

Version for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date March 2010	Completed by; Area Mgmt Team. S.L.M.H.S.
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	√	Not yet commenced	
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Please tick

Please provide supporting factual information

Discussed through AMT meetings any developments proofed against vision for change

Reason for partial completion / not yet

Staffing and resource issues

Completion Date:	unknown
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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 Area Mgmt Team	South Lee Mental Health Services	23.03.2010
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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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual information

<ul style="list-style-type: none"> ▪ Service users participate in care planning across the service ▪ Advocacy services on all wards in registered centres

Reason for partial completion / not yet

Carers do not participate at all levels of the mental health system

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 role of carers within the Mental Health Services		
Signed: Area Mgmt Team	South Lee Mental Health	19.03.03

Thank You

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	<input checked="" type="checkbox"/>	Partially implemented	<input type="checkbox"/>	Not yet commenced	<input type="checkbox"/>

Please tick

Please provide supporting factual Information

<ul style="list-style-type: none"> Irish Advocacy Service visits the Approved Centre on a weekly basis to meet with the residents and has a formal meeting every month with the Clinical Nurse Managers
<ul style="list-style-type: none"> Irish Advocacy Service attends the Area Management Meeting three times a year to meet the Senior Managers of the Service
<ul style="list-style-type: none"> Irish Advocacy Service is invited to meet with the Mental Health Commission (MHC) when they visit the service
<ul style="list-style-type: none"> Irish Advocacy Service furnish the MHC with a Annual Report
<ul style="list-style-type: none"> Irish Advocacy service visits day centres/day hospitals

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

Voluntary groups such as AWARE, GROW, SHINE active in the region and in approved centres

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Reason for partial completion / not yet

Need more formal links with community groups

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Look at PCCC Community work type posts and linkages with voluntary agencies at local level.

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

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

Please provide supporting factual information

Carers are involved in the care planning process with the service users agreement
Information is available to carers
The Primary nurse will make himself/herself known to the resident and his/her family, carer or chosen advocate, if appropriate (i.e. with the consent of the individual or in the case of a child), as soon as possible in the resident's stay taking time to explain his/her role.

Reason for partial completion / not yet

No planned respite care available
Limited number of multidisciplinary staff in service

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

Staffing of multi disciplinary teams.
Signed: Area Mgmt Team South Lee Mental Health 19.03.03

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)

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

Please provide supporting factual Information

Children 1 st Briefing sessions
Child Protection guidelines
Local Liaison between Services

Reason for partial completion / not yet

Limited National, regional and local service agreements
No formal education programme for Carers

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

Training Programme for Staff

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

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	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

▪	Written information on diagnosis, medication and general information on South Lee is available to service users and carers
▪	Service user and carer involvement at ongoing clinical reviews

Reason for partial completion / not yet

Need for continued improvement

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input checked="" type="checkbox"/>	Partially implemented	<input type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

Yes – Information is available on South Lee sites on the Complaints Procedure
Your Service Your Say information Leaflets available at all sites.
Senior Managers trained on Complaints procedure in 2008

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual information

SLMHS services have links with:
<ul style="list-style-type: none"> ▪ Irish Advocacy Network, City Links Project, Togher Mental Health Foundation, Cork Mental Health Association, Approved Centre community meetings, Focus meetings, Basement Club in Cork

Reason for partial completion / not yet

Much more needs to be done locally to establish better links with local community groups to raise awareness of mental health issues
Stigma still a major issue

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

Some individual and group interventions run at clinical level incorporate a coping with stigma element, eg. Family education group.

Reason for partial completion / not yet

No organised or systematic programme in place to tackle stigma.

Completion Date:

Revised Timescale
(commencement and completion dates):

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

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Thank You

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations

HSE REGION
Date
Chapter 4

Catchment
Completed by;
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

Many local developments.

- 1 "Focus" programme, a special year long training programme run in Co. Cork by the NLN, National Learning Network. Devised approx. 4 yrs ago , following discussions with mental health services on inadequacy of NLN existing courses for those with severe and enduring mental health .
2. "City Links". A training programme run in St. John's college supported by North & South Lee Mental Health Services, VEC & St. John's.
- 3..National Learning Network have strong base locally. i.e. two training centres. A large no of clients with mental health problems accepted.
4. FAS ..have a Disability Officer locally who accepts referrals from mental health service.
- 5." First Employment Services", an employment agency for people with a disability. Funded by a partnership between statutory& business
6. FAS ..access to mainstream Fas courses & Community Employment schemes.
- 7.Workstart ..Bandon, a service that helps to source work locally

Reason for partial completion / not yet

While there are very good links between above named services & clinical staff at sector level, no systematic use of Evidence –Based approaches.
No formal links between services at a management level, in a co-ordinated way.

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Signed Area Mgmt Team **South Lee Mental Health Service** **Thank You**
Date 23.03.2010

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

Please provide supporting factual information

Provision for interpreters is very good at clinical level

A local PCCC training unit, "Child Care and Family Support" has a good record in provision of training on cultural diversity and awareness, providing training on same annually. However, not provided to staff of mental health service although mental health social workers and PCCC staff have availed of training.

Service is provided as normal to residents of a local based accommodation centre For asylum seekers, who become unwell.

Good provision at acute in-patient level for different religious denominations, different nutritional needs.

HSE multi-lingual tool kit for assessment available on acute unit.

Reason for partial completion / not yet

No Training available for mental health staff.

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Request made to above named training unit to provide training for South Lee mental health staff.

Recommend key issues for the consideration of the Independent Monitoring Group

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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: 4.9

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

1. "City Links programme"...a training venture with local PLC college, St. John's , VEC and two local mental health services has impacted positively on integration of local service users.

Local Health Promotion Unit of HSE South has been involved in an extensive community mental health project in Kinsale, with local schools, Primary care team and local community.

Many informal links between local community projects and individual clinicians and teams at local level, for example, there is good community between local sector teams and family resource centres in the catchment area.

Good links with Voluntary housing associations in Catchment area and Local Authorities. An interagency committee set up by social work team, in conjunction with SHINE and two Local authorities to promote housing options for service users.

Reason for partial completion / not yet

No formal links between community projects and management of South Lee mental health services.

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Signed Area Mgmt Team

Title South Lee Mental Health Services

Date 23.03.2010

Thank You

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	

Please tick

Please provide supporting factual Information

At clinical level, i.e. CMHT, acute unit & long stay unit level, there are a wide variety of interventions taking place at one to one & group level. Examples: Most clinicians use relapse prevention component in individual work.

Groupwork:

Run by different disciplines: "Solution for Wellness", Coping with Depression & coping with Anxiety groups, family education group on schizophrenia, Bi-polar Group, social skills groups, social anxiety groups, OCD group.

WRAP.

Solution focussed therapy training made available to large number of staff three years ago.

Liaison service includes a nurse who specialises in Brief Interventions for alcohol Misuse.

At Regional Level, there is an active Health Promotion Dept, with approx. 23 health promotion officers, with one senior officer with a brief in mental health. This included one part time senior post dedicated to mental health, but that post was uncovered for ten months during 2009.

Training courses provided in community to date have included:

"Mental Health First Aid, at two community locations.

"Assist", a suicide prevention training programmes to two local communities.

Bullying Policy Workshops in local schools, includes training, workshops and telephonesupport.

Regional Health Promoting Schools network for Primary and Post-Primary school.

Mental Health Training provided to senior cycle post primary teachers.

Individual workshops provided to community or voluntary groups.

Ongoing provision of being -well training to communities to promote well-being.

Provision of week long mental health promotion summer school for primary school teachers.

Extensive Mental Health Promotion initiative completed in Kinsale last year, 2009. A collaborative effort which included primary care team and local community. It involved workshops and training of local community, local schools and the elderly .

Reason for partial completion / not yet

No formal links between Mental health Service and Health Promotion Dept.

No Health Promotion officer posts dedicated to mental health promotion.
Due to lack of regional or local structure to co-ordinate the above recommendation.
No forum to link with other disciplines, other HSE depts. .
Budget cuts, uncovered posts, difficulties for teachers in attending training,
embargoes of other staff in attending training.

Completion Date: unknown

Revised Timescale

(commencement and completion dates):

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

Signed Area Mgmt Team

**Title South Lee Mental
Health Services**

**Thank You
Date 23.03.2010**

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)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Lack of formal links with Health Promotion Department.

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Signed Area Mgmt Team

South Lee Mental Health Services

**Thank You
Date 23.03.2010**

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

Please provide supporting factual information

At regional level, there is an active health promotion department with approximately 23 health promotion officers with one senior officer with a brief in mental health. Training courses provided in community to date have included mental health first aid at two community locations, Assist, a suicide prevention training programme to two local communities and anti bullying workshops in local schools.

Reason for partial completion / not yet

No formal links between local mental health service and health promotion.

Completion Date:

Revised Timescale

(commencement and completion dates):

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

Mental Health Care workers, mainly psychologists, are members of a small number of primary care teams at a national level.
Only about 12% of South Lee population have access to primary care psychology Services.

Reason for partial completion / not yet

Slow pace of primary care team development
Mental health workers not being prioritised for primary care 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

There seems to be a belief that already under-resourced and overstretched MDTs in Mental health services should be able to meet hitherto unmet mental health needs of primary care patients.

Recommend key issues for the consideration of the Independent Monitoring Group

Ensure that primary care teams are staffed with mental health professionals.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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 7.3

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)

Fully Implemented	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

All mental health service users are registered locally with a G.P.

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

A Community mental health Nurse is piloting an early intervention programme in conjunction with G.P's in the community to prevent acute admission among 18 -30yr old schizophrenia sufferers.
South Lee Mental Health Services not involved in the delivery of mental health promotion in primary care.

Reason for partial completion / not yet

Resource allocation issues for primary care teams to promote mental health.

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 fully resourced primary care teams

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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

Links between Multi Disciplinary Teams within the sectors and individual and group GP practices vary across the catchment area. Most links are informal.
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Reason for partial completion / not yet

Completion Date:

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 development of primary care teams should ensure more efficient links be formed between mental health and primary care.
Large numbers of relatively small GP practices make the development of formal links less efficient

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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 7.6

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

Please provide supporting factual Information

See 7.1
Few mental health professionals appointed to the few primary care teams in the area

Reason for partial completion / not yet

Primary Care teams not fully developed
Mental health care not a primary care priority

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

Some CMHTs are single point of access but most CMHTs not fully developed.

Reason for partial completion / not yet

CMHT development slow in some sectors which limits capacity to provide this
No out-of-hours service so inpatient unit is point of access
Recruitment moratorium

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual information

Primary Care Teams not fully developed as yet.

Reason for partial completion / not yet

No spare capacity within service to develop policies etc re primary care because of Other demands

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual information

More than half of South Lee population accessing mental health care in CMHTs where the physical infrastructure is not of a “modern quality standard”
South Lee Mental Health Services are working with the Primary Care infrastructure model to provide sector head quarters for CMHT’s e.g. Mahon/Blackrock sector HQ
Working with voluntary sector to provide infrastructure e.g “cluid projects”

Reason for partial completion / not yet

Funding of appropriate CMHTs not available
Appropriate sites/facilities not available

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

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Thank You

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

Please provide supporting factual Information

GP trainees have placement within South Lee and work within community facilities available within the catchment area.
Induction programme includes section given by patients' advocate

Reason for partial completion / not yet

Community services not as developed as should be and so no access to training on assertive outreach for example

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 22.01.2010	Completed by; Area Management Team
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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual information

Medical psychological and social therapies are provided in the day facilities
Multi disciplinary home visits in some sectors
The teams have the skills of psychiatry and nursing, psychology and social work, Though the latter two are understaffed.
No Occupational Therapy

Reason for partial completion / not yet

No Occupational Therapy input. Both funding and availability
Some sectors require a sector headquarters. Moratorium on recruitment.
Location of sector headquarters not decided by CMHT

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

When the team is incomplete it is difficult to provide a comprehensive service
Lack of sector head quarters can pose many problems and can make it difficult to attract staff even if funding is available.
There can be some duplication across the disciplines

Recommend key issues for the consideration of the Independent Monitoring Group

There needs to be a commitment to filling the teams with the appropriate skill mix and also the provision of a facility in each sector.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 22.01.2010	Completed by; Area Management Team
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)

Fully Implemented	Partially implemented	Not yet commenced
	√	

Please tick

Please provide supporting factual information

Each sector has attempted to provide and appropriate multi disciplinary team. This however has not been possible and there are shortfalls. Some sectors have an identified team leader which can be from any discipline.
There is a culture of research and working in a way of identified best practice

Reason for partial completion / not yet

Both funding and availability are factors in hindering the development of proper multi disciplinary teams
Education requirements exist around shared governance etc.

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

A realisation that things can be achieved in different ways to historically. Home visits etc are a new way of working and is definitely sometimes more appropriate.

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual information

Good links developed with such groups as: family Resource centre, Youth Reach, NLN, First Employment Services, City Links
Multi disciplinary care team meetings in one sector
G.P. information sessions done in many sectors
Informal links with Grow, Aware, Schizophrenia Ireland.

Reason for partial completion / not yet

A lack of sector headquarters is a hindrance
Full Primary Care Teams required in all sectors

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

Good links and communication with G.P.s is vital
The more local services that can be accessed improve the possibilities of options for the client.

Recommend key issues for the consideration of the Independent Monitoring Group

Appropriate facilities for every sector
Deficit of fully staffed multi disciplinary teams

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 22.01.2010	Completed by; Area Management Team
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
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please tick

Please provide supporting factual information

Good links developed with such groups as: family Resource centre, Youth Reach, NLN, First Employment Services, City Links
Multi disciplinary care team meetings in one sector
G.P. information sessions done in many sectors
Informal links with Grow, Aware, Schizophrenia Ireland.

Reason for partial completion / not yet

A lack of sector headquarters is a hindrance.
Full Primary Care Teams required in all sectors

Completion Date:

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

Good links and communication with G.P.s is vital.
The more local services that can be accessed improve the possibilities of options for the client.

Recommend key issues for the consideration of the Independent Monitoring Group

Appropriate facilities for every sector.
Deficit of fully staffed multi disciplinary teams.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

Current lack of access to community services such as occupational therapy for children with mental health problems.
Poor resourcing of community services such as community psychology leads to long waiting lists.
Lack of understanding of role of CAMHS

Reason for partial completion / not yet

Resourcing

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

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Recommend key issues for the consideration of the Independent Monitoring Group

Need for a forum across primary care and community services to discuss appropriate referral pathways.

Thank You

		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)

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

Please tick

Please provide supporting factual information

Feedback is sought from adolescents and parents participating in groups.
We are looking at how to source more general feedback from other families.

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

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Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

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)

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

Please provide supporting factual information

Partial new CAMHS team funded for West Cork which will allow existing teams to improve services in South Lee. However South Lee will still only have 2.5 partial CAMHS teams and no liaison team
Some disciplines are not represented on teams.

Reason for partial completion / not yet

Resourcing

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

Difficulty in recruitment particularly in psychology and nursing. Slow approval process for consultant appointments
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Recommend key issues for the consideration of the Independent Monitoring Group

Need for further teams in this area Need for liaison team.

Thank You

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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)

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

Please provide supporting factual Information

All teams in South Lee have links with local Community Services with regular meetings
Referrals are prioritised within CAMHS teams.

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

Better consultation with primary care has led to more appropriate referrals.

Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

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)

Fully Implemented		Partially implemented	√	Not yet commenced	

Please tick

Please provide supporting factual Information

8-bedded interim unit open in Cork since November

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

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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)

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

Please provide supporting factual Information

ASD teams in place
Each CAMHS team in South Lee meets regularly with ASD team and provides consultation
Unclear re paediatric involvement

Reason for partial completion / not yet

Completion Date:

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 effectiveness of regular consultation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

Please tick

Please provide supporting factual Information

Referral Process available in all sectors
Formal links established with Primary care teams and GP's
G.P.'s refer patients by letter to sector consultants. Cases discussed at team meeting.
In urgent cases G.P. can refer patients directly to acute unit.

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Currently 6 adult consultants and one consultant for older age of psychiatry cover a catchment area of 177,000

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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

Thank You

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

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)

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

Please provide supporting factual information

Reason for partial completion / not yet

Lack of fully Staffed CMHTs and Sector Headquarters

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

Model needs to be developed and resourced.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input checked="" type="checkbox"/>	Not yet commenced

Please tick

Please provide supporting factual Information

There are a number of sectors which have CMHT centres or day hospitals and others are proposed using the primary care building programme.

A new acute unit is proposed in South Lee

Reason for partial completion / not yet

Facilities not available in all areas

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Innovative means to provide facilities have to be developed in the absence of capital funding.

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

In patient care plans are operated

Reason for partial completion / not yet

Sector teams are developing service user care plans

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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

One clinical psychologist per two sector teams providing individual consultations and group therapies in of the day centres/day hospitals. Neuropsychology also provided.
Waiting list initiatives include cross sector service provision.

Reason for partial completion / not yet

Limited Psychology and family therapy service available to CMHT
Need more AHP, resource 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

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Thank You

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

Please provide supporting factual Information

On information available which is a joint voluntary and HSE initiative.

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Lack of resources in the South Lee Catchment Area to set up 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

Team should be resourced and piloted in area.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input type="checkbox"/>	Partially implemented	<input type="checkbox"/>	Not yet commenced	<input checked="" type="checkbox"/>
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Lack of resources in the South Lee Catchment Area

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

Should be resourced and piloted.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input type="checkbox"/>	Partially implemented	<input type="checkbox"/>	Not yet commenced	<input checked="" type="checkbox"/>
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Please tick

Please provide supporting factual Information

South lee Mental Health Services would be interested in a local project.

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

Should be progressed from a national perspective

South lee Mental Health Services would be interested in a local project

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Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual information

Reason for partial completion / not yet

Current physical environment unable to support the development of a 6 bedded close observation ward.

A six bed facility is planned for new 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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

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)

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

Please tick

Please provide supporting factual Information

Area Management Team established. Meets every six weeks. Currently sharing governance of South Lee acute and Community mental health services.
Small risk management group at acute unit.

Reason for partial completion / not yet

Staffing 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

Public service moratorium on recruitment.

Thank You

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 2.2.2010	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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

All Sector CMHTs and in patient services subscribe to the recovery ethos. Person centred approach is used in Care planning for clients and is underpinned by the tidal model. Residential units have a high proportion of residents attending off site courses. Unit based rehab programmes facilitated by VEC. Eg. Horticultural programme on site – 25 hours over 6 month period. Fetac level 3 computer course, Brandon House. Douglas 36 hours over 12 month period. St John's college
St John's College Fetac level 5 city links spring course and full time course creative arts and technology. Meitheal Mara introduction to boat building 8-10 weeks duration. Radharc Nua creative arts for females in st John's College.
Solution for wellness programme. Creative dance in Lough Community Centre.
Creative music in Togher Family Centre.

Reason for partial completion / not yet

No dedicated rehabilitation team due to lack of resources.
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Completion Date:	Unknown – application made
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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

Liaising with the voluntary and statutory organisations is difficult to co ordinate due to lack of human resources and specialised rehab team.
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Recommend key issues for the consideration of the Independent Monitoring Group

A need for long term sheltered work placements followed by gainful employment.
A rehabilitation team to co ordinate the individual's rehabilitation back into their communities.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 02.02.2010	
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)

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

Please provide supporting factual Information

Rehabilitation and recovery mental health services for people with enduring mental health is provided by the community mental health sector team. Members of the sector team undertake some assertive outreach and domiciliary visits. Early intervention programme for schizophrenia has been established.

Reason for partial completion / not yet

No dedicated service and funding

Completion Date:

unknown

Revised Timescale

(commencement and completion dates):

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

Implementation is dependant on "now standardised funding" for rehabilitation programmes. No disability funding is allocated for mental health as for sensory and physical disability.

Recommend key issues for the consideration of the Independent Monitoring Group

Establish Disability guidance service with funding for people with mental health disability and establish a regional database.

Thank You

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 2.2.2010	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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please provide supporting factual Information

<p>Infrastructure is not developed in all sectors however there is</p> <ul style="list-style-type: none"> • Glenmalure high support hostel • Oaklodge low support hostel • Tusnu Day Centre • Watergate Day Centre • Ravenscourt Day Hospital on St Finbarrs Hospital Campus • Tearmainn Phadraig Resource Centre (limited use) • Togher Community Centre • Carrigaline Resource Centre – building nearing completion • Blackrock Hall (n adjunct with Primary Care Team) nearing completion

Reason for partial completion / not yet

No dedicated day centre and day hospital for each sector. Plans are advanced for community administrative centres as above and day amenities in Carrigaline.
Lack of human resources impeding progress. No step down housing facilities for long term people with enduring mental health problems.

Completion Date:	unknown
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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

Due to lack of community residences, graduates of long stay wards are not progressed to independent living in their own community.
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Recommend key issues for the consideration of the Independent Monitoring Group

Provision of physical infrastructure, administrative support, information technology and full compliment of staff. Funding needs to be put in place around the infrastructure both locally and nationally within a timescale
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Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Thank You

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 2.2.2010	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	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Good liaison has been established with local voluntary and statutory agencies. All sectors operate multiple out patient clinics from sectors. CMHT liaise with the following.

National learning network rehab care facilities Brook and Brandon house, focus programmes, basement club activities organised by shine, FAS, meitheal mara, cork arts partnership, ceol na ceile. Grow , aware, AA, Alnon, st john's college.

Reason for partial completion / not yet

Links have been established with voluntary and statutory organisations however due to heavy acute case loads it is not always possible to develop further.

Completion Date:

Revised Timescale
(commencement and completion dates):

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

Links have been forged but in order to progress these it is necessary to have a rehab team and fully staffed community mental health teams.
Need for sector manager and Assistant Director on Nursing per sector to coordinate care service

Recommend key issues for the consideration of the Independent Monitoring Group

Establish a Rehabilitation Community Mental Health Team
Education and support for voluntary and statutory service providers in working with clients with enduring mental health problems.

Thank You

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 2.2.2010	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)

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

Please provide supporting factual Information

Training in WRAP and concordance seminars on recovery has been provided. Higher Diploma course in nursing underpins the recovery approach. Recovery approach is used in care planning.
Literature and documentation regarding the competencies and principles of recovery is available on all sites

Reason for partial completion / not yet

Community mental Health Teams not fully staffed. No dedicated rehabilitation team. Community Mental Health Teams not fully multidisciplinary e.g. No occupational therapist in adult service. Units not self staffed.
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Completion Date:	unknown
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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

An induction course needs to be made available to all staff outlining the above principles.
Rehabilitation Team needed Fully multidisciplinary Community Mental Health Teams needed Self staffing needed for all units

Recommend key issues for the consideration of the Independent Monitoring Group

Rehabilitation Team needed Fully multidisciplinary Community Mental Health Teams needed Self staffing needed for all units An induction course needs to be made available to all staff outlining the above principles
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Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 2.2.2010	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)

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

Please provide supporting factual Information

Some formal liaison with education and FAS at Sector level but not coordinated for catchment area. Each sector liases with employment agencies.

Reason for partial completion / not yet

No dedicated Rehabilitation team .

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Loss of disability guidance service led to fragmented contract with multiple agencies. Difficult to assess aptitude for rehabilitation.

Liaison with agencies is labour intensive and time consuming.

Recommend key issues for the consideration of the Independent Monitoring Group

Dedicated rehabilitation team, liaison officer between mental health and Employment agency needed.

Guidance service for mental health services with a focus on gainful employment and third level education.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 2.2.2010	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		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual information

- City links initiative with St John's College provides 3 courses specifically for people with mental health difficulties
- Liaison with Fas and Cork City VEC
- Liaison with voluntary agencies – national learning network and rehab care, meitheal mara.

Reason for partial completion / not yet

Liaison done by community mental health teams in sectors and staff in residential units. No dedicated staff or lead consultant.

Loss of service of disability officers from NDTI

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Very positive joint ventures with city limits for north and south lee.

Major problem in coordination of various options for rehabilitation. No dedicated funding.

Recommend key issues for the consideration of the Independent Monitoring Group

Time intensive. Mental health professionals need time for administration and liaison.

Thank You

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 2.2.2010	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	√	Not yet commenced	
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Please tick

Please provide supporting factual information

city links programme is independently evaluated by St john's college no funding for it. Focus is more on educational attainment and client feedback. Care plan review informally uses some quality of life measures.

Reason for partial completion / not yet

No agreed measure of quality of life adopted.

Completion Date:

Revised Timescale
(commencement and completion dates):

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

Client feedback and family feedback very positive but concerns of lack of gainful employment.
Evaluation of re educational programmes has different focus.
New multi disciplinary team care plans promote a key workers approach presently initiated.

Recommend key issues for the consideration of the Independent Monitoring Group

Adopt agreed measures of quality of life.
No administrative back up
Problems with progression to gainful employment after completion of courses.
Designated ADON to coordinate this area of services

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Reporting Template

LOCAL Recommendations	
HSE REGION	Catchment South Lee
Date 25 Jan 2010	Completed by; Area Management Team
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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual information

13.1 Referral criteria for service 1. Older adults developing functional illness for the first time over 65 years 2) People developing dementia for the first time over 65 years.

Reason for partial completion / not yet

1. To meet the needs of adults over the age of 65 years other than those outlined above requires the expertise of the specialties of GAP and Rehab.
2. There is no national agreement on the nature of service for older people with enduring mental illness and resourcing of same
3. To incorporate this group into psychiatry of old age there would need to be a substantial raising of/transfer of resources.

Completion Date: Progress stalled due to lack of funding

Revised Timescale
(commencement and completion dates):

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

National agreement on resourcing and structuring of service for this group – with involvement of General Adult Psychiatry, Psychiatry of Old Age and Rehabilitation Psychiatry. A review of the section on Old Age Psychiatry of VFC should be considered given that the IACPOA continues to express reservations of the different needs of older people with dementia, those with late onset functional illness or those with severe enduring mental illness. There is a need for further elaboration within the VFC framework.

There is no mention of liaison psychiatry for older people, psychological therapeutic interventions or linkage with physicians of geriatric medicine.

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Reporting Template

LOCAL Recommendations	
HSE REGION	Catchment Old Age/ South Lee
Date 25 Jan 2010	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)

Fully Implemented	Partially implemented	√	Not yet commenced
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Please tick

Please provide supporting factual information

13.3. Mental Health Promotion

1. The Dementia Carers Support Group is an educational group run on a work-shop model – Carers receive practical information on caring for someone with dementia and caring for themselves – this has been audited and has a high satisfaction rate upon attendees.
2. Assessment of carers is part of the usual patient assessment – evidence shows that those caring for people with dementia have high levels of psychiatric morbidity – appropriate management/referral is offered to those identified with mental health problems
3. Conferences to update formal carers on innovative practice when caring for older people have been provided locally – conference in 2009 had 300+ attendees – a fourth conference is planned for 2010

Reason for partial completion / not yet

Opportunities for Health promotion are kept under review

Completion Date:

Revised Timescale
(commencement and completion dates):

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

Health promotion is an evolving service and opportunities to provide same are being sought on an ongoing basis

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Reporting Template

LOCAL Recommendations	
HSE REGION	Catchment South Lee
Date 25 Jan 2010	Completed by
Chapter 13	Recommendation 13.4

Recommendation Completion in this Area *(Tick Box)*

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

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..

Please provide supporting factual information

13.4 Screening
The evidence base for screening for mental health problems in primary care is limited – poor service is not linked to any such programme at present. We do however screen for mental health problems in carers of older adults.

Reason for partial completion / not yet

Absence of evidence to support the benefits of screening for mental health problems in older people

Completion Date:

Revised Timescale
(commencement and completion dates):

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

Research required to establish the benefits of screening for mental health problems in older people

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 23.03.2010	Completed by; Area Management Team
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)

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

Please provide supporting factual Information

In South Lee there is one complete team – there should be two complete teams as the population of older people is approaching 20,000.

Vision for change does not outline staffing – it is difficult to see how day hospitals could function from community staffing resources.

Reason for partial completion / not yet

Recruitment embargo
Inadequate funding

Completion Date:	Progress stalled due to lack of funding
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Revised Timescale (commencement and completion dates):	unknown
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Please share the key learning points which have evolved in the implementation of this recommendation

Difficult to see how this issue can be moved forward in the absence of financial resources but currently working to identify innovative ways of developing staff complement.

There is no mention of liaison psychiatry for older people, psychological therapeutic interventions or linkage with physicians of geriatric medicine.

Recommend key issues for the consideration of the Independent Monitoring Group

Please note also specified in VFC (pg 116) is team per 10,000 older people which is significantly more than one per 100,000 general population. Resources should be based on actual numbers of older people not on general population figures as the percentage of the general population which older people make up varies within Ireland.

Vision for change does not outline staffing – it is difficult to see how day hospitals could function from community staffing resources.

Thank You

Area Management Team	South Lee Mental Health Services	23.03.2010
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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)

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

Not relevant for south lee as team being developed. Complete adherence to this recommendation prevents any development in partially established teams.

Thank You

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

LOCAL Recommendations	
HSE REGION South	Catchment South lee
Date 23.3.2010	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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

Continuing Care – 4 beds for people with dementia with behavioural problems, now under fair deal.
 Service headquarters and community base – None dedicated to old age, share office space within general adult HSE resource.
 Respite service – no dedicated respite resource for people with mental health problems – respite is accessed through public health nurse and many facilities cannot meet the needs of those with mental health problems.

Reason for partial completion / not yet

The service is still developing, inadequate funding.
 Absence of norms – e.g. VFC does not specify norms for respite

Progress stalled due to lack of funding

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Dedicated independent accommodation for older people is essential – nursing older in-patients with younger adults is inappropriate.

Thank You

Signed Area Mgmt Team	South Lee Mental Health	23.03.2010
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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)

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

Please tick

Please provide supporting factual Information

Acute assessment – access to beds on general adult ward.

Reason for partial completion / not yet

Awaiting separate accommodation. There are plans to address this issue in new acute unit.

Completion Date:

2011

Revised Timescale

(commencement and completion dates):

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 Area Mgmt Team	South Lee Mental Health Services	23.03.2010
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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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

Day facility/Day care – 10 places on 2 days per week in a generic community centre (2 rooms allocated) Attendance is limited to functionally ill patients as the premises cannot facilitate those with dementia and organic illness. It is located on a busy main road and access is not secure, therefore unsuitable for patients with no road safety sense. There is no showering facilities, occupational therapy assessment facilities, clinical examination rooms, offices or therapy rooms.

Reason for partial completion / not yet

The service is still developing
 Inadequate funding and resourcing.
 Absence of day hospital staffing norms – VFC does not address the staffing needs of a functioning day hospital which can act as a real alternative for in-patient hospital admission.

Completion Date:

Revised Timescale
 (commencement and completion dates):

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

Day hospital facility with appropriate staffing levels to offer older adults a real alternative to in-patient admission.

Thank You

Signed Area Mgmt Team	South Lee Mental Health Services	23.03.2010
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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)

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

Please provide supporting factual information

The SL Old Age team has no senior nurse manager as per VFC to promote and develop formal co ordination structures between health services and employee agencies.

The department of old age psychiatry recognises the need for working closely with voluntary groups-we work closely with the alzheimers society of Ireland, we refer people to their facilities including day centres. We provide support to their facility if they have patients with particular mental health problems.

The department of old age psychiatry works closely with the voluntary day centres in Cork – both in making referrals to the day centres and supporting them if they have people attending who may require special mental health expertise e.g Ballyphehane Day Centre, Westgate Foundation, Ballincollig, turners Cross Day Centre, St Lukes Day Centre, Bessboro Day Centre.

Reason for partial completion / not yet

Opportunities are taken as they arise – while there are day centres, they are short on capacity. There are substantial waiting lists for existing day centres. Many patients cannot be discharged from the existing Togher day Centre/hospital due to lack of alternative day care.

The SL Old Age team has no senior nurse manager as per VFC to promote and develop formal co ordination structures between health services and employee agencies.

Completion Date:	Progress stalled due to lack of funding
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Revised Timescale (commencement and completion dates):	unknown
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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 Area Mgmt Team	South Lee Mental Health Services	23.03.2010
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Vision for Change Independent Monitoring Group Reporting Template

LOCAL Recommendations	
HSE REGION	Catchment Old Age/ South Lee
Date 25 Jan 2010	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)

Fully Implemented	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Carers and their families support

1. Carer Support is one of the underpinning principles of the POA – Carers are asked about their ability to care – both from a practical and a financial point of view – a carer health questionnaire is filled out as part of our routine assessment
2. Carers support group is run at least once per year – provides practical information and support for carers of people with dementia
3. Talks and articles are provided to the CARERS ASSOCIATION from within our team
4. Respite (though limited availability) is sourced by our team for carers – day care, nursing home respite
5. Community mental health team members provide support to carers and will visit them at home
6. The psychologist on the team will provide psychotherapeutic interventions for carers including one to one counselling where indicated

Reason for partial completion / not yet

Opportunities are taken as they arise

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

Vision for Change Independent Monitoring Group Reporting Template

LOCAL Recommendations	
HSE REGION	Catchment Old Age/ South Lee
Date 25 Jan 2010	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)

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

Please provide supporting factual information

Older people with mental health problems should have access to nursing homes
This supposes that the facilities are suitable for and the skills of the staff are appropriate to meet the needs of older people with mental health problems

There has been an expansion in the number of nursing homes in Cork when will specifically provide care for patients with dementia with behavioural problems – this is welcome

The POA team provides support to patients in nursing homes and the staff of these homes. Visits to the nursing homes are available

The Psychiatry of Old Age service work closely with management to identify opportunities to provide appropriate accommodation for people with special needs due to their mental illness whether this care be in specialist units or linking specialist care to general long term care facilities.

Reason for partial completion / not yet

Opportunities are taken as they arise

In recognition that there is a significant minority of dementia sufferers who cannot be cared for in a nursing home South Lee have opened a 4 bedded unit for dementia sufferers with behavioural problems – this is in a homely environment with specialist staffing.
More specialist care is required

Completion Date:	Ongoing piece of work
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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

All patients with mental health problems cannot be cared for in nursing homes but have a right to be cared for in a homely, non-institutionalised unit

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Reporting Template

LOCAL Recommendations	
HSE REGION	Catchment South Lee
Date 25 Jan 2010	Completed by;
Chapter 13	Recommendation 13.14

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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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.

Please tick

Please provide supporting factual information

30 Continuing Care places for older people
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Reason for partial completion / not yet

The philosophy of long term care is ever changing. It comprises among other things supported hostel accommodation for older people, sheltered housing, nursing homes, community hospitals beds for high dependency patients and continuing care places. Need for continuing care is dependent on care available to maintain people in their own homes

The needs of older adults who need continuing care are heterogenous – thus facilities must offer different services – e.g. inappropriate to mix those with dementia with older adults suffering from schizophrenia

Recent opening of 4 bedded unit for dementia sufferers with behavioural disturbance is such an example of a specialised unit, there needs to be other units for people with differing needs

Management are aware of the need and POA is working with them to identify opportunities

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

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Recommend key issues for the consideration of the Independent Monitoring Group

It is not clear which patient population these 30/300,000 beds were intended for – functional psychiatric illness? Dementia? Both? Those whose needs could not be provided in a nursing home? Is this compatible with 13.13 recommendation? Does this include sheltered accommodation and hostels?

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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

Minimal mental health services in South Lee for people with ID. Residents in Lota and Upton have sessional psychiatry input.
However, application in progress for new Consultant post

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

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Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

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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 14.2

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

Data being collected.

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

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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)

Fully Implemented		Partially implemented	√	Not yet commenced	

Please tick

Please provide supporting factual Information

Service provided by voluntary organisation with care planning process.

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

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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)

Fully Implemented	√	Partially implemented		Not yet commenced	

Please tick

Please provide supporting factual Information

All are registered with GP

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

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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)

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

Please provide supporting factual Information

Special teams for children are run by CAMHs however no funding for adult teams at present

Reason for partial completion / not yet

Staff moratorium and funding 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

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Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

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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)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Moratorium of recruitment of staff and funding 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

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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)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Mental health services for all children and adolescents with ID in Cork are provided by the South Lee CAMHS teams (approx 0.5 of a partial 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

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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)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual information

Minimal psychiatry input

Reason for partial completion / not yet

No funding for psychiatrist post

Completion Date:

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

Need to develop services

Thank You

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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	<input checked="" type="checkbox"/>	Not yet commenced

Please tick

Please provide supporting factual Information

Partially implemented for child services. (Bros of Charity)
No Adult services

Reason for partial completion / not yet

Public service moratorium on staffing Funding issues

Completion Date:

Revised Timescale (commencement and completion dates):

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

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Thank You

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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 guidelines for the discharge of people from psychiatric in-patient care and an assessment of housing need/living circumstances for all people referred to mental health services.

Recommendation Completion in this Area (Tick Box)

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

Please provide supporting factual information

The service has adopted the draft national HSE guidelines for the discharge of people from in-patient care. Social work staff at local level involved in process of drafting these guidelines.

Informal working practice at acute in-patient level currently means that referrals of homeless in-patient care are referred to the social work team. The social work team carried out housing needs survey of all service users in South Lee in 2004 and this is to be up-dated in the coming months.

A strong tradition of referral of service users with a housing need to the social work team at sector level.

Strong informal links exist with all services for the homeless at local level.

Reason for partial completion / not yet

Awaiting the final implementation of the national draft HSE guidelines on discharge of homeless people from mental health in-patient facilities.

Formal inclusion of simple housing need assessment not yet included in medical assessments at point of entry, which would ensure prompt referral to social work team. Discussion has taken place at clinical ward meeting re same.

Completion Date:

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

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Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

<p>Special mental health team for the homeless at local level in existence for five years, which serves two catchment teams, with strong links with local services including hotels, city council etc.</p> <p>Strong links in existence for many years between cork mental health association housing committee and staff of south lee mental health services, especially community nursing staff.</p> <p>Very strong local homeless forum, which has always included a representative from South Lee Mental Health Services, currently occupied by social worker.</p> <p>During 2009, at instigation of social work team, an inter agency committee was established to promote co-ordination between services and awareness of housing needs of service users. Committee includes SEO's of housing department of two local authorities, social work staff of South lee MHS and shine (Carer's group housing action committee.)</p> <p>In recent years social work team has established links with local voluntary housing associations including Cluid Housing, Respond, Sophia housing and Threshold.</p>

Reason for partial completion / not yet

Lack of multi disciplinary staff.

Completion Date:

Revised Timescale

(commencement and completion dates):

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

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Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

<p>Integrated Services: HSE specialist mental health team city south west now collaborating with primary care addiction service.</p> <p>Participation in the Mental Health MD team meetings by the Primary Care Addiction Counsellor.</p> <p>Training and Education: Professionals from each service have undertaken a dual diagnosis training programme (Category 1:An Bord Altranais)</p> <p>Currently clients being co-managed: with clinical governance of consultant psychiatrist (referral process via this consultant and team)</p> <p>A Pilot study group: is currently being developed to establish the efficacy of the service.</p>

Reason for partial completion / not yet

No designated addiction therapist available in South Lee mental health Services
However there is participation in the mental health team with the primary care addiction counsellor.

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

Pilot collaborative approach looks promising

Recommend key issues for the consideration of the Independent Monitoring Group

Appoint addiction counsellors to CMHS

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

<p>Integrated Services: HSE specialist mental health team city south west now collaborating with primary care addiction service.</p> <p>Participation in the Mental Health MD team meetings by the Primary Care Addiction Counsellor.</p> <p>Training and Education: Professionals from each service have undertaken a dual diagnosis training programme (Category 1:An Bord Altranais)</p> <p>Currently clients being co-managed: with clinical governance of consultant psychiatrist (referral process via this consultant and team)</p> <p>A Pilot study group: is currently being developed to establish the efficacy of the service.</p>

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

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Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

No specialist team set up
Co morbidity project established in Togher (city south west Sector)

Reason for partial completion / not yet

No specialist team available.

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

Develop specialist team.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Necessity to develop specialist team.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual information

Psychological education is provided for individual clients and families who are referred for intervention for eating disorders.

Reason for partial completion / not yet

No dedicated eating disorder service in place

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

Necessity for dedicated team for eating disorders.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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 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)

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

Please tick

Please provide supporting factual Information

All referrals seen by CAMHS team. Special eating disorder group has recently been set up across all CAMHS teams.

Reason for partial completion / not yet

Funding and staffing 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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input type="checkbox"/>	Partially implemented	<input type="checkbox"/>	Not yet commenced	<input checked="" type="checkbox"/>
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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

Teams need to be resourced

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date 28.01.2010	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)

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

Please tick

Please provide supporting factual Information

There is a Liaison Mental Health Service in Cork University Hospital, the largest acute general hospital in the HSE southern Group. This team was in place before the publication of Vision For Change, is multidisciplinary but not fully staffed. Current staffing 1.WTE Consultant, 2.WTE NCHD, 1.6 WTE CNM2, 08 WTE Senior Clinical Psychologist, 1 WTE Clerical Officer,

There is no nurse therapist, social worker, family therapist, occupational therapist with vocational rehabilitation skills, neuropsychologist. There is no designated team co-ordinator or practice manager.

There is no dedicated Liaison Mental Health Service to South Infirmarary/Victoria Hospital the smallest of the three general hospitals in Cork City.

Reason for partial completion / not yet

Suppression of posts
Staffing embargo

Completion Date:

Revised Timescale
(commencement and completion dates):

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

Liaison Mental Health Services are for all Emergency Department attendees, general hospital inpatients and outpatients with mental health needs. In Cork University Hospital, such patients are likely to be from Cork, Kerry, Waterford, Tipperary and elsewhere. Liaison Mental Health Service provision at CUH(as with other large Regional hospitals) transcends the South Lee catchment area population. It is thus unhelpful to determine LMHS on the basis of local authority areas alone or existing mental health catchment areas.

Health services in Cork and Kerry are currently being reconfigured. LMHS need to be in apposition to respond to this reality. Acute inpatient and Emergency Department

Liaison Mental Health Services in Cork City hospitals could be provided by a single expanded LMHS.

Out patient LMHS could be provided to the Cork and Kerry region by the same LMHS. There is a need for the equivalent of another Liaison Mental Health Team to provide a single Liaison Mental Health Service in the region. (in 2008, there were 940 acute general hospital beds in Cork City, a further 156 elsewhere in the county and 267 in Kerry.

The National Peri-natal Psychiatry resource could be based in CUMH. This post could incorporate Obstetric Liaison at Cork University Maternity Hospital along with it's national remit. CUMH is the only major maternity hospital in Ireland without a dedicated perinatal mental health service.

The Neuropsychiatry Supraregional service to be based at Cork University Hospital could also provide Liaison to Clinical Neurosciences in the Cork and Kerry Region.

If Community Mental Health services are to be provided in the HSE South region, then adolescents age 16-18 in the Emergency Department and General Hospital service should become their remit rather than the remit of the Liaison Mental health Service as is currently the case.

Thank You

<i>Signed: Area Mgmt Team</i>	<i>South Lee Mental Health</i>	<i>19.03.03</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 15.7.1

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

These are part of our entire care plan.
Policy guidelines when death occurs by suicide.
Crises nurses in Emergency department and Liaison Service

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

By putting in place guidelines there are clear protocols and actions to be undertaken by designated staff in dealing with the aftermath of a death by suicide.

Recommend key issues for the consideration of the Independent Monitoring Group

Ensure that guidelines in place are best practice and are adhered to when incident occurs.

Thank You

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

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

Please provide supporting factual Information

These are part of the entire care plan. High risk patients are seen regularly.
Patients are seen at out patients department two weeks after discharge are closely followed up and monitored. Community Mental health Nurses also visit patients at 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

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment South Lee
Date 11.03.2010	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	<input type="checkbox"/>	Partially implemented	<input checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

Services provided within Acute and Community Mental Health Service

Reason for partial completion / not yet

Due to moratorium on recruitment of staff the development of a special service for people with borderline personality disorder has not been possible.

Completion Date:	Unknown
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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

A dedicated service for people with borderline personality disorder is needed to implement this recommendation.

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

Reason for partial completion / not yet

Psychological post dealing with borderline personality disorders is pending fill.

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

Dedicated service needed to implement this recommendation.

Recommend key issues for the consideration of the Independent Monitoring Group

Community Mental Health teams require complete staffing.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual information

Multi Disciplinary meetings every six weeks
Accountable through Local health Manager Structure. LHM attends.
Service user advocate asked to attend twice yearly.

Reason for partial completion / not yet

Services being developed

Completion Date:

2010/2011

Revised Timescale

(commencement and completion dates):

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

Improvement in Communication
Improved decision making capability at appropriate level

Recommend key issues for the consideration of the Independent Monitoring Group

Integration of service user into decision making.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

Some sectors have identified team leader which can be from any discipline

Reason for partial completion / not yet

1. all multidisciplinary teams are not yet fully staffed
2. Roles and responsibilities in relation to team building are not fully introduced

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

1. Need for fully implementation of staffing requirements to facilitated multi Disciplinary team building
2. Need for resources to facilitate training and development.
3. Need for improved community facilities to enable consultant and multi Disciplinary teams working in the community

Recommend key issues for the consideration of the Independent Monitoring Group

Public Sector moratorium on recruitment, resources and physical resources all Impact on Multi Disciplinary team building

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented		Partially implemented	√	Not yet commenced	

Please tick

Please provide supporting factual Information

Executive Clinical Director post established.
Area Management Team review staffing and finance every 6 weeks.

Reason for partial completion / not yet

Service Planning centrally driven, not yet devolved
Delegated responsibility for service planning is with Local Health Manager
ECD office not developed.

Completion Date:

unknown

Revised Timescale

(commencement and completion dates):

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

Service users and key stake holders need to be involved with service delivery.
Area Management Team Agenda – service and planning issues every six months.

Recommend key issues for the consideration of the Independent Monitoring Group

Methodologies to be developed to implement recommendation.
Devolution of service planning, dedicated resources at local level to involve stake holding in service planning and delivery

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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	<input checked="" type="checkbox"/>	Not yet commenced

Please tick

Please provide supporting factual Information

Area Management Team in place and self managing CMH teams in place.

Reason for partial completion / not yet

National structure.

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

Communication improved by AMT and CMHT meetings

Recommend key issues for the consideration of the Independent Monitoring Group

National structure should reflect and guide local delivery structures.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

Clinical and administrative links to voluntary organisations. eg development of "Cluid" Carrigaline Resource Centre in partnership with HSE.
Health Resource Centre, Cork Mental Health Association – refurbishment of Oaklodge community residential centre. "Cork Mental Health Association".
Mental Health Services now integrated with PCCC directorate at local level.

Reason for partial completion / not yet

Ongoing development with voluntary sector. Query the need to designate Mental Health Community Workers at HSE interface.

Completion Date:	unknown
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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

Management Structure of Mental Health Service and links between National Mental Health directorate and local management needs to be established.
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Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Resource issues dependant
Area Management Team in operation
Primary Care teams are being developed at present.

Reason for partial completion / not yet

Primary care teams not yet fully developed

Completion Date:

ongoing

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

<ul style="list-style-type: none"> Resources Standing committee agendas should be developed nationally and locally to drive development.

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented		Partially implemented	√	Not yet commenced	

Please tick

Please provide supporting factual information

Centres exist with planning for a new centre at Blackrock finalised through the primary care infrastructure project.

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

Mental Health Services should look at all options to improve infrastructure.

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual Information

Flexibility is provided given the exigencies of the service.

Reason for partial completion / not yet

Due to current staffing levels it is not always possible to grant particular annual leave request, flexible working, and special leave.

Completion Date:

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Revised Timescale

(commencement and completion dates):

UNKNOWN

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

Staffing the multi disciplinary team is now a priority

Recommend key issues for the consideration of the Independent Monitoring Group

Staffing issues within all disciplines of South Lee Mental Health Services need to be addressed.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please provide supporting factual information

Career breaks provided where possible given the exigencies of the service.

Reason for partial completion / not yet

Difficult to provide special leaves and flexible working due to the current staffing levels.

Completion Date:

Revised Timescale (commencement and completion dates):

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please tick

Please provide supporting factual information

Limited training is provided to all staff in accordance with inadequate training budget.

Reason for partial completion / not yet

Budget limitations

Completion Date:	unknown
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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 is budget dependant.
Ongoing monitoring of service needs is needed to progress training.

Recommend key issues for the consideration of the Independent Monitoring Group

Coordinated approach at Area Management level needed.
Budgetary restraints impeding implementation.

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

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

Please tick

Please provide supporting factual information

Implemented fully in Psychology with individual personal training development plans in place.
Student placements in all disciplines

Reason for partial completion / not yet

Insufficient resources in place to release staff for specific training.
Under staffed Multi disciplinary teams

Completion Date:	Unknown
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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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual information

Not recruited due to public sector moratorium on recruitment.

Reason for partial completion / not yet

Completion Date:

unknown

Revised Timescale

(commencement and completion dates):

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

All disciplines receive induction. Health and safety programmes.

Reason for partial completion / not yet

Completion Date:	unknown
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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

Complete induction training with reference material provided is essential.

Recommend key issues for the consideration of the Independent Monitoring Group

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Thank You

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)

Fully Implemented	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Information to patients is readily available throughout the service

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

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

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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)

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

Please tick

Please provide supporting factual Information

Routine outpatient data is being collected throughout the service but there is no comprehensive central database detailing all patient contacts with all mental health professionals

Reason for partial completion / not yet

New patient information system due to be introduced nationally

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: Area Mgmt Team	South Lee Mental Health	19.03.03
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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)

Fully Implemented	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

All data that is required and requested centrally is collected
New data system due to be introduced nationally

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

Signed: Area Mgmt Team

South Lee Mental Health

19.03.03

Thank You

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)

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

Please provide supporting factual information

Research and audit is encouraged and facilitated.

Reason for partial completion / not yet

Research moratorium means less time available for staff to do research and leads to low morale and less interest in research
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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

Thank You

Signed Area Mgmt Team	South Lee Mental Health	Date 23.03.2010
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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)

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

Please provide supporting factual Information

AMT in place and partial CMH teams in place.

Reason for partial completion / not yet

Resource issues and public sector moratorium on recruitment.

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

Adequate resources are vital for implementation of this recommendation.

Recommend key issues for the consideration of the Independent Monitoring Group

Staffing. Resources .

Thank You

Signed: Area Mgmt Team	South Lee Mental Health	19.03.03
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION South	Catchment South Lee
Date MARCH 2010	Completed by; Area Mgmt Team. S.L.M.H.S.
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)

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

Please tick

Please provide supporting factual Information

South Lee local Health Office has no former institutional psychiatric hospital in it's catchment 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: Area Mgmt Team	South Lee Mental Health	19.03.03
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