

Ceannasaí Náisiúnta Oibríochtaí Meabhairshláinte,

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Deputy David Cullinane Dail Eireann, Dublin 2.

DATE: 06th September 2024

PQ Number: 30372/24

Dept. Contact: ePQ Import (phone: ePQ Import, email:

Paula_Dowling@health.gov.ie)

PQ Question: To ask the Minister for Health the cost of

implementing the dual diagnosis model of

care. -David Cullinane

Dear Deputy Cullinane,

Following the launch of the Model of Care for Dual Diagnosis in May 2023, recruitment for the two adult teams (in the Midwest/CHO3 region and in County Cork) is ongoing. The Dual Diagnosis team based in Cork commenced the services on 8th July 2024 with plans to recruit further team members later in the year and possibly, next year. Furthermore, Dual Diagnosis services is expected to commence in CHO 3 in October 2024, with additional team members expected to be recruited later in the year. For the Adolescent services, seven Whole Time Equivalents (WTEs) have been resourced to enhance the SASSY team in CHO 9 to an Adolescent Dual Diagnosis hub team this year, in addition to another seven WTEs being resourced to enhance the YoDA team in CHO 7 to another Adolescent Dual Diagnosis hub team.

The Model of Care recommends 12 adult dual diagnosis teams in total including the above two teams in CHO 3 and CHO 4. This is in addition to the four hub Adolescent Dual Diagnosis teams including the above teams in CHO 9 and CHO 7, recommended across the country. Each of these teams have been recommended in the Model of Care to have a staff allocation of 13 whole time equivalents (WTEs). The cost of 13 WTEs for a Dual Diagnosis Adult Specialist team is around €1.44 million per annum at present, and an Adolescent Specialist Team €1.58 million per annum. This will increase with the current agreement for public sector pay increase over the next two years. In addition to the Adolescent Dual diagnosis hub teams, there will be five spoke teams supporting the Adolescent services. Each of these spoke teams will have around two WTEs each and will have pay related costs of around €200,000 per annum. It should be noted these pay costings are based on mid-point salary scale for each of the grades and is inclusive of employers' PRSI.



As mentioned in the previous paragraph, currently we are developing two adult and two adolescent teams. The full roll out of the Model of Care for Dual Diagnosis require the recruitment to all remaining teams. The pay element of remaining teams is estimated to be €20,440,000 per annum. The non-pay costs will be considered at a local level as the programme is rolled out and will be determined following consideration of existing resources. Additional funding for IT, training, office equipment and capital will be required for each new team.

Also contained in the Model of Care is the provision of a residential unit to support individuals with Dual Diagnosis. It is estimated the pay cost of running this facility €1.88 million, this costing excludes potential existing resources that can be utilized.

The non-pay element will include cost of buildings, utilities, IT supplies, training, travel etc. The non-pay element will be dependent on local resources and other related determinants at the time of implementation. Hence, at present it is not possible to provide non-pay costings for the full implementation of the dual diagnosis services.

Please do not hesitate to contact us if you have any queries on the above.

Yours sincerely,

Yours sincerely,

Dr Amir Niazi

Boils

National Clinical Advisor & Group Lead for Mental Health Clinical Design and Innovation Health Service Executive