

Rehabilitation and Recovery Services  
Galway/Roscommon Mental Health Services  
Community Healthcare Organisation (CHO) 2  
2018/2019

Description

Galway/Roscommon has a population of 322,988. It has a wide geographical spread with a rural/urban mix and includes the Aran Islands and Inishbofin. There are significant areas of deprivation. There are six sectors: GR 1 - 6. Galway/Roscommon are in the process of implementing service development following a report into the service.

There are two very poorly staffed teams, and GR 1 (Connemara, including; Carraroe, Clifden, Cloonbur, Moycullen, Barna, and Spiddal) is not covered by the rehabilitation service.

Four people who require specialist rehabilitation inpatient care are receiving specialist rehabilitation in a unit that is out of area.

<b>Population</b>	<b>322,988</b>
<b>Number of rehabilitation teams</b>	2
<b>Number of rehabilitation teams recommended by <i>A Vision for Change</i> to nearest 100,000 population</b>	3

Staffing of Rehabilitation teams compared with recommendations of *A Vision for Change*

<b>Population 322,988</b>	<b>Number in team</b>	<b>Recommendation in <i>A Vision for Change</i> for population of 322,988</b>	<b>Percentage of <i>A Vision for Change</i> Recommendations to nearest 100,000 population</b>
<b>Consultant psychiatrist</b>	2	3	67%
<b>Non consultant medical staff</b>	1.8	No recommendation	
<b>Team coordinator/ADON</b>	4 (2 part-time)	No recommendation	
<b>Nursing staff</b>	3	30 minimum	10%
<b>Occupational therapist</b>	2	6	33%

<b>Social worker</b>	1.7	6	28%
<b>Clinical psychologist</b>	1	6	17%
<b>Peer support workers</b>	1.5	No recommendation	
<b>Arts therapist</b>	0	3	0%
<b>Addiction counsellor</b>	0	3	0%
<b>Cognitive behavioural therapist</b>	0	3	0%

### Assertive outreach team

Neither team delivers rehabilitation through an assertive outreach model and would not be able to do so given the current resources. Two nurses provide outreach from Team 1, and nurses from a community residence provide outreach to the Tuam area.

### Training of staff

Training of staff in evidence-based rehabilitation therapies was very limited.

<b>Course</b>	<b>Numbers of staff trained</b>
<b>WRAP Introduction Workshop<sup>1</sup></b>	0
<b>Recovery Principle Training</b>	All staff
<b>Integrated Recovery Care Planning</b>	0
<b>STORM Training<sup>2</sup></b>	0
<b>DBT<sup>3</sup></b>	0
<b>Brief Intervention/Solution Focused Therapy</b>	0
<b>Cognitive remediation</b>	0
<b>Social Role Valorisation</b>	0
<b>Basic CBT Skills<sup>4</sup></b>	0
<b>Family CBT Skills</b>	0
<b>Diploma in psychosocial intervention</b>	2
<b>Nurse Prescribing</b>	0

### Residential rehabilitation facilities

<b>Residential rehabilitation facilities</b>	<b>Number</b>	<b>Number of beds</b>
<b>Inpatient rehabilitation unit</b>	1	18
<b>Community rehabilitation units</b>	5	37

<sup>1</sup> Wellness Recovery Action Plan (WRAP)

<sup>2</sup> Skills Training on Risk Management

<sup>3</sup> Dialectical Behaviour Therapy

<sup>4</sup> Cognitive Behaviour Therapy

<b>Medium support residences</b>	5	19
<b>Low support residences</b>	2	25
<b>Supported independent accommodation</b>		22

## Day services

People under the care of the rehabilitation service may attend day centres, which are under the responsibility of the community mental health teams.

## Other Services

- There is an Individual Placement Support (IPS) to assist people to begin or return to work and to provide support once in work.
- A housing coordinator has been appointed to assist in finding appropriate accommodation for people with severe mental illness.

## Rehabilitation and Recovery Initiatives

- Reconfiguration of Toghermore House (a high support residence) to domestic orientated residences in Tuam working with Respond, an approved housing agency.
- Reconfiguration of supported residential programme in Boyle and Strokestown to provide low support housing.
- TnG in Castlerea has developed an intensive rehabilitation programme in House 1, and a less intensive programme in House 2 which includes a self-medication programme.
- Review and possible amalgamation of Boyle Training Centre and the Day Centre. This will release resources to populate outreach services to people moving to independent accommodation.
- Quality of Life study has commenced in Tuam area and which is due to be extended across the Galway/Roscommon mental health services.
- Peer support worker has been established as part of the multi-disciplinary team.

## Challenges

- Development of an adequately staffed assertive outreach team.
- Lack of homeless services.
- Difficulty in recruitment.
- Political and public opposition to closure of some residential units, which would allow residents to move to more independent living and recovery, according to their needs.

- Community Mental Health Teams do not accept service users back to their care when they have completed their rehabilitation programme. There are five residents who need to move back to community mental health teams in their sector.
- There are no advocacy services for the people who use rehabilitation services.
- No access to HSE Home Help services.
- Lack of training of staff providing rehabilitation services.

## Conclusion

Both rehabilitation teams struggle to provide a comprehensive rehabilitation service, mainly due to lack of resources. One large area of Galway does not have any rehabilitation service. The provision of high to low supported accommodation is reasonably good and there is ongoing efforts to reconfigure these to provide an optimal, appropriate care pathway through the rehabilitation process. It is therefore difficult to believe that political opposition would impede the process of recovery for people with enduring mental illness with a move to more independent living or better living conditions, with various levels of support. This flies in the face of government policy *A Vision for Change*.