



Mental Health Reform

Promoting Improved Mental Health Services

HSE National Service Plan 2016 Highlights

18th December 2015

The HSE's National Service Plan provides a high-level indication of priorities for mental health service delivery in 2016 along with a statement of the overall budget. A more detailed Mental Health Division Operational Plan will be published in due course which should contain further clarity on the allocation of funding for various initiatives and details of specific developments.

Funding and staffing

- The total budget allocation for mental health in 2016 is €791.6m, inclusive of 2015 Programme for Government funding (PfG). An additional €35 million will be allocated to mental health under PfG funding 2016.
- If fully realised, this level of expenditure would equate to 6.4% of the overall health budget. This proportion is similar to last year's.
- Each National Service Plan shows a projected spend for the year-end. Between 2014 and 2015 there has been an increase of €36.3 million in the projected Mental Health Division spend for the year, from €738.5 million in 2014 to €774.8 million in 2015.
- Between 2012 and 2016 €160 million has been allocated to the development of community mental health services and supports through Programme for Government funding.
- As of September 2015 the number of staff in post in mental health services was 9,316. This represents just 77.6% of the staffing levels recommended in *A Vision for Change*, and an increase of 320 staff in post since September 2014.

Overall priorities in the plan:

The Mental Health Division states its intention to improve the mental health of the population through five key priorities. These are quoted below as stated in the NSP:

- Ensure that the views of service users, family members and carers are central to the design and delivery of mental health services
- Design integrated, evidence based and recovery focused mental health services
- Deliver timely, clinically effective and standardised safe mental health services in adherence to statutory requirements
- Promote the mental health of the population in collaboration with other services and agencies including reducing loss of life by suicide
- Enable the provision of mental health services by highly trained and engaged staff and fit for purpose infrastructure

The prioritisation of recovery-oriented mental health services and increased service user and family member/carer involvement are both in line with Mental Health Reform's *Manifesto for A Vision for Change*. Mental Health Reform has also advocated for an increase in mental health promotion and contributed to the new Suicide Prevention Framework.

Programme for Government 2016 funding priorities

Programme for Government funding of €35 million in 2016 will be provided for continued enhancement of community mental health service provision. Priority will be given to the following, as stated in the NSP:

- Continued development of early intervention and prevention counselling services by Mental Health and Primary Care, specifically for young people under 18 years of age
- Investment in improved psychological and therapeutic interventions based in primary care settings
- Continued investment in clinical programmes, including the development of two new clinical programmes, specifically ADHD in adults and children and dual diagnosis of “mental illness and substance misuse”
- Continued development of services for psychiatry of later life and those with mental health and intellectual disability
- Development of perinatal mental health services
- New initiatives to address the mental health needs of the homeless in collaboration with Primary Care. This will be supported with the allocation of €2 million in funding
- Improved 24/7 response through investment in additional liaison psychiatry services, through enhanced community mental health service provision seven days a week and investment in the development and staffing of crisis houses
- Improved provision of early intervention services for children and adults and to progressively support the population to build resilience and positive mental health, as well as improved physical health
- Development of specialist mental health services, including forensic mental health
- Addressing the current service gap for low secure acute care and rehabilitation services for those with complex needs
- Continued implementation and further development of service user and carer engagement structures at national and CHO levels
- Implementation of the new national suicide prevention strategy Connecting for Life

Additional mental health developments identified in the National Service Plan include the following, quoted from the Plan:

- Provision of additional clinical suicide prevention services through NGOs and to develop health promotion capacity within the CHOs and mental health services
- Enhance the research and evaluation capacity of the division and extend the provision of suicide prevention initiatives and training programmes

- Continue to develop a focus on ensuring people with severe mental health difficulties have access to physical care, monitoring and intervention in partnership with primary care services
- Implement a targeted initiative to transfer individuals currently inappropriately placed in the Central Mental Hospital (CMH) to private settings which will free up the CMH for appropriate admissions from approved centres
- Implement the CAMH service improvement requirements through increased community mental health team capacity, additional CAMHs liaison resources, and new CAMHs day hospital provision
- Progress the implementation of the interim CAMHs eating disorder service and the development of a CAMHs forensic community mental health team provided for in 2015 investment
- Commence implementation of the two-year Integrating Employment and Mental Health Support (IEMHS) pilot project to demonstrate how existing mental health and supported employment services can fulfil best practice Individual Placement Support (IPS) in line with commitments in the Comprehensive Employment Strategy for People with Disabilities 2015–2024.
- Complete the establishment of the Office of Service User Engagement and continue the roll out of programmes to support collaboration and partnership with service users, family members and carers
- Progress the organisational change programme to achieve recovery orientation in the mental health services
- Implement the peer support worker role funded in 2014/2015 within the mental health services
- Further develop training for staff that includes a focus on service user and carers
- Continue to progress the new national forensic mental health hospital with ancillary CAMHs and MHID forensic provision
- Enhance the process to maximise the allocation of resources on an equitable basis aligned to population and deprivation
- Refurbish existing approved centres to comply with Mental Health Commission standards and to introduce anti-ligature measures in all settings
- Progress the implementation of the national mental health ICT infrastructure improvement programme

Performance targets for 2016 include:

- 75% of accepted referrals/ re-referrals to general adult mental health teams to be offered a first appointment and seen within 12 weeks / three months. This target is the same as in 2015.
- 95% accepted referrals / re-referrals to psychiatry of old age community mental health teams to be offered a first appointment and seen within 12 weeks / three months. This target is the same as in 2015.
- 95% of all children admitted to inpatient psychiatric units to be admitted to child and adolescent acute inpatient units. This target is the same as in 2015.

- 72% accepted referrals/ re-referrals to child and adolescent community mental health teams to be offered a first appointment and seen with 12 weeks/ three months. This target is the same as in 2015.