

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment Carlow Kilkenny South
Date	Completed by; Management Team
Chapter 1	Recommendation: 1.1

Chapter 1 Listening to what we heard: Consultation with service users, carers and providers The principles and values described here and underpinning this policy should be reflected in all mental health service planning and delivery

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Monthly SURF group[Service users Regular feedback group] , comprising of Clinical Director, CNM3 for Admission wards, Social Work Team Leader and Advocate from IAN
Kilkenny East Sector have been holding regular feedback meetings with Consultant Psychiatrist , CMHN and patients.
Family consultation meetings with families of patients admitted to DOP for the first time.
Family Education Courses have been held this autumn in both Carlow and Kilkenny Advocate now a member of Clinical Governance Committee.
Advocate has scheduled attendances at all 3 approved centres. Advocate is a member of a number of working groups including the Local Area Implementation group for the Vision for Change.
Evaluation protocols in place incorporating service user views and experiences.
Verbal feedback from therapeutic groups.

Reason for partial completion / not yet

Incremental progression with the standard is on going

Completion Date:	ongoing
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Revised Timescale (commencement and completion dates):	On going
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Please share the key learning points which have evolved in the Implementation of this recommendation

Patient experience heard and issues addressed locally.
Service users opinion informs management team.
Needs for ongoing evaluations and audits.
Need for mechanisms for feedback from therapeutic groups, when appropriate.

Recommend key issues for the consideration of the Independent Monitoring Group

How well are the service users represented by the appointed advocate?

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 3	Recommendation 3.1

Chapter 3 – Partnership in Care: Service Users and Carers:

3.1: Service Users and carers should participate at all levels of the mental health system.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Advocate from IAN now a member of Clinical Governance Committee
IAN advocate sitting on SURF Service Users Regular Feedback committee
A carer, trained by SHINE ran the family education group along with a professional in Kilkenny
Service users on Orchid committee in both Carlow and Kilkenny
User led group in Training Unit in St. Canice's and in Task

Reason for partial completion / not yet

Incremental progression with the standard is on going

Completion Date:	On going
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Revised Timescale (commencement and completion dates):	On going
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Please share the key learning points which have evolved in the Implementation of this recommendation

Patient experience heard and issues addressed locally.
Service users opinion informs management team.
Carers have valuable contribution at psycho/social educational level.
Service users have been contributing positively to the Orchid/information project by competing tasks involved, e.g. screening web sites

Recommend key issues for the consideration of the Independent Monitoring Group

Further exploration of how carers and service users can participate more fully..... can their training and support needs be indentified?

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 3	Recommendation 3.2

Chapter 3 – Partnership in Care: Service Users and Carers:

Advocacy should be available as a right to all service users in all mental health services in all parts of the country.

Recommendation Completion in this Area (Tick Box)

Fully Implemented	yes	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Regional advocate appointed to the service who has scheduled clinic days in all approved centres, and is a member of number of working groups including Clinical Governance, Local area implementation group for Vision for Change.
Within the HSE, cases are referred to the social worker for elder abuse on a needs be basis
Social workers refer people to the various advocacy groups on a needs be basis. These include CUMAS, DESSA, IAN, SHINE,. Information is also given on these groups via the Orchid Project.
Social Workers advise on availability of the Law Centres and Immigrant rights groups on a needs be basis.

Reason for partial completion / not yet

Resource problem re extending advocacy service to Community Mental Health Services

Completion Date:	completed
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Revised Timescale (commencement and completion dates):	na
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Please share the key learning points which have evolved in the implementation of this recommendation

Voice of the M.H. service User and Carer shape and informs the decision making process. The presence of an advocate is an essential part of a modern m.h. service
Increased Awareness of rights of service users

Recommend key issues for the consideration of the Independent Monitoring Group

Should more funding be made available to increase number of advocates?

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 3	Recommendation 3.3

Chapter 3 – Partnership in care: Service Users and carers

Innovative methods of involving service users and carers should be developed by local services, including the mainstream funding and integration of services organised and run by service users and carers of service users.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<i>Partially implemented</i>	<i>yes</i>	<i>Not yet commenced</i>	

Please tick

Please provide supporting factual Information

Orchid Project which is organising community information differently is an innovative project which was established within the Carlow Kilkenny MH Service. This is a web based information project which provides information on M.H. matters, community based support groups, practical issues such as social welfare, housing, employment and training and places a focus on patients rights and entitlements.
Monthly SURF group [Service users Regular feedback group], comprising of Clinical Director, CNM3 for Admission wards, Social Work Team Leader and Advocate from IAN Kilkenny East Sector have been holding regular feedback meetings with Consultant Psychiatrist, CMHN and patients.
A carer's Group is being established in Carlow. A start date has been agreed for the end of January 2010.
Family consultation meetings with families of patients admitted to DOP for the first time.
Family Education Courses have been held this autumn in both Carlow and Kilkenny: the Kilkenny group was co facilitated by a carer Carer and service user participation and involvement in case conferences Input from Mental Health Alliance Groups in patient and out patients therapeutic programmes.

Reason for partial completion / not yet

ONGOING COMMITMENT TO THIS STANDARD

Completion Date:	ONGOING
Revised Timescale (commencement and completion dates):	ONGOING

Please share the key learning points which have evolved in the implementation of this recommendation

Improved feedback and contributions continue to enhance the quality of the service
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Recommend key issues for the consideration of the Independent Monitoring Group

Should further training be made available to professionals on working with advocates, service users, families and carers?

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 3	Recommendation 3.6

Chapter 3: Partnership in care: Service users and carers

Carers should be provided with practical support/measures such as; inclusion in the care planning process with the agreement of the service user, inclusion in the discharge planning process, timely and appropriate information and education, planned respite care and should have a member of the multidisciplinary team to act as a keyworker/designated point of contact with the team and to ensure these services are provided.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Key worker system in place in form of primary nurse within all approved centres.
Pre discharge groups education groups are co ordinated by clinical nurse specialists within the D>O.P
Family /Carer consultation takes place rior to all discharges from the DOP
All patients in approved centres have a multi disciplinary care plan in place with input from a carer/family with the agreement of the service user. Each service user has a key role in the formulation of their multi disciplinary care plan.
The service has a policy supporting the new code of practice relating to the admission, transfer and discharge from approved centres.
Responsibilities are allocated to professionals of all disciplines at sector team meetings re liaison with carers in the community settings
Access to web sites and information via the orchid project Carer involvement in case conferences Co later information is routinely sought from treating teams Family Education groups

Reason for partial completion / not yet

Ongoing

Completion Date:	Ongoing
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Revised Timescale (commencement and completion dates):	ongoing
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Please share the key learning points which have evolved in the Implementation of this recommendation

Compliance with statutory requirements such as the code of practice on admission, transfer and discharge and the m.h. regulations governing the approved centres.

Recommend key issues for the consideration of the Independent Monitoring Group

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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 3	Recommendation: 3.7

Chapter 3 – Partnership in care: service users and carers

The experiences and needs of children of service users should be addressed through integrated action at national, regional and local level in order that such children can benefit from the same life chances as other children.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Not yet commenced

Reason for partial completion / not yet

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Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the Implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 3	Recommendation 3.8

Chapter 3 – Partnership in care; Service users and carers

Mental health services should provide ongoing, timely and appropriate information to service users and carers as an integral part of the overall service they provide.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Orchid Project which is organising community information differently is an innovative project which was established within the Carlow Kilkenny MH Service. This is a web based information project which provides information on M.H. matters, community based support groups, practical issues such as social welfare , housing, employment and training and places a focus on patients rights and entitlements.	
Monthly SURF group[Service users Regular feedback group] , comprising of Clinical Director, CNM3 for Admission wards, Social Work Team Leader and Advocate from IAN Kilkenny East Sector have been holding regular feedback meetings with Consultant Psychiatrist, CMHN and patients.	
Family consultation meetings with families of patients admitted to DOP for the first time.	
Family Education Courses have been held this autumn in both Carlow and Kilkenny	

Reason for partial completion / not yet

ongoing

Completion Date:	ongoing
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Revised Timescale (commencement and completion dates):	ongoing
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Please share the key learning points which have evolved in the Implementation of this recommendation

Usefulness of readily available relevant information

Recommend key issues for the consideration of the Independent Monitoring Group

Further funding on training to enhance quality of information projects

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 3	Recommendation 3.9

Chapter 3 – Partnership in care; Service users and carers

Information on the processes involved in making complaints or comments on mental health services should be widely available.

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<i>yes</i>	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

HSE Comments and Complaints Policy is widely displayed throughout the service and process adhered to when dealing with comments or complaints. Suggestion boxes are in place and comments are welcomed and auctioned where possible.

Complaints are monitored by the Senior Management Team and Clinical Governance Group, dealt with in accordance with HSE policy.

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Reason for partial completion / not yet

completed

Completion Date:	completed
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Revised Timescale <i>(commencement and completion dates):</i>	completed
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Please share the key learning points which have evolved in the implementation of this recommendation

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Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 3	Recommendation 3.10

Chapter 3: Partnership in care; service users and carers

Service user involvement should be characterised by a partnership approach which works according to the principles outlined in this chapter and which engages with a wide variety of individuals and organisations in the local community.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	×	Not yet commenced	
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Please tick

Please provide supporting factual Information

Advocate from IAN now a member of Clinical Governance Committee
IAN advocate sitting on SURF (Services Users Regular Feedback Committee)
Carer ran Family Education group along with mental health professional
Service users on Orchid committee in both Carlow and Kilkenny
Mental Health Alliance groups engage with service users, being invited to the admission units. Mental Health professionals encourage service users to participate in these groups.
Advocates from inclusion Ireland provide a supportive role in advocating for service users with an intellectual disability

Reason for partial completion / not yet

Ongoing development

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the Implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 4	Recommendation 4.2

Chapter 4 – Belonging and participating; Social Inclusion

Evidence-based programmes to tackle stigma should be put in place, based around contact, education and challenge.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	×	Not yet commenced	
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Please tick

Please provide supporting factual Information

Re Stigma and Domestic Violence: MEND- A community initiative has been established in the Carlow/Kilkenny area to address the issues involved in Domestic Violence.
MEND arose from a partnership approach between the Mental Health Service, Community Services, other statutory services and voluntary services in the area, including the Probation service, the Gardai, Women’s Aid and the Rape Crisis Centre. Members of the Systemic Psychotherapy and Social Work Departments were involved in this initiative. Extensive research was carried out on evidence-based approaches in this area and this contributed to the formulation of the programme.
Assessment and Group treatment is offered to men involved in domestic violence. A parallel programme of support is offered to the partners of these men.
Links have been established with the Local Authorities in the area to consider the issue of accommodation needs for vulnerable women and children who are victims of domestic violence

Reason for partial completion / not yet

A dedicated programme has not yet been put in place
Continued liaison required with the Mental Health alliance groups to develop appropriate programmes

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the Implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

The value of a partnership approach involving statutory and voluntary organisations.

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 4	Recommendation 4.6

Chapter 4: Belong and participating: Social Inclusion

Evidence-based approaches to training and employment for people with mental health problems should be adopted and such programmes should be put in place by the agencies with responsibility in this area.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Carlow has a dedicated CNM 2 responsible for STEER Support Training Employment Education and Referral. This group supports people with Mental Health problems to be re educated in the workforce. In Kilkenny TASK., training and support Kilkenny provide a similar function in the vocational and training area for patients with M.H, issues.
Patients with enduring mental health problems are provided with training appropriate to their needs in both Carlow and Kilkenny via the SDS supported training service and through two training areas.
Kares/FAS supported employment: referrals made
Referrals made to FAS community Employment Schemes
Referrals made to VEC adult guidance service
Literacy training has been provided by the Occupational Therapy Manager
Referrals are made to Word Aid, the jobs club and other community training programmes

Reason for partial completion / not yet

Ongoing

Completion Date:	Ongoing
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the Implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 4	Recommendation: 4.8

Chapter 4 – Belonging and participating: social inclusion

Mental health services should be provided in a culturally sensitive manner. Training should be made available for mental health professionals in this regard, and mental health services should be resourced to provide services to other ethnic groups, including provision for interpreters.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

HSE Interpreter service is in place.
All units are furnished with the HSE Intercultural guide.
Service users have been facilitated in contacting relevant services, e.g. Refugee Information Service

Reason for partial completion / not yet

On going

Completion Date:	ongoing
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the Implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 4	Recommendation: 4.9

Chapter 4: Belonging and participating; Social inclusion:

Community and personal development initiatives which impact positively on mental health status should be supported e.g. housing improvement schemes, local environment planning and the provision of local facilities. This helps build social capital in the community.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	×	Not yet commenced	
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Please tick

Please provide supporting factual Information

Involvement in MEND, programme in Carlow (Men overcoming Violent Emotions)
Membership of Homelessness Forum in Carlow, and Service Providers and Homeless Action Teams in Kilkenny
Representation by Mental Health Social Worker on board of the The Rape Crisis Centre

Reason for partial completion / not yet

No current involvement in Local Authority Committees

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the Implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 5	Recommendation : 5.1

Chapter 5: Fostering well being; mental health promotion

Sufficient benefit has been shown from mental health promotion programmes for them to be incorporated into all levels of mental health and health services as appropriate. Programmes should particularly focus on those interventions known to enhance protective factors and decrease risk factors for developing mental health problems.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Orchid Project – a web based mental health information programme for service users at both community and in patient level in Carlow and Kilkenny
A series of factual information leaflets on mental health available to and easily accessible for service users and concerned others
Standardised leaflet information systems on medication available and give to service user (P.A.L.S.)
Directory of counselling services and health promotion resources in Carlow and Kilkenny area disseminated to G.P's
Health Promotion is delivered to service users on waiting lists through a specific information pack incorporating bibliotherapy, useful websites and sources of support
Links with voluntary organisations (e.g. SHINE, AWARE) to promote mental health
Group psycho-education programmes (e.g. Solutions for wellness; coping Skills; Stress Management; Recovery model)

Reason for partial completion / not yet

Evolving and continues to be developed

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

The value of inter agency and service user involvement

Recommend key issues for the consideration of the Independent Monitoring Group

Greater service user involvement
Audit of all programmes for quality improvement

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 5	Recommendation : 5.2

Chapter 5: Fostering well-being; Mental health promotion

All mental health promotion programmes and initiatives should be evaluated against locally agreed targets and standards.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	√	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Programmes/interventions specifically tailored towards (a) specific populations e.g. women isolated in the community; and the M.E.N.D programme which addresses male domestic violence and (b) specific mental health issues (e.g. O.C.D.: eating disorders)

Community based programmes e.g. Leighlinbridge Community Centre

Provision for out of hours programme

Partnership approach with service user representatives involved in a number of programmes

Reason for partial completion / not yet

Continues to develop

Completion Date:

Revised Timescale

(commencement and completion dates):

Please share the key learning points which have evolved in the implementation of this recommendation

Importance of clearly defining and prioritizing targets

Recommend key issues for the consideration of the Independent Monitoring Group

Methods of evaluation

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 5	Recommendation 5.5

Chapter 5: Fostering well-being; Mental health promotion

Training and education programmes should be put in place to develop capacity and expertise at national and local levels for evidence-based prevention of mental disorders and promotion of mental health.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Cognitive Behavioural Therapy Skills Training Programme and Mentorship Programme for mental health staff
Group facilitation skills training delivered by the Health Promotion Department for M.D.T staff
Education input on service and mental health issues to N.C.H.D's
Training of Psychologists in Mental Health
Affiliate psychology placement programme in place which provides support for health promotion

Reason for partial completion / not yet

Incremental progression – further education and training planned

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Can increase capacity within existing resources through appropriate training
Willingness and interest of staff in expanding current roles

Recommend key issues for the consideration of the Independent Monitoring Group

Further education and training programmes to be implemented

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 7	Recommendation 7.1

Chapter 7; Mental Health in primary care;

All individuals should have access to a comprehensive range of interventions in primary care for disorders that do not require specialist mental health services.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	√	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Where primary care teams have been set up, mental health services are represented by community mental health nurses. There is also some consultant involvement

All services users have access to primary care services where the primary care team are set up

Reason for partial completion / not yet

Evolving

Completion Date:

Revised Timescale

(commencement and completion dates):

Please share the key learning points which have evolved in the implementation of this recommendation

Value of a shared, integrated and continuing of care model

Recommend key issues for the consideration of the Independent Monitoring Group

That primary care teams be fully developed

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 7	Recommendation 7.3

Chapter 7 – Mental Health in primary care

All mental health service users, including those in long-stay wards, should be registered with a GP.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Patients in long stay wards are not yet registered with G.P's

Reason for partial completion / not yet

Currently in process

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 7	Recommendation 7.4

Chapter 7: Mental health in primary care:

Appropriately trained staff should be available at the primary care level to provide programmes to prevent mental health problems and promote wellbeing.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	√	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Primary care teams are in the process of being set up. Where they are set up, mental health services are available

Reason for partial completion / not yet

Primary care teams are not fully developed

Completion Date:

Revised Timescale

(commencement and completion dates):

Please share the key learning points which have evolved in the implementation of this recommendation

Value of having the appropriate staff available

Recommend key issues for the consideration of the Independent Monitoring Group

Full development and formation of primary care teams

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 7	Recommendation 7.5

Chapter 7 – Mental health in primary care

It is recommended that the consultation/liaison model should be adopted to ensure formal links between CMHTs and primary care.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Liaisons have been established with the community mental health nurses, consultants and the primary care teams that are in existence

Reason for partial completion / not yet

In the process of being developed

Completion Date:

Revised Timescale

(commencement and completion dates):

Please share the key learning points which have evolved in the implementation of this recommendation

Value and productiveness of the established links

Recommend key issues for the consideration of the Independent Monitoring Group

The shared care and referral process needs to be formalised and implemented on all teams

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 7	Recommendation 7.6

Chapter 7 Mental health in primary care

Mental health professionals should be available in the primary care setting, either within community care, the primary care team or the primary care network.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Nursing staff of the community mental health team attend primary care meetings
There is a liaison Community Mental Health Nurse in place
Consultants have attended primary care team meetings

Reason for partial completion / not yet

Evolving

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Value of shared care

Recommend key issues for the consideration of the Independent Monitoring Group

Logistics of M.D.T. involvement at primary care level

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 7	Recommendation 7.7

Chapter 7: Mental health in primary care

Local multidisciplinary CMHTs should provide a single point of access for primary care for advice, routine and crisis referral to all mental health services (community and hospital based).

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	√	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

All service users are referred to the community mental health teams and discussed at respective team meetings

Reason for partial completion / not yet

Continues to be improved

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Importance of information being co-ordinated through a single point of access

Recommend key issues for the consideration of the Independent Monitoring Group

Management and governance of same

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 7	Recommendation 7.8

Chapter 7 Mental health in primary care:

Protocols and policies should be agreed locally by primary care teams and community mental health teams - particularly around discharge planning. There should be continuous communication and feedback between primary care and the CMHT.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

G.P.s invited to attend Case Conferences or complex cases
All summaries of discharges are sent to the primary care team

Reason for partial completion / not yet

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 7	Recommendation 7.10

Chapter 7 Mental health in primary care:

Physical infrastructure that meets modern quality standards should provide sufficient space to enable primary care and CMHTs to provide high quality care.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 7	Recommendation 7.11

Chapter 7 Mental health in primary care;

The education and training of GPs in mental health should be reviewed. GPs should receive mental health training that is appropriate to the provision of mental health services described in this policy (i.e. community-based mental health services). Service users should be involved in the provision of education on mental health.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Regular contact with G.P.'s in respect of legislation issues, referrals and other concerns. For a has been established in this regard.
Pilot training for G.P.'s is taking place in D.C.U

Reason for partial completion / not yet

Awaiting outcome of pilot training

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Pending outcomes of pilot training

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 9	Recommendation 9.1

Chapter 9 - The Community Mental Health Team (CMHT)

To provide an effective community-based service, CMHTs should offer multidisciplinary home-based treatment and assertive outreach, and a comprehensive range of medical, psychological and social therapies relevant to the needs of service users and their families. Each multidisciplinary team should include the core skills of psychiatry, nursing, social work, clinical psychology, occupational therapy. The composition and skill mix of each CMHT should be appropriate to the needs and social circumstances of its sector population.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Community M.H, Teams have been developed in each community sector which provide home based treatments and assertive outreach. Each team has limited access to various psychological and social and occupational therapy services, and full nursing and medical input.

Reason for partial completion / not yet

Teams and not fully resourced

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 9	Recommendation 9.2

Chapter 9 – The Community Mental Health Team (CMHT)

The cornerstone of mental health service delivery should be an enhanced multidisciplinary Community Mental Health Team (CMHT), which incorporates a shared governance model, and delivers best-practice community-based care to serve the needs of children, adults and older people.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	<i>yes</i>	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Not commenced yet

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 9	Recommendation 9.3

Chapter 9 – The Community Mental Health Team (CMHT)

Links between CMHTs primary care services, voluntary groups and local community resources relevant to the service user's recovery should be established and formalised.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	yes
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Please tick

Please provide supporting factual Information

Currently not in place, we intend to re establish a formal link up programme

Reason for partial completion / not yet

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 9	Recommendation 9.4

Chapter 9 The Community Mental Health Team (CMHT)

Links between CMHTs primary care services, voluntary groups and local community resources relevant to the service user's recovery should be established and formalised.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Long established links with wide range of voluntary and statutory groups, e.g. Social Workers, community mental health nurses, STEER and TASK network with FAS supported employment agencies and community employment schemes to facilitate appropriate placement for service users
Liaison with the Mental Health Alliance groups, to facilitate service user participation in the services they provide
Long established links with GPs

Reason for partial completion / not yet

No formal policy

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 10	Recommendation 10.3

Chapter 10: Child & Adolescent Mental Health Services

It is recommended that service users and their families and carers be offered opportunities to give feedback on their experience and to influence developments within these services.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Frank Kelly

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 10	Recommendation 10.1

Chapter 10: Child & Adolescent Mental Health Services:
 The need to prioritise the full range of mental health care, from primary care to specialist mental health services for children and adolescents is endorsed in this policy.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 10	Recommendation: 10.7

Chapter 10: Child & Adolescent Mental Health Services:
 Two child and adolescent CMHTs should be appointed to each sector (population: 100,000).
 One child and adolescent CMHT should also be provided in each catchment area (300,000 population) to provide liaison cover.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 10	Recommendation 10.8

Chapter 10: Child & Adolescent Mental Health Services

These child and adolescent CMHTs should develop clear links with primary and community care services and identify and prioritise the mental health needs of children in each catchment area.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 10	Recommendation 10.9

Chapter 10: Child & Adolescent Mental Health Services

Urgent attention should be given to the completion of the planned four 20-bed units in Cork, Limerick, Galway and Dublin, and multidisciplinary teams should be provided for these units.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 10	Recommendation 10.10

Chapter 10: Child & Adolescent Mental Health Services

Early intervention and assessment services for children with autism should include comprehensive multidisciplinary and paediatric assessment and mental health consultation with the local community mental health team, where necessary.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.3

Chapter 11 General Adult Mental Health Services:

CMHTs should provide support and consultation to primary care providers in the management and referral of individuals with mental health problems.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation : 11.4

Chapter 11: General Adult Mental Health Services

The proposed general adult mental health service should be delivered through the core entity of one Community Mental Health Team (CMHT) for sector populations of approximately 50,000. Each team should have two consultant psychiatrists.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.5

Chapter 11: General Adult Mental Health Services

It is recommended that a shared governance model, incorporating clinical team leader, team coordinator and practice manager be established to ensure the provision of best-practice integrated care, and evaluation of services provided.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	yes
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation :11.6

Chapter 11: General Adult Mental Health Services

CMHTs should be located in Community Mental Health Centres with consideration for easy access for service users. High quality day hospitals and acute in-patient care facilities should also be provided.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	yes
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.7

Chapter 11 General Adult Mental Health Services

CMHTs should evolve a clear care plan with each service user and, where appropriate, this should be discussed with carers.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	yes	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Multi disciplinary care plan is in use in all approved centres and plans to roll it out in the community

Reason for partial completion / not yet

On going

Completion Date:	ongoing
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.8

Chapter 11: General Adult Mental Health Services

Each team should include a range of psychological therapy expertise to offer individual and group psychotherapies in line with best practice.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Community based group interventions (e.g. mindfulness based groups programmes; mixed and depressions; O.C.D. groups)
Day Hospital programmes (e.g. stress management; coping skills; managing mood)
Community Integrated Eating Disorder Programme
One to one psychological interventions

Reason for partial completion / not yet

Insufficient psychology staffing levels

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Need for full complement of psychology staff to appropriately meet this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Ensuring full complement of Psychologists on all teams as per Vision for Change recommendations

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.9

Chapter 11: General Adult Mental Health Services

Service users and providers should collaborate to draw up clear guidelines on the psychological needs of users and the range of community resources and supports available to them locally.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Regular feedback is given to service provider by the Regional Advocate on the needs of service users
Collaboration with service users in the development of resources both web and paper based e.g. Orchid Project; Information Packs.
Identification of locally available support and their incorporation into an accessible and readily available directory
A number of fora are established with service user representation to inform service provider and to collaborate in the development of guidelines and policies (e.g. clinical governance group).
Service user feedback is also actively sought through service user satisfaction questionnaires

Reason for partial completion / not yet

Ongoing

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Importance and value of service user and service provider collaboration

Recommend key issues for the consideration of the Independent Monitoring Group

Service users having a place at the table where collaboration can take place (i.e. integration into the existing management structures)

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.10

Chapter 11: General Adult Mental Health Services

Home-based treatment teams should be identified within each CMHT and provide prompt services to known and new service users as appropriate. This sub-team should have a gate-keeping role in respect of all hospital admissions.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	yes
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Please tick

Please provide supporting factual Information

Not yet commenced

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.11

Chapter 11 General Adult Mental Health Services

Arrangements should be evolved and agreed within each CMHT for the provision of 24/7 multidisciplinary crisis intervention. Each catchment area should have the facility of a crisis house to offer temporary low support accommodation if appropriate.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<i>Partially implemented</i>	<i>yes</i>	<i>Not yet commenced</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tick

Please provide supporting factual Information

Two Crisis Houses are available within the service, Altamount in Kilkenny and Greenbanks in Carlow, however a multi disciplinary crisis team is not established.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.12

Chapter 11 General Adult Mental Health Services:

In addition to the existing Early Intervention Services (EIS) pilot project currently underway in the HSE, a second EIS pilot project should be undertaken with a population characterised by a different socio-demographic profile, with a view to establishing the efficacy of EIS for the Irish mental health service.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	yes
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Please tick

Please provide supporting factual Information

Not yet commenced

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.13

Chapter 11 General Adult Mental Health Services

Each 50 bed acute psychiatric unit should include a close observation unit of six beds.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<i>yes</i>	<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

The Department of Psychiatry in Kilkenny has 44 beds with 4 high observation beds.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.15

Chapter 11: General Adult Mental Health Services

It is recommended that a shared governance model, incorporating clinical team leader, team coordinator and practice manager be established to ensure the provision of best-practice integrated care, and evaluation of services provided.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	yes
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Please tick

Please provide supporting factual Information

Not yet commenced

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation :11.6

Chapter 11: General Adult Mental Health Services

CMHTs should be located in Community Mental Health Centres with consideration for easy access for service users. High quality day hospitals and acute in-patient care facilities should also be provided.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

High Quality acute in patient care facility in Kilkenny
Two Day Hospitals currently exist, one in Carlow and one in Kilkenny. These facilities are located within the old psychiatric hospital
One community mental health team hold their out patients appointments in a purpose built community health centre.

Reason for partial completion / not yet

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.7

Chapter 11 General Adult Mental Health Services

CMHTs should evolve a clear care plan with each service user and, where appropriate, this should be discussed with carers.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	yes
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Please tick

Please provide supporting factual Information

MDCare Plan fully implemented within the approved centres with plans to roll it out to the community facilities

Reason for partial completion / not yet

Completion Date:	
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Revised Timescale <i>(commencement and completion dates):</i>	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.8

Chapter 11: General Adult Mental Health Services

Each team should include a range of psychological therapy expertise to offer individual and group psychotherapies in line with best practice.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	yes	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.9

Chapter 11: General Adult Mental Health Services

Service users and providers should collaborate to draw up clear guidelines on the psychological needs of users and the range of community resources and supports available to them locally.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.10

Chapter 11: General Adult Mental Health Services

Home-based treatment teams should be identified within each CMHT and provide prompt services to known and new service users as appropriate. This sub-team should have a gate-keeping role in respect of all hospital admissions.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	yes
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Please tick

Please provide supporting factual Information

Not yet commenced

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.11

Chapter 11 General Adult Mental Health Services

Arrangements should be evolved and agreed within each CMHT for the provision of 24/7 multidisciplinary crisis intervention. Each catchment area should have the facility of a crisis house to offer temporary low support accommodation if appropriate.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Two 24/7 crisis intervention houses are located within the service, these houses are staffed 24/7. no multidisciplinary crisis intervention team.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.12

Chapter 11 General Adult Mental Health Services:

In addition to the existing Early Intervention Services (EIS) pilot project currently underway in the HSE, a second EIS pilot project should be undertaken with a population characterised by a different socio-demographic profile, with a view to establishing the efficacy of EIS for the Irish mental health service.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	yes
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Please tick

Please provide supporting factual Information

Not yet commenced

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.13

Chapter 11 General Adult Mental Health Services

Each 50 bed acute psychiatric unit should include a close observation unit of six beds.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<i>yes</i>	<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Our 44 bed acute psyc unit has 4 bed high observ area

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.14

Chapter 11: General Adult Mental Health Services

Each of the four HSE regions should provide a 30-bed ICRU unit - with two sub-units of 15 beds each - to a total of 120 places nationally, staffed with multidisciplinary teams with appropriate training.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	yes
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Please tick

Please provide supporting factual Information

Not commenced

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.15

Chapter 11: General Adult Mental Health Services

It is recommended that a shared governance model, incorporating clinical team leader, team coordinator and practice manager be established to ensure the provision of best-practice integrated care, and evaluation of services provided.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Not commenced

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 12	Recommendation 12. 1

Chapter 12: Rehabilitation and recovery mental health services for people with severe and enduring mental illness. A strong commitment to the principle of "Recovery" should underpin the work of the rehabilitation CMHT - the belief that it is possible for all service users to achieve control over their lives, to recover their self-esteem, and move towards building a life where they experience a sense of belonging and participation.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Consultant Psychiatrist and 2 NCHDs and nursing staff form our rehabilitation team Nursing staff have been trained in the recovery model and currently being rolled out.

Reason for partial completion / not yet

Other health professionals whose interventions encompass a recovery perspective are not yet engaged in the team, e.g. OT, Social Worker, Psychologist, Addiction Counsellor, MH support worker
Team members to be trained in the recovery model.

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recovery cannot be fully fostered without a full rehabilitation CMHT to meet all the needs of the individuals it serves.

Recommend key issues for the consideration of the Independent Monitoring Group

Examine barriers to core staffing of the CMHT

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 12	Recommendation 12.2

Chapter 12: Rehabilitation and recovery mental health services for people with severe and enduring mental illness Some 39 rehabilitation and recovery CMHTs should be established nationally, with assigned sector populations of 100,000. Assertive outreach teams providing community-based interventions should be the principal modality through which these teams work.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	yes
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Please tick

Please provide supporting factual Information

Not yet commenced

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 12	Recommendation 12.3

CHAPTER 12 - Rehabilitation and recovery mental health services for people with severe and enduring mental illness. The physical infrastructure required to deliver a comprehensive service should be provided in each sector. Rehabilitation and recovery CMHTs should have responsibility for those physical resources appropriate to the needs of their service users, such as community residences.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Clann Nua, Carlow and Tuas Nua, Kilkenny provide accommodation promoting recovery and progression to independent living.
Vocational training and support provided by STEER, Carlow, Task, Kilkenny & Rehab training services encompassing the recovery ethos. Close liaison with MH Alliance groups in Carlow & Kilkenny.
Peer support through the voluntary organisations & service support groups facilitated in Day Hospitals by CNM2's and by the OT, Social Worker Services.
Assertive Outreach team, Carlow provide support to this care group
Community residential facilities in both Carlow & Kilkenny, under the care of the rehab team promote recovery principles & foster the independence of residents according to individual need.
Team has access to in-patient care

Reason for partial completion / not yet

Specialist recovery focussed accommodation to be further developed in Kilkenny. Day Centres to be resourced & developed in line with the recovery model
Community based facility for team not yet in existence
No social worker on team to liaise with housing authority to provide accommodation No OT to provide full support and training for community integration & independent living ITU, Kilkenny developing recovery based programmes, awaiting further training of staff and adaptations to building to fully implement same and move towards person-centered training facility.

Completion Date:	
Revised Timescale (commencement and completion dates):	

Please share the key learning points which have evolved in the implementation of this recommendation

Importance of planning the transition from fully supported to independent living & ensuring that all physical resources needed to deliver the best service to this care group are now in place
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Recommend key issues for the consideration of the Independent Monitoring Group

Examine barriers to providing appropriate infrastructure
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Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 12	Recommendation 12.5

CHAPTER 12 - Rehabilitation and recovery mental health services for people with severe and enduring mental illness. Rehabilitation and recovery mental health services should develop local connections through linking with local statutory and voluntary service providers and support networks for people with a mental illness is required to support community integration.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Individuals have access to information on voluntary & statutory organisations through ORCHID project. ORCHID involves multi-agency and MH professional liaison
Staff facilitate access for individuals to Mental Health Alliance organisations
Regular contact with individuals by SHINE & GROW. Individuals attend courses appropriate to their needs.
Mental Health Association Kilkenny provide support systems for individuals and have strong alliance to MHI
CNM 2 on Homeless Action Team
IAN advocate provides support to individuals

Reason for partial completion / not yet

Mental Health Association, Carlow being formed

Completion Date:	ongoing
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Importance of allocation of funding to foster training of individuals in community service facilities

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 12	Recommendation 12.6

CHAPTER 12 - Rehabilitation and recovery mental health services for people with severe and enduring mental illness. All current staff within the mental health system who are appointed to rehabilitation and recovery services should receive training in recovery-oriented competencies and principles.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	Yes
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 12	Recommendation 12.7

CHAPTER 12 - Rehabilitation and recovery mental health services for people with severe and enduring mental illness. The development of formal coordination structures between health services and employment agencies should be a priority if the delivery of seamless services is to be facilitated.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	<i>Yes</i>	<i>Not yet commenced</i>	

Please tick

Please provide supporting factual Information

Access to FAS (Supported Employment)

Reason for partial completion / not yet

Appointment of social worker to the rehabilitation team to promote and formally co-ordinate liaison with employment agencies is outstanding

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Training should be focussed on securing employment & services co-ordinated to facilitate the individual to reach his/her full potential within the workforce

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 12	Recommendation 12.8

CHAPTER 12 - Rehabilitation and recovery mental health services for people with severe and enduring mental To facilitate the service user in re-establishing meaningful employment, development of accessible mainstream training support services and coordination between rehabilitation services and training and vocational agencies is required.

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Yes	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Individuals in the service have access to VTOS(Vocational Training Opportunities Scheme) VEC (Vocational Education Committee), National Learning Network, REHAB, TASK, STEER, contact with whom is facilitated by nursing staff.
Key worker in place to ensure open communication continues between the rehabilitation team, the individual in training and the training agency involved.

Reason for partial completion / not yet

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Importance of providing continual support to individuals attending mainstream training

Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 12	Recommendation 12.9

CHAPTER 12 - Rehabilitation and recovery mental health services for people with severe and enduring mental illness. Evaluation of services to the severe and enduring service user group should incorporate quality-of-life measures and assess the benefit and value of these services directly to service users and their families.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

Assessments using quality of life indices have been undertaken with many individuals.
Individuals encouraged to provide feedback on available support through 'Your Service, Your Say', and informally to staff of the team.
Accreditation & performance management encompassed evaluation & appraisal of service provision
Monthly minuted house meetings within community settings afford individuals the opportunity to be part of the decision-making process
User-led group within ITU, Kilkenny evaluates service provision

Reason for partial completion / not yet

Rehab service in developmental stages so evaluative measures need to be examined & proper resourcing provided for same

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Evaluation leads to improvement
Importance of services-user input

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.1

CHAPTER 13 - Mental health services for older people Any person, aged 65 years or over, with primary mental health disorders or with secondary behavioural and affective problems arising from experience of dementia, has the right to be cared for by mental health services for older people (MHSOP).

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	Yes
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Please tick

Please provide supporting factual Information

Currently the MHSOP caters for persons who develop Mental Health problems after they reach the age of 65 years
Persons with enduring mental illness who reach the age of 65 years have different presentations and needs and would require a different type of service to that currently provided by MHSOP

Reason for partial completion / not yet

Current service not suitable for persons with enduring mental illness

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

New onset mental illness over 65 years and enduring mental illness individuals who reach 65 years have different needs.

Recommend key issues for the consideration of the Independent Monitoring Group

Extra staff with different training required if MHSOP were to treat individuals with enduring mental illness. Examinations of current resources also required.

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.3

CHAPTER 13 - Mental health services for older people Health promotion programmes and initiatives found to be beneficial to older adults should be implemented.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<i>Yes</i>	<i>Partially implemented</i>		<i>Not yet commenced</i>	

Please tick

Please provide supporting factual Information

Prata Pet Therapy implemented on St. Gabriel's ward
Visits from National Council for the Blind & Deaf Society
Specialist Occupational Therapy on St. Gabriel's ward
Ongoing medical reviews/care plan reviews
Extensive links with voluntary organisations & social support groups, e.g. Alzheimer's Society, IWA, Sue Ryder, Aware

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Constant awareness of existing & new services
Linking in with geriatric services
Patient centred approach to care

Recommend key issues for the consideration of the Independent Monitoring Group

Forging closer links with medical geriatric services/liaison

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.4

CHAPTER 13 - Mental health services for older people Primary health care teams should play a major role in assessment and screening for mental illness in older people and should work in a coordinated and integrated manner with the specialist teams to provide high quality care, particularly care that is home-based..

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Yes	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Individuals are referred to MHSOP service by GP's. MHSOP provides a consultation/liason service feeding back to GP's following assessments and making recommendations for optimum plan of care
Established links with all of the Gp's in Carlow/Kilkenny, whether in Primary Care Centres or practicing independently

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Importance of constant communication with GP's to ensure optimum care

Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.5

CHAPTER 13 - Mental health services for older people A total of 39 MHSOP multidisciplinary teams should be established nationally, one per 100,000 population, providing domiciliary and community-based care.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	Yes
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.6

CHAPTER 13 - Mental health services for older people Priority should be given to establishing comprehensive specialist MHSOP where none currently exist.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

N/A

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.7

CHAPTER 13 - Mental health services for older people Physical resources essential to service delivery, acute beds and continuing care, service headquarters, community-based and day facilities should be provided for MHSOP within each sector..

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

The services runs St. Gabriel's Continuing Care ward for elderly people. Physical space in this unit for therapies is inadequate

Reason for partial completion / not yet

Acute admissions are currently to the General Adult Facility in DOP; VFC recommends a separate Acute Unit which is not currently provided
Day Hospital services are not currently provided
Current headquarters of MHSOP does not lend itself to easy access by the public and its location does not comply with VFC

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Importance of having more contact with service providers prior to making decisions on service development

Recommend key issues for the consideration of the Independent Monitoring Group

Possibility of linking with geriatric services for development of joint day hospital/Dementia clinics. Some discussion has already taken place informally.

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.8

CHAPTER 13 - Mental health services for older people There should be eight acute assessment and treatment beds in each regional acute psychiatric unit for MHSOP.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.9

CHAPTER 13 - Mental health services for older people

There should be one central day hospital per mental health catchment area (300,000 population) providing 25 places, and a number of travelling day hospitals in each mental health catchment area.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	Yes
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Catchment area reconfiguration, funding, staffing

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Discussion with all service providers recommended

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.10

CHAPTER 13 - Mental health services for older people There should be an appropriate provision of day centres in each mental health catchment area, but their provision should not be the responsibility of the MHSOP. The development of formal coordination structures between health services and employment agencies should be a priority if the delivery of seamless services is to be facilitated.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	<i>Yes</i>	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Availability of Day Centres throughout Carlow/Kilkenny

Reason for partial completion / not yet

Availability of Day Centres varies. Barriers to attending include lack of transport & lack of places in some centres
Some areas provide this service on a limited basis only
Increased local funding required

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.12

CHAPTER 13 - Mental health services for older people Carers and families should receive appropriate recognition and support including education, respite, and crisis response when required..

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<i>Yes</i>	<i>Partially implemented</i>		<i>Not yet commenced</i>	

Please tick

Please provide supporting factual Information

All service users receive support and education from Medical, Nursing and Allied Health Professionals staff.
Service liaises with respite services for individuals in need
Service offers education and support for families based on their particular needs
A comprehensive flexible service is provided to meet the needs of service users including crisis intervention
Service is home-based and all assessments take place in the home/nursing home

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Considerable expertise has been attained in this area by MHSOP

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.13

CHAPTER 13 - Mental health services for older people Older people with mental health problems should have access to nursing homes on the same basis as the rest of the population

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<i>Yes</i>	<i>Partially implemented</i>		<i>Not yet commenced</i>	

Please tick

Please provide supporting factual Information

The service has not experienced any discrimination towards people with mental health problems

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Both service users and Nursing Home care providers need support from the Mental Health team especially during the initial stages of an admission to a nursing home
This support helps prevent mental health service users from being stigmatised and promotes good relations between mental health services and care providers

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.14

CHAPTER 13 - Mental health services for older people There should be 30 continuing care places for older people with mental disorders in each mental health catchment area.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	<i>Yes</i>	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Beds are currently provided in St. Gabriel's Unit, which is a designated centre under the MHA 2001

Reason for partial completion / not yet

Resources required to allow for provision of extra beds. A de-designated unit would have a positive effect on the length of acute in-patient stays and enable the MHSOP to provide respite services, which would prevent admissions from occurring. The MHSOP could also use this facility to accommodate individuals with chronic and enduring mental illness, who need respite or support, to discharge from the Acute Unit.

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

In line with the expanse of the catchment area, St. Gabriel's/St/ Luke's Units are a centrally located area ideal to provide continuing care beds for the whole catchment area, as well as respite services and assessments beds.

Recommend key issues for the consideration of the Independent Monitoring Group

Consider St. Luke's or part thereof as a de-designated centre under the care of MHSOP. Previous consultant recommended that 4 of the current individuals resident in St. Luke's Unit would be better cared for in a de-designated unit. Current consultant concurs with this assessment.
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Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 14	Recommendation 14.1

CHAPTER 14 - Mental health services for people with intellectual disability The process of service delivery of mental health services to people with intellectual disability should be similar to that for every other citizen.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Full access to all general adult services

Reason for partial completion / not yet

No dedicated MHID team

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 14	Recommendation 14.2

CHAPTER 14 - Mental health services for people with intellectual disability Detailed information on the mental health of people with intellectual disability should be collected by the NIDD. This should be based on a standardised measure. Data should also be gathered by mental health services for those with intellectual disability as part of national mental health information gathering.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

All services users with an intellectual disability are on the NIDD

Reason for partial completion / not yet

No dedicated MHID team

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 14	Recommendation 14.4

CHAPTER 14 - Mental health services for people with intellectual disability The promotion and maintenance of mental well-being should be an integral part of service provision within intellectual disability services.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 14	Recommendation 14.5

CHAPTER 14 - Mental health services for people with intellectual disability All people with an intellectual disability should be registered with a GP and both intellectual disability services and MHID teams should liaise with GPs regarding mental health care.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	√	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

All patients with an intellectual disability are registered with a GP

Reason for partial completion / not yet

No dedicated consultant for MHID team

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 14	Recommendation 14.6

CHAPTER 14 - Mental health services for people with intellectual disability Mental health services for people with intellectual disability should be provided by a specialist mental health of intellectual disability (MHID) team that is catchment area-based. These services should be distinct and separate from, but closely linked to, the multidisciplinary teams in intellectual disability services who provide a health and social care service for people with intellectual disability.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<input type="checkbox"/>	<i>Partially implemented</i>	<input type="checkbox"/>	<i>Not yet commenced</i>	<input checked="" type="checkbox"/>
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

No dedicated consultant for a MHID team

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 14	Recommendation 14.7

CHAPTER 14 - Mental health services for people with intellectual disability The multidisciplinary MHID teams should be provided on the basis of two per 300,000 population for adults with intellectual disability.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

No dedicated consultant for a MHID team

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 14	Recommendation 14.8

CHAPTER 14 - Mental health services for people with intellectual disability One MHID team per 300,000 population should be provided for children and adolescents with intellectual disability.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

No dedicated consultant for a MHID team

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 14	Recommendation 14.9

CHAPTER 14 - Mental health services for people with intellectual disability A spectrum of facilities should be in place to provide a flexible continuum of care based on need. This should include day hospital places, respite places, and acute, assessment and rehabilitation beds/places. A range of interventions and therapies should be available within these settings.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

No dedicated consultant for a MHID team

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 14	Recommendation 14.10

CHAPTER 14 - Mental health services for people with intellectual disability In order to ensure close integration, referral policies should reflect the needs of individuals with intellectual disability living at home with their family, GPs, the generic intellectual disability service providers, the MHID team and other mental health teams such as adult and child and adolescent mental health teams.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

No dedicated consultant for a MHID team

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15.2	Recommendation 15.2.6

Mental health services for homeless people Community mental health teams should adopt practices to help prevent service users becoming homeless, such as assessment of housing need/living circumstances for all people referred to mental health services.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Discharge Policy in place
Homeless people referred to Social Worker in Sector team: social workers carry out housing needs assessments when appropriate
Service represented in weekly HAT team
Liaison with and referral to support workers with Focus Ireland

Reason for partial completion / not yet

Assessments of living circumstances are not carried out on all people referred to the mental health services

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Efforts to assist in the provision of suitable housing are an essential part of the recovery process

Recommend key issues for the consideration of the Independent Monitoring Group

Can effort be made to lobby for continued development of service for homeless people?

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.2.7

Mental health services for homeless people Integration and coordination between statutory and voluntary housing bodies and mental health services at catchment area level should be encouraged.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Participation in Service Providers Group and Homeless Action Team
Regular Liaison with Local Authorities and Respond, in relation to service users presenting with housing issues
Presentation of HAT to multi disciplinary staff at DOP, St. Luke's Hospital: dialogue and debate
Presentation by HAT to RAPID/Local Authority Committee included a module on mental health issues for homeless people

Reason for partial completion / not yet

Continued development continues to be required

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Easier communications between agencies in attempting to achieve positive outcomes for homeless people

Recommend key issues for the consideration of the Independent Monitoring Group

People with serious mental health diagnoses are not as yet prioritised on the Local Authority Housing Lists; can this be addressed at a national level?

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.3.1

Mental health services for people with co-morbid severe mental illness and substance abuse problems Mental health services for both adults and children are responsible for providing a mental health service only to those individuals who have co-morbid substance abuse and mental health problems.

Recommendation Completion in this Area (Tick Box)

Fully Implemented	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

People with addiction problems only are referred to Ardu, the community Addiction Services in Carlow and Kilkenny

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.3.2

Mental health services for people with co-morbid severe mental illness and substance abuse problems General adult CMHTs should generally cater for adults who meet these criteria, particularly when the primary problem is a mental health problem.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

All referrals which fall into this category are dealt with by the MDT Sector Teams addiction counsellors from the CATS service are available to the teams.

Reason for partial completion / not yet

One addiction counsellor per team required

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.3.4

Mental health services for people with co-morbid severe mental illness and substance abuse problems. Specialist adult teams should be developed in each catchment area of 300,000 to manage complex, severe substance abuse and mental disorder.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

No specialist team in place

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.3.5

Mental health services for people with co-morbid severe mental illness and substance abuse problems. These specialist teams should establish clear linkages with local community mental health services and clarify pathways in and out of their services to service users and referring adult CMHTs.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

No specialist team in place

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.4.1

Mental health services for people with eating disorders Health promotion initiatives that support greater community and family awareness of eating disorders should be supported and encouraged.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

The community Eating Disorder team has established links with a number of community organisations in the field, including Body Wise.
The community Eating Disorder Team organised a National conference on Eating disorders which highlighted the issues involved and presented an innovative approach to assessment, education and treatment to professionals and members of the public. The conference was very well attended and received widespread radio and newspaper coverage.

Reason for partial completion / not yet

Completion Date:

Revised Timescale (commencement and completion dates):

Please share the key learning points which have evolved in the implementation of this recommendation

The importance of building close links with voluntary and statutory organisations in the field
The positive impact that concentrated, one-off events can have in raising awareness and disseminating information and skills.

Recommend key issues for the consideration of the Independent Monitoring Group

The need for various fora to highlight areas of best practice in the mental health services.

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.4.4

Mental health services for people with eating disorders Eating disorders in children and adolescents should be managed by the child and adolescent should be managed by the child and adolescent CMHTs on a community basis, using beds in one of the five in-patient child and adolescent units if required..

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.4.8

Mental health services for people with eating disorders The four specialised multidisciplinary adult teams, and the national team for children and adolescents, should provide community-based consultation, advice and support to all agencies in their area.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

A virtual Community Eating Disorder Team has been established in the Carlow/Kilkenny Mental Health Service. The team comprises a consultant psychiatrist and members of the Systemic Psychotherapy and Clinical Psychology Departments. Dietetic expertise is sourced from outside the agency.
The team provides assessments, education and treatment to sufferers of eating disorders and their families
The Team provides a service on an in-patient and out-patient basis and offers individual psychotherapy, family therapy and an educational package

Reason for partial completion / not yet

No initiatives have been established as yet on a regional or national basis and the service is dependent on existing resources in the community teams.

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

That the imagination, motivation and flexibility of staff members can be harnessed to provide innovative services from existing resources.

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.5.1

Liaison mental health services The existing provision of nine LMHS teams nationally should be increased to thirteen.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Frank Kelly

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.5.2

Liaison mental health services Complete multidisciplinary LMHS should be established in the three national children's hospitals.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Frank Kelly

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.5.3

Liaison mental health services Liaison child and adolescent mental health services should be provided by a designated child and adolescent CMHT, one per 300,000 population (see Chapter 10)

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Frank

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.7.1

Suicide Prevention There should be agreed protocols and guidelines for engaging with those assessed to be at high risk of suicidal behaviour, and for engaging with those who are particularly vulnerable in the wake of a suicide, within mental health care settings.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

There is a Liaison Nurse specialising in deliberate self harm
Meetings between Mental Health Service and families of those bereaved by suicide takes place
A level 2 Risk Assessment is carried out on those service users deemed to be high risk after having completed a Level I Risk Assessment
Mental Health service has resource in dedicated suicide prevention office
Suicide prevention plans adopted and put in place for those who are vulnerable and/or at high risk

Reason for partial completion / not yet

In the process of being further developed and formalised

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Importance of early identification, implementation of action plan and follow up

Recommend key issues for the consideration of the Independent Monitoring Group

Importance of having an agreed process formalised

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.7.2

Suicide Prevention Particular care should be given to service users of mental health services who have been identified as being at high risk of suicidal behaviour e.g. those with severe psychosis, affective disorders, and individuals in the immediate aftermath of discharge from in-patient settings.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

MDT Care Plans for those discharged from in patient setting is in place
Outreach Programmes delivered by Community Mental Health Nurse
Specific Case Conferences held in relation to complex cases
Specific Group Programmes in place e.g. group therapy for affective disorders
Psychological interventions with those at risk

Reason for partial completion / not yet

Service being continually developed in the light of new evidence based research

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Importance of inter agency collaboration and links with suicide prevention groups

Recommend key issues for the consideration of the Independent Monitoring Group

The recommendations made by Community Suicide Prevention Groups

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.8.1

People with borderline personality disorder The needs of people with mental health problems arising from or co-morbid with borderline personality disorder should be recognised as a legitimate responsibility of the mental health service, and evidence-based interventions provided on a catchment area basis.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Evidence based interventions are been provided in some catchment areas particular through Psychology services.

Reason for partial completion / not yet

Lack of full compliment MDTCommunity Mental Health Teams

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Specific types of interventions are differentially effective with borderline personality disorder

Recommend key issues for the consideration of the Independent Monitoring Group

Full compliment of MDT’s Community Mental Health Teams be established in each service sector

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15	Recommendation 15.8.2

People with borderline personality disorder Specialised therapeutic expertise should be developed in each catchment area to deal with severe and complex clinical problems that exceed the available resources of generic CMHTs.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<input type="checkbox"/>	<i>Partially implemented</i>	<input checked="" type="checkbox"/>	<i>Not yet commenced</i>	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

Complex case conferences are carried out at regular basis allowing development of specialist therapeutic expertise in this area.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 16	Recommendation 16.4

CHAPTER 16 - Management and organisation of mental health services

Multidisciplinary Mental Health Catchment Area Management Teams should be established. These teams should include both professional managers and clinical professionals along with a trained service user and should be accountable to the National Care Group Manager and the National Mental Health Service Directorate.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

To be discussed and actioned

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 16	Recommendation 16.5

CHAPTER 16 - Management and organisation of mental health services Community Mental Health Teams should self-manage through the provision of a team coordinator, team leader and team practice manager.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

To discussed and actioned

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 16	Recommendation 16.6

CHAPTER 16 - Management and organisation of mental health services Community Mental Health Teams should be responsible for developing costed service plans and should be accountable for their implementation.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Training implicaitons

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 16	Recommendation 16.7

CHAPTER 16 - Management and organisation of mental health services A management and organisation structure of National Mental Health Service Directorate, a multidisciplinary Mental Health Catchment Area Management Team and local, self-managing CMHTs, should be put in place.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 16	Recommendation 16.8

CHAPTER 16 - Management and organisation of mental health services Mental Health Catchment Area Management Teams should facilitate the full integration of mental health services with other community care area programmes. This should include the maximum involvement with self-help and voluntary groups together with relevant local authority services.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 16	Recommendation 16.9

CHAPTER 16 - Management and organisation of mental health services Community Mental Health Teams and Primary Care Teams should put in place standing committees to facilitate better integration of the services and guide models of shared care.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 17	Recommendation 17.8

CHAPTER 17 - Investing in the future: Financing the mental health services Provision of community mental health centres as service bases for multidisciplinary community mental health teams should be given priority.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 18	Recommendation 18.7

CHAPTER 18 - Manpower, education and training Family friendly staff policies and flexible rostering with provision of suitable child care facilities is an important issue for the recruitment and retention of staff, as is help with housing, particularly for foreign nationals.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 18	Recommendation 18.8

CHAPTER 18 - Manpower, education and training A flexible retirement package should be considered to make the best use of valuable experienced staff. This would enable staff nearing retirement to move into part-time work without reducing pension benefit or to retire while carrying on with full or part-time work. Staff earlier on in their career should be able to take a career break and still contribute to their pension benefits.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	√	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Nurses have an opportunity to retire and return on a part time basis
Career Break opportunities are facilitated

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 18	Recommendation 18.10

CHAPTER 18 - Manpower, education and training Within the context of overall service changes, many currently employed staff will need to redefine their role in the light of the development of new community-based teams focusing on early intervention, assertive outreach, crisis resolution and home treatment. Appropriate training should be available for affected staff.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	√	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Twenty members of staff have been trained in CBT skills for practice
Plans to facilitate further training in Motivational Counselling and Brief Interventions are being considered.

Reason for partial completion / not yet

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by
Chapter 18	Recommendation 18.11

CHAPTER 18 - Manpower, education and training A personal training and development plan or equivalent should be introduced for all grades of staff in the mental health services. This should help managers set priorities for the use of resources in order to meet common needs more efficiently, organise staff release and target and schedule in-house education and training. In this regard it is also important to make available clear information about routes to employment training and career progression within the mental health service.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Resources issues

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 18	Recommendation 18.24

CHAPTER 18 - Manpower, education and training It is recommended that the position of mental health support worker be established in the mental health system to support service users in achieving independent living and integration in their local community.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<input type="checkbox"/>	<i>Partially implemented</i>	<input checked="" type="checkbox"/>	<i>Not yet commenced</i>	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

Two dedicated Health Care Assistant attached to the adult community mental health teams.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 18	Recommendation 18.27

CHAPTER 18 - Manpower, education and training A variety of programmes should be in place for the workplace such as induction programmes, health and safety programmes (for example, cardio-pulmonary resuscitation) and training in conducting staff appraisals.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	√	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Induction and all mandatory training programmes are in place, these are complemented by other relevant clinical in service training

Reason for partial completion / not yet

Staff appraisal system not in place

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 19	Recommendation 19.1

CHAPTER 19 - Mental health information and research Service users and carers should have ready access to a wide variety of information. This information should be general (e.g. on mental health services in their area) and individualised (e.g. information on their medication).

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:	
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 19	Recommendation 19.3

CHAPTER 19 - Mental health information and research Measures should be put in place to collect data on community-based mental health services.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<input type="checkbox"/>	<i>Partially implemented</i>	<input checked="" type="checkbox"/>	<i>Not yet commenced</i>	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

PI's are provided monthly by all Community Psychiatry Nurses- and these help to track all Community activity.
CORE: Clinically outcome routine evaluation this is initiative of the Psychology department
ORCHID PROJECT:
SERVICE USER SATISFACTION SURVEY:
ALLIED HEALTH PROFESSIONALS: They provide statistics

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 19	Recommendation 19.6

CHAPTER 19 - Mental health information and research Mental health services should implement mental health information systems locally that can provide the national minimum mental health data set to a central mental health information system.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	Not yet commenced
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 19	Recommendation 19.13

CHAPTER 19 - Mental health information and research Mental health research should be part of the training of all mental health professionals and mental health services should be structured to support the ongoing development of these skills.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>		<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 20	Recommendation 20.3

CHAPTER 20 - Transition and transformation: Making it happen The first steps that should be taken to implement this policy include the management and organisational changes recommended in Chapter 16 and the provision of training and resources for change.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>	<input type="checkbox"/>	<i>Partially implemented</i>	<input checked="" type="checkbox"/>	<i>Not yet commenced</i>	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

The process to implement this recommendation is in place

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 20	Recommendation 20.4

CHAPTER 20 - Transition and transformation: Making it happen Mental hospitals must be closed in order to free up resources to provide community-based, multidisciplinary team-delivered mental health care for all. A plan to achieve this should be put in place for each mental hospital.

Recommendation Completion in this Area (Tick Box)

<i>Fully Implemented</i>		<i>Partially implemented</i>	√	<i>Not yet commenced</i>	
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Please tick

Please provide supporting factual Information

A comprehensive closure plan is in place, one ward was closed in Feb 2009, one ward is due to close in Feb 2010.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

<i>Signed</i>	<i>Title</i>	<i>Date</i>
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