

Deputy Mark Ward,
Dail Eireann,
Dublin 2.

31st May 2022

PQ Number: 26680/22

PQ Question: To ask the Minister for Health the estimated cost to fully implement the National Clinical Programme for Self-Harm; and if he will make a statement on the matter - Mark Ward

Dear Deputy Ward,

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 2016 a Model of Care was published by the HSE. It established a clinical framework to ensure that any person who presents to the ED following self-harm or with suicide-related ideation receives a compassionate, empathic, validating response, and a therapeutic assessment and intervention from a suitably trained mental health professional; that every effort is made to ensure that a family member or supportive adult is involved in assessment and safety planning, and that they are followed up and linked to appropriate next care.

As of Jan 2022 the programme has funded 49 CNS posts across 25 EDs (open 24/7) and in the 3 paediatric EDs in Dublin. Resources are allocated based on total number of self-harm presentations to each ED recorded on our data collection system.

The Updated MOC document published in February 2022, is built on this learning of implementation of the NCP. It sets out comprehensive, detailed and specific pathways of care that reflect the diverse needs of particular service user groups and the broad range of contexts in which self-harm and suicidal ideation occurs. While continuing to maintain and further improve the NCP within the acute hospital EDs, the updated NCPSH MOC now extends into the community.

An important feature in the Updated MOC is the incorporation of the existing Suicide Crisis Assessment Nurse (SCAN) service within the NCPSH. SCAN has already been implemented in 8 geographic areas, serving 20% of the total population and will now align with the key interventions delivered through the NCPSH in the ED. It will be rolled out nationally in the coming years as a collaboration between GPs and specialist mental health professionals, with the aim of delivering a service of similar quality for people who present in suicidal crisis in primary care settings.

Funding in Budget has been allocated to recruit an additional 6 new CNS posts across 4 mental health services to deliver Suicide Crisis Assessment Nurse (SCAN) support for the National Clinical Programme on Self Harm and Suicide Related Ideation in 2022. This builds on the 12 SCAN CNS posts already providing a service to GPs.

In the coming years we will require up to 60 CNS/ANP posts in SCAN supported by 0.2WTE consultant psychiatrist dedicated input at 300,000 population. Administration support will also be required per ECD area.

A **training and Education plan** has been agreed and detailed in chapter 9 of the MOC. It is difficult to get an exact cost as some of the training will be delivered internally. We are supported with training for nursing by OMNSD and by National Office for Suicide Prevention.

Each ED department must have access to a safe and therapeutic assessment room for all patients. The room must be in compliance with agreed standards. There needs to be an agreed budget within each acute hospital to maintain this room on annual basis. Clinical staff delivering the Self Harm Clinical Programme must also have sufficient workspace and IT support within the ED in order to provide an appropriate service to patients and to record and report their service activity efficiently.

SCAN nurses will require space in primary care/GP to provide assessments and follow up interventions.

Data: The routine collection of data on people presenting to both programmes is critical to planning for the future. Currently this data is collected by clinical staff on excel sheets. A more efficient data collection system is required. A full time data manager (Grade VII) is required to manage and quality assure the data allowing for publication of reports and research. Currently there is access to 0.4 WTE.

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

Yours sincerely,



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