

Oibríochtaí Meabhairshláinte Ospidéal Naomh Lómáin Baile Phámar Baile Átha Cliath20. T 01 6207304 R: Sinead.reynolds@hse.ie

Mental Health Service

St Loman's Hospital, Palmerstown Dublin 20 Tel: 01-6207304 Email: sinead.reynolds@hse.ie

9th March 2020.

Deputy James Browne TD, Dail Eireann, Dublin 2.

PQ Number: 3222/20

PQ To ask the Minister for Health the position regarding the need for additional specialist Question: rehabilitation units, psychiatric intensive care units and mental health crisis houses; and

if he will make a statement on the matter. -James Browne

Dear Deputy Browne,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

Specialist rehabilitation:

In 2017 the HSE initiated a national project to improve Rehabilitation services for service users with severe and enduring mental illness. This project included the development of a Model of Care for people with severe and enduring mental illness and complex needs. This model of care describes a rehabilitation care pathway that ensures the needs of people with complex mental health needs are met.

A significant component of this rehabilitation pathway is the Specialised Rehabilitation Unit (SRU). An SRU is designed as an inpatient approved centre providing 24-hour care. Its primary focus is on active medium-term rehabilitation providing a wide range of services such a psychological interventions, self care and living skills, medication management, peer support, creative therapies and physical health. Service users progressing across levels of care should be the SRU's primary goal with the expected length of stay being 1 to 3 years (Killaspy et al., 2012). However, It is crucial that SRUs are not viewed as standalone units, but rather as part of a whole-system rehabilitation care pathway to ensure successful rehabilitation and recovery for people with complex mental health needs. Because of this it is not possible to provide a number of additional staff employed in whole time equivalent terms.

The HSE remains committed to improving rehabilitation and recovery services for people with severe and enduring mental illness and complex needs and in October 2018 commissioned two specialised rehabilitation units (SRUs). These two SRUs have 27 beds nationally for people with severe and enduring mental illness. We are currently reviewing this initiative which will inform our future decisions on the need for further investment.



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Psychiatric Intensive Care:

There is a continued need for short-term psychiatric intensive care units (PICUs) for a small number of people who cannot be accommodated in acute units due to the nature of their behaviour/ needs. Two psychiatric intensive care units have been developed to meet this need.

Carraig Mór is an 18-bed psychiatric intensive care unit (PICU) in Shanakiel, Co. Cork, which opened in 2002. The unit consists of a male observation ward, a female observation ward, and three single rooms. The approved centre operates on a 24 –hour basis as a psychiatric intensive care unit (PICU) for Cork city and county. Referrals to this tertiary service are usually from other mental health services and approved centres, or from direct admissions via court diversion, Cork Prison, or the Flexible Assertive Community Treatment (FACT) team.

Phoenix Care Centre (PCC) is a purpose built facility located on North Circular Road in Dublin. The approved centre consists of four wards located over three levels. In total, there are 54 beds. Two wards (Oak and Alder), located at ground level, provide 12-bedded psychiatric intensive care facilities for men and women. These units provide a tertiary intensive care for referrals from Dublin, Meath, Louth, Kildare, and Wicklow. All admissions are planned in advance. There is a clearly defined care pathway and referrals are subject to a contract of care which includes return of the patient to the referring service when clinically stabilised. A unit at first floor level (Birch) provides 20 beds for male and female residents with enduring severe mental illnesses. On the second floor Hazel ward provides a 10-bedded rehabilitation unit for both men and women. There are therapeutic and recreational facilities throughout the centre.

Further needs in relation to psychiatric intensive care units will be reviewed in line with Vision for Change VfC / Vision for Chang Refresh.

Crisis houses:

Crisis Houses, as defined by A Vision for Change, are not a model of care provided in the current range of mental health services nationally. However, there are a significant type and level of responses provided variously from these current mental health services to those who may experience a mental health crisis.

Specialist Mental Health Services have reconfigured to provide Community Mental Health Teams for children and young people, working age and older adults. These Teams have the ability to respond to urgent/crisis referrals by GPs with most teams having slots for urgent cases to be seen that day or the next working day. Outside normal working hours, all mental health services also have a crisis response capability provided through the on-call medical system which operates in all acute hospitals with a 24 hour ED. This on-call system consists of a consultant psychiatrist together with an NCHD. The consultants and NCHDs work within the Community Mental Health Teams or in the Hospital Liaison Services and provide the on-call service in addition to their day time commitment with Community Mental Health Teams.

At present all except one of our Level 4 General Hospitals has a 24/7 Mental Health Service provided by Clinical and Nursing staff.





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National Mental Health services have specific actions identified to ensure access to mental health services for individuals accessing community mental health services. This includes building the capacity to respond on a 24/7 basis to service users engaged with the community mental health services. National Mental Health services have s committed to developing weekend services for existing vulnerable patients attending the mental health services who would benefit from contact over the weekend. This could be by way of phone call, attendance at the base in which the nurses are working or a domiciliary visit. This is already available in a number of areas.

In addition to the development of 7 over 7 service provision, the HSE is working towards development of a 24/7 contact line, crisis text line and other eMental health digital responses.

The new yourmentalhealth.ie website launched in 2018, provides new content and personalised support options through an integrated search tool generating information on online resources, telephone and face-to-face supports and services relevant to a wide range of mental health issues.

HSE Mental Health, working in collaboration with the National Ambulance Service, established the YourMentalHealth Information Line in November 2019. This service is managed by the National Ambulance Service, operates on a 24/7 basis, and encompasses:

(i) the provision of information to the public about, and signposting of callers to, the most appropriate national and local supports and services provided by the HSE and their funded partners specific to the query raised, and (ii) Where possible/required, direction of callers to the most appropriate existing helpline partners as required.

HSE Mental Health is currently working in collaboration with partners to develop a 24/7 text-based active listening service, and to pilot other e-mental health related digital solutions including counselling online, internet-based cognitive behavioural therapy, and telepsychiatry.

I trust this information is of assistance to you but should you have any further queries please contact me.

Yours sincerely,

Dr Sinead Reynolds

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General Manager Mental Health Services

