

Ms. Iqra Zainul Abedin  
Committee Clerk  
Sub-Committee on Mental Health,  
Leinster house,  
Dublin 2  
D02 XR20

**Your Ref:** JCH-i-863  
**Sent to:** [health@oireachtas.ie](mailto:health@oireachtas.ie)

16<sup>th</sup> March 2022

Dear Ms. Iqra Zainul Abedin,

The Irish Association of Social Workers very much welcome the opportunity to speak with the Sub-Committee on Mental Health on the issues pertaining to the Pre-Legislative Scrutiny on the Mental Health (Amendment) Bill. I enclose our opening statement on this topic and a copy of our submission on the Mental Health Act, dated 6<sup>th</sup> of April 2021.

The IASW will be represented by myself Vivian Geiran, Chair of the IASW and Eoin Barry, Chair of the IASW Child and Adolescent Mental Health (CAMHS) Special Interest Group and Systemic Psychotherapist and Social Worker working in CAMHS.

If you have any questions regarding this submission prior to the 22<sup>nd</sup> of March you can contact me through our Office Manager, Danielle McGoldrick via [officemanager@iasw.ie](mailto:officemanager@iasw.ie) or tel. 087 7392420.

Sincerely,



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**Vivian Geiran**  
**Chair of IASW**  
**SW00319**

## **Presentation to the Oireachtas Sub-Committee on Mental Health 22<sup>nd</sup> March 2022**

My name is Vivian Geiran I am the Chairperson of the Irish Association of Social Workers, and this is my colleague Eoin Barry, Chair of the IASW Child and Adolescent Mental Health Services (CAMHS) Special Interest Group and Systemic Psychotherapist and Social Worker working in CAMHS.

By way of background, the Irish Association of Social Workers was founded in 1971 and is the National representative professional body for Social Workers.

The IASW currently has a membership of 1,600 social workers. We are an active member of the International Federation of Social Workers, which represents professional social work associations from over fifty-five different countries.

The association is a registered company and is run by a voluntary Board of Directors, which is elected annually by the membership. The Board is supported by the activities of Council representing the principal areas of social work activity in Ireland (children and families, mental health, probation, primary care, disability, hospitals, migrants, etc.).

As the representative group for social workers, we welcome in the main the recommendations of the Report of the Expert Review Group and the overall changes proposed, including those previously suggested by the IASW and incorporated in the Draft Heads of the Bill. We also broadly welcome the provisions of the Mental Health (Amendment) Bill, as outlined in the Draft Heads of the Bill, currently under consideration. We believe these changes will improve mental health services, including giving an amplified voice to service users, including children.

We would emphasise the following points.

- Under the definition of treatment, the proposed replacement of the word *medical* by the term *clinical* does more accurately reflect the broad range of care provided as opposed to a solely medical lens.
- We would emphasise that every involuntarily detained person should have a right to a psycho-social assessment conducted by a CORU registered mental health social worker. In relation to a psychosocial assessment completed by a mental healthcare professional member of the Multi-Disciplinary Team, we would propose that such assessments be specifically completed by a CORU registered mental health social worker. Mental health social workers are best placed to complete a psychosocial assessment, as they have an appreciation for complex systemic factors, risk management and the various therapeutic approaches.

- In relation to access to forensic assessments; “In the instance that a person is detained to ensure safety of others, access to a forensic assessment needs to be made available.” This is especially important in the context of families where there is risk of domestic violence, intimate partner homicide, parricide, filicide and intra and extra familial child homicide.
- The new act should be informed by the guiding principles of trauma-informed care in relation to manual or other forms of seclusion and restraints. We would be particularly concerned by reports that mechanical restraint has been used in some of the inpatient child and adolescent facilities. We would ask that this legislation explicitly prohibits the use of mechanical restraint on children.
- We note the legislation mandates the Mental Health Commission to visit and inspect every community mental health service at least once every five years. We would ask that it is clarified that this encompasses community mental health services for all age groups. We would also ask that the Mental Health Commission’s remit is extended to regulate low, medium, and high support HSE hostels. We would ask that all inpatient facilities are mandated to have a space that families can meet in privacy.
- We support the change of terms in the report, including the use of mental disorder in appropriate contexts, the renaming of mental health review tribunals to mental health review boards. This is an important change as people often felt they had done something wrong if they needed to attend a tribunal. Such changes in technology are positive and welcomed.
- We also welcome the changes in related to provision for children. We would ask that there is further exploration and development of the transition of children to adult mental health services. This area is inconsistent around the country – leading to serious issues in both CAMHS and Adult services.
- We welcome the changes to the rules around consent for children. We would also seek appropriate clarity in the legislation of what would happen if a young person consented to treatments, but their guardian opposes it. We would also ask that the family or guardians of a young person are specifically included in the care of young people in inpatient facilities – this would ensure the best possible outcome when they return home.
- We welcome the importance placed on advocacy and the role of the Guardian ad Litem.

Thank you for inviting us to the sub-committee today. We are happy to answer your questions.