

Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION: DML	Dublin West\South West Mental Health Service
Date: 10.02.2010	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		Partially implemented	X	Not yet commenced	

Please tick

Please provide supporting factual Information

Representatives from Carers and Service Users participate on the Management Group of the above service.

Reason for partial completion / not yet

Efforts will be made during 2010 to seek nominees from carers and service users on to sector management teams.

Completion Date:

Jan 2011

Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual information

National Mental Health Office Response

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 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	X	Not yet commenced

Please tick

Please provide supporting factual Information

Peer Advocacy: Advocacy service visits approved centres regularly. These are Irish Advocacy Network trained peer advocates.
Peer Advocacy: Advocate runs a weekly group on the Acute Unit and visits the Laura Unit on a monthly basis. The High and Medium Supported Staffed Accommodations have also been visited
Self Advocacy: Two separate service user education groups have been trialled, one in BMHC (peer provided 'finding your way') and one in Crumlin. The group in Crumlin has resulted in a service user support group being set up.
Out and About Group (BMHC) is a supported socialisation group in Ballyfermot Mental Health Centre. It is partially service user lead, in that each group member takes it in turn to organise the group
Care planning process involves service user
Carers Council is up and running
Carers and Service users are involved in new management structures

Reason for partial completion / not yet

Advocates not regularly available in MHCs.
No use of Adult Education services to access information, courses and qualifications relating to advocacy (we do work with Adult Education to provide other services)
Initiatives are happening on local levels – need to be reviewed and implemented on an area wide basis.

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

Management support of local projects is needed to avoid the service ceasing when certain staff members move on and to ensure that good ones are replicated throughout the service area.

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 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	X	Not yet commenced	
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Please tick

Please provide supporting factual Information

Carers' Council commenced – developed by a service user, carer and service provider project group.
Carer and Service Users now form part of the Area Management Team.
Service Users, Carers and Service Providers participated in the past 3 years of DCU Service Improvement Leadership for Mental Health Service Users, Carers and Service Providers.
Carers group central to political lobbying for resources for new building.

Reason for partial completion / not yet

Service User Council not yet up and running.
Service Users and Carers are not yet participating in local sector management teams.
Care Planning process involving service users is not yet fully implemented.

Completion Date:	March 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

Carers and service users' knowledge and perspectives add immeasurably to the management teams.
Increasing service user and carer involvement takes time and involves a huge amount of groundwork to commence.
Empowering and supporting carers seems to lead to enhanced clinical outcomes (needs proper research).
DCU course was very helpful in broadening the perspectives of all involved and motivating them to make changes.

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 3.6

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	X	Not yet commenced	

Please tick

Please provide supporting factual information

Carers 'psycho-education' programmes and support groups are available in all community sectors and in the Psychiatry of Later Life Service.
Home Care Teams (all sectors and PLL) have an official remit to support carers
Two respite beds available
Day Centres work with carers to provide for the long term needs of people with high dependency living in the community.

Reason for partial completion / not yet

Carers psycho-education programme needs to be further developed to ensure every carer has access to the information they need, that this service meets best international standards, and that the carers needs are communicated adequately to the CMHT.

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

Recommend key issues for the consideration of the Independent Monitoring Group

Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 3 – Partnership in care: service users and carers

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	X	Not yet commenced	

Please tick

Please provide supporting factual information

Social Work Team have provided specialist children's support group in past.

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 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

Please tick

Please provide supporting factual Information

Home Care Teams have education remit.
Carers Education available in all CMHTS
Key workers in hospitals, day hospitals, home care teams and day centres provide information.
Project team (carer, service user and service provider) are currently working to set up a website specifically focused on the information needs of service users, potential service users and carers in the Catchment.
Citizens Information Service is facilitated to provide a weekly session in Approved Centre (AMNCH)
Service User education programme has been piloted in Crumlin MHS

Reason for partial completion / not yet

Carer and service user education programmes need further development
Website project not yet complete.

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 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	X	Not yet commenced	

Please tick

Please provide supporting factual Information

Complaints procedure in place
Complaints monitored on a monthly basis.
Comments / Suggestions boxes available in many MHCs
Specific programmes such as Anxiety Management have service user feedback on quality and usefulness of course as an integral part of the programme

Reason for partial completion / not yet

Need more formal and informal feedback mechanisms for all programmes offered
Not all MHC have comments/ suggestions boxes.

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 3	Recommendation 3.10

Chapter 3: Partnership in care; service users and carers

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

Recommendation Completion in this Area (Tick Box)

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

Please provide supporting factual Information

Partnership with community groups is happening, it is usually driven at a local level with specific individuals spear heading certain initiatives such as partnership with VEC, training and employment agencies, local gyms etc. The local VEC is used by the Rehabilitation and Recovery service to provide computer, cookery and woodwork classes. Community Development Officer visits BMHC day centre on a regular basis to provide information about and encourage service users to participate in community events.

PIETA House – service has started creating formal link.

Reason for partial completion / not yet

Community Partnership needs to become a core part of our service.

Completion Date:

Revised Timescale
(commencement and completion dates):

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

Often good programmes disappear when staff members leave.

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	X	Not yet commenced

Please tick

Please provide supporting factual Information

These groups have been delivered in the relevant sectors and challenging self stigma and developing patient confidence and self esteem is a core element of the programmes
1.Staying Well Group Clondalkin and planning well advanced in Tallaght sector also
2.WRAP Wellness recovery action planning Groups established in Ballyfermot & Crumlin
There are carers groups in each sector. Challenging self stigma and stigma is part of the psycho-education process.
Tallaght Mental Health Association in partnership with mental health staff at Tallaght 1 produced an information leaflet with relevant information that challenges stigma by offering important facts
2 Team lectures to public regarding mental health & managing stress
Mental health social work manager attends area child protection committee in Dublin West. Presentation re mental health services is provided for all members which includes police, schools and voluntary groups

Reason for partial completion / not yet

More to be done
Increased links with primary care teams
Develop psycho-education programmes in all sectors
Include psycho-education as part of service users care plan when appropriate

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

Delivering groups as a multidisciplinary team, allow shared learning and team commitment to process, review of groups and feedback from service users

Recommend key issues for the consideration of the Independent Monitoring Group

Time commitment for these tasks needs to be prioritised and reasonable goals that are specific and achievable need to be pursued rather than over ambitious programme

Thank You

Signed	Title	Date 8.2.10
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Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 4: Belong and participating: Social Inclusion

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

Recommendation Completion in this Area (Tick Box)

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

Please provide supporting factual information

All sectors have occupational therapy staff, who take a lead in this area; the service is able to offer service users an assessment regarding their functional abilities with regard to employment training and offer training programmes. Other team members access the HSE rehab guidance service for additional assessments and support as well as voluntary and statutory bodies.

Reason for partial completion / not yet

The task is challenging and priorities need to be made regarding staffing resources

Completion Date: Subject to staffing

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 4	Recommendation: 4.8

Chapter 4 – Belonging and participating: social inclusion

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

Recommendation Completion in this Area (Tick Box)

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

Please provide supporting factual information

Part of Authorised Officer Training completed by 5 staff
Part of under graduate training for all disciplines now
Patient information leaflets in various languages

Reason for partial completion / not yet

Current staff need to have refresher training in this area
Should be a national focus to guide service on recommended programmes

Completion Date:

Dec 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

Useful programme as part of Authorised Officer Training, resources eg DVD could be used service wide.

Recommend key issues for the consideration of the Independent Monitoring Group

As above

Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 4: Belonging and participating; Social inclusion:

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

Successful partnership regarding Dublin Mental Health Ireland Association and Crumlin Mental Health Team re housing of 5 service users in newly developed house. Selection of residents was a collaborative exercise with the sharing of all relevant information. The Crumlin outreach team support residents in an on going way

South Dublin County Council housing forum includes rep from adult mental health service and other agencies to review the needs of mental health service users in accessing housing meets bi monthly

Reason for partial completion / not yet

Other such projects could be developed

Need to restore links with Dublin City Council who were unable to commit to a housing HSE adult mental health services meeting

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

Successful partnership approach, support of all relevant persons to make it happen, good planning and monitoring of progress.

Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 5: Fostering well being; Mental health promotion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

Health Promotion within Mental Health Services – Staying Well Group (Clondalkin MHT) Walking Group (Clondalkin MHT) Healthy Living Group (Tallaght MHT) Out and About Group (Ballyfermot MHT), Yoga (Acute Unit, PLL and Ballyfermot)

Health Promotion within wider community is co-ordinated by the Mental Health Association. Initiatives include, Secondary Schools Public Speaking Contest (12 -14 schools in our catchment participate in this on an annual basis. Mental Health Matters programme in secondary schools. Fifth Class essay competition takes place on an annual basis within our catchment. Mental Health Information Stands in AMNCH and in shopping centres. ASIST Applied Suicide Intervention Skills Training is provided and open to the public (Health Promotion Unit). Information on coping with exam stress provided to schools. World Mental Health Day events included a Choral Event and free, open to the public mindfulness training in Tallaght Library. Friends Together social group going in Tallaght. They also give talks to many groups such as the ICA, Dept of Family and Social Affairs etc.

Reason for partial completion / not yet

Need to further develop health promotion initiatives and co-ordinate with the local HSE health promotion office.

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

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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	<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

No locally or nationally agreed standards/targets.

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 5: Fostering well-being; Mental health promotion

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	* Not yet commenced

Please tick

Please provide supporting factual information

ASIST Training Available
Staywell Programmes delivered in Clondalkin

Reason for partial completion / not yet

Few training and education programmes in place

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 7; Mental Health in primary care;
 All individuals should have access to a comprehensive range of interventions in primary care for disorders that do not require specialist mental health services.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	X	Not yet commenced	
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Please tick

Please provide supporting factual Information

All clients of Community Residences have General Practitioners
Links have been in place between Community Mental Health Teams , General Practitioners & Public Health nursing services

Reason for partial completion / not yet

Primary carer teams only being established in the local area now

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 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	X	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

All patients 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
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Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 7: Mental health in primary care:

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	X	Not yet commenced	

Please tick

Please provide supporting factual Information

Primary carer teams only being established in the local area now

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 7	Recommendation 7.5

Chapter 7 – Mental health in primary care

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	X	Not yet commenced	

Please tick

Please provide supporting factual Information

The CMHTs link with General Practitioners in the local sectors.
Home Care Teams assess and support referrals at short notice.
Liaison Service is provided at AMNCH. Referrals are seen out of hours

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 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

Please tick

Please provide supporting factual Information

Primary carer teams only being established in the local area now

Reason for partial completion / not yet

We have sought to develop CNS posts in Primary Care however, no funding available for this initiative.

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

Recommend key issues for the consideration of the Independent Monitoring Group

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Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 7: Mental health in primary care

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	X	Partially implemented		Not yet commenced	

Please tick

Please provide supporting factual Information

All sector teams provide a single point of access for primary care within their sector for advice, routine and crisis referral.

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 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	X	Not yet commenced	

Please tick

Please provide supporting factual Information

Primary Care Teams only recently established within the catchment area service.
Discharge Summaries for both in-patient and out-patients are forwarded to GPs in each of our sectors.

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 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		Partially implemented	X	Not yet commenced	
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Please tick

Please provide supporting factual Information

A new purpose built Mental Health & Primary Care Centre will commence construction in Ballyfermot later this year.
It is envisaged that PPP arrangements will be entered into in Crumlin and Clondalkin for the construction of mental health & primary care centres. Building will most likely commence in 2011.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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Vision for Change Independent Monitoring Group Report for Jan 2010

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 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
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tick

Please provide supporting factual information

This service participates in the GP rotational training scheme. All GP trainees are based in one of the four community mental health teams.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

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	<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

Core skills of psychiatry, nursing, social work, clinical psychology (from 2010) and occupational therapy available to all sector teams. MDT staff not sufficient in numbers to meet the VFC requirements and/or fully meet the needs and social circumstances of sector populations.

Reason for partial completion / not yet

Public Sector Moratorium on Recruitment of staff. HSE fiscal constraints on the employment of staff

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

Chapter 9 – The Community Mental Health Team (CMHT)

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

Recommendation Completion in this Area (Tick Box)

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>CMHT's are the cornerstone of MH delivery of service within DWSW MHS but do not have sufficient number of MDT staff to allow for consistent best practice community based care to be delivered to all service users(see 9.1). Shared governance model is in the form of MDT Sector Management Teams rather than that outlined in Vision for Change.</p> <p>The appointment of the Executive Clinical Director (ECD) has ensured discussions with Child & Adolescent Psychiatric Service, Substance Misuse and MH ID re enhanced integration with Adult Mental Health Services.</p>

Reason for partial completion / not yet

<p>Shared governance model will be established with the full establishment of the Supercatchment MH Directorate.</p>
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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
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Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 9 – The Community Mental Health Team (CMHT)

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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 MHS has established close links across the catchment area with relevant community and voluntary groups. These groups include the like of Threshold, Eve Holdings Vocational Training, Homeless Advice Units, Citizen Information Centres. Formal service level agreements are in the process of being negotiated with a number of voluntary organisations including Pieta House and the Village Counselling centre, Clondalkin. The CMHT's link with Primary Care services on an individual basis and as required with the GP and the primary care team.

Reason for partial completion / not yet

Formal links with Voluntary organisations will be established in 2010

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 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	Not yet commenced

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

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	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	Not yet commenced

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

Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 10: Child & Adolescent Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

Chapter 10: Child & Adolescent Mental Health Services
 Urgent attention should be given to the completion of the planned four 20-bed units in Cork, Limerick, Galway and Dublin, and multidisciplinary teams should be provided for these units.

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

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

Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 10: Child & Adolescent Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

CMHT's typically provide support and consultation to primary care providers on a regular basis; the precise nature of this depends on the particular needs of individual service users.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Please provide supporting factual Information

Mental Health service is delivered in all sectors through the core entity of one CMHT. Sector populations vary in size from the VFC target of 50,000. Crumlin sector (48,658) and Clondalkin sector (58,533) are in line with VFC sector size while Ballyfermot sector (76,734) and Tallaght sector (82,642) exceed the suggested population of 50,000. The sector teams have with the exception of the Clondalkin sector the requisite number of psychiatrists on the team. Clondalkin sector has one psychiatrist for a population of 58,533.

Reason for partial completion / not yet

The Shared governance arrangements will be developed with the establishment of the Mental Health Catchment Area Directorate.

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	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.5

Chapter 11: General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

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

Please provide supporting factual information

The governance model of Sector Management Team is in operation within the CMHT's.

Reason for partial completion / not yet

The service management structure is in process of evolving to that outlined in VFC. From Jan 2010 the MHS management team broadly reflects the structure outlined in VFC and has Heads of Discipline, Service User and Carer representation on same.
The structures as outlined in VFC will have to be advanced at a National Level to take account of new grades of staff and the public sector moratorium on recruitment.

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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, with the exception of Ballyfermot sector,(new purpose build mental health & primary care centre to commence construction in Sept 2010) operate from Community Mental Health centres centrally located within sector areas for ease of access for service users. Day hospitals are provided in all sector areas and acute admission facilities are provided through Cedar and Rowan wards within the AMNCH.

Reason for partial completion / not yet

Ballyfermot CMHT is located within Cherry Orchard Hospital, while the build of a Community Mental Health Centre is undertaken. This capital project has approved and a start date set for Sept 2010.

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

Vision for Change Independent Monitoring Group Report for Jan 2010

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

Chapter 11 General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

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

Please provide supporting factual Information

All service users admitted to the inpatient units of Rowan, Cedar wards including the Aspen unit are involved in the development of an individual integrated treatment and care plan.

Reason for partial completion / not yet

Over the course of 2010, Integrated care plans are to be introduced for service users attending community services also. Acute admission units are priority in the first instance.

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	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.8

Chapter 11: General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

There are not sufficient resources within the service to allow for the full range of psychological therapy to be offered to service users. As such it is not possible always to facilitate the implementation of best practice group and individual interventions to be offered to service users. There is limited access to Psychodynamic psychotherapy, Behaviour Therapy, Cognitive Behaviour Therapy and Cognitive Analytic Therapy within sector teams.

Reason for partial completion / not yet

Public Sector Moratorium on Recruitment. HSE fiscal and employment controls which place constraints on a service's capacity to employ new staff and/or provide necessary training and upskilling of existing staff.

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	Catchment
Date	Completed by;
Chapter 11	Recommendation 11.9

Chapter 11: General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Information pertaining to community resources and supports are available to service users in the public areas of community mental health centres and admission units as well as through individual consultations with CMHT staff.

In 2009, a "Healthy Reading Scheme for Adults" was developed by the Psychology service in collaboration with South Dublin County Council. Information leaflets and evidence based self help books are available to service users and carers in local libraries.

Active participation in the management and day to day operation of the MHS by Service users and carers has been fostered by our funding and support of the DCU Service Users Leadership course. Peer support and advocacy groups operate within the acute and rehabilitation units. A carer's council has been established with a service user council envisaged in the near future. In 2009, research into the needs of carer's was undertaken by Tallaght social work and occupational therapy staff.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

Chapter 11: General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	X	Partially implemented	Not yet commenced
	X		

Please tick

Please provide supporting factual Information

Home care teams provide a responsive service to all sectors. The HCT liaises with the wider CMHT with the Consultant Psychiatrist having the gate keeping role in respect of hospital admissions.

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 11	Recommendation 11.11

Chapter 11 General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

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

Please provide supporting factual Information

This service is moving to extend capacity within the Home Care Teams to provide additional cover until 9.00pm.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

Chapter 11 General Adult Mental Health Services:

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

2010 will see the development of an early intervention service for first episode psychosis. Some nursing resources have been identified and CBT for Psychosis training has commenced. Negotiations re the required inclusion of AHP's to the team has begun also. Links have been established with the DETECT programme at St John of Gods Hospital.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

Chapter 11 General Adult Mental Health Services

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

The acute admission unit in AMNCH comprises of male and female units and a high observation unit. The high observations unit, Aspen is a six bedded unit while Cedar and Rowan wards have 23 beds apiece.

Reason for partial completion / not yet

Completion Date:

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	<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

Should be answered from a National \ Regional perspective

Reason for partial completion / not yet

Completion Date:

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

There is a rehabilitation multidisciplinary team with all disciplines apart from psychology (this service is available for staff consultation)
The team has an executive management team that meets regularly and this principle is a key point in the team's mission statement.

MDT care plans have or are being formulated for all patients within the service and there is a recovery focus to all plans, with a commitment to maximising patient's potential and offering the least restrictive options for our patients

Reason for partial completion / not yet

Recent introduction of new Integrated Care and Treatment Plan. Awaiting funding for educational package. Lack of move on accommodation blocks progress through the service with discharge delayed in some instances.

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

The development of the executive management team with all key members present was key.

Housing remains a challenge to the progress of rehabilitation with some clients remaining in settings of over provision thus not allowing them to be fully autonomous.

Recommend key issues for the consideration of the Independent Monitoring Group

To formalise links with Housing Providers at department level.

Thank You

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

LOCAL Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 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

We have an outreach team that supports all residents on discharge from our rehabilitation centres for a period of time before transferring to the local catchment CMHT.

Reason for partial completion / not yet

The team is small and covers a larger than recommended area

There are plans to reconfigure the service and increase the team composition

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

A large number of people with severe and enduring mental illness can live in the community if they receive support from an Assertive Outreach Team that can work across the week and into the evening. This team helps the client in all aspects of their daily living as well as monitoring symptoms, providing support and education. A recurring theme with this cohort of clients is loneliness and the AOT is a great support in encouraging and facilitating socialisation at weekends and in the evening time.

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	x	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

The MDT rehabilitation team visit all hostels on a regular basis and gate keep all admissions and discharges we have medium, low and high support community residences. Some buildings are the property of the HSE, some are rented from local authority and one is rented from a private source. We acknowledge that some of our buildings are no longer appropriate for the delivery of a person centred service and there are plans in action to upgrade this accommodation.

Reason for partial completion / not yet

The service is embarking on a major Capital development programme which includes two community residential units.

Completion Date:

Revised Timescale
(commencement and completion dates):

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

Clients need the experience of rehabilitation in the most normalised setting possible. With large old buildings, health and safety requirements, hygiene standards etc it is not always possible for the clients to become fully involved in the day to day running of the households.

Recommend key issues for the consideration of the Independent Monitoring Group

To participate in active rehabilitation using a client centred and recovery focus individuals require adequate accommodation that affords them dignity and access. Accommodation should be domestic in style and clients should have their own bedrooms/ensuites and .adequate leisure space. Accommodation should be sited within easy access of all services eg bus routes, shops etc. There are no HIQA standards for hygiene specific to domestic dwellings utilising a social model or recovery model. These need to be established in collaboration with stakeholders. We are keen to have accommodation units as normal as possible.

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

Links with general adult services. All rehab referrals are secondary referrals. Links are maintained with general adult services through the CMHTs at sector level. Links maintained with the Acute Unit. Links with general hospitals. Links with Pieta house and Mental Health Associations also Aware Recovery, Shine etc

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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		Partially implemented		Not yet commenced	X
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Please tick

Please provide supporting factual information

Reason for partial completion / not yet

Ongoing negotiations on reconfiguring the service. An education package was designed in recovery model in conjunction with TCD but funding not available. It is hoped to receive funding this year to continue with CBT, solution focused interventions and a recovery model of intervention

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

Since Planning for the Future rehabilitation in Ireland has been about resettling patients out of the institutions the concept of recovery is slowly evolving. Much emphasis has been placed on the development of CMHT sealing with acute patients in the community. A robust campaign for an educational curriculum in recovery based models for care is required for all staff working in rehabilitation.

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	X	Partially implemented	Not yet commenced
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Please tick

Please provide supporting factual information

There are links with employment agencies on an individual needs basis . We have formal links with the VEC in Lucan, EVE Ltd , National Learning Network (NLN) and FAS. Links with Palmerstown Adult Education Centre have recently been established..

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	x	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

There are links with employment agencies on an individual needs basis . We have formal links with the VEC in Lucan eg current computer class on going also individuals attend literacy classe. EVE Ltd provide training and occupational programmes which are ongoing. On an individual basis clients are referred to National Learning Network (NLN) and FAS. Links with Palmerstown Adult Education Centre plan to provide community classes in art and woodwork after Easter.

All clients in rehab service have access to training and vocational activity.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	x	Not yet commenced	
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Please tick

Please provide supporting factual information

The Occupational Therapists run a day programme during which they utilise recovery measurements.

Reason for partial completion / not yet

Not all service users have had a Quality of Life Assessment completed and no audit has been completed on all clients
Audit on social inclusion/integration and reduced admissions is currently in progress and will be completed by June 2010

Completion Date:

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Revised Timescale

(commencement and completion dates):

Nov 2010

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

Quality of life is very subjective and needs careful analysis, blocks to this is time and standardised assessment tool and not having fully resourced teams

Recommend key issues for the consideration of the Independent Monitoring Group

That the Monitoring Group Develop Standardised Measurement Tool on Quality of Life.

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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 over the age of 65 with new mental health disorders [not attending the psychiatric services within the previous 2 years] are cared for by the specialist old age psychiatry service. Those who are attending a general adult psychiatry service and would benefit from input from a consultant psychiatrist in the psychiatry of old age are offered a second opinion at the request of their treating psychiatrist but they are not automatically transferred to the care of the old age psychiatry service on reaching the age of 65 years.
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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

Patients under the age of 65 with secondary behavioural and affective problems arising from experience of dementia may have a greater need of specialist old age psychiatry services compared to those over the age of 65 whose needs are being appropriately met by general adult or rehabilitation psychiatry services.

Recommend key issues for the consideration of the Independent Monitoring Group

Patient need rather than an age cut-off should be a stronger influence on which specialist service [old age, general adult, rehabilitation, liaison etc] is responsible for the patient's care.

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

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

Professor Swanwick is a member of the Health Service Executive (HSE)– Mental Health in Primary Care Group, the Committee of the Dementia Services Information and Development Centre, and of the Steering Committee for Protection of Older Persons – Dublin West. He and Dr Ni Bhriain regularly deliver lectures, workshops, and seminars for general hospital staff, general practitioners, primary care team professionals, dentists, voluntary bodies, and others
The Clinical Nurse Specialists provide on-going training for staff in continuing care facilities aimed at prevention of challenging behaviour and promotion of psychological well being
The team provides a carer education and support service for informal carers of family members with dementia. This aims to reduce carer burden
The occupational therapist has facilitated a group at a local community centre to promote re-integration of patients with mental health difficulties into non-mental health community facilities

Reason for partial completion / not yet

Vision for change refers a development of a memory clinic. The team does not have access to psychology and does not have access to neuroimaging [waiting list over 4 months].
There is scope for expanding health promotion programmes as the team is further developed. See recommendation 13.5

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

4 members of the team [2 consultants and 2 clinical nurse specialists] have formal specialist training in psychiatry of old age. In order to develop further initiatives in this area support for a programme of education / training for all team members would be of benefit
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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	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.4

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<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

Professor Swanwick is a member of the Health Service Executive (HSE)– Mental Health in Primary Care Group, and the Committee of the Dementia Services Information and Development Centre. He and Dr Ni Bhriain regularly deliver lectures, workshops, and seminars for general practitioners and primary care team professionals.
The team works closely with primary care team professionals
All community based referrals [i.e. non-hospital liaison referrals] are assessed on home visit – there is no out-patient clinic
Ongoing care is provided through home visits by the clinical nurse specialists and multidisciplinary homecare team in close co-operation with the primary care team.

Reason for partial completion / not yet

Not all geographical areas covered by the service are provided with primary care teams.

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

Joint learning / training programmes for primary care teams and specialist mental health teams would be of benefit and could help define distinct and overlapping roles / skills
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Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

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

Please provide supporting factual Information

As noted above all community based referrals are provided with domicillary care. There is no waiting list – routine referrals are seen within 2 weeks. Team consists of 2 Consultant Psychiatrists in the Psychiatry of Old Age, 2 doctors in training, 2 clinical nurse specialists, 1 mental health social worker, 1 occupational therapist, 2 day-hospital nurses, 6 person home-care team [1 occupational therapist, 1 social worker, 4 nurses], and secretarial support.

Reason for partial completion / not yet

Population [2006 census] = 18,688 over 65 years [>200,000 total population]. Vision for Change recommendation is for one team per 100,000 population – this is EXCLUSIVE of old age psychiatry liaison services to general hospitals. 50% of referrals to this service are community based and 50% liaison. Thus the service is underprovided by one consultant [One consultant currently provides the community based service and the other provides the liaison service] and by the multidisciplinary team required for general hospital liaison. There is no clinical psychologist.

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	Catchment
Date	Completed by;
Chapter 13	Recommendation 13.6

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	√	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

See recommendation 13.5

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Design brief for sector HQ, specialist in-patient, and specialist day-hospital completed and submitted for funding. Currently acute beds are provided within the general adult psychiatry unit. A non-ground floor day-hospital is provided but not integrated with either the acute psychiatric beds or the medicine for the elderly facilities. There are no specialist continuing care beds.

Reason for partial completion / not yet

Approval for funding awaited

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Please provide supporting factual Information

See recommendation 13.7

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	
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Please tick

Please provide supporting factual Information

See recommendation 13.7

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

There is variable provision of day centres across the catchment area. Waiting lists for many, particularly for patients with dementia, are in excess of 6 months. This difficulty has been communicated to the LHO managers.

The occupational therapist has facilitated a group at a local community centre to promote re-integration of patients with mental health difficulties into non-mental health community facilities

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	<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 team provides a carer education and support service for informal carers of family members with dementia. This aims to reduce carer burden
The homecare team provides outreach and support 5 days / week
Acute admission is provided on the adult psychiatric unit as needed
The team works with multiple HSE and voluntary agencies to facilitate - case manage respite and crisis responses

Reason for partial completion / not yet

There is under-provision of respite [residential, daycare, in-home] across the catchment area leading to waiting lists and care burden
The team does not have direct access to specialist acute, respite, or continuing care beds

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	<input 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

'Fair Deal' process is being implemented and Professor Swanwick is a member of the Local Planning Forum

Reason for partial completion / not yet

Lack of specialist beds [approved within the Fair Deal scheme] for patients with dementia and severe challenging behaviour that can not be managed in the usual nursing home setting has resulted in life-long admission to the acute psychiatric unit.

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Please provide supporting factual Information

Specialist Unit has been developed at Bloomfield Hospital with input from Professor Swanwick and Dr Daly but is not as yet functional – pending funding

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	Partially implemented	Not yet commenced

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

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	

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

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

Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

Recommendation Completion in this Area (Tick Box)

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

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

Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	X	Not yet commenced	

Please tick

Please provide supporting factual Information

Link have been established with HAIL regarding housing needs of our clients. We are in the process of re-establishing links with the Co. Councils in the catchment area.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date

Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

Recommendation Completion in this Area (Tick Box)

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

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

Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

Recommendation Completion in this Area (Tick Box)

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

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

Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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		Partially implemented		Not yet commenced	

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual Information

National Response required

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Please tick

Please provide supporting factual Information

National Response

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

We are currently in the process of re-engineering two nursing posts to work in the area of In-reach\Out-reach Suicide\Deliberate Self harm.

Reason for partial completion / not yet

Completion Date:	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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

See 15.7.1

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

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

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

Vision for Change Independent Monitoring Group Report for Jan 2010

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

This service has established a multidisciplinary mental health catchment area management team. The team includes both professional managers, clinical leads and a trained service user and carer.

Reason for partial completion / not yet

The current HSE structure for accountability is not in line with the above i.e. mgt team should be accountable to the National Care Group Manager and the National MHS Directorate.

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	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	X
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Public Sector Moratorium on Recruitment

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale (commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

National Response

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	

Please tick

Please provide supporting factual information

This service is working towards full implementation on this recommendation since the development and appointment of the Executive Clinical Director posts. We have forged links with self-help groups and voluntary groups in the area of suicide prevention and are developing links with a local counselling service.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

CHAPTER 16 - Management and organisation of mental health services

Community Mental Health Teams and Primary Care Teams should put in place standing committees to facilitate better integration of the services and guide models of shared care.

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual Information

Primary carer teams only being established in the local area now

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 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	X	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Each of our sector teams operate from a sector-based headquarters. These are mental health only facilities. We are currently embarking on a building programme which will integrate mental health and primary care in 3 of our four sectors.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	X	Partially implemented		Not yet commenced	

Please tick

Please provide supporting factual Information

This service is compliant with all HSE HR policies which relate to family friendly working arrangements.

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 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

Please tick

Please provide supporting factual Information

This is an issue for HSE Corporate and not within the gift of local service providers.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

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

Please tick

Please provide supporting factual Information

This service is working towards developing a course for community based teams focusing on the interventions outlined above.

Reason for partial completion / not yet

Current economic climate and lack of funding.

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 18	Recommendation 18.11

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual information

National Response

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	<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

National Response.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	X	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Induction programmes are in place as per HSE policy. The service is also compliant with our statutory responsibility for mandatory training.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	X	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Each sector provides information leaflets to all service users and carers. Carer groups are also established in each sector and these groups meet on a monthly basis.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented	X	Not yet commenced	

Please tick

Please provide supporting factual Information

We currently collect data manually on our community based sector services.

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

Please provide supporting factual Information

All ICT projects regardless of size or cost have to go through the rigorous screening process established recently. Local services do not have the authority to provide local solutions in order to be compliant with this recommendation.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Please tick

Please provide supporting factual Information

National Response.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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

Recommendation Completion in this Area (Tick Box)

Fully Implemented	Partially implemented	Not yet commenced

Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

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

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

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	X	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual Information

Acute beds transferred to Tallaght Hospital in 2999. Old Psychiatric Hospital at St. Lomans demolished in 2006. Lands sold and funding being re-invested in mental health service.

Reason for partial completion / not yet

Completion Date:

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Revised Timescale

(commencement and completion dates):

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

Recommend key issues for the consideration of the Independent Monitoring Group

Thank You

Signed	Title	Date
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