

# Inconsistencies remain in staff testing across mental health services

## Mental Health Commission concerned about lack of oversight

**Monday, May 4<sup>th</sup>:** The Mental Health Commission has today said that it is concerned that significant inconsistencies still remain in the application of new guidance in relation to testing of mental health staff for Covid-19.

As part of the Commission's risk-rating of in-patient mental health centres, along with 24-hour community residences - which combined care for more than 3,800 mental health patients and residents across the country - the Commission sought specific information from all services on the roll out of staff testing.

It noted that significant inconsistencies still remain in the application of new guidance for testing in residential care facilities. While a number of services were now reporting that staff testing was planned, others reported that they were still waiting to hear about testing. In addition, areas that had completed testing reported delays in receiving results.

"As we have stated previously, while our primary focus must always be on the safety and wellbeing of patients and residents of the units that we are monitoring, we continue to have significant concerns around staff testing in mental health services," said the Chief Executive of The Mental Health Commission, John Farrelly.

"We are concerned at the lack of consistency, standardisation and oversight of this process. It is important that this is not seen as a once-off process and that the process for service wide staff testing is embedded and repeated regularly.

"Staff have been and always will be a key line of defence in the protection of mental health residents and patients. If we want to keep them safe, then we must keep staff safe. We will continue to follow up on this matter with the HSE as a matter of priority."

The Commission is continuing to do everything in its power to uphold the safety, rights and wellbeing of residents and patients of mental health facilities across the country. There are 176 services currently being monitored by the Commission, comprising of 66 in-patient units (services that have always been and continue to be regulated by the Commission), and 110 (unregulated) community residences.

The Commission also confirmed that, as of last Friday, May 1<sup>st</sup>, they have been notified of a total of 13 deaths of residents of mental health services from Covid-19 (an increase of one since the previous week). The Commission also confirmed that there were 55 services reporting suspected or confirmed cases; there were 112 suspected or confirmed cases relating to residents (55 of which were confirmed) and 179 suspected or confirmed cases relating to staff (71 of which were confirmed).

A report of the data gathered by the Commission, along with its general risk assessment report, is issued to the HSE, Department of Health and NPHET at the end of each working week.

"The Commission will continue to work in collaboration with service providers and health officials to do everything we can to uphold the safety, rights and wellbeing of patients and residents of our

mental health facilities by highlighting risks, and escalating any concerns we find on an ongoing basis," added Mr Farrelly.

## **Notes to the Editor:**

### **About the Mental Health Commission**

The Mental Health Commission is an independent statutory body. The primary functions of the Mental Health Commission are to foster and promote high standards of care and good practice in the delivery of mental health services and to ensure that the interests of those involuntarily admitted are protected, pursuant to the Mental Health Act 2001. The Mental Health Commission also has statutory responsibility for the Decision Support Service under the Assisted Decision-Making (Capacity) Act 2015.

### **About the MHC Support & Risk Escalation framework**

The Commission had been in regular contact with the approved in-patient mental health units since the beginning of March in relation to plans to deal with the virus. It was given additional powers at the start of April to risk-rate these units, along with the 24-hour community residences.

The Commission is currently risk-rating 66 in-patient units and 110 community residences.

Combined, these facilities care for more than 3,800 service users across the country.

Since those new powers were introduced on April 1<sup>st</sup>, the Commission has been supporting the HSE by identifying risks at these facilities, through its data information systems, to ensure that the health service is in possession of the correct information and can, if necessary, take immediate and effective action.

The Commission developed a standardised regulatory support framework and is working over the phone with all services to determine their risks in relation to staffing, equipment, premises and specialist support. If risk areas are identified, the Commission escalates those concerns to the highest levels of the HSE. In addition, the Commission has initiated a fast track registration scheme to enable immediate access to new and more suitable buildings.