

Oiling na Seirbhísí Sláinte Meabhrach | Cúram Sláinte Pobail Corcaigh & Ciarraí

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Deputy Neasa Hourigan Dáil Éireann, Dublin 2

PQ ref 26240/22

"To ask the Minister for Health the exact staffing allocations per discipline and per population of the HSE home-based treatment over the combined east Cork HSE catchment of Midleton, Youghal and Cobh, Glenville; 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 Questions, which you submitted to the Minister for Health for response.

The East Cork Home Treatment Team, North Lee Mental Health Services, treats people with severe and enduring mental illness in their homes. The vision of the Team is to offer intensive, responsive, but time – limited intervention and offer service users and their families/ carers a genuine alternative to hospitalisation.

This Team covers the very large catchment area of East Cork – Cobh/ Glenville and Midleton/ Youghal community mental health team sectors. It looks after service users with severe and enduring mental illness, e.g. schizophrenia, bipolar affective disorder, severe depression. It also looks after those who present in acute mental health crisis.

Staffing of the team is broken down as follows:

- Medical 1 WTE Consultant, 1 WTE NCHD
- Social Work 0.5 WTE
- Nursing 4 WTE

East Cork has a population of 95,451, comprising Cobh / Glenville 50,067 and Midleton / Youghal 5,384. This accounts for almost 50% of the total population of North Lee Mental Health Services. The population of these two East Cork sectors grew by approximately 20% from 2011 to 2016 Census. Review of recent trends in the acute adult admissions unit, St. Michael's Unit, indicate that almost 50% of in- patients are from East Cork sectors.

The East Cork Home Treatment Team aims to provide the following:

- Act as a credible alternative to hospital admission
- Rapid response following referral (within 24 hours)
- Intensive intervention and support in the early stages of the crisis
- Time limited intervention that has sufficient flexibility to respond to differing service user needs



- Facilitate early discharge from acute in- patient wards
- Active involvement of the service user, family and carers
- Develop collaborative partnership working arrangement with other services to enable credible alternatives to admission

Home - based treatment has proven to more acceptable to patients and families. It reduces the stigma of hospitalisation. It is more flexible and sensitive to cultural issues and offers extended support to family / carers.

A well- resourced and functional Home Treatment Team can significantly reduce the requirement for hospital beds by reducing the number and length of hospital admissions.

I trust you find the above clarifies the query raised.

Kind regards,

Kevin Morrison,

A/Head of Mental Health Services Cork Kerry Community Healthcare

