



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

Ceannasaí Náisiúnta Oibríochtaí Meabhairshláinte  
Ospidéal Naomh Lómáin Baile Phámar Baile Átha Cliath20.

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**10<sup>th</sup> March 2021**  
**Deputy Martin Browne**  
**Dail Eireann,**  
**Dublin 2.**

**PQ 9944/21**

**To ask the Minister for Health her views on a survey carried out locally among an organisation (details supplied) which found that 66% of members have reported that their mental health has been affected by the Covid-19 crisis; and her views on their concerns that CAMHS is not being given the funding it needs to deal with its workload effectively. -Martin Browne**

**Details Supplied: Youth Work Ireland's Tipperary Comhairle**

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.

In 2020, Mental Health incurred expenditure of €21m across all mental health service relating to Covid. This Covid expenditure related mainly to additional Nursing staffing costs arising due to increased sick leave in mental health units, along with additional support staff costs relating to cleaning and laundry costs associated with Covid. In relation to non-pay costs these primarily related to maintenance costs required to facilitate social distancing and isolation of patients in mental health units and short term private placement costs with external providers required to free up bed capacity in residential units.

Currently Mental Health is not in a position to report on expenditure or budget by service category. The current financial reporting system is aligned to Annual Financial Statement type (ie Nursing pay, Drugs & Medicines etc) and does not align to the services and sub-services in operation.

The Future Health Report identified the financial and service information systems of the Health Service as not fit for purpose. In order to address this, over 200 legacy financial systems will be moved to a Single Integrated Financial and Procurement Management System (IFMS). This process is now underway and the IFMS project is currently in the detailed design phase. When the IFMS system is fully implemented, Mental Health will be in a position to report on expenditure and budget by service category however we are currently not in a position to do so.

The availability of skilled staff is a significant issue in Mental Health services where demand outstrips supply in both the national and international contexts and our potential workforce are availing of employment opportunities outside of Ireland. This is symptomatic of the overall recruitment problem that Mental Health services have been experiencing for the past number of years. It is recognised that there is a current shortage of trained Mental Health staff nationally and this trend is not unique to Ireland. Ongoing efforts, both locally,



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nationally and internationally, are continuing in order to ensure that all available avenues are explored in providing a staffing supply for Mental Health services, including CAMHS services.

It is often the case that staff shortages are filled on an intermittent basis by locum, agency and overtime. Despite these recruitment challenges and difficulties, Mental Health services continue to work with our local HR colleagues and at a national level through the HSE Health Business Services National Recruitment to achieve recruitment results in as efficient a time frame as possible for posts to be filled in line with HSE recruitment guidelines.

Currently, CAMHS teams are meeting referral demands. CAMHS targets were met or exceeded in the domains as per table below.

|  | 2020 Target | Outturn 2020 | Outturn 2019 | +/-   |
|--|-------------|--------------|--------------|-------|
| % of accepted referrals / re-referrals <b>offered</b> first appointment within 12 weeks by Child and Adolescent Community Mental Health Teams          | 78%         | 79.2%        | 78.4         | +1%   |
| % of accepted referrals / re-referrals offered first appointment and <b>seen</b> within 12 weeks by Child and Adolescent Community Mental Health Teams | 72%         | 74.5%        | 72.2%        | +3.2% |
| %. of new (including re-referred) <b>child/adolescent</b> referrals offered appointment and <b>DNA</b> in the current month                            | <10%        | 6.6%         | 8.5%         | -1.9% |
| % of urgent referrals to Child and Adolescent Mental Health Teams responded to within <b>three working days</b>  | 80%         | 89%          | 76.3%        | +12.7 |
| No. of <b>child / adolescent</b> referrals (including re-referred) received by mental health services  | 18,128      | 17,358       | 18,831       | -7.8% |

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

Yours sincerely,



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Thomas O'Brien  
General Manager Mental Health Services

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