

NEWS RELEASE

Landmark year as Mental Health Act is fully implemented

2006 will be remembered as the year when significant and far-reaching changes took place in Irish mental health services, according to the Mental Health Commission's fifth annual report published today (Wednesday, 28/03/07).

"The full commencement of the Mental Health Act 2001 means a new era in mental health services in Ireland," said Brid Clarke, CEO.

In addition, with the full commencement of the Act, a range of rules and regulations relating to approved centres has also come into force. These involve the requirement for formal registration of approved centres and rules for a range of interventions, including rules governing the use of any necessary restrictions on patients' freedom.

The Annual Report outlines the extensive programme of work undertaken by the Mental Health Commission in advance of the full commencement of the Mental Health Act on 1st November 2006. This included the preparation of new statutory forms, rules and codes of practice, and a wide ranging training and information strategy.

2006 also saw the publication of the new Government policy document "A Vision for Change". This policy outlines a radical reform of mental health services towards a user-centred, evidence-based, community care programme. The Commission welcomes the recommendations contained in the policy document, which it sees as a hugely important step along the road to modernising Irish mental health services.

The Mental Health Commission is continually aware of the limited availability of mental health services research in Ireland. With this in mind, in 2006, the Commission invited the submission of research applications and is now funding three service research scholarships. The Commission have also established a database of mental health service research in Ireland, and it is hoped that a mental health service research centre can be established on an all-island basis in the future.

Also in 2006, the Mental Health Commission published three discussion papers on core aspects of the mental health services. These papers focused on key areas such as multidisciplinary teamwork and the recovery approach and also addressed issues pertinent to the future development of forensic mental health services in Ireland.

"The Quality Framework for Mental Health Services in Ireland" was finalised towards the end of 2006, and has recently been published. It aims to deliver high standards and good practices across all mental health services and should be of real benefit to service providers for 2007 and beyond.

The Report of the Inspector of Mental Health Services, also published today, provides key details of mental health services nationwide.

The Inspectorate identified a number of issues concerning multidisciplinary teams, longstay patients and care planning.

According to Dr Susan Finnerty, Acting Inspector of Mental Health Services:

“Over the past three years the inspectorate has noticed a change in attitude at service delivery level. There is an acceptance that services are to be delivered through multidisciplinary teams, and services are acutely aware of the deficits within their own services. The staffing of multidisciplinary teams in most parts of the country remains inadequate. There are 120 community mental health teams, the majority serving sectors of between 20,000 and 50,000. From information obtained there are two catchment areas out of 32 that are staffed sufficiently to be in a position to offer a core multidisciplinary team to each of its sectors.”

This is the third year that the Inspectorate has raised serious concerns about the difficulties that face patients in long stay wards. There are 15 large institutions in the country and 1683 patients in hospital for over one year and 1,077 in hospital for over 5 years. One third of acute units are still within the campus of large psychiatric hospitals. The numbers of long stay patients are slowly decreasing but the conditions of many remaining wards are entirely inadequate.

Referring to care planning, the Inspectorate stressed the importance of patient involvement in their own care. Dr Finnerty said:

“Services are moving slowly towards introducing integrated multidisciplinary care planning. It is timely, I think, to remind services that integrated care planning is a regulation for approved centres under the Mental Health Act. The right of each service user to be actively involved in formulating and reviewing their own care is expected.”

“Encouragingly, this year, the Inspector reports significant improvements in a range of services. There now seems to be an acceptance of the need for multidisciplinary teams and such teams are beginning to be established in some areas in the context of larger, more realistic sector sizes. There is now also recognition of the need for rapid progress to be made in critical specialty areas. Services vary greatly across the country from catchment to catchment, again emphasising the need for an efficient management system,” concluded Commission Chairman, Dr John Owens.

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