

INDIVIDUAL CARE PLANNING

2016-2018 IN REVIEW



Glossary

Approved Centre

A 'Centre' means a hospital or other in-patient facility for the care and treatment of persons suffering from mental illness or mental disorder. An 'Approved Centre' is a centre that is registered pursuant to the Mental Health Act.

CAMHS

Child and Adolescent Mental Health Services.

CHO

Community Health Organisation – Health Service Executive

Compliance/Non-Compliance

Compliance or non-compliance with the MHA 2001 (Approved Centres) Regulations [2006].

Independent

Private health service providers.

Individual Care Plan

A documented set of goals developed, regularly reviewed and updated by the resident's multidisciplinary team, so far as practicable in consultation with each resident. The individual care plan shall specify the treatment and care required which shall be in accordance with best practice, shall identify necessary resources and shall specify appropriate goals for the resident. For a resident who is a child, his or her individual care plan shall include education requirements. The care plan is recorded in the one composite set of documentation [MHA 2001 (Approved Centres) Regulations 2006].

Multi-Disciplinary Team (MDT)

A mental health team comprising of a variety of professional staff. Core team members should include: psychiatrists, psychiatric nurses, clinical psychologists, social workers and occupational therapists. Other specialist therapists may also be available.

NFMHS

National Forensic Mental Health Services

NIDS

Nationally Intellectual Disability Service – Health Service Executive.

Registration

The Mental Health Commission on receipt of applications enters the centre into the register

Register

Means the register of Approved Centres. The Commission establishes and maintains the register of approved centres.

Registration Conditions

The Commission may attach conditions to the registration of Approved Centres.

Resident

A person receiving care and treatment in an approved centre. The term 'resident' includes both voluntary and involuntary patients.

Service User

A person who uses any type of mental health service, including a 'resident' in an approved centre.

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Background

The purpose of this report is to give an overview of approved centre compliance with the regulatory requirements relating to individual care planning and to identify trends in high performance and persistent non-compliance.

Definition of individual care planning

The Mental Health Act 2001 (Approved Centre) Regulations 2006 defines an 'individual care plan' as follows:

"a documented set of goals developed, regularly reviewed and updated by the resident's multi-disciplinary team, so far as practicable in consultation with each resident. The individual care plan shall specify the treatment and care required which shall be in accordance with best practice, shall identify necessary resources and shall specify appropriate goals for the resident. For a resident who is a child, his or her individual care plan shall include education requirements. The individual care plan shall be recorded in the one composite set of documentation."

Regulation 3: Definitions

Across comparable jurisdictions, there are various definitions and names for care plans, including 'personalised care plan', 'recovery care plan', 'care and treatment plan' and 'care and support plan'. Common across all definitions is the concept of a set of goals developed collaboratively between the service user and healthcare professionals.

The Mental Health Commission considers care planning and the individual care plan document to be essential to person-centred recovery-based care within in-patient and community residential settings. As a regulator, the care plan is one of the central documents that shows whether or not a service user has an active role in decisions about their care, whether there is multi-disciplinary input into their treatment, and whether there is a collaborative road-map for their recovery.

Guidance on care planning

The Commission has had consistent concerns about the quality of care planning across a number of years; in particular the lack of engagement by mental health services with care planning as a meaningful process. It is a common finding in Ireland, but also in comparable jurisdictions, that care planning is seen as a bureaucratic and administratively burdensome process.

In 2012, the Commission introduced a Guidance Document on 'Individual Care Planning for Mental Health Services', in response to recommendations from the 'National Mental Health Services Collaborative on Individual Care Planning (2011)'. The purpose of the Guidance Document was to demystify the care planning process; assisting services and service users to create care plans that meet the requirements of *Regulation 15: Individual Care Plan and Regulation 16: Therapeutic Services and Programmes*. This guidance was aligned to the Government policy 'A Vision for Change (2006)' and the Commission's 'Quality Framework for Mental Health Services (2007)', both of which advocate for multi-disciplinary care plans developed in consultation with the service user.

In 2015, the Commission introduced the 'Judgement Support Framework', which provided further guidance for approved centres on best practice in care planning, including standards around processes, training and monitoring for care planning.

Regulatory requirements for care planning in regulated services

It is important to note that the Regulations set a high bar in relation to care planning. *Regulation 15: Individual Care Plan* requires that "each resident has an individual care plan". The definition set out in the Regulations adds a number of specific criteria to that requirement. This means that not only does every resident need to have a care plan in place, but each care plan is assessed against nine separate elements (ten elements for children).

During the course of an inspection, a sample of ten individual care plans are reviewed. Failure to meet just **one** of the nine requirements, in **one** care plan, will result in a rating of non-compliance on inspection.

Figure 1: Criteria for compliance

1.	ICP in place	<input type="radio"/>
2.	Full MDT ICP in place within 7 days	<input type="radio"/>
3.	Service user involvement	<input type="radio"/>
4.	MDT input <i>developed and reviewed</i>	<input type="radio"/>
5.	Appropriate goals <i>for the resident, not the treating team</i>	<input type="radio"/>
6.	Care and treatment <i>to meet goals</i>	<input type="radio"/>
7.	Resources <i>to provide care and treatment</i>	<input type="radio"/>
8.	Reviewed within timeframe <i>7 days for acute, 6 months for continuing care</i>	<input type="radio"/>
9.	Composite document	<input type="radio"/>
10.	Education requirements <i>CAMHS only</i>	<input type="radio"/>

Results

There has been marked improvement in compliance across 2016-2018, from the low baseline of 23 approved centres compliant in 2016, to 38 in 2018.

Figure 2: Approved centre compliance with Regulation 15: Individual Care Plan



There has also been a shift in the number of individual reasons for non-compliance year on year. An approved centre can be non-compliant for more than one reason, e.g. “the approved centre did not ensure that all care plans (1) had appropriate goals (2) identified necessary resources, and (3) were in a composite document”. An individual reason for non-compliance may relate to a single care plan reviewed on inspection or may reflect a wider trend. The table below demonstrates a decline in the number of individual reasons for non-compliance. It also includes the number of reasons that related to one care plan only.

Table 1: Number of individual reasons on non-compliance

Year	2016	2017	2018
Individual reasons	107	106	81
One care plan only	6	30	11

Positive trends in compliance

Trends in non-compliance can also be analysed by the individual criteria for compliance to identify changes in practice, both positive and negative.

A. CARE PLAN IN PLACE

In 2016, **four** approved centres were found to not have a care plan in place at all for one or more residents. In 2018, only **one** approved centre was found non-compliant for this reason. It is now very rare for a resident to not have a care plan in place; the non-compliances instead relate to the quality and content of the care plan.

B. APPROPRIATE GOALS

In 2016, **24** approved centres did not have appropriate goals in place; this was recognised as a widespread problem and highlighted by the Inspector of Mental Health Services. In 2018, this had reduced to **13** approved centres, showing positive progress in relation to this criteria.

C. COMPOSITE DOCUMENT

In 2016, **10** approved centres did not ensure that the residents’ care plans were recorded in one composite document (uninterrupted in the clinical file). In 2018 this was only **three** approved centres.

Results (Continued)

Lack of progress

In 2016, **13** approved centres were found to lack sufficient service user involvement in the care planning process. In 2018, this was **10** approved centres.

In 2016, in **16** approved centres, one or more care plans were found to lack necessary MDT input. In 2018 this was **14** approved centres.

Progress in both service user and MDT involvement in the care planning progress has been limited. This is disappointing for the Commission, as these areas are essential to meaningful care planning.

Centre by centre

Twelve approved centres were found to be consistently compliant with every regulatory requirement in every care plan reviewed across 2016-2018. Four of these were CAMHS services.

Table 2: Services found to be consistently compliant 2016-2018

Service	Sector/CHO
Central Mental Hospital	NFMHS
Adolescent In-patient Unit, St Vincent's Hospital	CAMHS
Child & Adolescent Mental Health In-patient Unit, Merlin Park University Hospital	CAMHS
Eist Linn Child & Adolescent In-patient Unit	CAMHS
Willow Grove Adolescent Unit, St Patrick's University Hospital	CAMHS
Creagh Suite, St Brigid's Healthcare Campus	CHO 2
Wood View	CHO 2
Carraig Mór Centre	CHO 4
Centre for Mental Health Care & Recovery, Bantry General Hospital	CHO 4
Department of Psychiatry, Midland Regional Hospital, Portlaoise	CHO 8
Lois Bridges	Independent
St Edmundsbury Hospital	Independent

Fourteen approved centres were found to be consistently non-compliant across 2016-2018. Of these, eight showed improvement in relation to the scope and number of non-compliance; three had only one reason for non-compliance in 2018. Six approved centres had shown either no improvement, or had gotten worse.

Table 3: Services found to be consistently non-compliant 2016-2018

Service	Improvement	Sector/CHO
Department of Psychiatry, Letterkenny University Hospital	Yes	CHO 1
Sligo/Leitrim Mental Health In-patient Unit	No	CHO 1
St Davnet's Hospital – Blackwater House	Yes	CHO 1
Adult Mental Health Unit, Mayo University Hospital	No	CHO 2
Acute Psychiatric Unit 5B, University Hospital Limerick	No	CHO 3
Acute Mental Health Unit, Cork University Hospital	No	CHO 4
St Catherine's Ward, St Finbarr's Hospital	Yes	CHO 4
Units 2, 3, 4, and Unit 8 (Floor 2), St Stephen's Hospital	Yes	CHO 4
Department of Psychiatry, St Luke's Hospital	Yes	CHO 5
Elm Mount Unit, St Vincent's University Hospital	No	CHO 6
Acute Psychiatric Unit, Tallaght Hospital	Yes	CHO 7
St Bridget's Ward & St Marie Goretti's Ward, Cluain Lir Care Centre	Yes	CHO 8
Department of Psychiatry, Connolly Hospital	No	CHO 9
Phoenix Care Centre	Yes	CHO 9

Condition monitoring

In 2017, the Commission reviewed its registration procedures and introduced a more robust review process which included a full review of a service's compliance data, corrective and preventive action plans, quality and safety notifications and enforcement data over a three year period. This led to a number of conditions being attached to approved centre registrations. A condition relating to individual care planning was attached to the registration of **11** approved centres. These conditions require services to audit their care plans monthly and to submit a report of the results to the Commission.

Of those 11 approved centres with a condition on care planning, three achieved compliance in 2017 and, importantly, continued to be compliant in 2018. Four further approved centres achieved compliance in 2018. Four services have continued to be non-compliant despite condition monitoring:

- Acute Psychiatric Unit 5B, University Hospital Limerick
- Acute Psychiatric Unit, Tallaght Hospital
- Department of Psychiatry, St Luke's Hospital
- St Davnet's Hospital, Blackwater House

Condition monitoring of individual care planning has provided a useful set of data for the Commission to closely monitor compliance trends and to pin point ongoing issues. It has shown some promise as a mechanism to improve compliance and the Commission has since attached five further conditions in relation to care planning.

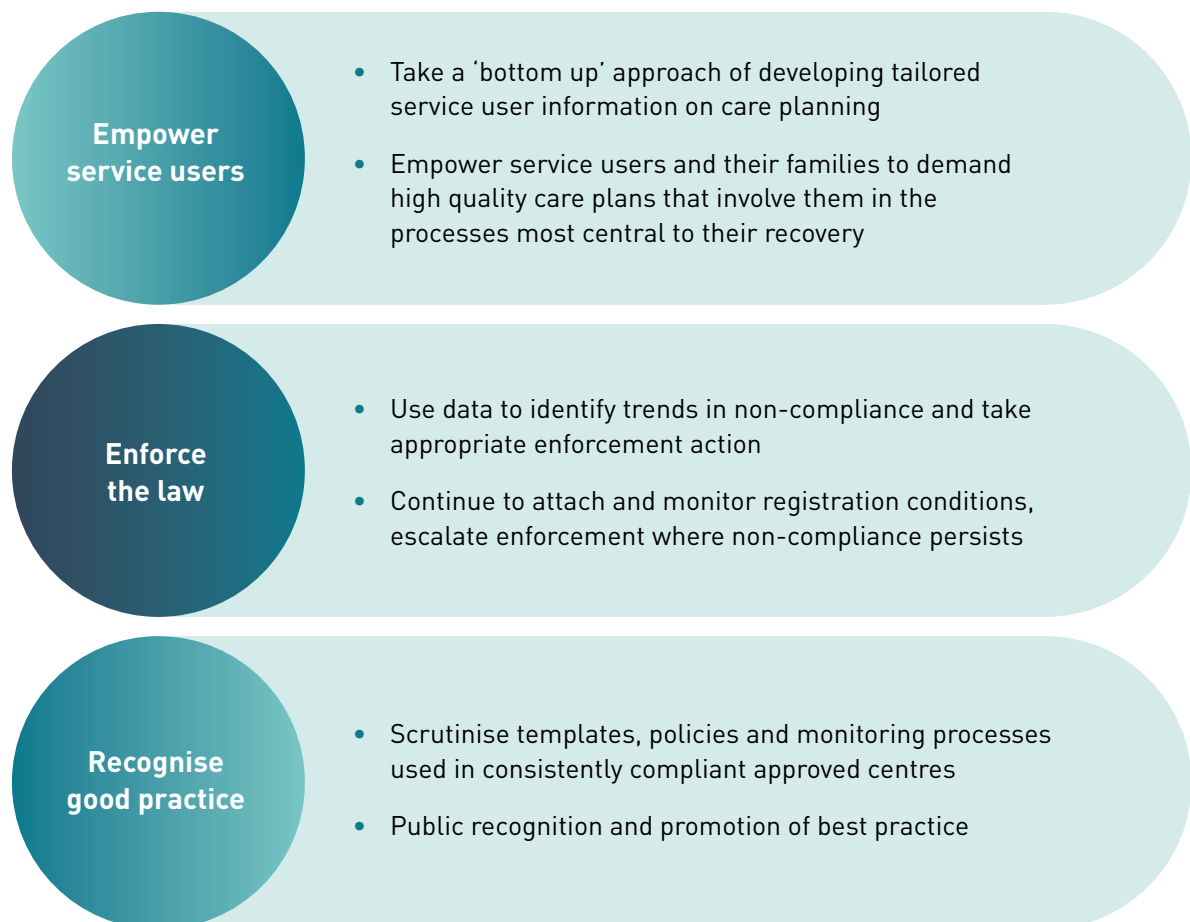
What next?

While it is now uncommon for a service user in an approved centre to not have a care plan in place, fundamental concerns about the quality of the care plans, in particular service user involvement and multi-disciplinary input, remain.

Recent systematic reviews have shown that regulatory requirements alone may have a limited impact on meaningful improvements in the care planning processes. This was highlighted by the Inspector of Mental Health Services in her 2017 annual report. She noted that while there had been some improvement in terms of services adhering to the specific criteria for compliance, it was seen by some as a 'tick-box exercise', and lacked meaningful engagement and recovery focus.

It is clear that the problem of creating high quality meaningful individual care plans is complex and will require a range of interventions to address. While the development of guidance materials and use of enforcement actions have shown some effect, it is clear that problems persist.

The Regulatory Team have developed a three part plan to seek to address some of these issues:



Work is underway progressing each of these elements and will be kept under regular review.

This work aligns with Strategic Objectives 2 and 3 in the Commission's Strategic Plan 2019-2022.

Appendix: Approved centre compliance with Regulation 15: Individual care plan 2016-2018

Approved centre	Sector	2016 Compliance	2017 Compliance	2018 Compliance
Central Mental Hospital	NFMHS	Compliant	Compliant	Compliant
St Joseph's Intellectual Disability Service	NIDS	Non-compliant	Compliant	Non-compliant
Adolescent In-patient Unit, St Vincent's Hospital	CAMHS	Compliant	Compliant	Compliant
CAMH In-patient Unit, Merlin Park	CAMHS	Compliant	Compliant	Compliant
Eist Linn Child & Adolescent In-patient Unit	CAMHS	Compliant	Compliant	Compliant
Linn Dara CAMH In-patient Unit, Cherry Orchard	CAMHS	Non-compliant	Compliant	Compliant
Willow Grove, St Patrick's University Hospital	CAMHS	Compliant	Compliant	Compliant
Acute Psychiatric Unit, Cavan General Hospital	CHO 1	Non-compliant	Compliant	Compliant
DOP, Letterkenny University Hospital	CHO 1	Non-compliant	Non-compliant	Non-compliant
St Davnet's Hospital – Blackwater House	CHO 1	Non-compliant	Non-compliant	Non-compliant
Sligo/Leitrim Mental Health In-patient Unit	CHO 1	Non-compliant	Non-compliant	Non-compliant
AMHU, Mayo University Hospital	CHO 2	Non-compliant	Non-compliant	Non-compliant
AAMHU, University Hospital Galway	CHO 2			Compliant
An Coillín	CHO 2	Non-compliant	Compliant	Compliant
DOP, Roscommon University Hospital	CHO 2	Compliant	Non-compliant	Non-compliant
St Anne's Unit, Sacred Heart Hospital	CHO 2	Compliant	Non-compliant	Non-compliant
Creagh Suite, St Brigid's Healthcare Campus	CHO 2	Compliant	Compliant	Compliant
Teach Aisling	CHO 2	Non-compliant	Compliant	Compliant
Wood View	CHO 2	Compliant	Compliant	Compliant
APU 5B, University Hospital Limerick	CHO 3	Non-compliant	Non-compliant	Non-compliant
Acute Psychiatric Unit, Ennis Hospital	CHO 3	Compliant	Compliant	Non-compliant
Cappahard Lodge	CHO 3	Compliant	Non-compliant	Compliant
Tearmann Ward, St Camillus' Hospital	CHO 3	Non-compliant	Compliant	Compliant
St Stephen's Hospital	CHO 4	Non-compliant	Non-compliant	Non-compliant
AMHU, Cork University Hospital	CHO 4	Non-compliant	Non-compliant	Non-compliant
St Catherine's Ward, St Finbarr's Hospital	CHO 4	Non-compliant	Non-compliant	Non-compliant

Appendix: Approved centre compliance with
Regulation 15: Individual care plan 2016-2018 (Continued)

Approved centre	Sector	2016 Compliance	2017 Compliance	2018 Compliance
Carraig Mór Centre	CHO 4	Compliant	Compliant	Compliant
Centre for Mental Health Care & Recovery, Bantry General Hospital	CHO 4	Compliant	Compliant	Compliant
Deer Lodge	CHO 4		Compliant	Compliant
Owenacurra Centre	CHO 4	Non-compliant	Compliant	Compliant
Sliabh Mis Mental Health Admission Unit, University Hospital Kerry	CHO 4	Non-compliant	Non-compliant	Compliant
St Michael's Unit, Mercy University Hospital	CHO 4	Non-compliant	Non-compliant	Compliant
Department of Psychiatry, St Luke's Hospital	CHO 5	Non-compliant	Non-compliant	Non-compliant
DOP, University Hospital Waterford	CHO 5	Non-compliant	Compliant	Compliant
Grangemore Ward & St Aidan's Ward, St Otteran's Hospital	CHO 5	Non-compliant	Compliant	Compliant
Haywood Lodge	CHO 5	Non-compliant	Compliant	Compliant
Selskar House, Farnogue Residential Healthcare Unit	CHO 5	Compliant	Compliant	Non-compliant
St Gabriel's Ward, St Canice's Hospital	CHO 5	Compliant	Non-compliant	Non-compliant
Elm Mount Unit, St Vincent's University Hospital	CHO 6	Non-compliant	Non-compliant	Non-compliant
Avonmore & Glenree Units, Newcastle Hospital	CHO 6	Non-compliant	Non-compliant	Compliant
Le Brun House & Whitethorn House, Vergemount Mental Health Facility	CHO 6	Non-compliant	Compliant	Compliant
Acute Psychiatric Unit, Tallaght Hospital	CHO 7	Non-compliant	Non-compliant	Non-compliant
Jonathan Swift Clinic	CHO 7	Non-compliant	Non-compliant	Compliant
Lakeview Unit, Naas General Hospital	CHO 7	Non-compliant	Non-compliant	Compliant
Admission Unit & St Edna's Unit, St Loman's Hospital	CHO 8	Non-compliant	Non-compliant	Compliant
DOP, Midland Regional Hospital, Portlaoise	CHO 8	Compliant	Compliant	Compliant
Drogheda Department of Psychiatry	CHO 8	Compliant	Non-compliant	Compliant
Maryborough Centre, St Fintan's Hospital	CHO 8	Compliant	Compliant	Non-compliant
St Bridget's Ward & St Marie Goretti's Ward, Cluain Lir Care Centre	CHO 8	Non-compliant	Non-compliant	Non-compliant
St Ita's Ward, St Brigid's Hospital	CHO 8	Non-compliant	Compliant	Compliant

Approved centre	Sector	2016 Compliance	2017 Compliance	2018 Compliance
Department of Psychiatry, Connolly Hospital	CHO 9	Non-compliant	Non-compliant	Non-compliant
Ashlin Centre	CHO 9	Non-compliant	Non-compliant	Compliant
O'Casey Rooms, Fairview Community Unit	CHO 9	Compliant	Non-compliant	Non-compliant
Phoenix Care Centre	CHO 9	Non-compliant	Non-compliant	Non-compliant
St Aloysius Ward, Mater Misericordiae University Hospital	CHO 9	Non-compliant	Non-compliant	Compliant
St Vincent's Hospital	CHO 9	Compliant	Non-compliant	Non-compliant
Sycamore Unit, Connolly Hospital	CHO 9	Non-compliant	Non-compliant	Compliant
Bloomfield Hospital	Independent	Compliant	Compliant	Non-compliant
Highfield Hospital	Independent	Non-compliant	Compliant	Compliant
Lois Bridges	Independent	Compliant	Compliant	Compliant
Cois Dalua	Independent			Non-compliant
St Edmundsbury Hospital	Independent	Compliant	Compliant	Compliant
St John of God Hospital	Independent	Non-compliant	Compliant	Non-compliant
St Patrick's University Hospital	Independent	Non-compliant	Compliant	Compliant

Appendix: Approved centre compliance with Regulation 15: Individual care plan 2016-2018 (Continued)

Who else is involved?

Your multi-disciplinary team (MDT)
The team of professionals responsible for supporting you in your recovery.

Your key worker
Your key contact point while you are in hospital. This may be any member of your care team.

Your family and other support people
With your consent, your family, carers, friends and advocates may be able to help with the care planning process.

If you would like to use an advocate, the hospital can arrange this for you.

Who are we?

The Mental Health Commission was set up under the Mental Health Act 2001. We have two important jobs under that Act:

- to make sure that mental health services maintain high standards and good practices, and
- to take all reasonable steps to protect the interests of people detained in approved centres

You can find more information about the Commission on our website www.mhcirl.ie.



Your Individual Care Plan

What to expect from your care plan

Key points...

- Services must have a care plan for you.
- You are entitled to be involved in the care planning process.
- There are different ways for you to be involved in your care planning.

Please note
This leaflet is only a guide on the requirements for care planning in approved centres. It is not a legal interpretation and it does not give a full description of care planning processes. Please do not rely on it for advice.

This pamphlet sets out information on care planning and what you and your family can expect from your care plan while you are in hospital.

Why are care plans important?

A good care plan will:

- make sure everyone is working towards the same goals
- lead to better treatment by focusing on your needs
- identify the supports you need for your recovery
- involve you, your family and other support people in the recovery process
- reflect your views and preferences.

Recovery goals in action...

Joe is admitted to hospital. Joe tells his team that he has been thinking about suicide.

Joe and his team agree on an immediate recovery goal:

- for Joe to stay safe and to strengthen Joe's reasons for living.

Together, Joe and his team identify steps to achieve this goal.

When Joe next meets with his key worker, he explains that he has been very stressed about money since he got fired from his job.

Joe and his key worker agree on two further recovery goals:

- for Joe and his family to have a financial plan to work from, and
- for Joe to enjoy a balanced diet and get enough sleep so that he is better able to deal with this stress.

Joe and his team agree the steps, resources and supports needed to achieve these goals.

What is a care plan?

- A plan that you and your team put in place while you are in hospital.
- Sets out actions you and your team will take to address your needs.
- Called different things in different hospitals.

The law requires services to develop a care plan for you...

Your care plan must include:

- appropriate **goals** for your recovery
- necessary **care and treatment** and **resources** to meet your goals
- education requirements** if you are a child.

The law also requires your care plan to be:

- developed in **consultation** with you
- regularly **reviewed and updated** by you and your multi-disciplinary team.

The care planning process...

Care planning is an ongoing process which starts when you are admitted to hospital.

- The process starts with an assessment of your mental health and other needs, as well as your strengths and abilities.
- You and your team agree a plan to achieve your recovery goals.
- Your plan is monitored during your stay.
- Your plan is reviewed and updated as your needs and goals change.
- Your plan will be reviewed by your community mental health team when you go home and progress in your recovery.

What is the point of review?

Your care plan should be reviewed and updated regularly.

The review process is a chance for you and your team to see how your plan is working and what could be different.

Remember, it is your care plan

