

Vision for Change Independent Monitoring Group Report for Jan 2010

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec '09/Jan '10	Completed by;	
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

Service level arrangement with STEER Advocacy Services.
STEER plays an active part in all service planning and service delivery

Reason for partial completion / not yet

STEER's capacity to fully engage due to personnel/ resource issues.

Completion Date:

Ongoing 2010 - 2011

Revised Timescale

(commencement and completion dates):

Ongoing Work & Engagement WITH Advocacy Services
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Please share the key learning points which have evolved in the implementation of this recommendation

Service users' voice is heard.
Limited capacity of Advocacy services to meet demands as outlined in VOC.

Recommend key issues for the consideration of the Independent Monitoring Group

Standardise the key component of Advocacy Services.

The importance of clarifying Role Of Advocacy Services , ensuring that all service users voice is heard, Inpatient, Community, Children, ID/Mental health

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION West	Catchment Donegal
Date 3 rd January 2010	Completed by;
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	Yes	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual information

S.T.E.E.R. is a member of the Donegal Mental Health Catchment Management Team in which they play an active role in bringing the views, opinions and recommendations of service users and carers into the planning and delivery process of the Donegal mental health services. S.T.E.E.R. currently are the Co-Chairperson of the Policy Group within the Donegal Mental Health Services which again provides an excellent opportunity for service users and carers to directly influence the policies of their mental health services and its operational processes.
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Reason for partial completion / not yet

N/A

Completion Date:	January 2008
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Revised Timescale (commencement and completion dates):	S.T.E.E.R. review this involvement with the HSE on an annual basis to reflect continuing developments and improvements within service provision.
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Please share the key learning points which have evolved in the implementation of this recommendation

The involvement of S.T.E.E.R. within the Donegal mental health services has been growing on a year by year basis with service user and carers views, opinions and aspirations assisting to shape and develop current and future service provision and developments. Both organisations have developed high levels of mutual respect and An indepth working knowledge of each organisation.

Recommend key issues for the consideration of the Independent Monitoring Group

Supported social housing that will create opportunities for community integration and independent living. Greater support and training for carers and families focusing on self-confidence and caring abilities. Increased independent Advocacy for service users, carers and the 16 to 18 year old client group.

Thank You

Signed	Title	Date 03/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	HSE West
Date	Dec'09 /Jan '10
Chapter 3	Recommendation 3.1

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual information

Service Level Agreement with STEER Advocacy Services.
STEER member of LHO Catchment Management Team
Steer chairs Donegal Mental Health Service Policy development group
Steer visits Approved Centres.

Reason for partial completion / not yet

Staff resources for Advocacy Services.

Completion Date:	Ongoing Work & Engagement WITH Advocacy Services
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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 importance of clarifying Role Of Advocacy Services , ensuring that all service users voice is heard

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION West	Catchment Donegal
Date 03/01/2010	Completed by;
Chapter 3	Recommendation 3.1

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

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

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual information

The Donegal Mental Health Services and S.T.E.E.R. continue to develop service user and Carer involvement at all levels within the mental health system. Since the establishment of the Leadership program in DCU Donegal Mental Health Services and S.T.E.E.R. have supported students to complete the program and return with their increased knowledge to participate within the mental health system. The long-term objective of this program will be to Create a cohort of service users and carers who will have the necessary training to be fully Involved in developing, shaping and monitoring mental health services.

Reason for partial completion / not yet

The task of establishing, developing and maintaining service user and carers participation in the mental health services require a considerable amount of time and resources, which at this juncture are limited, however, we are still making progressing and moving forward.
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Completion Date:	January 2011
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Revised Timescale (commencement and completion dates):	S.T.E.E.R. review this involvement with the HSE on an annual basis to reflect continuing developments and improvements within service provision
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Please share the key learning points which have evolved in the implementation of this recommendation

The need to continue to provide training programs and support for service users and carers in a partnership model.
Identify individual and groups learning needs of service users and carers

Recommend key issues for the consideration of the Independent Monitoring Group

Annual funding that can be accessed by independent providers to offer levels of training
To service users and carers focused on the Recovery Model approach

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	HSE West
Date	Dec'09/Jan'10
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	√	Partially implemented	
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Please tick

Please provide supporting factual Information

Service Level Agreement with STEER Advocacy Services
Advocacy service visits approved centres and endeavours to address needs of all service users.

Reason for partial completion / not yet

Staff resources for Advocacy Services.

Completion Date:

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Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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 importance of clarifying Role Of Advocacy Services , ensuring that all service users voice is heard

Thank You

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

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

Chapter 3 – Partnership in Care: Service Users and Carers:
 Advocacy should be available as a right to all service users in all mental health services in all parts of the country.

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Yes	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

This is available within the Donegal Mental Health Services

Reason for partial completion / not yet

N/A

Completion Date:

2008

Revised Timescale

(commencement and completion dates):

S.T.E.E.R. review this involvement with the HSE on an annual basis to reflect continuing developments and improvements within service provision

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

To identify other resources to meet the continuing demand for Advocacy in one Of the largest Counties in Ireland.

Recommend key issues for the consideration of the Independent Monitoring Group

To strategically fund Advocacy services and to ensure that there is quality assurance
And systems to provide effective and efficient Advocacy services that are value for
Money and professional.

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09 /Jan '10	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		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

STEER chairs policy development group
STEER member of LHO CMT
Service users questionnaire in place for service feedback.
Service Level agreement in place

Reason for partial completion / not yet

Resources

Completion Date:	2010 - 2011
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations Q1, 2, 3
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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 importance of clarifying Role Of Advocacy Services , ensuring that all service users voice is heard

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION West	Catchment Donegal
Date 03/01/2010	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	Yes	Partially implemented		Not yet commenced	

Please tick

Please provide supporting factual Information

The HSE fund S.T.E.E.R. and this Service Level Agreement includes innovative Methods for service users and carers to be involved with the mental health services.

Reason for partial completion / not yet

N/A

Completion Date:	2007
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Revised Timescale (commencement and completion dates):	S.T.E.E.R. review this involvement with the HSE on an annual basis to reflect continuing developments and improvements within service provision
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Please share the key learning points which have evolved in the implementation of this recommendation

The HSE and S.T.E.E.R. have been able to learn about each others organisational structures, strengths and developments.

Recommend key issues for the consideration of the Independent Monitoring Group

Increased resources for independent service providers that clearly show value for Money and that have quality management systems in place.

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09 / Jan'10	Completed by;	
Chapter 3		Recommendation 3.6	

Chapter 3: Partnership in care: Service users and carers

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

All service users have weekly meeting with treating Consultant and staff in Approved Centre.
Families are encouraged and welcomed to attend meetings.
Approved Centres have got named nurse allocation to each service user.
Developing an integrated care planning that should identify service users
Community teams has weekly review meeting.

Reason for partial completion / not yet

Resources / Staffing
Community team has weekly review meeting.

Completion Date:	Ongoing Work to address VOC Recommendations
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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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

Lack of advocacy services for Children
Unsuitability of Approved Centres for children.

Thank You

Signed	Title:	Date 22/01/2010
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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 3.6

Chapter 3: Partnership in care: Service users and carers

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	

Please tick

Please provide supporting factual information

There is evidence that these actions are been implemented as seen through our Advocacy service, but increased resources are required to achieve full implementation

Reason for partial completion / not yet

Limited resources

Completion Date:

?

Revised Timescale

(commencement and completion dates):

S.T.E.E.R. review this involvement with the HSE on an annual basis to reflect continuing developments and improvements within service provision

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

There is considerable work required to achieve this objective and it requires Working partnerships between all key stakeholders.

Recommend key issues for the consideration of the Independent Monitoring Group

Increased resources to provide a greater range of Advocacy services.
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual information

Draft policy on the education of children in Approved Centres.
Family visiting room in Approved Centre.
Training for staff on family engagement Strengthening Families Prog
Introduction of family liaison nurse in approved centres in Q1 2010

Reason for partial completion / not yet

Lack of advocacy services for children.
Unsuitability of Approved Centres for the admission children.

Completion Date:	2010 – 2011
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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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

Lack of advocacy services for children.
Unsuitability of Approved Centres for the admission children.
Need for Staff Training re managing Children in approved centres

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION West	Catchment Donegal
Date 03/01/2010	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		Partially implemented		Not yet commenced	

Please tick

Please provide supporting factual information

S.T.E.E.R. does not provide services to under eighteens.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09 / Jan'10	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

Information provided as per Mental Health Commission regulations and procedures.

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

Lack of funding to get reprint of service information

Thank You

Signed	Title:	Date 22/01/2010
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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 3.8

Chapter 3 – Partnership in care; Service users and carers

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	

Please tick

Please provide supporting factual information

S.T.E.E.R. Advocacy service is aware of the level of information that is provided
To service users and carers. There is also information on independent providers
And support groups given to service users and carers.

Reason for partial completion / not yet

The need to identify increased resources

Completion Date:	?
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Revised Timescale (commencement and completion dates):	S.T.E.E.R. review this involvement with the HSE on an annual basis to reflect continuing developments and improvements within service provision
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Please share the key learning points which have evolved in the implementation of this recommendation

The need to utilise the internet more effectively by providing support networks

Recommend key issues for the consideration of the Independent Monitoring Group

Increased resources for information to be provided to service users and carers.

Thank You

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

		LOCAL Recommendations	
HSE REGIO	HSE West	Catchment	Donegal
Date	Dec'09 / Jan'10	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	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Information re making complaints available to service users
All complaints processed via PCCC Complaints Dept.
Service User Questionnaire
Names/addresses of MHC posted on notice boards in approved centres

Reason for partial completion / not yet

Completion Date:	2009
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 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		Partially implemented	Yes	Not yet commenced	

Please tick

Please provide supporting factual Information

In 2009 a client survey was undertaken by the Donegal Mental Health Services and Data was collated independently by S.T.E.E.R. and presented to the HSE.

Reason for partial completion / not yet

Increased resources required

Completion Date:	2011
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Revised Timescale (commencement and completion dates):	S.T.E.E.R. review this involvement with the HSE on an annual basis to reflect continuing developments and improvements within service provision
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Please share the key learning points which have evolved in the implementation of this recommendation

S.T.E.E.R. will propose to the Donegal Mental Health Services that we establish a Primary Stakeholder Action Group (PSAG) that will be create a process for service users and carers to be made aware of information processes and procedures.

Recommend key issues for the consideration of the Independent Monitoring Group

Increased resources to fully implement the PSAG project

Thank You

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

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec '09 / Jan '10	Completed by;	
Chapter 3		Recommendation 3.10	

Chapter 3: Partnership in care; service users and carers

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Donegal Mental Health Services have good interface, communication pathways with local voluntary groups and community groups
Service users are encouraged to work with voluntary groups
Services provides educational/health promotion activities for local communities
Interface Meetings with local Garda
Interface Meetings with Donegal Domestic Violence Group
Interface Meetings with Travellers Project

Reason for partial completion / not yet

Staff / Resources

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

Important to develop interface meetings with voluntary groups

Recommend key issues for the consideration of the Independent Monitoring Group

Mental Health Services must take the lead in developing networks

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION West	Catchment Donegal
Date 03/01/2010	Completed by;
Chapter 3	Recommendation 3.10

Chapter 3: Partnership in care; service users and carers

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	
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Please tick

Please provide supporting factual Information

S.T.E.E.R. Advocacy service and other providers are very active within the Donegal Mental Health Services. However, increased resources would allow this to further
Develop within the services and create opportunities for service users and carers.

Reason for partial completion / not yet

There is considerable work required to establish, maintain and develop these actions.

Completion Date:	2011
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Revised Timescale (commencement and completion dates):	S.T.E.E.R. review this involvement with the HSE on an annual basis to reflect continuing developments and improvements within service provision
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Please share the key learning points which have evolved in the implementation of this recommendation

The HSE and S.T.E.E.R. believe that they have developed a model of good practice that is evolving and the creation of the PSAG is a clear learning point of this Partnership working.

Recommend key issues for the consideration of the Independent Monitoring Group

Increased resources for the Advocacy service

Thank You

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

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by;	
Chapter 4		Recommendation 4.2	

Chapter 4 – Belonging and participating; Social Inclusion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Evidence of education programmes to community groups
Services involved in various forums to address Stigma/Social Inclusion
Donegal Travellers Project
Donegal Domestic Violence
Asylum seekers Group

Reason for partial completion / not yet

Resources / Staffing

Completion Date:	2010 - 2011
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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Please share the key learning points which have evolved in the implementation of this recommendation

Demise of HP Dept. has left a void in the co-ordination of educational programmes

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 4 – Belonging and participating; Social Inclusion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	

Please tick

Please provide supporting factual Information

S.T.E.E.R. currently is engaged in addressing stigma through a number of its Educational programs.

Reason for partial completion / not yet

Limited resources

Completion Date:	?
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Revised Timescale (commencement and completion dates):	S.T.E.E.R. review this involvement with the HSE on an annual basis to reflect continuing developments and improvements within service provision
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Please share the key learning points which have evolved in the implementation of this recommendation

There needs to be a clear strategy that is fully resourced to address the issue of stigma.

Recommend key issues for the consideration of the Independent Monitoring Group

Increased resources for Advocacy services

Thank You

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

LOCAL Recommendations	
HSE REGION West	Catchment Donegal
Date 03/01/2010	Completed by;
Chapter 4	Recommendation 4.6

Chapter 4: Belong and participating: Social Inclusion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual information

S.T.E.E.R. is not involved in employment schemes for clients.

Reason for partial completion / not yet

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 4: Belong and participating: Social Inclusion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

Winning New Opportunities is a 20 hr job search skills programme with an inbuilt inoculation against setbacks which improves resilience. This programme has a strong international evidence base. A pilot study completed in Ireland proved that the programme is just as effective with people with mental health difficulties. In 2009 38 people along HSEW were trained as trainers. This was funded by NOSP. In Donegal 2 staff from Worklink were trained and plan to offer the programme to mental health service users throughout Donegal in 2010. Evaluation of the programme will be conducted by the Centre for Health promotion Research NUIG funded by Mental Health Ireland.

Reason for partial completion / not yet

Programme in early stage of implementation.

Completion Date: ongoing

Revised Timescale
(commencement and completion dates):

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

Clear referral criteria need to be agreed between trainers and other mental health service staff and a schedule of training agreed for 2010. As WNO Courses are also being run in the community by a range of providers mental health service users can also be integrated into those courses where appropriate.

Recommend key issues for the consideration of the Independent Monitoring Group

Support staff from other areas to train as WNO trainers so that the programme can be offered across the country.

Thank You

Signed	Title	Date 20.10.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09 / Jan'10	Completed by;	
Chapter 4		Recommendation: 4.8	

Chapter 4 – Belonging and participating: social inclusion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Interpreters available from HSE approved panel.
Staff attends training in traveller culture
Staff attend training in working with minority groups

Reason for partial completion / not yet

Staffing/Moratorium
No training other than mandatory
Resources

Completion Date:

Ongoing

Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION West	Catchment Donegal
Date 03/01/2010	Completed by;
Chapter 4	Recommendation: 4.8

Chapter 4 – Belonging and participating: social inclusion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

S.T.E.E.R. Advocacy services has limited exposure to other ethnic groups

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

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	HSE West Catchment Donegal
Date	Dec'09 / Jan'10 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

STEER Advocacy services conducting work re Social Housing
Services works well local authority

Reason for partial completion / not yet

Time/Resources
Need for identified staff to drive this agenda

Completion Date:

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Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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

Greater strategic planning needed to address social inclusion agenda.

Thank You

Signed	Title:	Date 22/10/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION West	Catchment Donegal
Date 03/01/2010	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	

Please tick

Please provide supporting factual information

N/A

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION W	Catchment Donegal, Sligo/leirim
Date 19.01.10	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	X	Not yet commenced	
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Please tick

Please provide supporting factual information

Mental Health Promotion programmes are in place in many Primary and Second level schools in Donegal. Training and programme support is provided as well as programme resources. Zippy's Friends is a 24 week positive mental health promotion programme for 6-7yr old children which has been implemented on a pilot basis in 2008-2009 in 40 primary schools in Donegal, Sligo, Leitrim and Galway. A detailed evaluation is being completed by the Centre for Health Promotion research, NUIG. The programme is supported by funding from NOSP and the evaluation is confirming significant benefits for children and teachers.

MindOut is a 10 week positive mental health promotion programme developed in the North West in collaboration with NUIG which is promoted in second level schools in Donegal, Sligo and Leitrim. Training and programme resources are provided for teachers and an adapted version of MindOut is now available for Youthreach centres. Mental health service staff are involved in the delivery of a 'visitors' session' as part of the Mindout programme.

Reason for partial completion / not yet

Programmes are not being taught in all schools in Donegal. The % of schools implementing mental health promotion programmes increases every year.

Completion Date: ongoing

Revised Timescale

(commencement and completion dates):

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

Schools based programmes require ongoing support to ensure they are implemented annually. Programmes need to be integrated as part of the SPHE programme. Programmes provide a useful context for mental health professionals to deliver information and address barriers to help seeking. For sustainability programme require the support of the DoES.

Recommend key issues for the consideration of the Independent Monitoring Group

Lobby DoES for SPHE at senior cycle level

Lobby DoES to recommend evidence based mental health promotion programmes as resources for SPHE

Thank You

Signed	Title	Date 19.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 5: Fostering well-being; Mental health promotion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	X	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Evaluation is a standard practice in terms of mental health promotion and all initiatives are subject to research and evaluation.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 5: Fostering well-being; Mental health promotion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

2 x 2 days training in Mental Health Promotion evidence has been provided by NOSP for 2 groups of HSE staff nationally including mental health promotion/suicide resource officers/ suicide prevention training officers etc. Within Donegal elements of this training has been provided to a number of community groups e.g. Donegal South Forum, Buncrana Community Combatting Suicide group etc.

Reason for partial completion / not yet

Lack of national training/local training plan. Therefore training happens on request basis rather than something that is proactively promoted. Opportunities for mental health service staff to participate in such training has receded as a result of budgetary HR cost savings.

Completion Date: ongoing

Revised Timescale
(commencement and completion dates):

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

Training in Mental health promotion needs to be part of a plan which supports people not just to develop capacity but also to implement the learning in their setting and in that way increase the implementation of evidence based mental health promotion in various settings including health settings.

Recommend key issues for the consideration of the Independent Monitoring Group

Prioritise mental health promotion annually and set targets.

Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

4 Community Mental Health Teams (CMHT) established
Out-patient clinics held in some Primary Care settings
1 CMHT moving to new Primary Care Centre
Service users are referred by G.P. to CMHT
Day Hospital in Central Sector
Day Centres in all sector

Reason for partial completion / not yet

CMHT's are not fully integrated or aligned to Primary Care
Some CMHTs have limited or no access to allied Professionals

Completion Date:	2010 ->
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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Please share the key learning points which have evolved in the implementation of this recommendation

Impact of moratorium re Allied Health Professional staff for CMHT's
Limited evidence of fully functionally Primary Care Teams/network.

Recommend key issues for the consideration of the Independent Monitoring Group

Impact or moratoriums/retirements etc. on service delivery
Further development of CMHT's
Further interface communication needed between Primary Care and Mental Health Service.

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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 service users registered with G.P. except 6 patients in St. Bernadette's Ward, St Conals Hospital

Reason for partial completion / not yet

Due to be registered in Q.1

Completion Date:

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Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC/MHC Recommendations

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

Potential cost savings of getting patients registered so that they can avail of GMS, eg drugs costs which can be utilised within services

Thank You

Signed	Title:	Date 22/01/2010
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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

Please tick

Please provide supporting factual Information

An initiative to reduce the health inequalities experienced by people with enduring mental health problems in terms of their physical health is underway in 5 GP practices in Co Donegal. 4th yr trainee GPs are screening the patient list to identify people with enduring mental health problems, inviting them for a screening assessment and following up on any physical health issues identified. This intervention is based on a local piece of research by a local GP which identified that people with enduring mental health problems did not receive the same service from GPs as the general public. This initiative is being led by the GP training unit in collaboration with mental health service and health promotion. Training has been provided to the trainee GP on 'effective communication' and brief intervention.

Reason for partial completion / not yet

Trainee GP are doing this as part of their placement and protocols need to be developed to increase awareness among GPs and agree strategies to close this gap in healthcare provision.

Completion Date: June 2010

Revised Timescale

(commencement and completion dates):

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

GPs unaware of the issue
Need to keep raising it with GPs to find sustainable solutions
Issue needs to be integrated as part of GP trainee education programme

Recommend key issues for the consideration of the Independent Monitoring Group

Raise awareness with ICGP and engage ICGP to remedy the situation.

Thank You

Signed	Title	Date
		20.01.10

Vision for Change Independent Monitoring Group Report for Jan 2010

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Service users have access to CMHT's in Primary Care via G.P.
All teams working in collaboration with G.P's
Close networks established with Primary Care
Innovative work practices between Primary care/Local Services

Reason for partial completion / not yet

Resources / Staffing/Moratorium

Completion Date:

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Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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

Implementation depends a lot on local networking, building communication networks and good work practices

Recommend key issues for the consideration of the Independent Monitoring Group

The need to position CMHT's in Primary Care where possible.
Develop educational /information sessions for G/Ps
Be a responsive service to managing referrals

Thank You

Signed	Title:	Date 22/10/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by;	
Chapter 7		Recommendation 7.5	

Chapter 7 – Mental health in primary care

It is recommended that the consultation/liason 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

No official liaison model in situ However, very good local networks established between PCCC & CMHT's and local Mental Health Services.

Reason for partial completion / not yet

Resources / Staff / Time

Completion Date:	2010 ongoing
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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Please share the key learning points which have evolved in the implementation of this recommendation

Where CMHT's are situated or visit Primary Care settings, then relationships with Primary Care are more effective and respected

Recommend key issues for the consideration of the Independent Monitoring Group

Where possible each CMHTs should have a dedicated contact person/liason person with primary care

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by	
Chapter 7		Recommendation 7.6	

Chapter 7 Mental health in primary care
 Mental health professionals should be available in the primary care setting, either within community care, the primary care team or the primary care network.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

CMHT's visit Primary Care for sessional /clinic intervention. /Psycho Social intervention
Open referrals from G.P's to their respective CMHT's
Some services have direct referral to specialities within Mental health eg Addiction, Child & Adolescent Services,

Reason for partial completion / not yet

Not fully aligned , resources/staffing, moratorium, retirements
Infrastructure Deficits

Completion Date:	ongoing
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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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 need to strike a balance between working with primary care and the demands of working in mental health services, whereby ownership and right to services complete
Where possible have dedicated liaison services with Primary care

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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 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

All G.P's refer to CMHT's in their area.
Weekly Multi-disciplinary CMHT meetings, referrals triaged/allocated to team members
Crisis Referrals managed by CMHTs
Information, advice and guidance offered on request

Reason for partial completion / not yet

Completion Date:

2010 ongoing

Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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 need to establish good working relationships with G/Ps
Provide educational sessions re MHA 2001 etc

Thank You

Signed	Title:	Date 22/10/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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

No formal protocols/policies agreed by Primary Care and CMHT's
Good working arrangements in place for all teams
Some teams more advanced in the context of transformation prog

Reason for partial completion / not yet

Lack of liaison person between Primary Care & Mental Health Service

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

For some areas it can be difficult to engage with Primary Care because of their work load etc. G/Ps are busy and can be difficult to engage

Recommend key issues for the consideration of the Independent Monitoring Group

MHC Codes of practice re the management referrals should advance this recommendation

Thank You

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

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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

Evidence in some Primary Care settings of good physical infrastructure to facilitate the delivery of modern quality standards.

Reason for partial completion / not yet

Cost containment
Capital funding
Awaiting completion of primary care centres

Completion Date:

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Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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

Responsibility of PCCC/DOHC/Dept of Finance

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title:	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by;	
Chapter 7		Recommendation 7.11	

Chapter 7 Mental health in primary care;

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Trainee G.P's participate in placement with local Mental Health Service which involves experiential learning across a variety of settings
Education sessions provided by Steer
Health Checks programme for service users with enduring Mental Health problems

Reason for partial completion / not yet

The need to build and develop existing progs

Completion Date:

Ongoing

Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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

The need to expose G.P's to working in the community, home visits etc.,

Recommend key issues for the consideration of the Independent Monitoring Group

More engagement with academic institution to advance training needs, multidisciplinary team working, early intervention techniques, relapse prevention

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION West	Catchment Donegal
Date 03/01/2010	Completed by;
Chapter 7	Recommendation 7.11

Chapter 7 Mental health in primary care;

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

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual information

Reason for partial completion / not yet

Lack of resources

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

Chapter 9 - The Community Mental Health Team (CMHT)

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	#	Not yet commenced	

Please tick

Please provide supporting factual Information

Absence of allied professional in some CMHTs
1 Rehabilitation team established to cover pop 139,000
4 CMHTs
Limited evidence of assertive outreach

Reason for partial completion / not yet

Moratorium / resources
Existing Case loads
Geography/Transport /Social isolation

Completion Date:

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Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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 for educational training progs re recovery approach to care,
The need move away from a illness model to a recovery model
More work need in multidisciplinary team working

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan10	Completed by;	
Chapter 9		Recommendation 9.2	

Chapter 9 – The Community Mental Health Team (CMHT)

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual information

4 CMHT's established
1 Rehan Team
Mental Health Service For Older People Services
Addiction Service
1 Child Adolescent Team
1 Mental Health/ Intellectual Disability Service

Reason for partial completion / not yet

Moratorium on Recruitment
Greater emphasis on shared governance

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

Multidisciplinary team working and the associated challenges.

Recommend key issues for the consideration of the Independent Monitoring Group

Need for national standards regarding governance structures in mental health
Process and challenges of setting up CMHT
More emphasis on audit/research into service delivery/service user feedback

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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

Links with Primary Care, voluntary groups and community groups evident throughout the services, however they could be more structured/formalised

Reason for partial completion / not yet

Present teams evolving and developing
Resources/staffing

Completion Date:	Ongoing work
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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Please share the key learning points which have evolved in the implementation of this recommendation

This work requires a lot of out of hours work which staff are too busy to undertake

Recommend key issues for the consideration of the Independent Monitoring Group

Role of primary care liaison/health promotion in fulfilling recommendation

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment Donegal North and South
Date 18/01/10	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	Yes	Not yet commenced	

Please tick

Please provide supporting factual Information

This year the North team ran two concurrent groups for the children and parents of the service , which involved feedback collection from the children and a further meeting with parents due to gather feedback and suggestions for further group work .
Plans in place to incorporate service user feedback collection to service for coming year as part of quality and risk management plan for the total service.

Reason for partial completion / not yet

Heavy clinical caseloads of up to 18 age group constantly impede progress in such projects
No service management post

Completion Date:	Group service user feedback Dec 2009
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Revised Timescale (commencement and completion dates):	June 2010 for whole service feedback process
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Please share the key learning points which have evolved in the implementation of this recommendation

In CAMHS the feedback from the children and adolescents is vital as their needs are our priority , while family feedback also is necessary to inform future service provision. The feedback process is more complex than with adult services and specific formats are necessary in order for the process to be constructive

Recommend key issues for the consideration of the Independent Monitoring Group

Dedicated management sessions for our service would greatly help to progress matters as the consultants clinical caseloads are extremely heavy due to complexity and severity of clinical cases

Thank You

Signed	Title	Date 18/01/10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment Donegal
Date 18/01/10	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		Partially implemented	Yes	Not yet commenced	

Please tick

Please provide supporting factual information

As a CAMHS consultant I can only comment on The Specialist Mental Health Care end of the spectrum but if community/primary care services had a better capacity we could concentrate on the moderate to severe end of the clinical spectrum as is our brief, which would reduce our waiting lists.

2009 saw a Senior Registrar join the Donegal South team and a Senior Clinical Psychologist joined the North team (regraded post which had been vacant since 2006)

New premises for South Donegal team nearly operational

Reason for partial completion / not yet

Both teams still operating at half the Vision for Change staffing recommendations despite being one of few services in country providing service to older adolescents

Completion Date: Not under our control

Revised Timescale
(commencement and completion dates): Unknown

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

Further senior clinical staff needed for this service to cope with the demand, particularly second senior registrar or third consultant psychiatrist or further senior psychologist etc. Also extra admin staff badly needed

Thank You

Signed	Title	Date 18/01/10
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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 checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual information

As part of the Multi-agency Children's Services committee an application has been made to Headstrong to participate in the Headstrong Learning Network to ensure improved co-ordination of early intervention services to young people with mental health issues.

Reason for partial completion / not yet

Application submitted. Awaiting selection interview.

Completion Date: Dec 2010

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	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations

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

Chapter 10: Child & Adolescent Mental Health Services:

Two child and adolescent CMHTs should be appointed to each sector (population: 100,000). One child and adolescent CMHT should also be provided in each catchment area (300,000 population) to provide liaison cover.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	Yes	Not yet commenced	
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Please tick

Please provide supporting factual information

Two CAMHS teams are in operation since 2007 with appointment of second consultant and SHO but no further new team members were funded so effectively the original team split in two. For the Donegal population of 147,000, and seeing clients up to the age of 18, our total staffing for the two teams is 2 WTE consultants, 1 SR, 2SHOs (usually very junior), 2.6 nursing staff, 0.8 Senior Clinical Psychologist, 1 Senior Social Worker, 2.9 Child Care Leaders and 2 Admin staff.

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

The three extra team members since 2007 has helped bring down waiting list times and allowed groups to run again, family therapy team to operate etc. but we are still far from a full MDT with the recommended skills mix. The high proportion of severe and complex cases that are presented by managing the older adolescent age group means that consultant cases loads are by necessity very high which interferes greatly with service management issues.

Dr Don Mc Dwyer is also the consultant and lead clinician for the Donegal Autism service

Recommend key issues for the consideration of the Independent Monitoring Group

A further senior clinician who can carry out risk assessments and carry to completion the complex and high risk cases will be necessary to move this service forward further.

Thank You

Signed	Title	Date 20/01/10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment Donegal
Date 21/01/10	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	Partially implemented	Yes	Not yet commenced
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tick

Please provide supporting factual Information

Close or even co-working with primary and community care services is ongoing and in the process of being made more explicit through written policies and agreements.
Child Psych team members have commenced attendance at IMSR and CPNS and Child Health Committee meetings

Reason for partial completion / not yet

As above, clinical overload.

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	Title	Date

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

Cannot comment. No inpatient facility in NW region

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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	✓	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

All CMHT's have weekly Multi-disciplinary meetings where G.P. referrals are triaged and discussed

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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

The need to network and support G.P's regarding Mental Health Illness and Services

Recommend key issues for the consideration of the Independent Monitoring Group

Build strong relationships with Primary care by good quality service provision , education/training,

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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

Teams established in line with VOC recommendations.

Reason for partial completion / not yet

Some teams have limited access to Allied Health Professionals (AHP)
Geographic barriers, transport issues

Completion Date:

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Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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

The need to balance VOC recommendations with service users needs,
Urban v Rural divide
City V Country
Access to Specialists

Recommend key issues for the consideration of the Independent Monitoring Group

For some sectors, service user focused services does not match VOC recommendations re population size etc, Urban V Rural
The need to remain focused on service users needs
The criteria for allocation of capital needs to consider the above issues

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual information

LHO Catchment Management Team established
Some evidence of a shared governance model, lack of role clarity
Clarification needed re role of Executive Clinical Director

Reason for partial completion / not yet

Funding to support new structures
Awaiting clarification re Executive Clinical Director's role
National Discussuions

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

A lot of work needed to work and change the culture of service management and delivery

Recommend key issues for the consideration of the Independent Monitoring Group

Define role, responsibility, decision making, and accountability of shared governamnce as recommended by VOC, (moving theory to practice)

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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	Not yet commenced
	√	

Please tick

Please provide supporting factual information

All CMHT's are situated in Community Mental Health Centres, one is aligned to Primary Care Centre (Central Sector)
1 Approved Centre - for population of 140,000
1 Day Hospital - for population of 66,000
1 Approved centre to close in Q2 2010 (St Conals Hospital)

Reason for partial completion / not yet

Infrastructure deficits/ Capital Investment/ Staffing/Resources

Completion Date:

Ongoing

Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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

Need for more day hospitals

Recommend key issues for the consideration of the Independent Monitoring Group

Potential stigmatisation of Community Mental Health Centres within local communities, if possible should be located in primary care
Need to review existing day centres, role/ function, impact, costs, activity, staffing in the context of service delivery, profile of service users, are services applicable to young adults, institutionalisation in the community?

Thank You

Signed	Title	Date 22/01.2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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

Not formalised, discussions with service users and their families occurs
Not yet developed as a standard practice

Reason for partial completion / not yet

Part of CMHT's development
Mental Health Commission codes of practice re CMHT's

Completion Date:	Ongoing
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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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, resources, time factors, geography, transport issues

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE WEST	Catchment	Donegal
Date	Dec'09/Jan'10	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	

Please tick

Please provide supporting factual Information

Lack of psychology services on team
Psychosocial intervention carried out across the services, both in-patient and community settings
Group therapy progs in addiction/day Hospital

Reason for partial completion / not yet

Moratorium / recruitment, expertise, competencies.

Completion Date:

Ongoing

Revised Timescale

(commencement and completion dates):

Ongoing Work to address VOC Recommendations

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

Education re the role and function of psychosocial interventions
Need to train all staff in recovery model

Thank You

Signed	Title	Date
		22/01/10

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by;	
Chapter 11		Recommendation 11.9	

Chapter 11: General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual information

Reason for partial completion / not yet

Part of developing existing services in response to VOC recommendation

Completion Date:	Ongoing
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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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 consult with service users, focus groups, questionnaires etc
Limited community resources
Transport/geography issues re access

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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 <input checked="" type="checkbox"/>

Please tick

Please provide supporting factual Information

Community mental health teams provides home visits ,
Existing teams provides a responsive service

Reason for partial completion / not yet

Moratorium / resources / staffing / retirements

Completion Date:	ongoing
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Revised Timescale (commencement and completion dates):	Ongoing Work to address VOC Recommendations
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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

Review MHC Codes of Practice re referral protocols from CMHTs
Address VOC recommendation against existing resources.
Gate keeping roles not yet established

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by;	
Chapter 11		Recommendation 11.11	

Chapter 11 General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual information

Supervised Residential Units offer rest bite care to service users, however these
Units offer a 'one size fits all' which does not meet individual service users needs
Eg Young Adults in Elderly dominated SRU

Reason for partial completion / not yet

Moratorium / resources / staffing / retirements
Rural Area
Infrastructure

Completion Date:	2010
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Revised Timescale (commencement and completion dates):	Ongoing
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

As 11.10

Thank You

Signed	Title	Date 22/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by;	
Chapter 11		Recommendation 11.12	

Chapter 11 General Adult Mental Health Services:

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

As 11.10

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

As 11.10

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Bed occupancy 38 in Approved Centre
Plans for new Psychiatric Unit 35 beds with observation area.

Reason for partial completion / not yet

Awaiting Department Of Health & Children approval

Completion Date:	2010
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Revised Timescale (commencement and completion dates):	2010
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Please share the key learning points which have evolved in the implementation of this recommendation

Need to develop community services prior to reduction in beds.
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Recommend key issues for the consideration of the Independent Monitoring Group

Re focus service deliver away from an illness model to a recovery model
Education re role and function of recovery model,
Need to provide an effective community service
Staffing of teams, CMHTs

Thank You

Signed	Title	Date
Date Dec'09/Jan'10	Completed by;	

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by;	
Chapter 11		Recommendation 11.14	

Chapter 11: General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Planning services / Capital Funding

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

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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		Not yet commenced	√
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Please tick

Please provide supporting factual information

Reason for partial completion / not yet

Ongoing national discussion re executive Clinical Director's role

Completion Date:	2010 – 2011
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Revised Timescale (commencement and completion dates):	Ongoing
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

This action needs to be prioritised nationally

Thank You

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

LOCAL Recommendations	
HSE REGION	Catchment: Donegal
Date	Completed by; Rehab & Recovery Team
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

Mission statement reflects this commitment.
Assessment tools i.e. CASIG and care plans reflect this recovery philosophy.

Reason for partial completion / not yet

Recovery is a journey not an end point, recovery philosophy of this is to support service users own personal recovery journey.
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Completion Date:	N / A
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Revised Timescale (commencement and completion dates):	N / A
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Please share the key learning points which have evolved in the implementation of this recommendation

The need to have structured documents i.e. CASIG.
Individualised care plans facilitate recovery based structures and discussion and maintains person centred approach.

Recommend key issues for the consideration of the Independent Monitoring Group

Clarity in documentation related to recovery.

Thank You

Signed;	Title	Date; 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment: Donegal
Date	Completed by; Rehab & Recovery Team
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 checked="" type="checkbox"/>	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual information

Donegal has one Rehabilitation and Recovery Team for a population of 120,000+.
Team members include; (1) Consultant Psychiatrist (1) ADON / Team Co-ordinator (1) NCHD (1) Clinical Psychologist (6) Clinical Nurse Specialists (1) CNM II (1) Occupational Therapist (3) Health Care Assistants (1.5) Administration.
Assertive outreach component, not a principal modality, team role / service includes long stay / medium support / low support provision service in Donegal along with assertive outreach component.

Reason for partial completion / not yet

Recruitment ban
Not all disciplines represented.

Completion Date:	Dependant on service funding.
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Revised Timescale (commencement and completion dates):	See above
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Please share the key learning points which have evolved in the implementation of this recommendation

Required full MDT as per vision for change recommendations.
Low density population in Donegal is a challenge for county wide service delivery .

Recommend key issues for the consideration of the Independent Monitoring Group

Advocate for the number of teams as outlined in Vision for Change.
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Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment: Donegal
Date	Completed by; Rehab & Recovery Team
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 tick

Please provide supporting factual information

Responsibility for one community residence, Cleary House Supervised Residential Unit, Letterkenny with the Rehabilitation & Recovery Team.
3 x other SRUs in the county under care of sector Consultant Psychiatrist
Lack of non HSE step down and community residence is a constraint on rehabilitation & recovery service provision.

Reason for partial completion / not yet

See above

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

As per Vision for Change, service users are entitled to accommodation in the community.
Challenge of stigma of mental illness in accessing community housing.

Recommend key issues for the consideration of the Independent Monitoring Group

Awareness of local authority / social housing regarding the needs of service users with mental health difficulties
--

Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by; Rehab & Recovery Team
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

Rehabilitation & Recovery Team have links with the following; Worklink, Create a Link, Steer, TOSS, NLN, Aware, Grow, Solas, MHA, Cara House, Serenity House, St Vincent DePaul, Hearing Voices Group.

Reason for partial completion / not yet

Ongoing work on developing relationships with the various groups in our community.

Completion Date: Ongoing

Revised Timescale (commencement and completion dates): N / A

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

Provides an essential support for service users in the community.

Recommend key issues for the consideration of the Independent Monitoring Group

None

Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by; Rehab & Recovery Team
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

WRAP Training completed by two members of the rehabilitation & recovery team.

Plans to roll out WRAP to full rehabilitation & recovery team and community mental health teams throughout the county over the coming two years.

Reason for partial completion / not yet

Ongoing

Completion Date: 2012

Revised Timescale
(commencement and completion dates):

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

Lifelong learning that is essential for rehabilitation & recovery team in providing high quality care for our service user.

Ongoing education opportunities to be explored.

Recommend key issues for the consideration of the Independent Monitoring Group

Funding for training is difficult to access in current economic climate.

Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by; Rehab & Recovery Team
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	✓	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Supported employment, CE Schemes, FAS, TOSS are well established links.

Reason for partial completion / not yet

N / A

Completion Date:

N / A

Revised Timescale

(commencement and completion dates):

N / A

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

Provides an essential support to service users on their recovery journey.

Recommend key issues for the consideration of the Independent Monitoring Group

Recently abolished training allowance for new attendees is a concern as no longer do clients have a monetary incentive to progress with occupational / vocational avenue as part of their recovery

Difficulty in accessing supported employment.

Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by; Rehab & Recovery Team
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

Re-establishing meaningful employment is a key goal for service users as part of their individual care plans.

See previous recommendation for links already established by Donegal Mental Health Service / Rehabilitation & Recovery Team.

Reason for partial completion / not yet

N / A

Completion Date:

N / A

Revised Timescale

(commencement and completion dates):

N / A

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

Provides an essential support to service users on their recovery journey.

Recommend key issues for the consideration of the Independent Monitoring Group

Recently abolished training / attendance allowance for new attendees is a concern as no longer do clients have a monetary incentive to progress with occupational / vocational avenue as part of their recovery.

Difficulty in accessing supported employment.

Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment Donegal
Date	Completed by; Rehab & Recovery Team
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

Currently assessment tool, CASIG, measure quality of life and quality of treatment.
Feedback sought from service users and families.
Plans to establish formal feedback mechanism over the next 12 to 24 months.

Reason for partial completion / not yet

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

Service user feedback perspective are key to providing individual care package to clients of the rehabilitation & recovery team.
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Recommend key issues for the consideration of the Independent Monitoring Group

N / A

Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by; MHSOP Consultant & Team Coordinator
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 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

MHSOP's referral criteria meets this recommendation – 13.1
MHSOP also assess and diagnose Dementia prior to development of any BPSDs. We also see people who suffer from Psychiatric Disorders secondary to Medical Disorders.
This liaison work with Physician and Surgeons was overlooked by the “Expert” Group despite it being a significant aspect of our practice.

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

The MHSOP extended its referral criteria due to referral requests to care for patients diagnosed with dementia under the age of 65 years and support their carer/family.
Criteria were required to be established to manage patients known to the Adult CMHTs who were aged over 65 years. If a patient was known 10 yrs prior to reaching 65 years, he/she would remain under the Adult CMHT's care unless a patient specifically requests for his/her care to transfer to MHSOP following agreement between Consultants. This criteria was needed due to the population size of over 65s in the county, staff compliment of the MHSOP especially with only 1 Consultant.

Recommend key issues for the consideration of the Independent Monitoring Group

I suggest IMG request input from Clinicians with specialist expertise in MHSOP. The “Expert” Group lacked this experience.
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Thank You

Signed:	Title:	Date: 15/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/1/2010	Completed by; MHSOP Consultant & Team Coordinator
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	<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

Due to limited staff resources, transport issues and geographical layout of county. Also what evidence base and initiatives are the "Expert" Group referring to?

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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

As above.

What is the evidence base?

Increasing pensions providing medical Cards, setting up National Body to provide volunteer befriending service, increasing access to home care and respite services would also promote well being.

Does IMG agree?

Recommend key issues for the consideration of the Independent Monitoring Group

As above

Thank You

Signed:	Title	Date 15/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by; MHSOP Consultant & Team Coordinator
Chapter 13	Recommendation 13.4

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

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual information

GPs in the county have developed a close working relationship with the Consultant and the team. The GPs do generally carry out an assessment and screen patients who they are concerned about. If a GP has not screened a patient, the MHSOP will request same from GP before a diagnosis is made.
What does the "Expert" Group mean by "screening" – screening for what?
What's the evidence base?

Reason for partial completion / not yet

There are 3 Primary Health Care teams established in the county. Other referring GPs work from their own private practices.

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

As above
Again ""Expert" Group making recommendations that are ill-concerned and lacking an evidence base.

Recommend key issues for the consideration of the Independent Monitoring Group

Review this recommendation.

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by; MHSOP Consultant & Team Coordinator
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 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

MHSOP team per 130,000 approx. of population in Donegal initially set up in 2002. The team gradually grew to current compliment of staff below.
Team consists of :
1 Consultant in Old Age Psychiatry, 1 NCHD (6 mthly rotation), 1 Team Coordinator/ADON level, 4 CMHNs, 1 CNS, 1 Social worker, 0.5 Occupational Therapist (Basic Grade), 2 x 0.5 Senior Psychologists. 1.5 Administration
The 100,000 pop. base is plain silly. International norms suggest one consultant per 10,000 older (>65 yrs) people. This is basic but again overlooked by "Expert" Group

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

Suggest "Expert" Group be reviewed and introduce someone with proper expert knowledge of Mental Health in Older People

Recommend key issues for the consideration of the Independent Monitoring Group

As above

Thank You

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

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by;MHSOP Consultant & Team Coordinator
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	N/A	Partially implemented	Not yet commenced
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tick

Please provide supporting factual Information

Not applicable – MHSOP already established.

Reason for partial completion / not yet

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Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed:	Title:	Date: 15/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by;MHSOP Consultant & Team Coordinator
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

MHSOP was provided with a community based service headquarters – 20 Solomons Court, Letterkenny. Satellite offices set up in sector areas for CMHNs.
Acute psychiatric inpatient beds can be borrowed from fellow Consultant Psychiatrist as needed for the service. No dedicated beds to Consultant in Old Age Psychiatry.
Continuing care beds can be accessed through MH Supervised Residential Units for patients with a functional illness if needed.
Continuing care beds for the MHSOP patient group can be negotiated with the 9 local community hospitals in the county. Patients & families can also apply for a private nursing home bed, seeking financial support through the HSE home support scheme.
The MHSOP can refer patients to community care day centres and voluntary day centres in the sector areas. Community care services have established dedicated dementia days in many of their day centres. There are 2 private nursing home(PNH) available that are specifically for patients with dementia in the county. Community care services have contracted one of the PNH's to provide 1 day per week for patients who require a specialised day service.

Reason for partial completion / not yet

We recommend a peripatetic Day Hospital but HSE won't provide necessary staff to provide comprehensive 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

A lack of home help service provision and Alzheimers society services due to current financial restraints and increasing demands on these services to meet older people's needs at home especially with mental health needs as this increases carers stress and they requires additional support from the MHSOP.
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To provide comprehensive service we should be able to access home based physiotherapy – this is unavailable. As is night time and 24 hour home respite service. Also there is lack of Neurology Service/Advance Practitioner Nurse in continence management and neurology.

Recommend key issues for the consideration of the Independent Monitoring Group

As above

Thank You

<i>Signed:</i>	<i>Title:</i>	<i>Date: 15/01/2010</i>
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by;MHSOP Consultant & Team Coordinator
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	√
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Please tick

Please provide supporting factual Information

Consultant in Old Age Psychiatry can borrow beds as needed from fellow Adult Consultant Psychiatrists for patients who require hospital admission.
This a silly recommendation. Where did the "Expert" Group get this number where 's the evidence base. The region includes Sligo, Donegal, Leitrim and parts of Cavan – where will we locate beds?

Reason for partial completion / not yet

The Acute Psychiatric Unit in Donegal is waiting for renovation plans to commence – a dedicated 6 bedded annex for over 65s is part of the proposal/renovation plan.
This local recommendation is much more sensible.

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

As above.

Thank You

Signed:	Title:	Date: 15/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by;MHSOP Consultant & Team Coordinator
Chapter 13	Recommendation 13.9

CHAPTER 13 - Mental health services for older people

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

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual information

A MHSOP day hospital was established for the Sligo/Leitrim/West Cavan Service but would be unsuitable for the Donegal MHSOP to access this facility due to the distance.

Again a draft poorly thought through recommendation for this region and again lacking any evidence base.

Reason for partial completion / not yet

Due to current financial restraints a mobile day hospital for Donegal MHSOP is unable to be developed.

Completion Date:

Revised Timescale

(commencement and completion dates):

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

As above

Recommend key issues for the consideration of the Independent Monitoring Group

Ask the "Expert" Group for the evidence base underpinning these recommendations.

Thank You

Signed:	Title:	Date: 15/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by;MHSOP Consultant & Team Coordinator
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

<p>There are day hospitals attached to each of the 9 community hospitals and 4 voluntary day centres available in the county. The MHSOP will refer patients to avail of these services as needed but availability is limited as they cater for all over 65s. Day hospital/centre places are limited in the county especially with insufficient dedicated places for patients with dementia ie Falcarragh D/Hospital x 1 day (Saturday); 1 day in Brentwood Private Nursing Home etc. Also transport is an issue for many patients to access this type of service more than 1/2 day per week in some sector areas. MHSOP staff have established close working links with all of these facilities.</p>
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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

Improve access to transport support establishing peripatetic Day Hospital

Recommend key issues for the consideration of the Independent Monitoring Group

As above

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Thank You

Signed	Title:	Date: 15/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by;MHSOP Consultant & Team Coordinator
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
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please tick

Please provide supporting factual Information

Carers and families needs are assessed on an ongoing basis by the MHSOP key worker(s) involved. The key worker involved will provide the necessary education packs, advise on services available ie respite, day care and respond to crisis as they develop.
However home respite services unavailable. Alzheimer's Society underfunded to meet demands. Home care Services being cut.

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

Support increased provision of Home Care Services.

Thank You

Signed:	Title:	Date: 15/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by;MHSOP Consultant & Team Coordinator
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	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Patients with MH problems can apply for a nursing home bed as per HSE local policy for all patients aged 65 years and over (in keeping with the rest of the 65 and over population).
 Consultant in Old Age Psychiatry is a member of the local nursing home placement panel committee who attends monthly meetings with other MDT members from older people services to discuss patients who have applied for a nursing home bed and HSE subvention support.

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

MHSOP team are strong advocates for this patient group having membership on the committee.

The MHSOP have established good working relationship with the various older people's services available.

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Recommend key issues for the consideration of the Independent Monitoring Group

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Thank You

Signed:	Title:	Date: 15/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations

HSE REGION: West	Catchment: Donegal
Date: 15/01/2010	Completed by;MHSOP Consultant & Team Coordinator
Chapter 13	Recommendation 13.14

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

Recommendation Completion in this Area (Tick Box)

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

There are no dedicated beds for older patients suffering from Functional Psychiatric Disorders.

Reason for partial completion / not yet

There are continuing care beds within the mental health catchment area i.e SRUs facilities that are managed by the Adult CMHT for their over 65s patient group. The MHSOP can access these beds occasionally for respite periods if needed but very limited access for a patient requiring long term care.

Completion Date:

Revised Timescale

(commencement and completion dates):

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

Where did the number 30 come from?

Recommend key issues for the consideration of the Independent Monitoring Group

Suggest IMG support dedicated Unit for older patients who require continuing psychiatric care due to challenging behaviours. The number of places required could be established in consultation with local services.

PS. The recommendation reflect the absence of specialist expert knowledge in Older Peoples' Mental Health Problems, within the "Expert" Group a brief perusal of the members of the "Expert" Group will confirm this.

In the area of Dementia The Vision for Change Document is a far inferior piece of work to the Action Plan for Dementia prepared in 1998 by E O'Shea (a recognised expert in the field). I would suggest the IMG adopt this as their blueprint. Creating a one size fits all template is clearly disadvantageous. The "Expert" Group ignore the wide variation in population density of over 65s, the rural/urban divide, the rural isolation, lack of access to transport, levels of poverty etc.

The "Expert" Group seem unaware of liaison psychiatry and the interface between Geriatric Medicine and Old Age Psychiatry. This constitutes a significant amount of a Psychiatrist's job. Also they have nothing to say about Early Onset Dementia.

Thank You

Signed:	Title:	Date: 15/01/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment Donegal
Date 20.01.10	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	<input type="checkbox"/>	Partially implemented	X	Not yet commenced	<input type="checkbox"/>
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Please tick

Please provide supporting factual Information

Support provided for the expansion of the Good Morning Telephone Service for older adults operating in Co Donegal. Currently over 50 older adult volunteers in 3 sites, Buncrana, Falcarragh and Donegal town provide calls to over 200 clients weekly. The service was developed as a result of local needs assessments with older people which identified social isolation, fears of being alone and lack of information as key factors impacting their mental and overall health. The service has developed to meet new emerging needs including co-ordination of older people materials, group development, volunteerism and intergenerational work. An advocacy element is currently being developed and funded through health promotion. This will involve moving individual issues identified through confidential collation of data into collective themes for action.

Reason for partial completion / not yet

Service can be further developed in other areas.	
Completion Date:	ongoing
Revised Timescale (commencement and completion dates):	

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

Need for partnership working intra health service (e.g with home support service) and intersectorally through the management committee
Support and training for active participation and quality of life of volunteers
Improved quality of life for older people both as volunteers and clients.

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date 20.01.10
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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	<input checked="" type="checkbox"/>	Not yet commenced	

Please tick

Please provide supporting factual Information

Community based MHID Service – Adult
Consultant Psychiatrist appointment 15.01.01
NCHD – 01.07.02
Medical Secretary (Grade IV) August 01
Services delivered – catchment based.

Reason for partial completion / not yet

Resource Allocation Inadequate
Staffing Complement - Cap

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

Increased liaison with Primary Care is beneficial

Recommend key issues for the consideration of the Independent Monitoring Group

Time/Travel – major issue for specialist service.
Inadequate Human Resources
Inappropriate Clinical Space

Thank You

Signed:	Title	Date: 19.01.10
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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	<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

Majority of patients already on NIDD but this does not gather information specifically on Mental Health

Reason for partial completion / not yet

System is not linked with AMHS or MHID

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

Information is dependent on who completes the NIDD form

Recommend key issues for the consideration of the Independent Monitoring Group

Should not be two databases for collecting information – either NIDD or WISDOM not both

Thank You

Signed:	Title	Date: 19.01.10
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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

On a clinical basis Health Promotion is both part of I.D and MHID provision

Reason for partial completion / not yet

No specific staff allocation for Health Promotion

Completion Date:

unknown

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 more resources
Specific policies are required to support Health Promotion

Recommend key issues for the consideration of the Independent Monitoring Group

Dedicated projects required nationally to support standards of care

Thank You

Signed:	Title	Date: 19.01.10
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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	<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

All patients attending MHID in Co Donegal are registered with a 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

Signed:	Title	Date: 19.01.10
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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

Catchment based service since January 2001.
However not fully operational team

Reason for partial completion / not yet

Resource allocation inadequate/ Staffing Cap

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

Increased liaison with Primary Care is beneficial

Recommend key issues for the consideration of the Independent Monitoring Group

Fully operational teams are required for recommendation 14.6 to be realised.

Thank You

Signed:	Title	Date: 19.01.10
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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

Current population for one not fully operational team is
1:149500 (Co. Donegal)

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed:	Title	Date: 19.01.10
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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

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed:	Title	Date: 19.01.10
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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	<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

Access to Inpatient beds for mild LD - AMHS
Respite available
No dedicated designated beds for moderate/severe LD with MH needs
No day hospital or Rehab places

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

Access to patient beds in AMHS is valuable for mild I.D. Further training is required for nursing staff both in ID and MH services

Recommend key issues for the consideration of the Independent Monitoring Group

Need dedicated treatment and assessment beds for patients with moderate/severe ID & MH needs.

Thank You

Signed:	Title	Date: 19.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual information

Referral Policy – under re-evaluation due to competing demands for limited Resources – Consultant Time

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

Close integration not MDT but Interdisciplinary working does occur in Co Donegal

Recommend key issues for the consideration of the Independent Monitoring Group

Inadequate resources to achieve minimum standards of clinical care.

Thank You

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

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by;	
Chapter 15		Recommendation 15.2.7	

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Integration and co-ordination is limited and sporadic with no standardised approach to addressing accommodation needs.

Reason for partial completion / not yet

Completion Date:	2010 – 2015
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Revised Timescale (commencement and completion dates):	Ongoing
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Individuals with mental Health Problems are often stigmatised when it comes
To accessing Social Housing

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

Local Addiction services provide assessment / treatment to all service users who
Are referred via Community Mental health Teams

Reason for partial completion / not yet

Resources / Moratorium
The need for dedicated service for Dual Diagnosis

Completion Date:	Ongoing 2010
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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

Need for dedicated services for Clinical diagnosis

Thank You

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

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	Completed by;	
Chapter 15		Recommendation 15.3.2	

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Staff from Addiction services attends CMHT meetings on a weekly basis.
No dedicated dual diagnosis Community Psychiatric Nurse with this specific brief.

Reason for partial completion / not yet

Local arrangement with Mental Health and Addiction Services
Awaiting resources and rededicated staffing

Completion Date:

Not confirmed

Revised Timescale

(commencement and completion dates):

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

Dual diagnosis and substance misuse service users require highly intensive evidence based interventions.

Recommend key issues for the consideration of the Independent Monitoring Group

Prioritise prevalence study of dual diagnosis and substance abuse for LHO area
Review nationally services (dual) for service users with severe mental health and substance misuse.

Thank You

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

		LOCAL Recommendations	
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Planning for specialist adult team not included in business plan for North West

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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		Partially implemented	√	Not yet commenced	√
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Please tick

Please provide supporting factual Information

Addiction Counsellors sits as part of CMHTs offering services to Service Users with Dual diagnosis

Reason for partial completion / not yet

Resources/ moratorium/other services prioritised

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

Someone needs to address the dual diagnosis agenda as service users are not receiving appropriate intervention, their needs are not being met by mainstream Services.

Thank You

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

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

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

Through the CAWT (Co-operation and working together) INTEREG IV A project – Development of an Eating Disorders Network, a plan is in place for developing Health promotion initiatives that support greater community and family awareness of eating disorders. On such initiative is the establishment of a support group for people with an eating disorder and their carers led by Bodywhys. Health promotion initiatives in school and community groups that involve greater awareness of eating disorders are planned for Quarter 3 of 2010.

Reason for partial completion / not yet

These initiatives are currently in the planning stages.

Completion Date:

Jan 2012

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

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

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

Recommendation Completion in this Area (Tick Box)

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

Currently, existing child and adolescent CMHT's manage eating disorders in children and adolescents on a community basis.

Reason for partial completion / not yet

The full complement of beds are not yet available in one of the five in-patient child and adolescent units.

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

The four specialised multi-disciplinary adult teams, and the national team for children and adolescents are not yet in place therefore provision of community based Consultation, advice and support to all agencies in their area is impossible.

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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	√
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Please tick

Please provide supporting factual Information

National Negotiations

Reason for partial completion / not yet

Funding / National negotiations

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

LOCAL Recommendations	
HSE REGION HSE West	Catchment Donegal
Date Dec'09/Jan'10	Completed by;
Chapter 15	Recommendation 15.5.2

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

National Issue

Reason for partial completion / not yet

National decision re planning for Liaison Mental Health Services.

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by; Health Promotion
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

(1) Health promotion are developing resources for Junior Cycle SPHE for use by teachers and students which include lessons on Body Image, Self Confidence and Self esteem, Nutrition and Healthy Eating which tackle some of the contributing factors to eating disorders.

(2) Health promotion in partnership with mental health service, Donegal has developed a series of 3 brochures in response to an identified gap in Women's Services. The brochures are;

- Information you need to know if you have an eating disorder
- Information if you are a family/friends of someone with an eating disorder
- Summary of Bulimia Nervosa, Anorexia nervosa and Binge Eating Disorder.

Posters have also been developed.

Brochures were distributed to all schools, colleges, GPs, PC centres, mental health services, hospitals & health shops in Donegal. A re-print is currently underway.

Reason for partial completion / not yet

Completion Date:	(1) September 2010 (2) Q1 2010
Revised Timescale (commencement and completion dates):	

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

Managers and key people need to be involved from the start
 Multi disciplinary working worked effectively
 Inputs from young people who had used the service was essential
 The topic of eating disorders is a 'hidden' subject that many people are suffering with daily
 The use of colour makes a huge impact on the finished product.

Recommend key issues for the consideration of the Independent Monitoring Group

Needs assessment for a support group in the NW
 Awareness raising is an ongoing necessity
 Need to review information brochures annually.

Thank You

Signed	Title	Date 20.01.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by; Health Promotion
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	<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 draft local Donegal HSE response has been developed in relation to responding to 'traumatic' deaths. Plans are underway to pilot an 'early notification system' between the Gardai, the HSE and Living Links in cases of suspected suicide deaths to ensure that bereaved families are proactively offered support services. Mental health service personnel are involved in both initiatives.

Reason for partial completion / not yet

Both initiatives are in development stage

Completion Date: Dec 2010

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

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

CHAPTER 16 - Management and organisation of mental health services

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

Recommendation Completion in this Area (Tick Box)

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

Catchment Area Management Team established with all Professional Managers representation plus GP Rep, Advocacy services also represented

Reason for partial completion / not yet

Service user not on Team but plans to introduce member who is on the NSUE this year

Completion Date:	During 2010
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date 1/2/2010
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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		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual information

Reason for partial completion / not yet

Devolved budgeting required in order to deliver this recommendation

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date 1/2/2010
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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	HSE West
Date	Dec'09/Jan'10
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	<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

Organisational change needed to deliver recommendations.

Completion Date:	2011
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Revised Timescale (commencement and completion dates):	Ongoing
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

This action needs to be prioritised whereby you have accountability for budget
And decisions

Thank You

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

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

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	<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

Local Mental Health Management Team established
Team Established
Terms of Reference
Planned for 2010 (Self Management)

Reason for partial completion / not yet

Completion Date:

During 2010

Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual information

Some evidence of integration between other services
Service Level Agreements established with Several Voluntary Groups

Reason for partial completion / not yet

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment Donegal
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	

Please tick

Please provide supporting factual Information

Networks and working relationships developed with Primary Care Teams
This however is not structured or formalised

Reason for partial completion / not yet

Completion Date:	2011 - 2012
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Revised Timescale (commencement and completion dates):	Ongoing
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Please share the key learning points which have evolved in the implementation of this recommendation

Recommend key issues for the consideration of the Independent Monitoring Group

A lot of education needed with Primary Care, as GPs tend to be busy professionals that need a lot of buy into the integration concept

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

Recommendation Completion in this Area (Tick Box)

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

Donegal Central Sector moving to Primary Health Care Centre in Feb 2010
Other Centres awaiting funding approval

Reason for partial completion / not yet

Completion Date:

2011 - 2012

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

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

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

Please tick

Please provide supporting factual Information

Create facilities at local level
Family Friendly Rosters across all grades and services eg parental leave, flexitime
Job sharing

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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		Partially implemented		Not yet commenced	√
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Please tick

Please provide supporting factual Information

Not deliverable due to gross number of retirements from Service
Not allowed to rehire staff who have retired.

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

Urgent attention needed re loss of skilled / Competencies due to retirements

Thank You

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

LOCAL Recommendations			
HSE REGION	HSE West	Catchment	Donegal
Date	Dec'09/Jan'10	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	
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Please tick

Please provide supporting factual Information

CMHT's established
Staff have redefined their roles
Staff have diversified into other roles developing new competencies

Reason for partial completion / not yet

Ongoing embargo on all training, other than mandatory

Completion Date:

Revised Timescale (commencement and completion dates):

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

Managing the change process
Challenging organisational culture
Leadership and management competencies.
Staff feel isolated, motivation very low, no professional development training

Recommend key issues for the consideration of the Independent Monitoring Group

Review lack of training nationally in response to delivering VOC recommendation.

Thank You

Signed	Title	Date

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	<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

No training happening

Reason for partial completion / not yet

Completion Date:	2011
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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

This is a major concern for service providers

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Rehab team have HCA in place offering assistance with Independent living and Integration in their local community

Reason for partial completion / not yet

Lack of Resources to fully deliver on this Recommendation

Completion Date:	2011
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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

Positive impact of HCAs in Mental Health Services should be expanded

Thank You

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

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

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

A variety of programmes are available regarding induction, Health and Safety etc
Mandatory Training

Reason for partial completion / not yet

Difficulty to release staff to training due to Moratorium/ Retirements/ Financial Restrictions

Completion Date:

2011 - 2012

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

Moratorium major impact on all training

Thank You

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

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 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	<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

Donegal Mental Health Service has recognised the need to develop and implement an information system for mental health care providers, service planners, policy makers and researchers to record and report specific data in real time on mental health activity in both hospital and community mental health services. To this end, the Donegal MHS has been engaged with the HRB in implementing a mental health information system (WISDOM) that will meet the requirement of Recommendation 19.3.

WISDOM is a web-based system, accessible via the HSE network, which will be used by professionals in the mental health services to record, store and share patient information. It records a variety of individual demographic details, such as name, address, sector, age, gender, socio-economic group, and General Medical Services (GMS) status. It also records clinical information, e.g. diagnostic details, referral source, team based activity. It has the ability to create reports on service activity, and has the ability to create HSE performance indicator reports for the Donegal area. Additionally, WISDOM has a scheduling system, a letters module, a correspondence tool for team members and an inbuilt quality assurance process.

WISDOM will create a comprehensive, detailed record of patients within the mental health services structure. This will improve service efficiency and potentially improve patient safety by making patient information readily available to all mental health staff wherever the patient presents whether this is at the local Emergency Department, a community mental health team or at an Approved Centre.

Reason for partial completion / not yet

WISDOM is being rolled out in the Donegal Local Health Area as a proof of concept (POC). After the proof of concept, which will last approximately last 18 months, WISDOM will be evaluated.

Completion Date:	End Date for POC = 30 th June 2010
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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

Wisdom seeks to explore within the Proof of Concept process, the opportunities and challenges in building and implementing a MHIS system that meets local service needs, national needs in terms of the minimum data set, and also other national information needs from 3rd parties. The period leading up to the POC as well as the POC itself have been rich in learning. All of which will form part of the project evaluation process.

Key learning points to date include:

- The importance of a shared vision amongst all stakeholders
- Knowing who 'owns' the project
- All stakeholders knowing and understanding their roles and responsibilities within the process.
- The importance of commitment and passion from organisation leaders and heads of service in implementing over a sustained period of time.
- Communication, Communication, Communication
- Having a clear risk management approach
- Importance of Project Management processes and practices
- Awareness of ethical, legal and clinical considerations in sharing information
- The importance of fully scoping the system, the system requirements and organisational requirements
- Giving time to adapt and develop organisation culture
- Learning how to develop, change and adapt in challenging economic and cultural change to keep the project moving forward – achieved mostly through a soft implementation approach.
- The fact that no system will meet all expectations
- Learning from, and learning how to move on from failures and disappointments
- The importance of a multi-annual budget to span the POC stage
- The importance of taking the current system to the 'next level', i.e. a full EPR
- The value of and need for, a consistent and capable cohort of project staff.
- The need for a clear 'exit' strategy from POC stage.
- The importance of acknowledging and valuing the contributions made by all
- Some things that are considered 'done' or completed can come become 'undone' if not supported or monitored.
- Celebrate success

Recommend key issues for the consideration of the Independent Monitoring Group

Recommend continuing support for the Wisdom system post Proof of Concept to develop the system to its maximum capability in meeting local and national requirements.

Thank You

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

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 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	<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 Draft National Minimum Data Set for the mental health service is included within the WISDOM System.

Reason for partial completion / not yet

WISDOM is being rolled out in the Donegal Local Health Area as a proof of concept (POC) which is currently 13 months into its' 18 months time frame.

Completion Date: End June 2010

Revised Timescale
(commencement and completion dates):

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

Please see Rec. 19.3 above

Recommend key issues for the consideration of the Independent Monitoring Group

Recommend that a national scoping exercise be conducted to identify national mental health service information and communications requirements.

Thank You

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

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

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		Partially implemented		Not yet commenced	✓
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Please tick

Please provide supporting factual Information

Mental health research appreciation and methodologies are include in all post graduate and undergraduate programmes conducted under the auspices of Donegal MHS

Joint funding research opportunities have been provided by the HSE in conjunction with the local Higher Education institutions. e.g HSE/LYIT funding of €40,000 (2009-2010) to fund a study of the contribution of CNSs to reducing demand within acute services.

In-service training programmes promote the use of research evidence and underpin research in their programmes. eg. STORM

Reason for partial completion / not yet

Not yet commenced

Completion Date: End 2010

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

Recommend that that HSE mental health services directorate establish a priority listings of research that is **required** to further support service developments, in relation to carers, users and the wider population needs. There should be a special focus on identifying those with unmet as well as new or emerging needs.

Thank You

Signed	Title	Date

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		Partially implemented	√	Not yet commenced	
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Please tick

Please provide supporting factual Information

Organisational change has commenced in respect to Vision for Change Recommendation:
Eg LHO CMT
CMHTs
Rehab, however other recommendation to be delivered

Reason for partial completion / not yet

Resources, Organisational support and structures not in place

Completion Date: 2011 - 2012

Revised Timescale (commencement and completion dates): Ongoing

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

Managing the change process needs to be a systemic approach, that is supported by Training in recovery / rehab Ethos

Thank You

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

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

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	
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Please tick

Please provide supporting factual Information

6 Residents due to be relocated during 2010 this will complete the full closure

Reason for partial completion / not yet

Completion Date:

2010

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

Process of Change slow, Feel consultation with all stakeholders, services, users and families at very early stage in the process of closing down Mental Health Institution is necessary.

Thank You

Signed	Title	Date
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