Protecting People's Rights
Our Vision
The highest quality mental health and decision support services underpinned by a person’s human rights.

Our Mission
Regulate and engage to promote, support and uphold the rights, health and well-being of all people who access mental health and decision support services.
Strategic Objectives

Strategic Objective 1
Promote and uphold human rights to meet our responsibilities and remit under national and international legislation.

Strategic Objective 2
Implement the Commission’s legislative mandate and pursue appropriate changes to the Mental Health Act 2001, the Assisted Decision Making (Capacity) Act 2015 and other relevant legislation.

Strategic Objective 3
Promote awareness of and confidence in the role of the Mental Health Commission.

Strategic Objective 4
Develop an organisation that is responsive to the external environment and societal changes.

Strategic Objective 5
Develop an agile organisation with an open and inclusive culture.
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Foreword from the Chairman and Chief Executive

‘Remaining a champion for people’s rights’

Welcome to the Mental Health Commission’s Strategy for 2019-2022. This is the sixth Strategy for the Commission since our establishment in 2002.

This Strategy builds on the significant work undertaken by the Commission since the full commencement of our functions in 2006, and charts an ambitious course for the next four years to realise our vision of an Ireland with the highest quality mental health and decision support services underpinned by a person’s human rights.

As part of developing this Strategy, we reviewed our mission to ensure that we focus our resources on regulating and engaging to promote, support and uphold the rights, health and well-being of all people who access mental health and decision support services.

The priorities set out in this Strategy enhance our core role as the regulator for mental health services, while broadening our attention and raising awareness of our fundamental purpose of protecting people’s rights.

We face the particular challenge over the next four years of operationalising a best-in-class Decision Support Service. We are committed to rolling out this much-needed service, which will maximise autonomy for all relevant persons requiring support to make decisions about their personal welfare, property and financial affairs. We will also regulate individuals who are providing these supports.

Over the last three years, much effort has gone into building our people, processes and systems internally. This has set a solid foundation to further develop the Commission over the next four years as an outward-facing organisation, enhancing our scrutiny of a wider range of services, while remaining a champion for people’s rights.

Individual’s human rights will be at the heart of our work and functions. Human rights will be the common thread through all our activities, policies, regulations, codes of practice and standards. We will work with Government to strengthen the regulatory infrastructure which protects human rights and we will ensure compliance through proportionate risk-based regulation, monitoring and supports.

To implement all of these important actions the Commission will further develop our corporate agility to ensure that we are effective in our remit and responsive to change, and that we attract and retain talented public servants. Key to this is a strong corporate spine providing shared services and a modern IT infrastructure to support person-centred delivery whilst reducing red tape and regulatory burden for providers of services and individuals.

We would like to sincerely thank all of our partners and stakeholders who engaged in our Strategy development process, in particular people using services and their representatives, whose valuable contributions cannot be overstated. We look forward to working closely with the Department of Health, Department of Justice & Equality, partner agencies, service providers and people using services, as we deliver on our strategic priorities.

Mr John Saunders | Chairman
Mr John Farrelly | Chief Executive
Introduction

The Mental Health Commission (the Commission), is an independent statutory body established under the provisions of the Mental Health Act 2001 (2001 Act). The remit of the Commission incorporates the broad spectrum of mental health services for all ages in all settings.

In addition, under the provisions of the Assisted Decision Making (Capacity) Act 2015 (2015 Act), the Commission’s remit has been extended to include the establishment of the Decision Support Service. The Decision Support Service will support decision-making by and for adults with capacity difficulties, and will regulate individuals who are providing a range of supports to people with capacity difficulties.

This is the Commission’s sixth Strategic Plan since our establishment in 2002. The priorities set out in the Plan will cover the period 2019–2022.
**Strategy Development**

This document sets out the Commission’s sixth Strategic Plan covering the period 2019-2022. In developing this Strategic Plan, the Commission focused on a wide range of internal and external factors and drivers:

<table>
<thead>
<tr>
<th>Factor</th>
<th>Description</th>
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<tbody>
<tr>
<td>The ongoing delivery of the Commission’s obligations under the 2001 Act</td>
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<tr>
<td>The Oversight Review of ‘A Vision for Change’; the national mental health policy</td>
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<td>The evolving state of mental health services and the delivery of these services within the community</td>
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<td>Consideration of international leading practice in mental health service regulation</td>
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<td>Impacts of the establishment of the Decision Support Service within the Commission and full enactment of the 2015 Act</td>
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<td>The report of the Joint Oireachtas Committee on the Future of Mental Health Care, published in October 2018</td>
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<td>A widespread stakeholder engagement and consultation process</td>
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<td>Impacts of the changing societal environment and attitudes towards mental health</td>
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<td>Impacts of the Sláintecare report setting out a 10-year strategy and transformation plan for the Irish healthcare system</td>
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<td>A review of the implementation of the Commission’s 2016-2018 Strategy</td>
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<tr>
<td>Consideration of the emerging legislative and regulatory environment impacting on the Commission over the next four years</td>
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Details of the Strategy Development Process and Stakeholder Engagement Process are detailed in the Appendix.
Who We Are and What We Do

- The Commission regulates in-patient mental health services.
- The Commission ensures that all persons involuntarily detained in approved centres are independently reviewed by a Mental Health Tribunal.
- The Commission sets standards for high quality and good practices in mental health and decision support services.
- The Commission shall maximise autonomy for all relevant persons requiring support to make decisions about their personal welfare, property and finances as well as regulating individuals who are providing a range of supports to people with capacity difficulties.

<table>
<thead>
<tr>
<th>Regulatory Process</th>
<th>Mental Health Tribunals</th>
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<tr>
<td>Monitoring mental health services and the registering and inspection of approved centres in line with legal requirements. We are a responsive regulator and use data collected to take a risk-based approach.</td>
<td>Protecting the human rights and interests of persons detained for care and treatment; specifically through ensuring the independent review of involuntary admission orders by a Mental Health Tribunal.</td>
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<tr>
<th>Decision Support Service</th>
<th>Quality Improvement</th>
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<td>Maximising autonomy for all relevant persons requiring support to make decisions about their personal welfare, property and finances. Regulating individuals who are providing a range of supports to persons with capacity difficulties.</td>
<td>Encouraging continuous quality improvement; fostering high standards and good practices in the delivery of mental health services. Issuing guidance and developing evidence-based standards to improve service delivery and service user experience.</td>
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Figure 1: Roles and functions of the Mental Health Commission.
Vision, Mission and Values

Our Vision
The highest quality mental health and decision support services underpinned by a person’s human rights.

Our Mission
Regulate and engage to promote, support and uphold the rights, health and well-being of all people who access mental health and decision support services.

Our Values

Dignity and Respect
We believe that everyone deserves to be treated with dignity and respect.

Human Rights
We believe that everyone is entitled to have their human rights respected and protected.

Confidentiality
We respect and protect the confidentiality of all persons whose rights we uphold.

Person-Directed
We believe in person-directed support and care.

Accountable and Transparent
We are accountable and transparent.

Quality
We expect the highest standards of ourselves and of all those we regulate.
Strategic Objectives

This Strategy has five key Strategic Objectives. Each Objective sets out key actions through which the strategic objective will be delivered by 2022.

**Strategic Objective 1**
Promote and uphold human rights to meet our responsibilities and remit under national and international legislation.

**Strategic Objective 2**
Implement the Commission’s legislative mandate and pursue appropriate changes to the Mental Health Act 2001, the Assisted Decision Making (Capacity) Act 2015 and other relevant legislation.

**Strategic Objective 3**
Promote awareness of and confidence in the role of the Mental Health Commission.

**Strategic Objective 4**
Develop an organisation that is responsive to the external environment and societal changes.

**Strategic Objective 5**
Develop an agile organisation with an open and inclusive culture.
Strategic Objective 1

Promote and uphold human rights to meet our responsibilities and remit under national and international legislation.

Actions

1.1 Provide leadership, within our remit, in human rights principles by embedding a person’s right to self-determination, privacy, dignity and recovery into all our activities.

1.2 Ensure compliance with national and international human rights principles through the administration of Mental Health Tribunals, assisted decision-making services and in our regulation of mental health services.

1.3 Provide relevant guidance and standards frameworks to educate the public, service users and service providers in the principles of human rights and the practical implementation of these in line with relevant legislation.

1.4 Strengthen the regulatory infrastructure which protects and enhances human rights.

DESCRIPTION

This Objective puts the individual’s human rights at the heart of the Commission and all our functions. It is a common thread through all our activities, policies, regulations and standards. It is about ensuring compliance with national and international human rights principles through regulation, education and supports.

WHAT SUCCESS LOOKS LIKE:

- There are higher levels of compliance with human rights principles in our inspections.
- The Mental Health Tribunal is recognised for its contribution to the upholding of human rights.
- The Decision Support Service is effectively established and develops a strong reputation for supporting individuals with capacity issues.
- The Commission complies with international human rights legislation.
Strategic Objective 2

Implement the Commission’s legislative mandate and pursue appropriate changes to the Mental Health Act 2001, the Assisted Decision Making (Capacity) Act 2015 and other relevant legislation.

Actions

2.1 Advise on reform of the 2001 Act and workable changes to the 2015 Act, to allow the Commission to become more effective in implementing its functions.

2.2 Establish an effective Decision Support Service office under the remit of the 2015 Act.

2.3 Strengthen the infrastructure which protects and enhances human rights through the administration of Mental Health Tribunals.

2.4 Implement a targeted, risk-based inspection programme and monitor approved centres for compliance with the 2001 Act.

2.5 Pursue the expansion of the Commission’s remit to include regulation of residential community mental health services.

2.6 Enhance and expand a quality framework that allows for community mental health services, aligned to the principles of responsive regulation.

DESCRIPTION

This Objective focuses on the legislative remit of the Commission under the Mental Health Act 2001 and the Assisted Decision Making (Capacity) Act 2015. It focuses on the Commission’s role of regulating mental health services and those who support people with capacity difficulties.

The Strategic Objective pursues the expansion of the current remit of the Commission to include regulation of residential community mental health services, e.g. 24-hour nurse-supervised community residences.

WHAT SUCCESS LOOKS LIKE:

- All approved centres will be compliant with regulatory requirements.
- There is an agreed evaluation framework for residential community mental health services.
- There is appropriate reform of the Mental Health Act 2001 that enables the Commission to more effectively promote high standards and good practices in the delivery of mental health services.
- The Decision Support Service is successfully established.
- The Commission’s remit is expanded to include the regulation of residential community mental health services.
Strategic Objective 3

Promote awareness of and confidence in the role of the Mental Health Commission.

Actions

3.1 Develop a professional communication strategy that consistently promotes the views of the Commission, identifies and targets gaps in public, service user and service provider awareness and supports the Commission in delivering on our functions.

3.2 Take a strategic approach to becoming the leading authority in the quality and standards of mental health services and the delivery of decision support services, through evidence-based research and effective, consistent communications.

3.3 Advise on appropriate changes in the Mental Health Act 2001 and the Assisted Decision Making (Capacity) Act 2015 that will enable the Commission to be more effective in delivering on our functions under the Acts and under international human rights legislation.

3.4 Build effective relationships with Government, professional bodies, service providers and service user advocacy groups that will support the Commission in our function of improving standards in mental health services and the functioning of the Decision Support Service.

DESCRIPTION

This Objective will allow the Commission to improve our effectiveness across all functions by ensuring that the public, service users, service providers and other stakeholders understand the Commission’s role and function.

WHAT SUCCESS LOOKS LIKE:

- There is an improved understanding and support of the role of the Commission amongst the public, service providers and service users.
- External communications consistently and accurately reflect the Commission’s position and views on mental health and capacity.
- The Commission is the ‘go-to’ organisation on standards for mental health services and decision support services, and the regulation of these services.
- There is improved engagement with all stakeholders, leading to better understanding of the Commission’s role and challenges and those of our stakeholders.
- Communication becomes an important and effective tool to achieve the Commission’s strategic intent, and the Commission’s views are promoted and accessible via social media channels.
Strategic Objective 4

Develop an organisation that is responsive to the external environment and societal changes.

Actions

4.1 Develop an outward-facing organisation that monitors the external environment and plans for change.
4.2 Engage with Government, stakeholders and service users to influence policy and legislative changes.
4.3 Engage in public discourse on issues within the remit of the Commission, and lead in shaping the direction of mental health and decision support service delivery and regulation.

DESCRIPTION

This Objective focuses the Commission on external policy and discourse on mental health and decision support services and the future direction and regulation of these services. It positions the Commission as a key stakeholder in shaping the debate around mental health services and decision support services. It is also about being able to strongly advocate for change where the Commission believes it is required or desirable.

WHAT SUCCESS LOOKS LIKE:

- The Commission becomes a leading voice in standards for mental health and decision support services, and the regulation of these services.
- The Commission is proactive and responsive to the changing external environment and demands on the organisation as the regulator for mental health services.
- The Commission is an open and honest voice in the public discourse on mental health issues.
Strategic Objective 5
Develop an agile organisation with an open and inclusive culture.

Actions
5.1 Ensure governance structures are responsive to the evolving needs of the organisation and wider stakeholders.
5.2 Develop a strong corporate spine with appropriate IT infrastructure to enable effective and efficient delivery of the Commission’s core functions.
5.3 Build the necessary skills and competencies across all functions and levels within the Commission.
5.4 Nurture staff through effective leadership and training to develop a culture that encourages staff initiative, quality work and delivery on the Commission’s remit.
5.5 Successfully integrate the new functions of the Decision Support Services into the organisation.

DESCRIPTION
This Objective focuses on developing an agile organisation that is effective in its remit, responsive to change and attracts and retains talented staff throughout the organisation. It looks at establishing a corporate spine with shared services and an effective IT infrastructure to support the delivery of the Commission’s functions.

WHAT SUCCESS LOOKS LIKE:
- The pre-existing organisation and the DSS function are integrated in a seamless manner and the corporate spine effectively services all functions.
- Staff recruitment and retention are enhanced.
- The Commission becomes an employer of choice and attracts and retains high-calibre staff.
- The IT structures are adequate to support all functions and are future-proofed to the extent that they can grow and evolve with the organisation.
- There is a greater awareness by all staff of the goals and challenges of each other’s functions, and sharing of resources to achieve the organisation’s objectives.
Strategy Implementation

The Mental Health Commission’s Strategy 2019-2022 will be implemented through targeted and measurable annual Business Plans, aligned to the Strategic Objectives.

In setting out the Strategic Objectives, the Commission has determined the key actions that are required to achieve our objectives and what we consider to be our key success criteria. These actions will be clearly aligned to the actions in the annual Business Plans over the course of the Strategy. Each Business Plan will have well-defined and measurable key performance indicators (KPIs) designed to bring the Commission further towards achieving our four-year Strategic Objectives.

The Commission will monitor our KPIs throughout the term of the Strategy to facilitate the successful implementation of its strategic priorities. We will also continuously monitor the environment in which we operate to ensure that our Objectives continue to serve our mission, stays true to our values and have the achievement of our vision at their core.
Appendix: Strategy Development Process

The Strategy was developed by undertaking the following major activities:

- **Review of the Commission’s Strategic Plan 2016-2018**
- **Leading practice review of international mental health regulators’ practices**
- **Review of the context and environment in which the Commission operates**
- **Wide-ranging engagement with stakeholders through workshops and surveys to derive the emerging strategic themes for shaping this strategy**
- **Visioning workshops with the Board and Senior Management Team**

**Review of the Commission’s Strategic Plan 2016-2018**

As part of the process to develop the new Strategy, the Commission and the Senior Management Team reviewed the current Strategic Plan to determine lessons learned from its preparation and implementation through the Annual Business Plans. These lessons were considered and informed the development of this current Strategy, which covers the period 2019-2022.

**Contextual and Environmental Review**

**COMMENCEMENT OF THE 2001 ACT**

The Mental Health Act 2001 saw the establishment of the Mental Health Commission in 2002. The Commission worked towards the full commencement of the Act in November 2006. The automatic independent review system for detained patients, registration and regulation of approved centres, and the development of guidance for mental health services were all in place at this time.

In 2014, the Government followed up with a review of the Mental Health Act 2001 and the expert group published a report with 165 recommendations to reform the Mental Health Act 2001. The report were respect for a person’s own understanding of their condition and a move from paternalism and ‘best interests’ to autonomy, self-determination, and respect for a person’s dignity. It also referenced a person’s capacity and their right to make their own decisions. In 2016, amendments were made to the 2001 Act in relation to treatment without consent.
A VISION FOR CHANGE

‘A Vision for Change’, the report from the expert group on mental health policy, was published in 2006. It reinforced the Commission’s calls for more involvement of service users in their treatment and care planning, a theme of the Commission’s strategic plans since our first strategy was published in 2004. In 2010, the Government ring-fenced €35m per year for the development of community-based mental health services.

In February 2017, a report on the expert review of ‘A Vision for Change’ was published. It reviewed the implementation of ‘A Vision for Change’ and looked at international best practice. It covered the state of mental health services in Ireland today, including societal issues, prevention, recovery, social inclusion, governance and financing. It did not present recommendations but provided an evidence base on which future policy might be set. In July 2017, Mr Hugh Kane was appointed as Chair of an Oversight Committee to oversee additional policy priorities for mental health based on the outcome of the Expert Review and to produce a high-level policy framework which sets out future service priorities.

JOINT COMMITTEE FOR THE FUTURE OF MENTAL HEALTH CARE

In July 2017, the Oireachtas Joint Committee for the Future of Mental Health Care was also established. It published its final report in October 2018. The Committee made 22 recommendations, including recommendations on staffing, the traveller community, increase in acute beds, a range of therapies, funding, governance and accountability.

The Committee recommended that the Mental Health Act 2001 be amended to: provide for the regulation of all premises where mental health services are provided and to strengthen the Mental Health Commission’s powers to impose penalties on service providers where they are found to be non-compliant with the regulations’. The Committee also recommended major additional capital investment to ensure compliance with the Mental Health Act 2001 (Approved Centre) 2006 Regulations. It further recommended that, as Sláintecare is implemented, the recommended increase to 10% for mental health services be ring-fenced and prioritised with a portion of this budget ring-fenced for a national traveller mental health strategy. The Committee also recommended that a National Director for Mental Health be reinstated within the HSE.

The Commission welcomed the report and the overall approach of the Joint Committee and supported the recommendation that a National Director for the Mental Health be reinstated in the HSE. ‘A Vision for Change’ has brought about significant change in mental health services provision in Ireland, but there is a substantial amount still to do, particularly in the areas of community services, staffing and the provision of mental health services to children.

ASSISTED DECISION MAKING (CAPACITY) ACT 2015

The Assisted Decision Making (Capacity) Act 2015 (ADMA) provided for the establishment of the Decision Support Service within the Commission. The DSS extends the remit of the Commission beyond mental health services to include all relevant persons in Ireland who may require support to make decisions about their welfare, property and finances. The DSS is expected to become operational in 2020. The ADMA marked a cultural shift from paternalism to autonomy for all persons and is underpinned by human rights principles.

SLÁINTECARE

The Government’s Sláintecare Implementation Strategy was published in August 2018. The Commission welcomed the additional funding of €35m that was provided to develop mental health services in 2018, and the €55m additional funding agreed for 2019. Two notable goals within Sláintecare are the enhancement of community mental health services and a more highly coordinated model of care for people with more complex needs.
Internal and External Drivers

The Commission’s internal and external drivers are set out in Figure 2 below. In considering our Strategic Objectives for 2019-2022, the Commission took careful account of our role and obligations under each. We are committed to working with legislators to ensure that the Acts under which we operate are in line with human rights principles and international best practice. We are committed to upholding human rights principles and responding to changing expectations in mental healthcare. We are ready to adapt to the changes in the mental healthcare environment resulting from the transformation programmes.

Figure 2: Internal and External Drivers for 2019-2022 Strategy.
International Best Practice Review

In preparation for the development of the strategy, the Commission conducted desk-based review of the mental health regulators and supported decision-making frameworks in England, Scotland, Northern Ireland, Wales, New Zealand, Australia, the Netherlands and Canada. The purpose was to identify examples of best practice, emerging trends and lessons learned that would inform the strategy development. The findings were carefully considered in the Irish context and discussions informed the strategy development.

The research looked at best practice in communications and effective engagement with service users, their support network, service providers and wider stakeholders. It considered the various forms of communications used, for example: forums, social media and expert groups. The review demonstrated some good examples of how service users are facilitated in making decisions about their care and treatment plans, and how service users are included in inspection teams and valued for their experience.

Stakeholder Engagement

As part of the development of this Strategy, a wide-ranging stakeholder engagement through meetings, workshops and surveys was conducted. This stakeholder engagement, illustrated in Figure 3, led to the development of a set of emerging strategic themes which helped to shape this Strategy. A list of all external stakeholders with whom the Commission engages was developed and a stakeholder engagement process was established which included:

- **A series of workshops with stakeholder groups:**
  - HSE Executive Clinical Directors
  - HSE Mental Health Leads
  - Independent Service Providers
  - Service User and Voluntary Organisations

- **Completion of four individual surveys with:**
  - Staff of the Commission
  - Mental Health Tribunal Panel Members
  - Professional Representative Organisations and their members
  - Statutory Agencies, Trade Unions and Employers

- **One-on-one meetings with the Commission Board Members and Senior Management Team**

- **Workshops with internal staff groups:**
  - Commission Members
  - Inspectorate
  - Senior Management Team
  - Middle Management Team

A synthesised summary of the key emerging themes and feedback from all the stakeholder engagement was developed and this was used to inform the Strategic Plan development.

The Commission held visioning workshops with internal staff groups to further develop the themes and ensure the Strategic Objectives were accurate, responsive and achievable.
Mental Health Commission Stakeholder Engagement

- Mental Health Commission Members, Management and Staff, Inspectorate, Decision Support Service, Tribunal Panel Members
- Statutory Agencies, Trade Unions and Employers
- Government Department of Health and Department of Justice & Equality
- HSE Executive Clinical Directors and Mental Health Leads
- Professional Representative Bodies and their members
- Service User and Voluntary Organisations
- Independent Service Providers

Figure 3: Stakeholders consulted in Engagement Process.