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**An Comhchoiste um Chúram Meabhairshláinte sa
Todhchaí**

**Tuarascáil Eatramhach ón gComhchoiste
um Chúram Meabhairshláinte sa Todhchaí**

Nollaig 2017

Houses of the Oireachtas

Joint Committee on the Future of Mental Health Care

**Interim Report of the Joint Committee
on the Future of Mental Health Care**

December 2017



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In July 2017, the Joint Committee on the Future of Mental Health Care was established with the aim to achieve cross-party agreement on the implementation of a single, long-term vision for mental health care and the direction of mental health policy in Ireland. This interim report outlines the Joint Committee's proposed goals, work schedule and approach to its work.

In the context of the implementation of 'A Vision for Change', the Joint Committee will examine current delivery of mental health services, including funding and recruitment challenges. The Committee will make recommendations on structuring mental health services, recruiting and retaining personnel, implementing 'A Vision for Change' and increasing access to services. 'A Vision for Change' was a ten year strategy by Government which recommended a wide range of reforms in mental health services, most of which were to be implemented by the HSE. The Committee has expressed a strong interest in implementation and ensuring that its report is 'not another report on a shelf'.

The Committee has held a number of briefing sessions with relevant stakeholders. These stakeholders have included Mr. Hugh Kane, Chair of the Oversight Body established by the Department of Health to oversee the next stages of implementation of 'A Vision for Change', representatives of the HSE and Department of Health and Mr Jim Daly T.D., Minister of State for Mental Health and Older People. These briefing sessions have assisted the Committee in planning its various work streams.

Based on these initial briefing sessions, the Joint Committee has already formed the view that it is necessary that a permanent Mental Health Oireachtas Committee be established in order to have ongoing accountability, in particular in relation to funding. That is a recommendation contained in this Report. The Committee is also of the view that the issue of prevention will form an important part of its work.



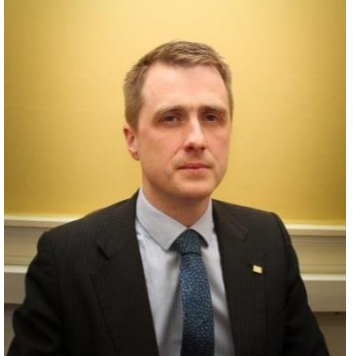
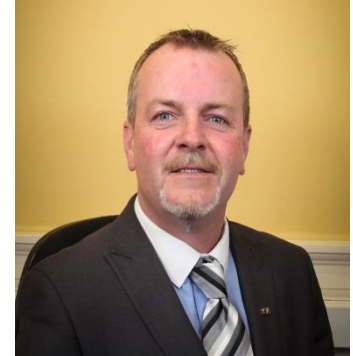





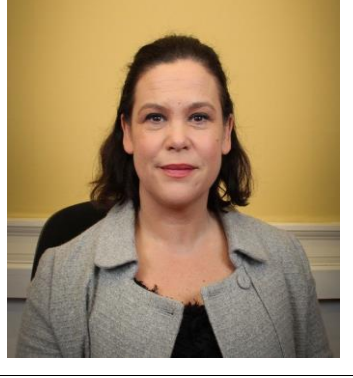


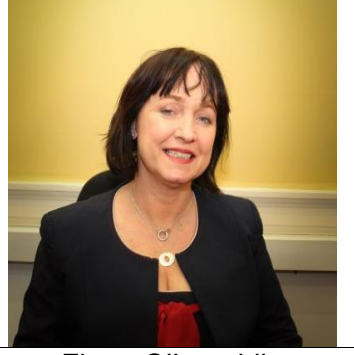

On behalf of the Joint Committee, I wish to formally request that this report be debated in the Dáil and the Seanad at the earliest possible opportunity.

A handwritten signature in black ink, appearing to read 'Joan Freeman', written in a cursive style.







Senator Joan Freeman
Chair
Committee on the Future of Mental Health Care

MEMBERS OF THE COMMITTEE

Deputies

			
Mick Barry T.D. (AAA-PBP)	John Brassil T.D. (FF)	James Browne T.D. (FF)	Pat Buckley T.D. (SF)
			
Joe Carey (FG)	Joan Collins (I4C)	Marcella Corcoran Kennedy (FG)	Dr Michael Harty (RIG)
			
Alan Kelly T.D. (Lab)	Catherine Martin (Green Party)	Mary Lou McDonald (SF)	Tony McLoughlin (FG)
			
Tom Neville (FG)	Fiona O'Loughlin (FF)	Anne Rabbite (FF)	

Senators

			
Senator Máire Devine (SF)	Senator Frank Feighan (FG)	Senator Joan Freeman [Chair]	Senator Colette Kelleher (Independent)
			
Senator Gabrielle McFadden (FG)	Senator Jennifer Murnane O'Connor (FF)		

INTRODUCTION

The Joint Committee on the Future of Mental Health Care was established by Order of the Dáil on 13th July 2017 and by Order of the Seanad on 18th July 2017 with the aim of agreeing the implementation of a single, long-term vision for mental health policy in Ireland - while recognising that the Department of Health is simultaneously conducting a review of 'A Vision for Change'.

In the context of the implementation of 'A Vision for Change', the Committee shall examine –

- Current integration and delivery of mental health services in Ireland;
- The availability, accessibility and alignment of services and supports (including the work of the National Task Force on Youth Mental Health and the Youth Mental Health Pathfinder Project);
- The need to further develop prevention and early intervention services;
- The significant challenges in the recruitment and retention of skilled personnel; and
- The efficacy of establishing a permanent Mental Health Oireachtas Committee.

The Joint Committee, having carried out its examinations, shall make recommendations on how best to align Ireland's mental health services and supports to increase availability and accessibility, recruit and retain personnel and complete the implementation of 'A Vision for Change' in order to provide a more integrated mental health service of the highest quality.

Meetings to Date

The first meeting of the Committee took place on 28th September 2017 in private. The Committee's twenty-one members elected Senator Joan Freeman to serve as Chair. The Joint Committee elected James Browne T.D. as Vice-Chair at its meeting of 22nd November 2017.

The Committee held a number of planning meetings where the Committee received briefings on various topics, including:

- Mr. Hugh Kane, Chair of the Oversight Body established by the Department of Health;
- Mr. Jim Daly T.D., Minister of State for Mental Health and Older People;

- The Health Service Executive.

Interim Report

The Orders establishing the Joint Committee requires that the Committee produce an interim report which shall contain its proposed work schedule, within two months of its first public meeting.

Final Report

The Committee is required to present a final report to both Houses of the Oireachtas by 31st October 2018, whereupon the Committee shall stand dissolved.

Work Schedule

Regarding its work schedule, a consensus emerged that stakeholder sessions should be organised based on a number of work streams, which are outlined in the main body of this report.

COMMITTEE OBJECTIVES

The Committee has the following objectives:

1. To achieve cross-party agreement on the implementation of a single, long-term vision for mental health care and the direction of mental health policy in Ireland while recognising that the Department of Health is simultaneously conducting a review of 'a Vision for Change'.
2. In the context of the implementation of 'A Vision for Change', the Committee shall examine:
 - (i) The current integration of delivery of mental health services in Ireland;
 - (ii) The availability, accessibility and alignment of services and supports (including the work of the National Task Force on Youth Mental Health and the Youth Mental Health Pathfinder Project;
 - (iii) The need to further develop prevention and early intervention services;
 - (iv) The significant challenges in the recruitment and retention of skilled personnel; and

- (v) The efficacy of establishing a permanent Mental Health Oireachtas Committee.
3. The Joint Committee shall, having carried out the examination at paragraph 2, make recommendations on how best to align Ireland's mental health services and supports to increase availability and accessibility, recruit and retain personnel and complete implementation of 'A Vision for Change' in order to provide a more integrated mental health service.

INTERIM FINDINGS AND RECOMMENDATIONS OF THE COMMITTEE

1. In view of the fact that there is a simultaneous review being conducted by the Oversight Body established by the Department of Health, the Committee are of the view that it is important that it see the Oversight Body's work plan to ensure that the Committee can complement the work of the body and avoid a duplication of effort. The Minister of State for Mental Health and Older People gave a commitment to the Committee that he would request the Body to furnish a copy of the plan to the Committee as soon as it is available. The Committee are still awaiting a copy of the work plan.
2. The Joint Committee held a meeting with Officials of the HSE on 22 November in relation to funding and budgeting of Mental Health Services. The Committee expressed deep concern at the fact that the HSE were not in a position to provide detailed financial analysis on how the mental health funding is being spent under each of the speciality areas. The Committee urges that proper systems are put in place without further delay in order for this information to be available.
3. During the course of its work to date the Committee has already formed the view that a permanent Oireachtas Mental Health Committee is required and recommend that one be established once the Joint Committee has finally reported.

BROAD THEME FOR MAIN REPORT

While under its Terms of Reference the Committee is required to agree its final report by 31st October 2018, the Committee intends to report regularly during the

course of its deliberations. These reports will contain updates on findings-to-date and initial recommendations.

Based on the Joint Committee’s objectives set out in its terms of reference and its deliberations to date the Committee agreed to focus on the following three areas:

1. Primary Care;
2. Recruitment; and
3. Funding

1. Primary Care

According to the HSE Service Plan 2017 over 90% of mental health problems should be dealt with in primary care. Therefore, the Committee is of the view that it is important that it investigate this area in terms of defining where the gaps are in primary care services, recruitment and funding.

	Themes
1.	24/7 Crisis Intervention
2.	Role of General Practitioners including medication
3.	Lack of Service for 16 – 18 year olds
4.	Talking Therapies/Local Counselling
5.	Accessibility of services for the homeless/minority groups
6.	Prevention/Early Intervention
7.	Dual Diagnosis

	Proposed Stakeholders/Experts
1.	Minister for Health
2.	Minister for Mental Health and Older People
3.	Mr. Hugh Kane, Chair of Oversight Group to oversee the next stages of the review of a Vision for Change
4.	HSE
5.	Dr. Brendan O’Shea, Irish College of General Practitioners
6.	Joyce O’Connor, Former Chair of the Expert Panel

	VFC.
7.	Services Users (Family Representatives and Minority Representatives)
8.	Representatives from each of the CHO areas
9.	Other relevant stakeholders and representative organisations.

The Committee is interested in the potential of the following proposals which may improve services and its work in this section will include an analysis of their practicality and likely benefits or drawbacks.

Proposals

1. Reduction in waiting lists to access mental health services by providing a psychiatric nurse for initial assessment which will act as a filter thus reducing the unnecessary referrals to CAMHs and adult services.
2. Recruitment of skilled personnel to be done at local level rather than nationally.
3. Reduction in child and adolescent waiting lists through the temporary collaboration of public and private psychiatric teams.

2. Recruitment and Retention of Skilled Personnel

The Joint Committee has agreed, following its work to date, that recruitment and retention of skilled personnel is a vital part of its work and has agreed the following themes should be investigated further.

	Themes
1.	Employment Terms and Conditions of skilled personnel
2.	Shortfall in skilled personnel
3.	Challenges in recruiting and retaining skilled personnel
4.	Continuous Professional Development
5.	McCraith Report

	Proposed Stakeholders/Experts
1.	Minister for Health
2.	Minister for Finance and Public Expenditure and Reform
2	HSE
3	Minister for Mental Health and Older People
4	Dr. John Hillery, President of the Royal college of Psychiatrists.
5.	Mr. Peter Hughes, Psychiatric Nurses Association
6.	Representatives from each of the CHO areas
7.	An Bord Altranais
7.	Other relevant stakeholders and representative organisations.

The Committee is interested in the potential of the following proposals which may improve services and its work in this section will include an analysis of their practicality and likely benefits or drawbacks.

Proposals

1. Ensure future recruitment is done at local level.
2. Further integration of psychiatric nurses at primary level.

3. Funding

The Joint Committee has agreed that funding for mental health services is very important and is very concerned that at its meeting of 22nd November the HSE were unable to provide a breakdown of mental health funding showing how it was spent by service area. The HSE has committed to provide the information requested to the Committee, however they have not provided a timeline. The Committee is of the view that this needs to be investigated further and intend to have additional engagements with the following stakeholders in order to get clarity on funding:

	Proposed Stakeholders/Experts
1.	Minister for Health
2.	Minister for Finance and Public Expenditure and Reform
2	HSE
3	Minister for Mental Health and Older People
6.	Representatives from each of the CHO areas
7.	Other relevant stakeholders and representative organisations.

The Committee will investigate the proposal that there should be an increase in mental health funding to 12% of the total health budget and an increase in child mental health funding to 12% of the total mental health budget.

ADDITIONAL MATTERS FOR CONSIDERATION BY THE COMMITTEE

As a part of its work, the Committee will analyse the performance indicators currently being used by mental health services to see whether they capture the most vital aspects of patient experience. It will seek the views of representatives of service users, the HSE, the Department of Health and other stakeholders on how these indicators might be improved and how service delivery can best be measured. Identifying and striving for the most pertinent targets is essential to the future of Mental Health Care as energy and resources should be directed towards fulfilling the most essential aspects of care.

As well as requesting a copy of their work plan, the Committee has requested regular communication from the Department of Health's Oversight Group and will consider that body's ongoing work and findings.

As stated in the introduction to this Interim Report, the Committee has a keen interest in ensuring that its reports are likely to be implemented and do not become solely 'reports on a shelf'. The Committee will therefore seek to identify existing implementation gaps and their causes as it does its work on the 3 major themes. Based on this analysis, actions to improve the likelihood of implementation will be included alongside the Committee's recommendations.

APPENDIX 1 TERMS OF REFERENCE OF THE COMMITTEE

That, notwithstanding anything in Standing Orders—

- (a) Dáil Éireann noting—
- (i) the pressures on mental health services, the waiting times for services, and the need to improve services in certain parts of the country,
 - (ii) the consensus that the 2006 policy 'A Vision for Change' charts the best way forward for mental health services, and
 - (iii) the fact that, eleven years after its publication, 'A Vision for Change' is not yet fully implemented,
- hereby appoints a Special Committee (hereinafter referred to as 'the Committee'), to be joined with a Special Committee to be appointed by Seanad Éireann, to form the Joint Committee on the Future of Mental Health Care;
- (b) the Joint Committee shall aim to achieve cross-party agreement on the implementation of a single, long-term vision for mental health care and the direction of mental health policy in Ireland, while recognising that the Department of Health is simultaneously conducting a review of 'A Vision for Change';
- (c) in the context of the implementation of 'A Vision for Change', the Committee shall examine—
- (i) the current integration of delivery of mental health services in Ireland;
 - (ii) the availability, accessibility and alignment of services and supports (including the work of the National Task Force on Youth Mental Health and the Youth Mental Health Pathfinder Project);
 - (iii) the need to further develop prevention and early intervention services;
 - (iv) the significant challenges in the recruitment and retention of skilled personnel; and
 - (v) the efficacy of establishing a permanent Mental Health Oireachtas Committee;
- (d) the Joint Committee shall, having carried out the examination at paragraph (c), and taking account of the Department of Health review of 'A Vision for Change', make recommendations on how best to align Ireland's mental health services and supports to increase availability and accessibility, recruit and retain personnel and complete the implementation of 'A Vision for Change' in order to provide a more integrated mental health service of the highest quality;

- (e) the number of members of the Committee shall not exceed 15, and the members shall be appointed as follows:
 - (i) four members appointed by the Government,
 - (ii) four members appointed by Fianna Fáil,
 - (iii) two members appointed by Sinn Féin, and
 - (iv) one member each appointed by the Labour Party, Solidarity-People Before Profit (Sol-PBP), Independents 4 Change, the Rural Independent Group and the Social Democrats-Green Party Group;
- (f) the Ceann Comhairle shall announce the names of the members appointed under paragraph (e) for the information of the Dáil on the first sitting day following their appointment;
- (g) the quorum of the Joint Committee shall be eight, at least one of whom shall be a member of the Dáil, and one a member of the Seanad;
- (h) the Joint Committee shall elect one of its members to be Chairman;
- (i) the Joint Committee shall have the powers defined in Standing Order 85(1), (2), (3), (4), (5), (7), (8) and (9);
- (j) the Joint Committee shall produce an interim report, which shall contain its proposed work schedule, within two months of its first meeting in public; and
- (k) the Joint Committee shall make its final report to both Houses of the Oireachtas by 31st October, 2018, and shall thereupon stand dissolved."