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Deputy Jennifer Murnane O'Connor, Dail Eireann, Dublin 2.

26<sup>th</sup> May 2022

**PQ Number: 25175/22** 

PQ Question: To ask the Minister for Health the estimated full-year cost to ensure that specialist eating disorder services teams including CAMHS are in place to meet needs across the country

Dear Deputy O'Connor,

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.

Most people can and do get better from eating disorders. While a small number of people benefit from more intensive treatment through day programmes or inpatient care, the most effective treatment setting is in the community. Dedicated community-based eating disorder services, where multidisciplinary teams have specialist training, can provide evidence-based care and treatment.

In January 2018 the HSE published a National Model of Care for Eating Disorders (MOC) in partnership with College of Psychiatrists' of Ireland and Bodywhys. The MOC is the blueprint for the HSE to roll out specialist eating disorder services in Ireland to address the unmet need for specialist eating disorder service within HSE. Outpatient specialist care is considered to be the most effective treatment setting for most people with eating disorders. The MOC has a core focus on developing regional community based specialist eating disorder services provided by skilled multidisciplinary teams.

The clinical programme aims to establish an Eating Disorder network (eight adult teams and eight CAMHS teams) in accordance with the agreed Model of Care 2018. Currently, there are three teams in operation: two CAMHS teams (one serving Cork/Kerry Community Healthcare - CHO4 and the other serving Dublin South, Kildare and West Wicklow Community Healthcare - CHO7) and an adult team in Community Healthcare East (CHO6). These multidisciplinary teams provide specialist eating disorder assessment and treatment in the community. The first team was established in April 2018 (CHO7 CAMHS), the adult team in CHO6 commenced expansion in November 2018 and CHO4 CAMHS ED team commenced in May 2019.

Since 2016 €7.9 million has been made available for Eating Disorder posts through programme for government funding. Of that, €3.3 million has been invested to date in Eating Disorder Specialist Posts. This has resulted in the set-up of the 3 existing Eating Disorder teams and to progress recruitment for the 2nd phase of teams in CHO4 (adult), CHO9 (adult) and CHO2 (CAMHS). This 2nd phase of teams are in advanced stages of recruitment and set up to establish a high quality service. The balance of €4.8 million remains available for continued investment in specialist Eating Disorder posts including a 3rd phase of specialist community team development in 2022. By the end of this year there will be 9 out of 16 teams in development.

It is estimated that the cost of a core team is 1.4M each. Given the growing demand for this specialist service additional posts will be required on existing teams. An estimated cost to ensure equal access across the HSE is the provision of an additional 7 teams at a cost of 1.4 M each = 9.8M. The MOC is due to be reviewed in 2022/23 and this may impact on the number of teams required into the future.

The NCPED recommends delivering 3 eating disorder teams per year (1.4m X 3 = 4.2M) to ensure sustainable phased recruitment and training. The HSE is provided funding on a yearly basis as per the estimates process. However, the availability of skilled staff is a significant issue in mental health services where demand outstrips supply in both the national and international contexts. The HSE is working closely with NDTP, National Doctors Training and Planning, to take measures to ensure trained clinicians in Eating Disorders are available to take up posts. The NCPED recently successfully secured funding to recruit medical and Paediatric consultants within acute hospitals to work with existing and future community eating disorder teams due to the number of complex medical presentations of eating disorders.

The development of a skilled experienced workforce in eating disorders is a key recommendation of the MOC. The NCPED has worked to develop online and face to face training and education for all clinicians including supervision in evidence based treatments. This will be paramount as newly recruited teams become operational and delivering services. A rolling ring-fenced budget is required to ensure this objective is meet and grows as teams come on stream.

Capital costs, new teams will require suitable accommodation in line with the schedule outlined in the agreed MOC. It is difficult to estimate this cost as access to suitable accommodation varies by CHO.

I trust this information is of assistance to you. Please do not hesitate to contact me if you have any further queries.

Yours sincerely,

Kall

Dr Amir Niazi

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