

Office of Mental Health Services | Cork Kerry Community Healthcare

Health Service Executive Model Business Park | Model Farm Road | Cork T12 HT02

> T:021 4928724 / 021 4928581 E: MHSCorkKerry@hse.ie

9th March 2022

Deputy Neasa Hourigan, T.D., Dáil Éireann, Dublin 2,

PQ ref 7787/22

"To ask the Minister for Health if the clinical directors of the west Cork, south Lee and north Cork adult mental health services have agreed with senior management to accept referrals of serviceusers under the care of the Midleton, Youghal and Cobh, Glenville adult mental health teams for long-stay or respite placements in the community residences attached to their local catchment areas into the future; the way that he can reconcile this practice into the future for east County Cork service users with the position of the Mental Health Commission and the UK's Care Quality Commission on the negative outcomes for persons placed out of area; and if he will make a statement on the matter."

Dear Deputy Hourigan,

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 apologise for the delay in reverting to you with this response.

As advised by the Chief Officer, Michael Fitzgerald, in his response to PQ 1408/22, in regard to the closure of Owenacurra Centre in Midleton and as part of the ongoing engagement with service users, it is an imperative that Mental Health Services cater for their ongoing needs safely and appropriately. To this end all mental health services are engaged where necessary in ensuring the care plan for individuals moving to alternative locations is robust and that continuity of care is to the forefront of any considerations.

There are a number of community residences both in the form of continuing care and high support hostels within 25km radius of the Owenacurra Centre. When a placement in a community residence is being considered the multidisciplinary team meet the individual and their family members and aim to provide the placement that best suits the individual's needs.

In the UK, due to difficulties sourcing acute psychiatric in-patient beds, some patients were admitted long distances from their home, which on occasion was several hundred kilometres from home. The UK Care Quality commission recommended that these out of area acute admissions should cease.

Within Cork Kerry Community Healthcare the majority of acute admissions are to the approved acute centre associated with the multidisciplinary team of that area. If an acute bed is not available in the local acute approved centre, then the individual is admitted to one of the other acute



approved centres and is prioritised for the next available bed in their local area, this ensuring the continuity of care with their treating tea.

I trust the above clarifies the queries raised.

Kind Regards,

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Mr Kevin Morrison A/Head of Service Mental Health Services Cork Kerry Community Healthcare

