



DISABILITY FEDERATION OF IRELAND

**Submission by the Disability Federation of Ireland
to the Department of Health and Children**

**Assessment of Progress on the Implementation of *A Vision for
Change* and Implementation Priorities for 2010**

November 2009

DFI welcomes this opportunity to submit a report on its assessment of progress on the implementation of *A Vision for Change*, and the views of the organisation on the implementation priorities for 2010.

DFI represents a significant number of organisations from the voluntary mental health sector and others with a mental health interest. At the outset, it must be stressed that the voluntary mental health sector is an important representative and delivery mechanism within the broader mental health sector, and its active participation in the planning, implementation and review of the service is therefore of vital importance.

DFI'S ASSESSMENT OF PROGRESS ON THE IMPLEMENTATION OF A VISION FOR CHANGE

- ***Implementation and Action Plan***

DFI is concerned at the absence of a comprehensive implementation plan, and would highlight the need for clear time frames and action plan.¹ This was endorsed by the Monitoring Group earlier this year, when their concerns at the lack of leadership at national level for the implementation process, and the absence of a comprehensive implementation plan were brought to the attention of the Minister and the CEO of the HSE. The Monitoring Group have commented that they were not confident that the implementation plan, as drafted, would ensure the implementation of *A Vision for Change*. DFI would be hopeful that the issue of leadership will be resolved with the appointment of the National Director for Mental Health. DFI supports the recommendation that an independent Monitoring Group should be appointed by the Minister for Health and Children to oversee the implementation of this mental health policy.

- ***Mental Health Needs of People with Physical and Sensory disabilities***

While a comprehensive vision for mental health service delivery is described in the second section of the Report of the Expert Group, DFI is concerned that there is no mention of the mental health needs of people with physical and / or sensory disabilities. As the primary mechanism for the development of all aspects of services to people with disabilities, including by definition those with mental health conditions, it is disappointing that there is a lack of cross reference between the NDS and proposed mental health services. It is not evident how the HSE and other providers propose to embed mental health services within a framework of broader disability service provision. This is despite the fact that many people can cross these divisions at particular times throughout their lifetime.

- ***Funding***

It is essential that there is clarity that funding allocated to mental health is to be used for mental health services. A significant recommendation of the Report of the Expert Group (17.3) is the assertion that *'other agencies must take up their responsibilities in full so mental health services can use their funding for mental health responsibilities. Mental health services should not provide the broad range of*

¹ For example, the action plan will need to incorporate the recommendations of the national housing strategy for people with disabilities which is to be completed within a few months and which has a particular focus on people with mental health issues.

services which are more appropriately provided elsewhere.' (p.183). DFI agrees that mainstream providers have not fulfilled their responsibilities to include people with mental health difficulties within their services.

Another issue is the lack of real-time tracking of funding voted for mental health services. For example, the Comptroller and Auditor General's Annual Report for 2007 pointed out that €22 million for mental health services developments never was spent (page 131).

- **Child and Adolescent Mental Health Services**

In its official mental health policy the Government made a commitment to properly staffed Child and Adolescent Mental Health Teams (CAMHT), but has so far failed to do so comprehensively. DFI continues to be concerned at the slow rate of progress in this area. If fully developed, these teams will provide support and services that is focused on the needs of the service users.²

- **Informal and Family Carers**

The importance of the work of informal and family carers is highlighted in Section 13 of the Report. There is still only minimal support for informal and family carers. It had been hoped that this would be addressed through the commitment in the Social Partnership Agreement, *Towards 2016*, to develop a National Carers' Strategy. However a decision was made by Government this year not to publish the Strategy. DFI is very concerned about this, and about the continuing lack of support for carers, and would recommend that this issue is addressed as a matter of urgency.

- **Older People's Mental Health Services**

Mental health services for older people are contained in Ch.13 of the Report of the Expert Group. According to the Report, *'The critical principle in service provision for older people, including those living in the community, is that – regardless of their mental history – they should have access to the services most appropriate to their needs.'* This has not been realised. For example there are few community based supports for people with early stage dementia, such as psycho-social interventions, thorough needs assessment or co-ordinated services delivery.

- **Voluntary Disability Sector**

Each voluntary disability organisation has expert knowledge about their particular disability area and the other conditions that may be associated with it. For example, people with physical and sensory disabilities often have mental health issues. Organisations have developed relationships of trust with their members/clients and can facilitate access to services, both disability-specific and mainstream. It is important therefore that all mental health service providers maintain links with the wider voluntary sector and work as partners with them in providing holistic services.³ The new partnership consultative arrangements being developed by the HSE are a means of supporting better collaboration.

² The Indecon report for Amnesty International documents the shortfalls in the teams.

³ This wider role of disability organisations needs to be recognised in the current value for money and policy review of Disability Services

The Disability Federation of Ireland (DFI) is the national support organisation and advocate for voluntary disability organisations in Ireland who provide services to people with disabilities and disabling conditions, hidden, intellectual, mental health, physical, sensory and emotional.

There are currently over 100 voluntary disability organisations in DFI membership. DFI also works with a growing number of organisations and groups around the country that have a significant disability interest, mainly from the statutory and voluntary sectors. DFI provides:

- Information
- Organisation and Management development
- Training and Support
- Advocacy and Representation
- Networking
- Research and Policy Development

DFI works to ensure that Irish society is fully inclusive of people with disabilities and disabling conditions so that they can exercise fully their civil, social and human rights. In pursuit of this vision:

- Acts as an advocate for the voluntary disability sector.
- Supports organisations to further enable people with disabilities

DFI also supports the broader voluntary and disability sector through its representation of the disability strand with the Community and Voluntary Pillar of the Social Partnership process, as a social partner at the national Economic and Social Forum, Health Board Co-Ordinating Committees and other fora at regional, national and European level. DFI is recognised as a representative on disability issues to a broad range of local, national and regional fora this includes working with the HSE, NESC and Social Partnership.

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