



Mental Health Reform

Promoting Improved Mental Health Services

HSE National Service Plan 2015 Highlights

The HSE's National Service Plan provides a high-level indication of priorities for mental health service delivery in 2015 along with a statement of the overall budget. A more detailed Mental Health Division Operational Plan will be published in mid-December which should contain further clarity on the allocation of funding for various initiatives.

Funding and staffing

- At approximately 9,000 Whole Time Equivalents (WTEs), mental health staffing levels are currently at about 75% of what is recommended by the national mental health policy *A Vision for Change* i.e. 12,240 WTEs.
- The total budget allocation for mental health in 2015 of €756.8m, along with the additional Programme for Government funding of €35m, represents an increase of €37.6m or 5% compared to 2014.
- If fully realised, this level of expenditure would equate to 6.5% of the overall health budget. However, on current trends it is unlikely that the HSE will be able to realise their full allocation in 2015.
- The €35m provided for in Budget 2015 will be held by the Department of Health until allocation is approved. It will be directed towards the continued development of general adult mental health teams, including psychiatry of old age, in addition to child and adolescent community mental health services.

Overall priorities in the plan:

The Mental Health Division states its intention to improve the mental health of the population through five key priorities as follows:

- 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.

Other developments include:

- A commitment to building community mental health teams' capacity for 24/7 contact and response and an investment in practical strategies to reduce loss of life by suicide, including the implementation of the new Strategic Framework for Suicide Prevention.
- An investment in the physical health needs of people with a mental health difficulty. Dedicated initiatives will be developed across health and well-being services, primary care services and the Irish College of General Practitioners. Mental Health Reform had highlighted this issue to the Department of Health and during the Healthy Ireland consultation.
- Establishing the three existing Clinical Care Programmes and designing two additional Clinical care Programmes.
- Continuing to build on the investment in community based mental health services in MHID (Mental Health in Intellectual Disabilities) and services for the homeless mentally ill.
- Providing an additional 12 bed capacity in response to eating disorders and other secondary care acute needs in CAMHs.
- The development of forensic mental health services, including the development of a seed CAMHs community based forensic mental health team.
- Further roll-out of the Advancing Recovery in Ireland project.
- Continued support for Jigsaw services.
- A commitment to review and improve access to psychotherapeutic interventions, working with primary care.
- A commitment to enhance mental health promotion, in collaboration with other services and agencies.
- Involvement in a Genio project to improve integration between mental health and employment services (in partnership with the Department of Social Protection and Mental Health Reform).

There is also an indication of continued work on a national mental health information system. Mental Health Reform has been recommending that a mental health information system that can track provision, quality and outcomes be developed.

Performance targets for 2015 include:

- 75% or more 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 2014.
- 95% or more 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 2014.
- 95% of all children admitted to inpatient psychiatric units to be admitted to child and adolescent acute inpatient units. This target is more challenging than the target set in 2014 at 75% or more.
- 72% or more 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 less challenging than the target set in 2014 at 75% or more.