

Vision for Change Independent Monitoring Group Report for Jan 2010

Regional Recommendations	
HSE REGION	Catchment DML
Date	Completed by;
Chapter 1	Recommendation:

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	
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Please tick

Please provide supporting factual information

Reason for partial completion / not yet

As part of the implementation of VFC in DML, a group representing a multi-disciplinary membership was formed. This group included 2 Service User/Carers representatives and were fully involved in all aspects of advising and monitoring on implementation. Following the establishment of Executive Clinical Directors and designation of the 3 Super-Catchment areas this group stood down and will be replaced by a broader management team at Super-catchment area level when established. These groups will include Service User representatives.

Completion Date:	On-going
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Revised Timescale <i>(commencement and completion dates):</i>	Not known at present
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Please share the key learning points which have evolved in the implementation of this recommendation

It is important to provide Service User/Carer representatives with the necessary support to fully represent their constituency

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

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

Chapter 3 - Partnership in care: Service users and carers
 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	X	Not yet commenced	
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Please tick

Please provide supporting factual information

Reason for partial completion / not yet

As outlined this is already in operation across the Mental Health Services in DML

Completion Date:	
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Revised 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

Regional Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15.1	Recommendation: 15.1.1

Chapter 15.1 - Special categories of service provision: Forensic mental health services

Every person with serious mental health problems coming into contact with the forensic system should be accorded the right of mental health care in the non-forensic mental health services unless there are cogent and legal reasons why this should not be done. Where mental health services are delivered in the context of prison, they should be person-centred, recovery oriented and based on evolved and integrated care plans.

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

Reason for partial completion / not yet

This recommendation has been significantly advanced by the development of the Forensic Mental Health services Prison In-Reach and Court Liaison Scheme. The service involves the deployment of a Consultant led Multi-Disciplinary team which inter-acts with individuals in the Prison service to assess and treat where appropriate. Where clinically appropriate and the Courts allow, individuals can be referred on to their local Mental Health service for treatment thus diverting them from the CMH and making better use of the scarce beds in the Hospital. This initiative needs to be expanded to include Castlerea Prison.

Completion Date:	Subject to additional funding
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Revised Timescale (commencement and completion dates):	Not known at this time
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Please share 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

Regional Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15.1	Recommendation: 15.1.2

Chapter 15.1 - Special categories of service provision: Forensic mental health services

FMHS should be expanded and reconfigured so as to provide court diversion services and legislation should be devised to allow this to take place.

Recommendation Completion in this Area (Tick Box)

Fully Implemented		Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual information

Reason for partial completion / not yet

As outlined above very significant progress has been made in this area, despite the legal limitations. Further progress needs to be made in the Cork and Limerick areas to respond to their Prison populations

Completion Date:

Subject to reconfiguration of existing resources and new funding required

Revised Timescale

(commencement and completion dates):

Not known at present

Please share 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

Regional Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15.1	Recommendation: 15.1.3

Chapter 15.1 - Special categories of service provision: Forensic mental health services

Four additional multidisciplinary, community-based forensic mental health teams should be provided nationally on the basis of one per HSE region.

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

Not progressed at present due to lack of additional funding

Completion Date:	Not known at this time
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

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Vision for Change Independent Monitoring Group Report for Jan 2010

Regional Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15.2	Recommendation: 15.2.5

Chapter 15.2 Mental health services for homeless people

The CMHT team with responsibility and accountability for the homeless population in each catchment area should be clearly identified. Ideally this CMHT should be equipped to offer assertive outreach. Two multidisciplinary, community-based teams should be provided, one in North Dublin and one in South Dublin, to provide a mental health service to the homeless population.

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

Reason for partial completion / not yet

Individuals who have a Mental Health difficulty and are homeless will in the main be the responsibility of the catchment area in which they present for service. There are some specialist staff working in inner-city Dublin but not a full multi-disciplinary team

Completion Date:	Dependant on reconfigured and additional staffing
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Revised Timescale (commencement and completion dates):	Not known at this point
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Please share the key learning points which have evolved in the implementation of this recommendation

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Vision for Change Independent Monitoring Group Report for Jan 2010

Regional Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15.4	Recommendation: 15.4.6

Chapter 15.4 Mental health services for people with eating disorders

There should be four specialist multidisciplinary teams providing specialist in-patient, outpatient and outreach services for eating disorders; one team per HSE region. These teams should link closely with local adult CMHTs to ensure continuity of care.

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

(This recommendation may need to be addressed at National level also) No progress on this specific recommendation has been made in DML. People with eating disorders are initially treated within their catchment area service and if necessary can also be referred to specialist eating disorder services in the private sector

Completion Date:	Dependant on additional funding
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Revised 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

Regional Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15.4	Recommendation: 15.4.7

Chapter 15.4 Mental health services for people with eating disorders
 Each team should manage an eating disorder sub-unit in a regional general hospital mental health unit. These subunits should have six beds each, thereby contributing 24 public ED beds nationally.

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

As outlined above no additional specialist beds have been provided for eating disorders. However, there have been additional in-patient facilities commissioned for Child and Adolescent services which also cater for eating disorder patients

Completion Date:	Not known at this time
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Revised 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

Regional Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 15.4	Recommendation: 15.4.8

Chapter 15.4 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	X	Partially implemented		Not yet commenced	
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Please tick

Please provide supporting factual information

Reason for partial completion / not yet

As outlined above no progress has been made on this recommendation due to lack of additional resources

Completion Date:	Not known at this time
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

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Vision for Change Independent Monitoring Group Report for Jan 2010

Regional Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 16	Recommendation: 16.1

Chapter 16 - Management and organisation of mental health services

Mental Health Catchment Areas should be established with populations of between 250,000 and 400,000 with realigned catchment boundaries to take into account current social and demographic realities. These catchment areas should be coterminous with local health office areas and the new regional health areas. They should take into account the location of acute psychiatric in-patient units in general hospitals.

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

Reason for partial completion / not yet

In DML, 3 Mental Health Super Catchment areas have been identified and Executive Clinical Directors have also been appointed. A significant amount of work has been done within these areas to identify the full range of services provided, budgets held and number of WTEs in place as a prerequisite to greater integration. National negotiations with the other Unions involved have commenced and progress is being made. This recommendation was made in advance of the current Reconfiguration process including Integrated Service areas and therefore will need to reflect the changing Administrative structures within the HSE.

Completion Date:	Dependant on National Agreements with relevant Union and decisions on Integrated Service areas
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Revised Timescale (commencement and completion dates):	
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Please share the key learning points which have evolved in the implementation of this recommendation

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Vision for Change Independent Monitoring Group Report for Jan 2010

Regional 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	
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Please tick

Please provide supporting factual information

Reason for partial completion / not yet

DML is cooperating with the other Administrative areas in identifying Key Performance Indicators which will also try to capture data on Community based Mental Health activity. It is hoped that this process will be completed later this year

Completion Date:

Q 2 2009

Revised 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

Regional Recommendations	
HSE REGION	Catchment
Date	Completed by;
Chapter 20	Recommendation: 20.

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	X	Not yet commenced	
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Please tick

Please provide supporting factual Information

Reason for partial completion / not yet

As previously outlined progress has been made in the Organisational and Management re-organisation required to implement Vision for Change. However, much work is still required to be completed, some of which is outside the remit of the Mental Health service and is dependant on wider Health Service reform.

Completion Date:	Dependant on a number of external factors
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Revised 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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