



Ceannasaí Náisiúnta Oibríochtaí Meabhairshláinte
 Ospidéal Naomh Lómáin,
 Baile Phámar Baile Átha Cliath 20.
 R: PQReps.NatMHOPS@hse.ie

Head of Operations, Mental Health Service
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Deputy Mark Ward.
 Dail Eireann,
 Leinster House,
 Kildare Street,
 Dublin 2.

18th April 2023

PQ Number: 16025/23

PQ Question: To ask the Minister for Health the number of community mental health teams nationally; the breakdown of staffing by WTE; the operational costs for each team; the intended expansion of professions within a team under Sharing the Vision; 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.

The number of community mental health teams nationally and breakdown of staffing by WTE

As at February 2023, there were 112 Community Adult Mental Health Teams with 1,878.1 WTEs and 31 Psychiatry of Later Life Teams with 404 WTEs operational.

Table 1 below provides detail on the number of WTE for Community Adult Mental Health Teams. Please note this data is correct at point in time i.e. 12/04/2023 and is subject to change/amendment.

General Adult WTEs	Addiction Counsellor	Administrative Support Staff	Clinical Psychologist	Consultant Psychiatrist	Mental Health Support Worker	Non Nursing	Nurse	OT	Other Staff	Other Therapist e.g. SLT Creative/Recreational	Registrar/SHO	Senior Registrar	Social Worker	Total
National Total	36.7	207.3	133.2	173.4	17	27	660.7	126.9	20.3	29.4	223	65.4	157.9	1,878.10



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Table 2 below provides detail on the number of WTE for Psychiatry of Later Life Teams (POLL). Please note this data is correct at point in time i.e. 12/04/2023 and is subject to change/amendment.

POLL WTE data	Administrative Support Staff	Clinical Psychologist	Consultant Psychiatrist	Mental Health Support Worker	Non Nursing	Nurse	OT	Other Staff	Other Therapist e.g. SLT Creative/Recreational	Registrar / SHO	Senior Registrar	Social Worker	Total
National Total	44.8	26.5	47.5	3	6	141.6	31.9	4	6.4	40	18.4	34.2	404

Operational costs for each team

The needs of different groups of service users determine the precise mix of skills required within their local community mental health teams therefore the make-up of each team may vary due to local need. Teams include input from psychiatry, nursing, social work, clinical psychology, occupational therapy and clinicians with specific expertise. A generic community mental health team is based on the following estimate as per the Department of Health consolidated pay scales. These pay scales set out the rates of pay for each grade and include incremental pay which is paid annually. The link below provides up to date detail on the Health Sector consolidated salary scales in accordance with the FEMPI acts, the public service agreements and the Public Service Pay and Pensions Act 2017. These scales must be read in conjunction with Department of Health Circular 3/2023

<https://www.hse.ie/eng/staff/resources/hr-circulars/final-1-march-2023-salary-scales.pdf>

Please note posts are costed at basic level and these figures are based on no vacancies.



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Estimate Cost of 1 General Adult Mental Health Team

Grade	Post	WTE Total	Salary Mid Point (Full)	Allowance	Salary plus Allowances	Annual Salary (WTE)	Annual PRSI 11.05%	Total Annual Pay	Non Pay	Total Budget including 10% Non Pay
143Y	Consultant Psychiatrist	1.0	237,904	10,200	248,104	248,104	27,415	275,519	24,810	300,330
1538	Registrar	1.0	66,874		66,874	66,874	7,390	74,264	6,687	80,951
3689	Clinical Psychologist	1.0	74,334		74,334	74,334	8,214	82,548	7,433	89,981
3017	Social Worker	1.0	55,409		55,409	55,409	6,123	61,532	5,541	67,073
3298	Occupational Therapist	1.0	49,562		49,562	49,562	5,477	55,039	4,956	59,995
2301	Psychiatric Nurse	4.0	56,770	5,449	62,219	248,876	27,501	276,377	24,888	301,264
2625	Clinical Nurse Specialist	2.0	60,789	5,449	66,238	132,476	14,639	147,115	13,248	160,362
3029	Social Care Worker	1.0	43,765		43,765	43,765	4,836	48,601	4,377	52,978
0558	Grade IV	1.0	40,237		40,237	40,237	4,446	44,683	4,024	48,707
		13.0						1,065,677		1,161,641

Intended expansion of professions within a team under *Sharing the Vision*

The cornerstone of mental health service delivery in secondary care is the multi-disciplinary Community Mental Health Team (CMHT). Multi-disciplinary CMHTs enable a range of professional perspectives to be brought to bear in case formulation, care planning and ultimately, service delivery. They enable integrated care for service users predicated on supporting them in their own recovery in their own community. This approach is in line with our mental health service strategy, *Sharing the Vision: A Mental Health Policy for Everyone* (2020), and fits squarely into overall health service strategy, as set out through Sláintecare. Children and Adolescent Mental Health Services (CAMHS) are also delivered in line with this strategy and therefore CAMHS teams are structured on a multidisciplinary approach to enable integrated care for service users.

Where the predecessor to *Sharing the Vision, A Vision for Change* (2006), was prescriptive on the composition of multi-disciplinary teams, *Sharing the Vision* recognises that in line with changes in best practice and to enable future flexibility in terms of service delivery as best practice continues to develop, additional competencies are recommended for multi-disciplinary teams, to complement the core skills and competencies. In addition to core skills like psychiatry, social work, clinical psychology and occupational therapy, additional competencies like dietetics, peer support, outreach and job coaching, for example, may be appropriate and required. Rather than be specific on staffing numbers and structure, a flexible approach can be more responsive to local needs, which empowers local responses and helps achieve recovery-oriented outcomes.

Under *Sharing the Vision*, we envisage an expansion of mental health service provision overall. Clearly, this will entail analysis of skill mix requirements which in turn, will require comprehensive workforce planning. To achieve this, the HSE, in conjunction with the Department of Health is developing a Health and Social



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Care Workforce Planning Strategy and Workforce Planning Projection Model, based on international best practice. In addition, reforms under Sláintecare are centered on having sufficient capacity in the workforce and the appropriate configuration of staff and skill-mix, which are integral to improve service delivery, including that for Mental Health.

I trust this information is of assistance to you.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Tony Mc Cusker', written over a horizontal line.

Tony Mc Cusker
General Manager
National Mental Health Services