunities for the NIMC to examine broader strategic issues and to provide commentary within and outside the NIMC.
Recommendation 25	Consider additional skills required for the next cycle within the Steering Committee e.g. Transformation and Systems Change.