

Mental Health Services Source Book 1999



# Mental Health Services Source Book 1999



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# Mental Health Services Sectors



O Sector Headquarters

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# Mission Statement

We aim to sustain and develop an equitable, high quality community based mental health service, engaged both in the promotion of health and in the prevention and treatment of illness, which is sensitive and responsive to the needs of those availing of the service; the staff entrusted with its delivery; and the community which it serves.

## Introduction

The last 10 years have seen significant improvement and development in this Board's Mental Health Service. The achievement of many of the core elements of the comprehensive community service model set out in the Government's policy document *Planning for the Future* is indeed a source of pride. Sectorisation and multidisciplinary working have been achieved, the benefits are evident in the integrated approach to delivery of care and the appropriate use of service facilities to the patient's benefit.

The future service system will require well-integrated community-based services where there is continuity of providers and treatments in the context of the care continuum outlined in the Strategy for Mental Health Services (1998). Effectiveness will also require greater liaison with and support from other internal and external providers in the form of welfare, housing and job opportunities. A critical question will be to examine what is actually achieved for those to whom services are provided. Service user opinion and expectation will increasingly need to be considered in terms of the service provided.

This source book provides comprehensive quantitative data on the Catchment Areas and Sector Services within the Mid-Western Health Board with appropriate comparisons with previous years performance. It focuses largely on Adult Psychiatry but also includes data on Old Age Psychiatry and Child & Adolescent Psychiatry. As a reference on performance the data it provides will require our consideration and analysis if it is to generate into real information to influence future service provision and practice.

The crisis intervention project introduced to the Limerick and Clare services is an example of how such data can influence service provision and raises the possibility of including qualitative data and outcome measurements in the Source Book publication.

G. Crowley

Asst. Chief Executive Officer

### 1. COMMUNITY SERVICES

### 1.1 Day Hospitals

There were 35,684 Day Hospital attendances in the Mid-West during 1999, a decrease on the '98 figure of 37,647.

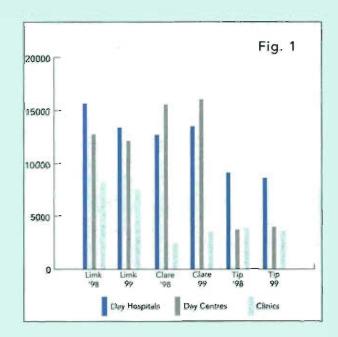
Attendances in Clare increased and attendances in both Limerick and Tipperary decreased.

### 1.2 Day Centres

There were 32,276 Day Centre attendances in 1999, broadly similar to 1998. Attendances in Limerick showed a minor decrease while Clare and Tipperary attendances increased.

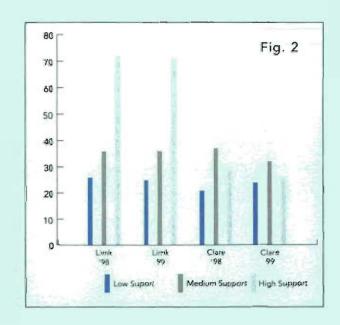
### 1.3 Clinics

There was a slight increase in Clinic attendances in 1999 with a total of 14,726 compared to 14,510 the previous year. Limerick and Tipperary attendances decreased but Clare attendances increased.



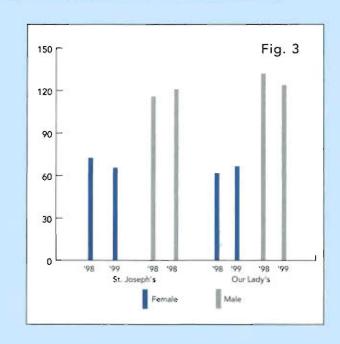
### 2. COMMUNITY RESIDENTS

There were 214 people living in 28 Community Residences in Limerick and Clare at year end 1999. In Clare, the number of residents fell from 87 to 82 and in Limerick from 134 to 132.



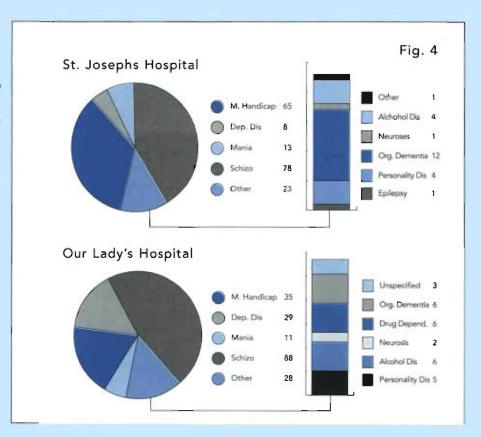
### 1. RESIDENTS IN LONGSTAY CARE

In line with previous years, the number of patients resident in St. Joseph's and Our Lady's Hospitals continued to decline. There were 187 patients resident in St. Joseph's Hospital at year end 1999 - a decrease of 2 on the previous year and 191 in Our Lady's Hospital, a decrease of 3 on the previous year. As in previous years, both hospitals had a significantly higher male than female population.



### 2. IN-PATIENT DIAGNOSIS

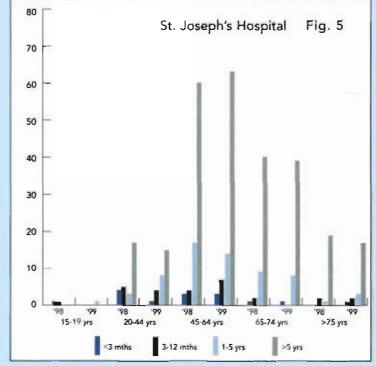
Similar to previous years, the dominant inpatient diagnosis in both hospitals at y/e 1999 was Schizophrenia, accounting for 44% of all in-patients, followed by Mental Handicap with 26%.



### 3. IN-PATIENT AGE AND LENGTH OF STAY

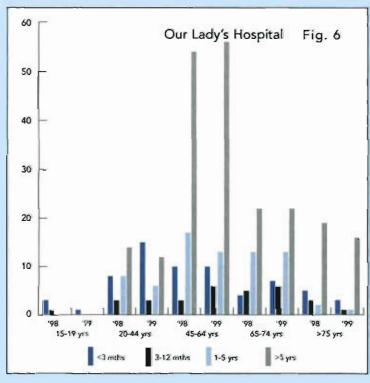
The patient age profile in St. Joseph's Hospital was similar to the 1998 position with very minor variations in each category. 47% of patients were in the 45-64 years age group; 26% were in the 65-74 years category, 15% were aged between 20 and 44, 12% were over 75 years and there was 1 resident in the 15-19 years age group.

72% of patients were resident for longer than 5 years similar to the 1998 position.



The patient age profile in Our Lady's Hospital was broadly similar to the previous year with some slight variations. 45% of patients were in the 45-64 years age group, 25% were aged 65-74, 19% were in the 20-44 years category, with 11% aged over 75 years. There was 1 patient in the 15-19 years age group.

55% of patients were resident for over 5 years - a 1% decrease on the previous year.



### 4. ADMISSIONS PER SECTOR - RATES PER '000

### 4.1 OVERALL

The overall admission rate per '000 dropped from 5.5 to 5.3 in 1999.

### 4.2 LIMERICK

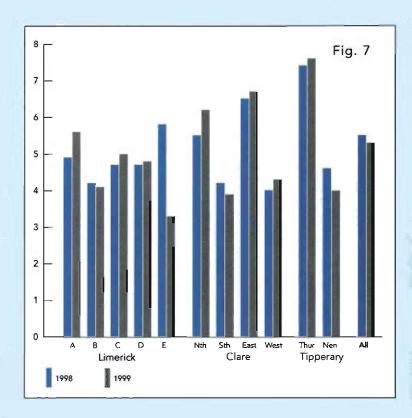
There were 836 admissions to Unit 5B and St. Joseph's in 1999, a decrease of 52 on the previous year. 830 people were admitted to Unit 5B including 18 admissions to the Child & Adolescent Psychiatry Service. Admissions from Sectors A, C and D increased and admissions from Sectors B and E decreased. The admission rate per '000 population for the Limerick catchment area fell from 5.38 to 5.07 in 1999.

### 4.3 CLARE

There were 506 admissions to Our Lady's Hospital during 1999, an increase of 10 on the previous year. Admissions from the North, East and West Sectors increased marginally and there was a slight fall in admissions from the South Sector. The admission rate per '000 population for the Clare catchment area increased from 5.3 to 5.4 in 1999.

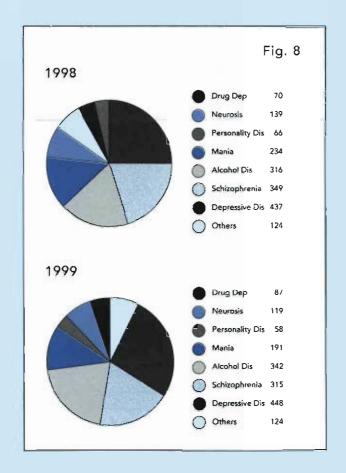
### 4.4 TIPPERARY N.R.

There were 342 admissions to St. Michael's Unit, St. Luke's Hospital during 1999, a slight decrease on the previous year's figure of 351. The admission rate per '000 in the Tipperary N.R. catchment area fell slightly from 6 to 5.9 in the year under review. Admissions from the Thurles sector increased from 220 to 226 and Nenagh Sector admissions fell from 131 to 116 in the year under review.



### 5. OVERALL ADMISSIONS DIAGNOSIS

The dominant admissions diagnosis in 1999 was, similar to previous years, Depressive Disorder accounting for 27% of all admissions compared with 25% in 1998. Alcohol Disorder overtook Schizophrenia as the second most dominant diagnosis with 20% of admissions, compared to 18% in 1998 and 19% of admissions in 1999 were for Schizophrenia, compared to 20% in the previous year.



### 6. ADMISSIONS AGE PROFILE

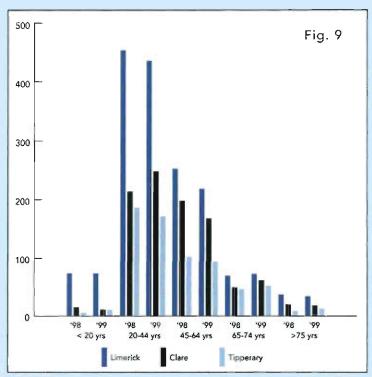
Of a total of 836 admissions to Unit 5B and St. Joseph's Hospital, 52% were in the 20-44 years age group, 26% were aged from 45 to 64 years, 9% were under 20 years, a further 9% were in the 65-74 years category and 4% were over 75 years of age.

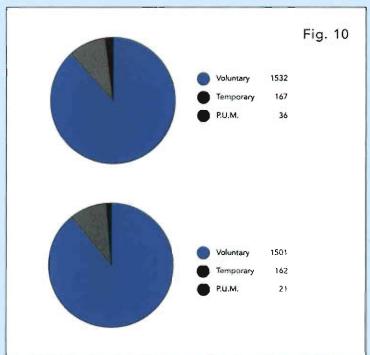
There were 506 admissions to Our Lady's Hospital in 1999, 49% were in the 20-44 years category, 33% were aged from 45 to 64 years, 12% were in the 65-74 years category, 2% were under 20 years of age and 4% were over 75 years.

Tipperary N.R. had 342 admissions in 1999 and 50% of these admissions were in the 20-44 years age group compared to 53% in 1998. 27% of admissions in 1999 were in the 45-64 years age group, 15% were in the category 65-74 years, 4% were over 65 and 3% were under 20 years - an increase of 1.3% on the previous year.

### 7. ADMISSIONS STATUS

89% of all admissions during 1999 were voluntary, 10% were temporary and 1% had P.U.M. status. 19 of the 21 P.U.M. admissions were to Our Lady's Hospital, Ennis.

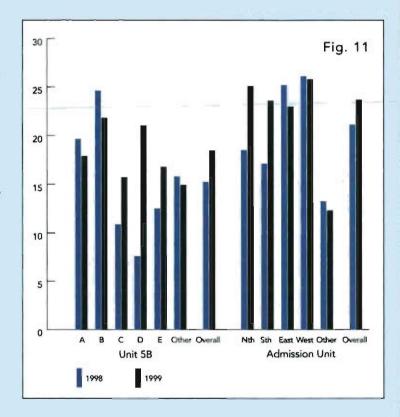




### 8. AVERAGE LENGTH OF STAY - ACUTE CARE

In Unit 5B the overall average length of stay increased from 15.23 days to 18.47 in 1999. There was a decrease in Sectors A and B and an increase in Sector C from 10.87 to 15.72 and Sector E from 12.50 to 16.78. The average length of stay increased significantly in Sector D, from 7.58 to 21.05 in 1999.

The overall length of stay in the Admission Unit, Our Lady's Hospital increased from 21.1 the previous year to 23.7 in 1999. The East and West Sectors average length of stay decreased while the North Sector increased from 18.5 to 25.1 and the South from 17.1 to 23.6 days.



# Catchment Area Reports and Statistics

### LIMERICK MENTAL HEALTH SERVICE - PROFILE 1999

### **COMMUNITY SERVICES**

### DAY HOSPITALS

Location	Sector	Places	Attenders	Attendances
Tevere	А	25	169	3109
St. Annes	В	25	322	2779
Willowdale	С	25	393	2777
Churchtown	D	25	215	2396
Kilmallock	E	25	171	2375
TOTAL		125	1270	13,436

### **OUTPATIENT CLINICS**

Location	Sector	Clinics	Attenders	Attendances
Tevere	А	144	321	2008
St. Annes	В	190	299	1413
Willowdale	С	186	578	1948
Churchtown	D	164	278	1216
Kilmallock*	E	89	271	921
TOTAL		773	1747	7506

<sup>\*</sup> Does not include E.M.I. Clinics

### DAY CENTRES

Location	Places	Attenders	Attendances
Belfield House, Limerick	20	29	4073
Gerald Griffin House, Limerick	20	26	3441
O'Connell House, Newcastle West	25	57	4670
TOTAL	65	112	12,184

### PROFILE 1999

### COMMUNITY RESIDENCES

Status	Residences	Places	Residents
Low Support	5	30	25
Medium Support	6	40	36
High Support	4	76	71
TOTAL	15	146	132

### **IN-PATIENT SERVICES AT 31/12/1999**

### ST. JOSEPHS HOSPITAL

Zones	Wards	Patients
L/Stay High Dependency	3	51
L/Stay Low Dependency	1	21
Medium Acute/Unit 10	1	24
Mental Handicap	3	37
Psycho Geriatric	2	54
TOTAL	10	187

	Wards	Patients
UNIT 5B	1	49

	EXPENDITURE 1999
11.914m 1.949m	Pay Non-Pay
£13.863m	TOTAL

### 1 SECTOR A - TEVERE DAY HOSPITAL

### 1.1 OUT PATIENTS CLINICS

In 1999, 3 Out-Patient Clinics were held weekly - two Return and one for New Referrals. 144 Clinics were held during the year. 80 new referrals and 32 re-referrals were seen in the New Patients Clinics. The total number of attendances at these clinics was 2,008. In addition, 52 Depot Clinics with 1,298 attendances and 37 Clozaril Clinics were held with 120 attendances. It was noteworthy that patients on Clozaril rarely required re-admission to hospital. 46 Lithium Clinics with 164 attendances were held during 1999.

### 1.2 DAY CENTRE

During 1999 the total attendance at Belfield House Day Centre was 4,073, with 29 attenders. 13 of the attenders were hostel or group home residents, the remainder lived at home. Attenders ranged in age from 47 to 74 years, the majority were over 55. 14 clients attended full time on a 5-day per week basis leaving only 6 places for others whose attendances varied from 1-4 days. All attenders were from Sector A, with the exception of 2 clients from Sector C which does not have a Day Centre at present. All referrals were processed through the Sector Team Meeting which is held weekly. A 90-minute session every two weeks was provided by the Senior Occupational Therapist. All other activities were organised by the two nurses assigned to the Unit.

Difficulties encountered at the Day Hospital during 1999 were insufficient domestic allocation and the lack of an intercom door system.

### 1.3 HOSTELS

Sector A is responsible for 3 Hostels -

- New Strand House, a High Support Hostel, with 16 residents and 1 respite bed
- · Lansdowne Park, a Medium Support Hostel, with 4 residents
- · Roma, a Medium Support Hostel, with 6 residents.

All residents are fully occupied during the day and attend a variety of activities such as Raheen Industrial Estate, the Occupational Therapy Unit and Belfield House Day Centre. A number of clients regularly attended art therapy and 5 clients attended music therapy, which was available at Tevere Day Hospital for the first time in 1999.

### 1.4 ACHIEVEMENTS DURING 1999

- Articles were written on agrophobia, depression and suicide by the Consultant in Sector A and have become well known to GPs and, hopefully, have increased their knowledge of mood disorder in particular. This should help in maintaining patients in the community.
- Two Staff Nurses completed the Management Programme at University of Limerick.
- · Five Nurses obtained the Phlebotomy Certificate.
- Three Nursing Staff completed a Bereavement Therapy Programme at Milford Hospice.
- 30% of all patients with addictions completed the After Care Programme.
- The re-referral rate was reduced.

### 1.5 NEW DEVELOPMENTS

A plan has been submitted for an extension to the Day Hospital premises.

### 2 SECTOR B - ST. ANNE'S DAY HOSPITAL

### 2.1 DAY HOSPITAL ACTIVITY

There were 2,779 attendances to St. Anne's Day Hospital in 1999 with a total of 322 attenders compared to 274 attenders having 3965 attendances in the previous year. This decrease in attendances is attributable to the quicker discharge of patients and attenders being reviewed less frequently.

### 2.2 OUT-PATIENT CLINICS

There was a slight decrease in attendances at Out-Patient Clinics in 1999 - from 1,659 in 1998 to 1,413 in the year under review. Attenders decreased from 306 to 299.

### 2.3 DAY CENTRE

26 attenders had 3,441 attendances at Gerald Griffin House Day Centre during 1999 compared to 23 attenders and 3,633 attendances in the previous year. It continued to provide places to Sector C owing to the absence of a day centre in this sector.

### 2.4 SERVICE REQUIREMENTS

- · Lack of space in the Day Hospital continued to impinge on service delivery.
- · Storage of files remained to be resolved.
- · There is an urgent need for a High Support Hostel for Sector B.

### 3 SECTOR C - WILLOWDALE DAY HOSPITAL

### 3.1 DAY HOSPITAL ACTIVITY

There was an increase in the number of people attending the Day Hospital in 1999 - from 223 in 1998 to 393 in the year under review. Attendances fell in 1999 - from 3,054 in the previous year to 2,777 in 1999.

### 3.2 OUT PATIENT CLINICS

186 out-patient clinics were held in 1999 and 578 people attended, with a total of 1,948 attendances - an increase on the previous year where 378 attenders had 1,756 attendances.

### 3.3 DEVELOPMENTS

- · An Occupational Therapist joined the team in 1999, working half a day per week on site.
- For the first time, a trainee Counsellor was assigned to the Addiction Department until May 1999.
- In conjunction with the University of Limerick, music therapy was available to patients from October to December 1999.

### 3.4 PRESSURE POINTS

- Since April 1999 Sector C has been without the services of a Psychologist and are dependent on the availability of psychologists from other Sectors.
- · The Sector is awaiting the completion of a purpose built Day Centre in St. Joseph's Street.
- There are insufficient personal safety alarms available the number needs to be increased from 4 to 10.

### 3.5 STAFF DEVELOPMENTS

An important emphasis is placed on staff development, both in the acquisition of new knowledge and skills, and the revisal and updating of old ones. During 1999 members of the team took part in the following courses/seminars:

- · Bereavement Support Training, run in conjunction with Milford Hospice
- Venepuncture
- Certificate in Family Mediation
- Distance Education leading to a B.A.
- Developments in Mental Health and Psychiatric Nursing.
- · Internal Training with the Health Promotion Unit
- Woman's Regional Network, organised by the Mid-Western Health Board in conjunction with Change Management Training.
- · Foundation Course in Counselling Skills
- Supervision Course for Addiction Counsellors
- · Nursing Officer assigned to ACNO position, Community Services for six months
- Staff Nurse assigned to Liaison Nursing Officer post for six months
- · Addiction Counsellor and Nursing Officer worked on Project Team in the Acute Unit.

### 4 SECTOR D - CHURCHTOWN DAY HOSPITAL

### 4.1 DAY HOSPITAL ACTIVITY

215 people attended Churchtown Day Hospital in 1999 and had a total of 2,396 attendances - a reduction on the 1998 figure. The team adopted a time specific approach to Therapy Sessions in 1999, benefiting both client and therapist, by providing quality time. The nine day nursing strike also impacted in reducing attendances at the Day Hospital.

### 4.2 OUT PATIENT CLINICS

Out patient clinics continued to be held in Churchtown, Foynes and Abbeyfeale. Four sessions were held per week. Attendances at Clinics decreased by 36 during 1999 to 1,216, due to the restructuring of the clinic following a clinic Audit. Waiting times for appointment were reduced significantly to 15-30 minutes maximum. 54 Depot Clinics were held during the year with 555 attendances.

### 4.3 DEVELOPMENTS

### Clinic Audit

A six month Clinic Audit was completed and the restructuring of the Clinic proved effective. The Audit measured Clinic waiting times and practices.

### Team Development Day

Two Team Development Days were held in 1999. The first detailed incidences of suicides in Sector D, and the team's response to crisis management. The second meeting was a Workshop on accommodation needs for clients in the Sector.

### Restructuring of Team Meetings

A regular weekly Team Meeting was held in Unit 5B to discuss in-patients and pertinent out-patients. The Day Hospital Team Meeting is held monthly to discuss out-patients and Day Hospital business.

### Ongoing Education

Guest speakers were invited to the latter part of the Day Hospital. Team Meetings to speak on various topics relevant to work practices, e.g. child abuse, domestic violence, The National Training & Development Institute.

Formal Referral Forms were drawn up to aid direct referrals for respite admission and Day Centre activity in O'Connell House.

### Performance Indicators

Waiting Time for Out Patient Appointment : 4 weeks
Waiting Time at Clinic : 15-30 minutes
Waiting Time for Psychology Appointment : 2 months

Waiting Time for Addiction Services : Max. 2 weeks, often seen on day at OPD Waiting Time for Social Worker Appointment : Max. 2 weeks. Crisis seen urgently Waiting Time for Occupational Therapist Appt : Max. 2 weeks. Crisis seen urgently.

### Art Classes & Flower Arranging

Five Classes were enthusiastically attended.

### 4.4 DEVELOPMENTS FOR 2000

### Day Hospital Booklet

A draft copy of the Churchtown Day Hospital Booklet will be forwarded to the Executive Committee, with a view to seeking approval for funding to publish same to a professional standard. It is envisaged that each G.P. in the Sector will be furnished with copies of this booklet

### Secretarial Services

It is hoped that the pressing issue of increasing secretarial services from three to five days per week will be addressed this year.

### Carers Group

This group was due to commence in 1999 but difficulties arose for relatives attending a six session course. It is hoped to commence same on a trial basis of two full mornings.

### Team Development Days

The Team Development Days will continue. It is envisaged to hold two per year, to develop policies and procedures pertinent to Sector D needs.

### 5 SECTOR E - KILMALLOCK DAY HOSPITAL

### 5.1 DAY HOSPITAL ACTIVITY

There were 2,375 attendances in Kilmallock Day Hospital during 1999, an increase on the previous year. This increase is mainly due to -

- Increase in referrals from the Clinic to the Day Hospital for individual & group sessions
- People with long term mental illness who had two or more admissions during the previous year to the Acute Unit 5B, attended more
  often.
- A Psychologist was assigned for one session weekly during 1999.

### 5.2 OLD AGE PSYCHIATRY

11 clinics for the Elderly Mentally Infirm were held in the Day Hospital during 1999.

### 5.3 OUT-PATIENT CLINICS

There were 921 attendances at Out-Patient Clinics during 1999, a reduction on the 1998 figure. This reduction is due to the restructuring of clinics according to diagnosis.

### 5.4 DEVELOPMENTS DURING 1999

### · Reclassification of Clinics under Diagnosis

- All clinics are now scheduled by diagnosis only, allowing patients of the same diagnosis to be seen at a clinic appropriate to their needs following a request for this development from G.P.s in the area.
- All patients are given an individual appointment time. There is no delay in waiting to be seen at the Psychiatric Out-Patient Clinic.

### Lithium Clinic

Having researched the latest literature on monitoring Lithium bloods, the monitoring of bloods was reduced from 4 times yearly to twice yearly.

### Clozaril Clinic

The Clozaril clinics which were held fortnightly were reduced to once monthly since March 1999. This was done on advice sought from the manufacturers.

### Research Study

During the year a Patient Satisfaction Survey was undertaken based on an Italian Study - this was completed in December.

### Auditing of Notes

Auditing of notes at the Day Hospital commenced in October. Two charts were selected at random and were audited for completion of clinical, demographic and other relevant data. This auditing of notes will continue on a once monthly basis.

### Admission to Acute Unit 5B

Direct admissions from the day hospital to the Acute Unit decreased significantly during the year. This reduction was due to a number of factors

- more regular attendance at the Day Hospital of patients who are at risk.

### 5.5 FUTURE DEVELOPMENTS

- It is planned to update the Day Hospital Information Brochure during 2000.
- The Day Centre will be opened during mid-2000.
- · The newly classified clinics and appointments times will be reviewed during the year.
- · An evaluation on the effectiveness of clinical intervention will be undertaken.
- Bipolar Disorder Study It is planned to be involved in the Global Phase 3 study in comparing the use of Olanzapine versus Lithium in relapse prevention of Bipolar Disorder.
- Clinical Audit of Notes The Clinical Audit of notes will continue during 2000.
- When the patient satisfaction survey is analysed it is planned to examine the results and implement them if required.

### 5.6 PRESSURE AREAS

- There is a lack of accommodation to facilitate all the disciplines at the Day Hospital. A schedule of accommodation was submitted to
  the Technical Services Department two years ago and as yet no response has been forthcoming. This accommodation is urgently
  required.
- Full time secretarial service is required as the secretarial workload has increased with the restructuring of clinics.

### 6 OLD AGE PSYCHIATRY

The purpose of the Limerick Psychiatry of Old Age service is to promote mental health and to restore those people over the age of 65 years with late onset of mental illness to as independent and normal a life as possible. It provides a service to two groups of patients:

- 1. Those over 65 years who develop functional illness for the first time.
- 2. Those with dementia and associated behavioural problems of psychiatric disorder

The service is community oriented with an emphasis on domiciliary assessment and management. This is provided by the specialist multidisciplinary team with access to day hospital, acute, respite and continuing care beds when necessary.

- A Senior Registrar in Old Age Psychiatry was appointed to the service on the 1st of July 2000. This post is a part of the National Higher Training Scheme in Psychiatry.
- A part-time social worker has commenced employment with the service this post had been vacant for twelve months. The Senior Clinical Psychologist post is currently vacant but has been re-advertised on a temporary basis.
- . The service continues to expand with an increasing number of referrals. It continues to operate a community-oriented service.
- The Day Hospital will need to be extended or alternative accommodation provided as it is currently inadequate.

### NON-MEDICAL SERVICES

### 7 PSYCHOLOGY DEPARTMENT

The Psychology Department endeavoured to maintain a high level of service during 1999 despite staff shortages. The problem of staff recruitment occupied the Department during the year and several options were explored to address the recruitment shortage, including

- Training options such as the PSI Diploma in Clinical Psychology.
- Modifications to the structure of the existing UCD Clinical course.
- Setting up alternative training courses.
- Changes to the career structure are essential to retain staff and were under review during 1999.

A permanent Clinical Psychologist was appointed to Sector B in February 1999, bringing the staff complement in the Psychology Department to four basic grade Clinical Psychologists and one Snr. Clinical Psychologists.

### 7.1 CONTINUING PROFESSIONAL DEVELOPMENT

Clinical Psychologists in Limerick Mental Health Services, together with their colleagues in Clare and North Tipperary again ran a Continuing Professional Development Programme (CPD). The topics discussed ranged from Suicide and Bereavement, Grief Reactions, Assessment of Dangerousness, Chronic Fatigue Syndrome, Therapeutic Alliance, ADHD, Obsessive Compulsive Disorders and Personality Disorders to a research proposal on Spouse Abuse.

### 7.2 PSYCHOLOGY DEPARTMENT ACTIVITY

### Teaching Activity

M PSYCH Science Course UCD - The Psychology Department continued the close involvement in both the teaching and supervision aspect of this course. In 1999 one Clinical Psychologist in training completed the placement and another took up training and will complete in early 2000.

Certified Course in Behavioural Therapy for Nurses - 3 Nurses from the Mid-Western Health Board completed this course in 1999 and were supervised by Psychologists and nurses from the Limerick Mental Health Services.

### Lectures

In 1999, Psychologists gave lectures to student Nurses, students in Behavioural Therapy for Nurses, other postgraduate nurse training courses, Mental Health Associations, Parents Groups and other voluntary groups.

### Training

In addition to compiling the Professional Development Programme, specific training needs were identified in the areas of Attention Deficit and Hyperactivity Disorder (ADHD) and Neuropsychology. A workshop was conducted for ADHD and further workshops planned for 2000. A series of workshops were also planned in the area of Neuropsychology for 2000. All Psychologists attended workshops in Risk Analysis Assessment and Management and Assessing Credibility at Trinity College Dublin.

### Values to Action Programme

This programme was designed to develop an ethos of client-centred treatment within Limerick Mental Health Service. Clinical Psychologists provided a teaching resource to this programme.

### Supervision

The Senior Clinical Psychologist continued supervising the Counselling Midwife in the Regional Maternity Hospital, Limerick, for issues relating to counselling and the application of psychological methods in her work. All Clinical Psychologists are part of the peer supervision network for the region. Local and regional peer supervision sessions are conducted fortnightly in an alternating sequence.

### NON-MEDICAL SERVICES

### 7.3 RESEARCH

The Department has struggled to support the level of research activity commensurate with training. This is one of the key result areas targeted for 2000.

A Clinical Evaluation study of a therapeutic group was conducted in Willowdale Day Hospital. The group was aimed at clients attending the Day Hospital whose communication style contributed to the aetiology of their presenting problems. The group's aims were:

- to find support from other people in the group
- to enhance and teach new methods to cope
- to help clients to realise the knock on effects of making behavioural changes in their lives.
- to provide information about local resources etc.
- · to enhance and teach new communication skills.

A 6-week course in positive communication skills was provided for 6 clients at Willowdale Day Hospital. All clients enthusiastically took part in the course and reported an improvement in their general mental health and their communication skills on formal and informal measures.

### 7.4 FUTURE DEVELOPMENTS

- It is hoped to agree a strategy for the recruitment and training of Clinical Psychologists early in 2000.
- The operation of an ongoing clinical evaluation protocol for all Clinical Psychologist therapy work is a priority for 2000.
- A review of psychological activity in multidisciplinary teams is also proposed for 2000.

### NON MEDICAL SERVICES

### 8 SOCIAL WORK DEPARTMENT

### 8.1 SERVICE DEVELOPMENTS

A trend analysis of referrals showed that many are linked to social adversity such as family violence, long-term unemployment and marital breakdown. The skills used are geared towards reducing the impact of socio-economic factors on people with mental illness and empowering them to enable access to networks of rights and entitlements as well as aiming for overall improvement in quality of life.

Access to information promotes mental health. In 1999 an Information Clinic was started in Unit 5B, dealing with specific requests from patients on a variety of topics, e.g. family law, welfare, accommodation options etc. This clinic complements the information flip chart on display in the ward.

Placement Problems - these referrals comprised a relatively small percentage of referrals but took up an enormous amount of time. They included people who sometimes take up an acute bed, so a speedy response has resource implications. The good relations fostered with hostels in Limerick City resulted in a number of placements as staff were made aware of follow-up from Day Hospitals. The local authorities were more responsive to clients due to constant advocacy on their behalf. The Senior Social Worker responded to complaints by voluntary hostel managers in the Housing Forum that the Health Board was not adequately responding to the needs of a special category of homeless persons. Meetings were arranged and special arrangements were made regarding liaison with hostels to ensure a speedy response where appropriate, this also involved close co-operation with the CWO for the Homeless Unit and provided a good example of the integration of services. The Senior Social Worker also worked closely with the General Manager to deal with crisis cases involving discharge of homeless people from the Regional Hospital and meetings were held with the Bed Manager in the Regional Hospital to ensure that Dept. of Health guidelines on discharge of homeless persons were implemented.

A feature of the social work function is the ability and willingness to co-work with other disciplines and to develop close links with other networks. Training courses and particular skills are brought to the sector teams. Since the deployment of a full time social worker to Sector D there was increased co-working with psychology, addiction counselling and nursing staff - particularly in the area of groups, e.g. Post Discharge & Women's Groups. The Social Worker in Sector C had an increase of referrals for eating disorders as a result of facilitating the Bodywhys Support Group. This Social Worker is nearing completion of a mediation course and this will enhance the skills base in the team.

### NON-MEDICAL SERVICES

### 9 OCCUPATIONAL THERAPY DEPARTMENT

### 9.1 STAFFING

Until September 1999 there was only one Senior Occupational Therapist, covering three of the five Sectors with minimum input in Unit 5B. In September 1999 a basic grade Occupational Therapist joined the service with responsibility for one Day Hospital and in-patient treatment. Another basic grade post is planned for 2000.

### 9.2 ACUTE UNIT 5B

For the first part of 1999 the Occupational Therapy cover in Unit 5B matched the input provided by other non-medical disciplines on a sessional basis. However, from September 1999, Occupational Therapy involvement in Unit 5B increased to a part-time service provided mainly on an individual referral basis. In 2000, this service will be broadened with the appointment of an extra basic grade post and more comprehensive service provision is planned in Unit 5B.

### 9.3 DAY HOSPITAL ACTIVITY

Occupational Therapy services were provided in three of the five Day Hospitals during 1999. The service provided included individual assessments, treatments and group work. Groups included:-

- Assertiveness Training
- Independent Living Skills Group
- Women's Support Groups

With increased staffing, an O.T. Service for St. Anne's and Kilmallock Day Hospitals is planned. Cover for Ashleigh Lodge is also planned in 2000.

### 9.4 CARERS SUPPORT GROUP/SCHIZOPHRENIA IRELAND

The O.T. Service started a Limerick Carers Support Group in late 1998. The group meets once monthly and offers support to carers of people with schizophrenia in the Limerick region.

### 9.5 TRAINING 1999

- Eating Disorders Course on the use of treatments in the Maudsley Hospital, London/St. John of Gods
- · Group Work Course/Health Promotion Unit
- Stress Management Course
- · Student Supervision Course/College of Occupational Therapy

### 9.6 FUTURE DEVELOPMENTS

All of the five area Sectors include the appointment of an Occupational Therapist in their Service Plans. To date only two permanent posts and one temporary post are sanctioned for the service. The provision of as comprehensive a service as possible will be the priority of the O.T. Service, including seeking sanction for further posts as positions are filled.

### 1 ST. JOSEPH'S HOSPITAL

Inpatient numbers in St. Joseph's Hospital continued to fall, continuing the trend from previous years. There were 187 patients in residence at year end 1999. The dominant in-patient diagnosis was, similar to the previous year, Schizophrenia, accounting for 42% of in-patients.

### 1.1 DEVELOPMENTS IN 1999

- In Sieptember 1999 the School of Nursing in St. Joseph's Hospital recommenced psychiatric nurse education and training with the intake of 26 student nurses.
- A Co-ordinator and a Resource Person were appointed to manage and implement the Board's Suicide Prevention Plan.
- A Project interviewer was appointed to collate data for a study into the genetic factors inherent in alcohol abuse in collaboration with the Health Research Board.
- A multi-disciplinary group of staff underwent training on the diagnosis and treatment of ADHD.
- The Daughters of Charity, in co-operation with the Board commenced building 6 bungalows to facilitate the transfer of 36 persons
  with an intellectual disability from St. Joseph's Psychiatric Hospital to a more appropriate environment.

### 1.2 ACUTE ADMISSION UNIT - UNIT 5B

Admissions to the Acute Unit fell from 881 in 1998 to 830 in 1999. In line with previous years, the dominant admission diagnosis was depressive disorder, accounting for 28% of admissions, followed by Alcohol Disorder with 21% and Schizophrenia with 16%.

### Developments in 1999

- An Out of Hours Crisis Intervention Service was developed with the appointment of Crisis Intervention Nurses. This service ensured
  continuity of treatment with the sector teams and helped to prevent unnecessary admission to the Acute Unit.
- . A new Patient Chart was introduced to provide improved patient demographic information and enhance the process of clinical audit.

### DAY HOSPITALS

Sector/Location/Year		No. of Places	No. of Places Attendances		Attenders	
Sector/Location/ (	300)	140. Of Flaces	Attendances	New	Return	Total
A. Tevere	'98	25	3755	59	179	238
	'99	25	3109	34	135	169
B. St. Anne's	′98	25	3965	51	223	274
	'99	25	2779	42	280	322
C. Willowdale	'98	25	3054	29	194	223
	'99	25	2777	63	330	393
D. Churchtown	′98	25	2735	11	211	222
	′99	25	2396	9	206	215
E. Kilmallock	'98	25	2190	*	178	178
	'99	25	2375	*	171	171
TOTAL	'98	125	15,699	150	985	1135
	'99	125	13,436	148	1122	1270

<sup>\*1</sup>st referrals to Out-Patient Clinic

### DAY CENTRES

Sector/Location/Year		Places Available	Attenders	Attendances
	'98	20	31	4134
	'99	20	29	4073
B. Gerald Griffin Hse.	'98	20	23	3633
	'99	20	26	3441
The state of the s	'98	25	63	5013
	'99	25	57	4670
	'98	65	117	12,780
	'99	65	112	12,184

CLINICS

MENTAL HEALTH OUT-PATIENT CLINIC ACTIVITY Y/E 31ST DECEMBER

Sector/Location/Year	No. of Clinics	No. of Attenders	N	o. of Attendan	ces
Sector/Location/ Tear	No. of Clinics	No. of Attenders	New	Return	Total
A. Tevere '98	143	358	92	1998	2090
199	144	321	112	1896	2008
B. St. Anne's '98	182	306	61	1598	1659
′99	190	299	66	1347	1413
C. Willowdale '98	184	378	136	1620	1756
'99	186	578	190	1758	1948
D. Newcastle West '98	175	295	91	1268	1359
Foynes	12	36	5	124	129
Abbeyfeale	11	28	4	85	89
Total	198	359	100	1477	1577
Newcastle West '99	164	278	80	977	1057
Foynes	12	25	1	95	96
Abbeyfeale	11	14	1	62	63
Total	187	317	82	1134	1216
E. Kilmallock '98	95	285	83	974	1057
199	89	271	112	809	921
OVERALL TOTAL '98	802	1686	472	7667	8139
′99	796	1786	562	6944	7506

### DIAGNOSIS - CLINIC ATTENDERS 1999

Sector	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
А	1	65	8	74	26	78
В	2	70	9	87	12	68
С	5	101	11	136	37	83
D	2	65	3	128	33	38
E		68	3	72	50	40
TOTAL	10	369	34	497	158	307
Sector	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	All Diagnoses
A	8	31	23	5	2	321
В	8	22	15	1	5	299
С	23	48	19	11	104	578
D	5	26	1	3	13	317
E	2	22	-	3	11	271
TOTAL	46	149	58	23	135	1786

### DEPOT, LITHIUM AND CLOZARIL CLINICS

Sector	Location	ation Clinic Type		Clinics	Attendances	
Sector	Location	Cillic Type	1998	1999	1998	1999
Α.	Tevere	Depot Lithium Clozaril	52 - 36	52 12 37	1418 - 141	1298 164 120
В.	St. Anne's	Depot Clozaril	52 52	52 29	1185 89	1096 80
C.	Willowdale	Depot Lithium Clozaril	52 52 26	52 31 17	1086 89 78	996 101 49
D.	Churchtown	Depot	56	54	507	555
E.	Kilmallock	Depot Lithium Clozaril	52 4 26	52 2 14	549 70 96	585 51 36
	TOTAL	Depot Lithium Clozaril	264 56 140	262 45 97	4745 159 404	4530 316 285
	OVERALL		460	437	5308	5131

### COMMUNITY RESIDENCES

2 SA W SA WAY	200	,,	Pla	ices	Residents at 31/12		
Sector/Location/Year	Status		1998	1999	1998	1999	
A. Lansdowne Park	Medium	Support	5	6	4	4	
Shelbourne Road	Medium	Support	6	6	6	6	
New Strand House	High Su	pport	16	16	16	16	
B. Garryowen	Low Sup	port	4	4	4	4	
Johnsgate	Low Sup	port	10	10	9	8	
C. Norbiton Hill	Low Sup	port	6	6	4	5	
St. Joseph's Street	Low Sup	port	4	4	4	4	
2/3 Verona Tce.	Medium	Support	7	6	6	6	
Vizes Court	Medium	Support	10	10	10	9	
Beech Hill	Medium	Support	6	6	5	5	
Ferndale Lodge	Medium	Support	6	6	5	6	
Ivernia House	High Su	port	15	15	15	15	
Ferndale	High 5u	oport	20	20	19	19	
D. Maple Lodge	Low Sup	port	6	6	5	4	
O'Connell House	High Support		23	25	22	21	
TOTAL	1998	1999	1998	1999	1998	1999	
Low Support	5	5	30	30	26	25	
Medium Support	6	6	40	40	36	36	
High Support	4	4	74	76	72	71	
OVERALL TOTALS	15	15	144	146	134	132	

### NON-MEDICAL ACTIVITY

### PSYCHOLOGY DEPARTMENT

Sector	1.00	A	В	С	D	E	Total
Clients	'98	47	56	20*	76	17	216
	'99	27	52	40	81	31	231
Consultations	'98	227	264	185	688	112	1476
	'99	213	296	177	455	84	1225
Groups	′98	12	23	5	7		47
	'99	16	75	8	22	S	121

<sup>\*</sup>No full time psychology service in Sector C from April 1998

### SOCIAL WORK DEPARTMENT

Sectors	43	А	В	С	D	E	Unit 5B	Total
Sessions per Week	'98 '99	5 5	5 5	9	3 8	3	2 3	27 33
Referrals	'98 '99	119 55	119 126	179 133	68 92	57 69		542 475

### NON-MEDICAL ACTIVITY

### SOCIAL WORK DEPARTMENT

Reason for Referral	Number Referred			
Reason for Referral	1998	1999*		
Individual Counselling/ Family Intervention	184	137		
Welfare Work	108	80		
Family Law	59	44		
Placement	99	84		
Social Work Assessment	57	44		
Other	35	31		
TOTAL	542	420		

<sup>\*</sup>Breakdown of Sector A referrals not available

### OCCUPATIONAL THERAPY DEPARTMENT

Sector	Attendance	e at Groups	No. of Individuals seen In-Patient and Out-Patient		
Sector	1998	1999*	1998	1999	
A	55	150	165	157	
В	306	95	53	19	
С	1.50	120	95	137	
D	152	205	196	210	
E	191	65	20	35	
Unit 5B	456				
TOTAL	969	635	529	558	

<sup>\*</sup>Includes in-patient and out-patient activity per sector

### ACUTE IN-PATIENT SERVICES - UNIT 5B

### POSITION AT 31ST DECEMBER

Year	Number of Beds	Number of Wards	Number in Residence	Male	Female
1998	50	1	46	21	25
1999	50	1	49	33	16

### IN-PATIENTS: LEGAL STATUS

Year	Temporary	Voluntary	P.U.M.	TOTAL
1998	7	39	-	46
1999	11	38	-	49

### IN-PATIENT DIAGNOSIS

Year	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	2	7	14	17	5	5
1999	•	10		18	3	5
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	All Diagnoses
1998	1	6	2	1	¥	46
1999	2	6	5	-	-	49

### IN-PATIENTS AGE AND LENGTH OF STAY 31ST DECEMBER

Age		15-19	20-44	45-64	65-74	>75	All	% of Hospital/
Length of Stay	Length of Stay						Ages	Unit Population
< 3 Months	'98	2	15	13	8	2	40	86.96%
	′99	4	23	12	8	-	47	95.92%
3-12 Months	′98	2	1	1	2	-	6	13.04%
	'99	-	2	2.50	(2)	-	2	4.08%
1-5 Years	'98	-	-	-	45	1.5	- -	
	'99	-	-	-	5.4:1		-	2
> 5 Years	′98		-	-	-	-	-	35
	'99	2 /	-	-	-	-	-	-
All Lengths of	′98	4	16	14	10	2	46	100%
Stay	'99	4	25	12	8	-	49	100%
% of Hosp./Unit	<b>'98</b>	8.7%	34.78%	30.43%	21.74%	4.35%	-	100%
Population	'99	8.16%	51.02%	24.49%	16.32%		-	100%

## ACUTE IN-PATIENT SERVICE - UNIT 5B

## ADMISSIONS: BY SECTOR

Sector	Total Ad	missions	1st Admissions		1st Admission as a % of Total Admissions	
Sector	1998	1999	1998	1999	1998	1999
A	144	162	26	30	18.06%	18.52%
В	176	172	37	39	21.02%	22.67%
С	188	194	41	32	21.81%	16.49%
D	153	156	50	33	32.68%	21.15%
E	128	73	21	19	16.41%	26.02%
Others	92	73	32	26	34.78%	35.62%
TOTAL	881	830	207	179	23.50%	21.55%

## **ADMISSIONS: LEGAL STATUS**

Tem		porary	Volu	intary	P.L	J.M.	Total
Year Male	Female Male	Male	Female	Male	Female		
1998	51	44	418	364	1	3	881
1999	55	24	398	352	1	-	830

## ACUTE IN-PATIENT SERVICES - UNIT 5B

## ADMISSION RATE PER '000 BY SECTOR

Sector	Population	Admi	ssions	Rates per '000	
		1998	1999	1998	1999
A	29,242	144	162	4.92	5.54
В	41,561	176	172	4.23	4.14
С	39,476	188	194	4.76	4.91
D	32,823	153	156	4.66	4.75
E	21,940	128	73	5.82	3.33
Others	2	92	73	Tuk	-
TOTAL	165,042	*881	**830	5.33	5.03

<sup>\*</sup>Includes 17 admissions to Child & Adolescent Psychiatry service \*\*Includes 18 admissions to Child & Adolescent Psychiatry service

# ADMISSIONS: DIAGNOSIS

Year	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	28	139	9	225	139	73
1999	9	134	16	230	97	60
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	All Diagnoses
1998	44	158	40	16	10	881
1999	52	171	44	10	7	830

# ADMISSIONS: AGE ANALYSIS

Year	< 15	15-19	20-44	45-64	65-74	> 75	All Ages
1998	6	68	449	252	70	36	881
1999	4	70	433	218	72	33	830

# ACUTE IN-PATIENT SERVICES - UNIT 5B

# DISCHARGES

Sector	Discharges (Inc	luding Deaths)	Dea	aths
	1998	1999	1998	1999
A	129	137		-
В	146	157	1	1
С	157	179	-	1
D	145	148	-	1
Ē	132	72	-	-
Others	85	62	-	-
TOTAL	794	<b>7</b> 55	1	3

# UNIT USAGE

Sector	Beds A	vailable	Average Le	ngth of Stay	
	1998	1999	1998	1999	
А	10	10	19.63	17.90	
В	11	11	24.61	21.82	
С	12	12	10.87	15.72	
D	10	10	7.58	21.05	
Е	7	7	12.50	16.78	
Other	-	-	15.79	14.93	
TOTAL	50	50	15.23	18.47	

## POSITION AT 31ST DECEMBER

Year	Number of Beds	Number of Wards	Number in Residence	Male	Female	
1998	195	10	189	116	73	
1999	192	10	187	121	66	

## IN-PATIENTS: LEGAL STATUS

Year	Temporary	Voluntary	P.U.M.	TOTAL
1998	11	165	13	189
1999	7	167	13	187

## NEW LONGSTAY

	Number who became New Longstay during the Year								
Year	< 65 Years	> 65 Years	Total						
1998	6	4	10						
1999	9	4	13						

## IN-PATIENT DIAGNOSIS

Year	Organic/ Demontia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	8	80	NO THE STATE OF	11	13	1
1999	12	78		8	13	1
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	All Diagnoses
1998	4	2	72.1	68	1 =	189
1999	4	4		65	2	187

### AGE AND LENGTH OF STAY OF ALL PATIENTS AT 31ST DECEMBER

Age Length of Stay		15-19	20-44	45-64	65-74	>75	All Ages	% of Hospital/ Unit Population
< 3 Months	'98 '99	1	4	3	1	- 1	9	4.76% 3.21%
3-12 Months	'98 '99	1 -	5 4	4 7	2	2 2	14 13	7.41% 6.95%
1-5 Years	'98 '99	- 1	3 8	17 14	9 8	1 3	30 34	15.87% 18.18%
> 5 Years	'98 '99		17 15	60 63	40 39	19 17	136 134	71.96% 71.66%
All Lengths of Stay	'98 '99	2	29 28	84 87	52 48	22 23	189 187	100% 100%
% of Hosp./Unit Population	'98 '99	1.1% 0.53%	15.3% 14.97%	44.4% 46.52%	27.5% 25.67%	11.6% 12.31%	100% 100%	100% 100%

# ADMISSIONS: BY SECTOR

Contac	Total Admissions		1st Admissions		1st Admission as a % of Total Admissions	
Sector	1998	1999	1998	1999	1998	1999
A	1	1	1	1	100%	100%
В	5)	•		-	-	•
С	6	3	-	-	-	11
D	4	1	-		-	.7
E	-	+0	-	-	-	100
Others	#S	1	-	-	-	=
TOTAL	7	6	1	1	14.3%	16.67%

### ADMISSIONS: LEGAL STATUS

and a	Temporary		Temporary Voluntary		P.U.M.		Total
Year	Male	Female	Male	Female	Male	Female	
1998	1	-	2	4	-	-	7
1999			3	3			6

## ADMISSION RATE PER '000 BY SECTOR

Sector	Population	Admi	ssions	Rates p	er '000
	M 1 48	1998	1999	1998	1999
А	29,242	1	1	0.03	0.03
В	41,561	-	-	-	
С	39,476	6	3	0.15	0.08
D	32,823	-	1	-	0.03
Е	21,940	-	-	-	-
Others	-	-	1	-	-
TOTAL	165,042	7	6	0.04	0.04

## ADMISSIONS: DIAGNOSIS

Year	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	-	2		-	+	-
1999		1		1	-	-
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	All Diagnoses
1998	4	2	-	-	1	7
1999	-	3	-		1	6

# ADMISSIONS: AGE ANALYSIS

Year	< 15	15-19	20-44	45-64	65-74	> 75	All Ages
1998	-		5	1		1	7
1999	•	-	3	1	1	1	6

### DISCHARGES

Sector	Discharges (Inc	cluding Deaths)	Deaths		
	1998	1999	1998	1999	
A	24	27	2	4	
В	22	12	3	1	
С	27	16	2	4	
D	8	13	3	4	
E	5	3	-	2	
Others	3	9	-		
TOTAL	89	80	10	15	

## TRANSFERS IN - FROM UNIT 5B

Sector	1998	1999
A Said	27	27
В	33	22
С	31	21
D	10	13
E) 14()	5	2
Other	2	9
TOTAL	108	94

## HOSPITAL REHABILITATION SERVICES

## REHABILITATION UNIT

Name/Location	Year	Number of Residents at 31st December	Total Number who Resided in Rehab Unit during Year	Average Length of Stay in Rehab Unit
Ashleigh Lodge,	'98	10	19	6-12 months
Mulgrave Street, Limerick	'99	10	16	12 months

# INDUSTRIAL/OCCUPATIONAL THERAPY UNITS

Mulgrave Street Enterprise Centre		Number of Units	Total Number of In-Patients who Attended	Total Number of Out-Patients who Attended	Average Daily Attendances
Industrial Therapy	'98	1	6	29	35
	'99	1	6	30	32
Occupational	'98	1	45	6	50
Therapy Activation	'99	1	40*	2	20
TOTAL	'98	2	51	35	85
	'99	2	46	32	52

<sup>\*</sup>Sessional

## POSITION AT 31ST DECEMBER

Year	Number of Beds	Number of Wards	Number in Residence	Male	Female
1998	245	11	235	137	98
1999	242	11	236	154	82

## IN-PATIENTS: LEGAL STATUS

Year	Temporary	Voluntary	P.U.M.	Total
1998	18	204	13	235
1999	18	205	13	236

### IN-PATIENT: DIAGNOSIS

Year	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	10	87	-	28	18	6
1999	12	88	-	26	16	6
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	All Diagnoses
1998	5	8	3	69	1	235
1999	6	10	5	65	2	236

### IN-PATIENTS AGE AND LENGTH OF STAY 31ST DECEMBER

Age		15	-19	20	-44	45	64	65	-74	>	75	All	Ages	Hospit	of al/Unit lation
Length of Stay		5B	S.J.	5B	S.J.	5B	5.J.	58	S.J.	5B	5.J.	58	S.J.	5B	S.J.
< 3 Months	'98 '99	2	1	15 23	1	13 12	3	8	1	2	1	40 47	9	86.96% 95.92%	
3-12 Months	'98 '99	2	1	1 2	5	1	4	2	2		2	6 2	14	13.04%	
1-5 Years	'98 '99		. 1	-	3	e   14	17 14	1916	9	10.1	1	66	30 34		15.87% 18.18%
> 5 Years	'98 '99	-	-	-	17 15	- 1	60 63	150 m	40 39	7.0	19 17		136 134		71.96% 71.66%
All Lengths of Stay	'98 '99	4	2	16 25	29 28	14 12	84 87	10 8	52 48	2	22 23	46 49	189 187	100% 100%	100%
% of Hosp./ Unit Population	'98 '99	8.7% 8.16%	1.1% 0.53%	34.78% 51.02%	30	30.43% 24.49%		21.74% 16.32%		4.35%	11.6% 12.31%	-	-	100%	100%

### ADMISSIONS: BY SECTOR

Sector	Total Ad	missions	1st Adr	nissions	1st Admission as a % of Total Admissions		
	1998	1999	1998	1999	1998	1999	
A	145	163	27	31	18.6%	19%	
В	176	172	37	39	21%	22.67%	
С	194	197	41	32	21.1%	16.24%	
D	153	157	50	33	32.7%	21.02%	
E	128	73	21	19	16.4%	26.02%	
Others	92	74	32	26	34.8%	35.14%	
TOTAL	888	836	208	180	23.4%	21.53%	

# ADMISSION RATE PER '000 BY SECTOR

Sector	Population	Admi	ssions	Rates per '000		
Jector	1 opulation	1998	1999	1998	1999	
A	29,242	145	163	4.95	5.57	
В	41,561	176	172	4.23	4.14	
С	39,476	194	197	4.91	4.99	
D	32,823	153	157	4.66	4.78	
E	21,940	128	73	5.83	3.33	
Others	-	92	74	-	~	
TOTAL	165,042	888	836	5.38	5.07	

## ADMISSIONS: LEGAL STATUS

Temporary		porary	Voluntary		P.I	Total	
Year	Male	Female	Male	Female	Male	Female	
1998	52	44	420	368	٠ 1	3	888
1999	55	24	401	355	1		836

### **ADMISSIONS: DIAGNOSIS**

Year	Organic/ Demontia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	28	141	9	225	139	73
1999	9	135	16	231	97	60
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	Ali Diagnoses
1998	48	158	40	16	11	888
1999	52	174	44	10	8	836

### **ADMISSIONS: AGE ANALYSIS**

Year	< 15	15-19	20-44	45-64	65-74	> 75	All Ages
1998	6	68	454	253	70	37	888
1999	4	70	436	219	73	34	836

### DISCHARGES: BY SECTOR

Sector	Discharges (Inc	cluding Deaths)	De	aths
	1998	1999	1998	1999
A	153	164	2	4
В	168	169	4	2
С	184	195	2	5
D	153	161	3	5
E	137	75		2
Others	88	71	-	ě)
TOTAL	883	835	11	18

## OLD AGE PSYCHIATRY SERVICE

### **FUNCTIONAL MENTAL ILLNESS**

## ADMISSIONS

Year	Sector	Α	В	C	D	E	Other	Total
1998	Number of	6	9	2	10	15	5	47
1999	Admissions	8	1	7	3	7	10.00	26

### ADMISSIONS: AGE ANALYSIS

Year	45-64	65-69	70-74	75-79	80-84	85-89	90-94	Total
1998	1	16	9	4	10	4	3	47
1999	•	9	5	4	3	5		26

### ADMISSIONS: DIAGNOSIS

Year	Depressive Disorder	Org/Dementia	Schizophrenia	Alcoholic Disorder	Mania	Other	Total
1998	24	12	7	2	2	41	47
1999	19	3	1		2	1	26

# ADMISSIONS: SOURCE OF REFERRAL

Year	G.P.	Regional Hospital	Other Hospitals	OPD	Others	Total
1998	16	19	2	5	5	47
1999	11	4	2	2	7	26

### DISCHARGES

Year	Sector	A	В	С	D		Other	Total
1998	Number	6	8	2	9	17	3	45
1999	Discharged	7	2	7	3	7	1	27

CLINICS -	LINICS - ST. CAMILLUS' HOSPITAL & KILMALLOCK DAY HOSPITAL					Kilmallock	
Year	No.of Clinics	New Referrals	Return Patients	Attendances	New Patients	Return Patients	Attendances
1998	52	55	73	287	9	6	42
1999	50	37	49	290	4	7	30

### DOMICILIARY/CPN VISITS/CONSULTATIONS

Year	Domicili	ary Visits	CPN Visits	Consult	ations
	New	Return	(Mental Health)	>65 St. Camillus'	>75 RHD
1998	60	32	778	28	19
1999	107	84	941	37	41

## CHILD AND ADOLESCENT PSYCHIATRY SERVICE

### ADMISSIONS

Year	Sector	A	В	E	D	E	Other	Total
1998	Number of	My DEST	6	4	4	1	2	17
1999	Admissions	2	1	6	3	2	4	18

ADMISSIONS: AGE ANALYSIS

Year	12 years	13 years	14 years	15 years	16 years	17 years	Total
1998	1	ex constant	5	6	3	2	17
1999	1 3	1	3	11	1	2	18

**ADMISSIONS: DIAGNOSIS** 

Year	Drug Dependence	Depressive Disorder	Personality Disorder	Alcoholic Disorder	Schizophrenia
1998	-	8	9	7411	
1999	-	5	10	(-)	2
	Neuroses	Mania	Unspecified	Total	
1998		-		17	
1999	1			18	

ADMISSIONS: SOURCE OF REFERRAL

Year	Regional Hospital	G.P.	Liaison Officer	Other	Total
1998	4	6	2	5	17
1999	7	8	-	3	18

### DISCHARGES

Year	Sector	A	В	C	D	E	Other	Total
1998	Number		6	4	4	1	2	17
1999	Discharged	2	1	6	1	2	4	16

# CLARE MENTAL HEALTH SERVICE - PROFILE 1999

### COMMUNITY SERVICE

### DAY HOSPITALS

Location	Sector	Places	Attenders	Attendances
Ennistymon	North	10	208	1770
Shannon	South	12	131	3314
Ennis	East	15	238	4782
Kilrush	West	12	169	3701
TOTAL		49	746	13,567

# **OUTPATIENT CLINICS**

Sector	Clinics	Attenders	Attendances
North	68	126	351
South	131	195	883
East	171	384	1404
West	156	165	930
TOTAL	526	870	3568

## DAY CENTRES

Location	Places	Attenders	Attendances
Ennistymon Community Centre	10	29	1875
Friary Hall, Ennis	40	86	9816
Kilrush Community Centre	20	44	4380
TOTAL	70	159	16,071

## PROFILE 1999

### COMMUNITY RESIDENCES

Status	Residences	Places	Residents at 31/12
Low Support	6	27	24
Medium Support	5	39	32
High Support	2	30	26
TOTAL	13	96	82

# IN-PATIENT SERVICES AT 31/12/1999

Zones	Wards	Patients
Long Stay High Dependency	1	21
Long Stay Low Dependency	2	34
Medium Acute Unit	1	39
Mental Handicap	1	24
Psycho Geriatric	2	51
Rehab	1	22
TOTAL	8	191

EXPENDITURE 1999	
Pay Non-Pay	£8.706m £2.066m
TOTAL	£10.772m

#### 1 NORTH SECTOR

#### 1.1 ACTIVITY

208 people attended Ennistymon Day Hospital in 1999 and had a total of 1,770 attendances. Similar to previous years, the dominant diagnosis of attenders was Schizophrenia, accounting for 28% of attenders, followed by Depressive Disorders with 23% and Neuroses with 19%.

29 people attended the Day Centre at Ennistymon Community Centre and had a total of 1,875 attendances. 68 Out-Patient Clinics were held during 1999 and had a total of 126 attenders and 351 attendances.

#### 1.2 DEVELOPMENTS

A G.P. Information evening was held at which over 50% of the GPs in the area attended. This was considered a useful exercise by both the Team and G.P.s.

A property was purchased in Spanish Point for the provision of a High Support Hostel. Refurbishment to be carried out in 2000.

#### 1.3 SERVICE REQUIREMENTS

Day Hospital: Due to the expansion of the multi-disciplinary team, the current Day Hospital is inadequate in size and facilities. The provision of a purpose built unit requires immediate consideration.

Day Centre: The Day Centre is located in a section of the local Community Centre and is not very satisfactory. A purpose built Day Centre needs to be provided.

### 2 SOUTH SECTOR

#### 2.1 ACTIVITY

131 people attended Shannon Day Hospital during 1999 with a total of 3314 attendances, compared to 2,613 attendances the previous year. The dominant diagnosis of attenders was Neuroses accounting for 39% of attenders, followed by Depressive Disorders with 26%. Clinic activity increased significantly in 1999 - 131 Clinics were held with a total of 195 attenders and 883 attendances compared to 87 clinics with 135 attenders and 472 attendances the previous year.

### 2.2 DEVELOPMENTS

- A second Nurse was appointed to Shannon Day Hospital in 1999 and this has resulted in increased activity.
- · The new referral rate has increased especially for persons on the borders of Limerick.
- Respond houses and Day Centre will be ready for occupants in April 2000.
- An Therapy was provided for patients.

#### 2.3 SERVICE REQUIREMENTS

- Since the commencement of a bus service in June 1999, more patients are attending for sessions and day care from the rural areas of the county. With increasing numbers attending the Day hospital there is a need for a full time porter to be attached to the Day Hospital.
- An Addiction Counsellor is required as an increased rate of drug and alcohol abuse in the younger population was noted with an
  increased admission rate of young people with drug induced psychotic states.
- A full time Social Worker is required.
- High Support Residences for groups of young people with long psychiatric illnesses and problems are required.
- There is an increased need for a specialised home-help/homemaker service for clients attending the service.

#### 3 EAST SECTOR

#### 3.1 ACTIVITY

Ennis Day Hospital had a total of 238 attenders with 4,782 attendances during 1999, similar to 1998. The dominant diagnosis was Neuroses with 28%, followed by Schizophrenia with 27% and Depressive Disorders with 19%.

86 people attended Ennis Day Centre with a total of 9,816 attendances, slightly less than the previous year. The Nurses strike in October 1999 had an adverse effect on the attendances in all areas. The continuing N.C.H.D. vacancy continued to affect the Sector as a number of clinics had to be cancelled in the Day Centre.

Overall clinic activity increased significantly during 1999. 171 Clinics were held compared to 120 in the previous year. Attenders rose from 230 to 384 and attendances increased by 83% to 1,404 during 1999.

### 3.2 DEVELOPMENTS

- The Day Hospital will continue in its present function and will also be extended to provide accommodation for management/clerical staff. Planning permission has been granted.
- The Day Centre in Scariff is ready to open when discussions with Unions are finalised.
- The Crisis Research project began in August 1999 and one team member participated in this project.

#### **4 WEST SECTOR**

#### 4.1 ACTIVITY

169 people attended Kilrush Day Hospital during 1999 and had a total of 3,701 attendances compared to 154 people with 3,795 attendances the previous year. This reduction in attendances highlighted the increase in shared-care with G.P.s. Domiciliary visits were frequently carried out with medical staff and G.P.s, and also medical and nursing staff. This included assessment in addition to treatment at home. The dominant diagnosis of day hospital attenders was Depressive Disorders accounting for 39%, followed by Schizophrenia with 31%.

Kilrush Day Centre had 44 attenders and 4,380 attendances during 1999, a 24% increase on attenders from the previous year. The number of attenders at Out-Patient Clinics also increased - from 124 in 1998 to 165 in 1999 and attendances increased from 812 to 930. The number of clinics increased from 134 to 156 in 1999 and included more Family Therapy Clinics which were carried out at Our Lady's Hospital.

### **4.2 DEVELOPMENTS**

- During 1999 groups were carried out by Nursing Staff and the Occupational Therapist, including self-esteem groups, relaxation therapy, anxiety management, drama integration group and medical awareness. There was also a nutritional group and patients attended the local gym.
- The Leaving Cert teachers and students availed of the Relaxation Therapy and Anxiety Management in the Sensory Integration Unit.
   The secondary school children donated a substantial cheque to Kilrush Day Hospital.
- The Mental Health Association financially supported the move from the hostel in John Paul Estate to Shannon Heights. This move should become a reality in 2000.
- In addition to "Shared Care", G.P.s were encouraged to visit the Day Hospital and meet with the Team. Eight of the 11 G.P.s did so in
  the year. It is hoped to work with some of the G.P.s in their surgeries during 2000.
- Leader provided a substantial grant for the Educo Programme during 1999. The Health Board committed to continuing this
  programme which is a stepping stone from Day Centre to employment in the Community.
- The VEC are increasing funding for the Resource Group due to its successful outcome in 1999.
- · Picture framing and Horticulture moved to the Orchard.
- It is hoped that the High Support Hostel will open in 2000.

### 4.3 SERVICE REQUIREMENTS

- An Addiction Counsellor is required it was felt that several admissions to Our Lady's Hospital could have been prevented if an Addiction Counsellor was working with the Team.
- There is a Psychology vacancy in the West Sector since May 1999.

### 4.4 TRAINING/EDUCATION

Courses attended during the year by members of the Team included Facilitators for Child Protection, Bereavement Counselling, Group Therapy, Management of Day Hospitals and Women & Violence.

#### 5 PSYCHOLOGY DEPARTMENT

#### 5.1 STAFFING

There are three Psychologists in the Clare catchment area - the fourth post was sanctioned but despite interviews being held, remains unfilled. This resulted in the continuation of an unacceptable level of work commitment being shared by three staff and the loss of a full time psychologist for the West Sector.

### 5.2 NORTH SECTOR

Psychological input for 1999 consisted of individual one-to-one sessions. In February, local G.P.s were met by the multi-disciplinary team and the job descriptions of each discipline were outlined. It was agreed that such a meeting should take place on a bi-annual basis.

#### Plans for 2000

- G.P.s be contacted again regarding psychological input and service delivery
- Referrals to the multi disciplinary team requesting psychological input be screened more effectively in order to outrule where possible non-compliance with attendance and, in the long-term, decrease the number of failed to attend appointments.
- The establishment of psychology groups for depression, anxiety etc. which would help to alleviate a backlog of one to one referrals.

### 5.3 SOUTH SECTOR

The activities of the Psychologist for the South Sector for 1999 included:-

- Lecture on Depression, in collaboration with Psychiatrist & Community Mental Health Nurse
- Development of Questionnaire for a Needs Assessment of GPs to determine their requirements from the Day Hospital and Team. The
  findings were presented to a G.P.s meeting and resulted in the allocation of a bus to transport patients to and from the Day Hospital,
  thereby increasing patient attendance at the Day Hospital.
- · Trial run of a Suicide Audit in collaboration with the Consultant Psychiatrist.
- Research Project

#### Plans for 2000

- · To continue with Peer Review, CPD and the Research Project
- To continue with the Sexual Offenclers Assessment Training Group
- To engage in Public Lectures as required
- · To continue with Community Outreach Projects
- To develop psychometric skills with the use of computer programs.

### 5.4 EAST SECTOR

The Psychological services for the East Clare Sector are delivered by one full-time psychologist based in Ennis Day Hospital. The activities of the East Sector Psychologist during 1999 were as follows:-

- Assessment
- Psychotherapy
- Team Building
- Continuing Professional Development
- Education

- Public Lectures
- Training
- Supervision
- Research

The purchase of a computer and test related software for the Department has meant that scoring tests and generating reports is less time consuming, more up to date and more detailed and accurate.

In conjunction with the other members of the Psychology Department and a member of the Social Work Dept. a research project was embarked upon looking at how psychiatric services in Clare respond to domestic violence. In parallel with this was attendance at workshops about domestic violence and attendance at a conference in Adapt House, Limerick, as well as meetings with people in Dublin working in the area of domestic violence and meetings with local advocate group working out of Clarehaven House in Ennis.

Due to the delay in filling the fourth clinical psychology post in Clare, the Psychologist for the East Sector took on some of the urgent referrals from the West Sector, and took over as Acting Senior Clinical Psychologist from May until November, which entailed extra administrative responsibilities.

#### Plans for 2000

Among the plans for 2000 are:-

- Research
- Continue programme of directed and self-directed Continuing Professional Development
- Day Hospital Programme to be reviewed
- Supervision of Graduate Students
- Monitoring of Waiting Lists to be continued
- Training
- Review of procedures within multi-disciplinary team including the piloting and review of the GP referral form.
- Assist in organising of Conference/Lecture

### 5.5 WEST SECTOR

Due to staffing levels, service delivery to the West Sector was kept to a minimum from January to June and service was limited to urgent referrals only from July.

#### 5.6 AIMS FOR 2000

- Staffing Levels Top priority will be given to acquiring a fourth full time member of staff for the West Sector. A Research Assistant
  is also required.
- Office Space: With the closure of Our Lady's Hospital in mid 2000, all staff will be based in their Sectors. Office space is required for the North Sector and for the Senior Grade Post. Suitable office space needs to be obtained in the proposed new Admission Unit at Ennis General Hospital for assessment purposes.
- · It is hoped to acquire another P.C. for computerised testing to continue to improve the quality of service in 2000.
- Increasing Public Awareness: The Department hopes to increase public awareness of what Psychology means throughout 2000.
   People appear to be confused about what services are available and where, and it is hoped to rectify this during 2000.

#### 6 SOCIAL WORK DEPARTMENT

#### 6.1 STAFFING

The Social Work Department consists of one Senior Social Worker and one basic grade Social Worker providing a shared service to the four sectors, Admission Unit and Rehabilitation Team. The closure of Our Lady's Hospital will impact on the activities of the department staff. Initially, ensuring the smooth discharge of patients will involve social work intervention and the Dept. has agreed also to participate in the training programme for staff affected by the closure. The need to integrate social work services in any new service developed following the closure will be imperative. It is also imperative to address the imbalance with regard to social work posts prior to the complete move to a community based service.

#### 6.2 ACTIVITY

There were 178 referrals to the Social Work Department in 1999 and the number of contacts rose to 1,529 an increase on the previous year.

### 6.3 LIAISON WITH CHILD CARE SERVICE

During 1999 the Snr. Social Worker engaged in a number of discussions with the Child Care Manager in reviewing joint mental health/childcare issues. Items discussed included Child Care reporting concerns, the impact of alcohol/drug abuse in families with children in care and the need for greater understanding in joint working services. It is expected that a presentation on some of these issues will be made to the Mental Health Executive early in 2000.

#### 6.4 NATIONAL GUIDELINES FOR THE PROTECTION & WELFARE OF CHILDREN

The new national guidelines will impact on mental health practice and the Snr. Social Worker was nominated, among others, to develop and run a Child Care Training Seminar to employees of the Mental Health Services. Training will commence early in 2000.

### 6.5 WOMEN'S HEALTH COUNCIL

The Snr. Social Worker was appointed to the Board of the Women's Health Council for a period of 3 years.

#### 6.6 TRAINING

Both Social Workers were involved in developing and/or presenting different training workshops, including Alternative Intervention & Awareness for Drug/Alcohol problems, Suicide, and Domestic Violence.

### 6.7 RESEARCH

- The Social Worker, along with the Dept. of Psychology researched and developed a proposal regarding issues of domestic violence and
  users of the Clare Mental Health Service
- A Study on Schizophrenia Sufferers expressed met/unmet needs is due for completion.

#### 7 ADDICTION COUNSELLING SERVICE

The Addiction Counselling Dept. is staffed by two Addiction Counsellors serving the North and East Clare Sectors and are available to the other sectors on a consultancy basis only. It is understood that the appointment of a third counsellor is imminent. As the Dept. becomes more established, the necessity for a Senior Addiction Counsellor is more pressing.

#### 7.1 ACTIVITY

103 people availed of the addiction services during 1999 and the number of contacts was 608.

Apart from their clinical work, the addiction counsellors were involved in clinical audits, CPD, Peer Supervision, attendance at Meetings and Committees, the G.P. Information Session in the North Sector and Drug Treatment Reporting to the Health Research Board.

#### 7.2 SIGNIFICANT SERVICE ISSUES

- · Staffing Levels as outlined above
- Facilities in North Clare Day Hospital in particular with the closure of Our Lady's Hospital where multi-disciplinary staff will be working mainly out of the Day Hospital.
- Children First: The Addiction Counsellors welcomed the meeting with the Child Care Manager as in the course of their work they
  encounter families where children may be negatively affected by parental substance abuse and mental ill health. It was vital, therefore,
  that there would be ongoing liaison with colleagues working in Childcare for discussion, policy and procedure formation and
  implementation.

### 7.3 SERVICE DEVELOPMENT & CHANGE

- The Addiction Counsellors met monthly as a Vocational Group since Spring 1999 and this has proven to be a useful and supportive venture.
- All client contacts were entered on the PHC system since September 1999. It was felt that computers could be used to greater effect
  if there were better availability of terminals.
- A significant development was the Discussion Document produced in May 1999 by the Drug Strategist. The document highlighted
  many of the areas of concern previously identified by the Clare Addiction Counsellors and it is hoped that these concerns will be given
  serious consideration and form the basis of a co-ordinated response in relation to substance misuse in the Mid-Western Health Board
  area.

#### **8 OCCUPATIONAL THERAPY DEPARTMENT**

### 8.1 STAFFING

In 1999 there was a full complement of staff i.e. 3.5 WTE's, serving the four sectors.

### 8.2 ACTIVITY

880 inpatients and 1,265 out-patients attended the Occupational Therapy Dept. during 1999 an increase in the 1998 activity of 840 inpatients and 993 out-patients.

## 8.3 PROFESSIONAL ISSUES

- · In-Service Training: In service training continued throughout the year.
- Specialist Interest Group: The Dept. forged links with Occupational Therapists in Psychiatry and in the Western Health Board.
   Meetings are held every 3 months within the region.
- . MWHB Regional Group: Members of the Department attend the Regional Group Meeting held every eight weeks

#### 8.4 FUTURE PLANS

- The Dept. is committed to further education and training by availing of the Health Board's own training and outside training programmes including specific occupational therapy training, i.e. A.O.T.I.
- An initial meeting has been organised with colleagues in Limerick to establish a Peer Support Group.
- The closure plan for Our Lady's Hospital has implications for Occupational Therapists as there will be demands for additional
  Occupational Therapy input in High Support Hostels. These needs could not be met by existing staff who are already fully committed,
  however, with extra staffing the future role of Occupational Therapy would be used in assessing clients placement needs and
  continuing development of the skills of clients to gain/maintain maximum functional independence in the community environment.

#### IN-PATIENT SERVICES

#### 1 OUR LADY'S HOSPITAL

Substantial progress was made on the programme of work initiated in relation to the closure of Our Lady's Hospital and the subsequent transfer of patients to alternative care settings. Key points of progress were as follows:-

- An application for planning permission for a 40 bed Acute Unit at Ennis General Hospital was lodged, with a planned completion date
  of Spring 2001.
- RESPOND Housing Association commenced construction on a medium dependency residence for 7 clients, plus a Day Centre in Shannon, together with a 20 bed residential unit on the grounds of Our Lady's Hospital.
- Planning permission was obtained for a medium support hostel for 20 clients in Spanish Point.
- An application for planning permission was lodged in respect of medium support accommodation for 7 clients in Ard Aluinn, Ennis
- · Planning permission was obtained for change of use from Convent to High Support Hostel at St. Joseph's Hospital, Ennis.
- Refurbishment work continued at the former Orchard Hotel Kilrush and it is hoped that the High Support Residence, catering for 30 clients, will open when negotiations are concluded between management and unions.
- Premises adjacent to Scariff Medical Centre were leased to provide a service for day patients and clinics. Unfortunately, the use of this
  premises is delayed pending the conclusion of management and union negotiations of the hospital closure.
- Planning permission is being sought for an extension to Ennis Day Hospital which will provide the necessary office space required by administration, consultants and other disciplines based at Our Lady's Hospital.
- Clients due to be transferred to community residences as a result of the planned hospital closure have undergone a rehabilitation programme organised by the Occupational Therapy Dept.

Approval to appoint a Consultant in Old Age Psychiatry was received and a Consultant was appointed on a temporary basis in the Autumn.

The vacant post of Consultant Psychiatrist in the East Sector was filled on a permanent basis.

A Crisis Intervention Nurse was appointed on a pilot basis in August 1999, initially for six months.

The Occupational Therapist attached to the psycho-geriatric ward is currently involved with the nursing staff in setting up a sensory integration room for clients suffering from dementia.

#### 1.1 ACTIVITY

There were 191 residents in Our Lady's Hospital at year end 1999, a reduction of 3 on the previous year. There were 506 admissions during 1999 compared to 496 the previous year and the admission rate per '000 increased from 5.3 to 5.4. The dominant admission diagnosis was, similar to the previous year, Schizophrenia, accounting for 24% of admissions, followed closely by Depressive Disorders with 23% and Alcoholic Disorders with 22%. 49% of admissions were aged between 20 and 44, followed by 33% in the 45-64 years age group and 12% in the 65-74 category. 18 admissions were over 75, there were 10 in the 15-19 years category and 1 admission was under 15 years of age.

## DAY HOSPITALS

Sector/Location/Year		No. of Places	Attendances		Attenders	
				New	Return	Total
North: Ennistymon	<b>'98</b>	10	1653	43	107	150
	'99	10	1770	63	145	208
South: Shannon	'98	12	2613	80	58	138
	'99	12	3314	65	66	131
East: Ennis	<b>'98</b>	15	4700	92	142	234
	'99	15	4782	59	179	238
West: Kilrush	'98	12	3795	48	106	154
	'99	12	3701	89	80	169
TOTAL	′98	49	12,761	263	413	676
	'99	49	13,567	276	470	746

# DIAGNOSIS - DAY HOSPITAL ATTENDERS 1999

Sector	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
North	2	59	14	48	-	39
South	approach The control of	6	ie.	34		51
East	-3	64	6	45	3	66
West	4	53	1	66	9	9
TOTAL	4	182	21	193	12	165
Sector	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	All Diagnoses
North	-	32	3	4	9	208
South	9	20	10	1		131
East	4	26	9	1	14	238
West	2	11	1	3	10	169
TOTAL	15	89	23	9	33	746

# DAY CENTRES

Sector/Location/Year	Places Available	Attenders	Attendances	Daily Average
North: Ennistymon '98	10	25	2120	8
Com. Centre '99	10	29	1875	7
East: Friary Hall '98	40	83	9942	39
Ennis '99	40	86	9816	40
West: Kilrush '98	10	53	3533	13.6
Com. Centre '99	20	44	4380	17
TOTAL '98	60	161	15,595	
'99	70	159	16,071	

# CLINICS

# DIAGNOSIS - CLINIC ATTENDERS 1999

Sector	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
North	•	54	20	24		10
South	740	46	•	60	9	54
East	-	102	8	89	•	51
West	3	61	1	54	5	15
TOTAL	3	263	29	227	5	130
Sector	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	All Diagnoses
North	0.00	3	1	2	12	126
South	6	15	14	•	-	195
East	3	18	9	2	102	384
West	3	6	3	4	10	165
TOTAL	12	42	27	8	124	870

CLINICS
MENTAL HEALTH OUT-PATIENT CLINIC ACTIVITY Y/E 31ST DECEMBER

	/Location/Year	No. of Clinics	No. of Attenders	_	o. of Attendance	ces
200000		Section Sectio		New	Return	Total
North:	Ennistymon '9	23	56	7	139	146
	Our Lady's Hosp	48	59	23	237	260
	TOTAL	71	115	30	376	406
	Ennistymon '9	22	52	11	140	151
	Our Lady's Hosp	46	74	21	179	200
	TOTAL	68	126	32	319	351
South:	Shannon Day Hosp '9	47	105	49	299	348
	Sixmilebridge	9	7	3	19	22
	Shannon Workshops	7	10	-	43	43
	Our Lady's Hosp	24	13	6	53	59
	TOTAL	87	135	58	414	472
	Shannon Day Hosp '9	9 68	163	92	506	598
	Sixmilebridge	8	5	-	26	26
	Shannon Workshops	11	10	2	77	79
	Our Lady's Hosp	44	17	9	171	180
	TOTAL	131	195	103	780 	883
East:	Our Lady's Hosp '9		164	66	577	643
1	Scariff	9	30	-	74	74
	Day Centre, Ennis	9	36	-	51	51
Ť	TOTAL	120	230	66	702	768
	Our Lady's Hosp '9		307	173	1045	1218
	Scariff	12	36	-	94	94
	Day Centre, Ennis	19	41	-	92	92
9	TOTAL	171	384	173	1231	1404
West:	Kilrush D/Hosp '9		85	47	498	<b>54</b> 5
	Kilkee	10	9	2	55	57
ķ.	Our Lady's Hosp	34	30	17	193	210
	TOTAL	134	124	66	746	812
	Kilrush D/Hosp '9	90	107	50	522	572
	Kilkee	11	15	6	67	73
	Our Lady's Hosp	55	43	24	261	285
	TOTAL	156	165	80	850	930
	OVERALL TOTALS '9	8 412	604	220	2238	2458
	'9		870	388	3180	3568

# COMMUNITY RESIDENCES

Sector/Location		Sta	Status		ces	Residents at 31/12	
		100		1998	1999	1998	1999
North:	Prague House Ennistymon	Medium	Support	7	7	7	7
South:	Delginish, Shannon	High Su	pport	18+2 res	pite beds	19	16
East:	Mountain View	Medium	Support	9	9	9	7
	Ashfield Park	Medium	Support	9	9	9	8
	New Park	Medium	Support	7	7	6	5
	Corrovorin Crescent	Low 5up	port	4	4	3	3
	Kincora Park	Low Sup	port	5	5	4	5
	Shannon Park	Low Sup	port	4	4	4	4
	Mountain View	Low Sup	pport	4	4	4	4
West:	Beech Park	Medium	Support	7	7	6	5
	Sycamore Drive	Low Sup	- 1000 And	4	4	2	4
	Shannon Heights	Low Sup		6	6	4	4
	Avonree House	High Su	pport	10	10	10	10
	TOTAL	1998	1999				
	Low Support	6	6	27	27	21	24
	Medium Support	5	5	39	39	37	32
	High Support	2	2	30	30	29	26
	OVERALL TOTALS	13	13	96	96	87	82

# NON MEDICAL ACTIVITY

## PSYCHOLOGY DEPARTMENT

Sector	Assessments		Treatments		Groups	
	98	99	98	99	98	99
North	82	12*	389	56*	38	5.0
South	77	76	389	396	21	38
East	83	40	676	654	10	45
West	54	18*	316	100*	10	
TOTAL	296	146	1770	1206	79	83

<sup>\*</sup>Activity down in 1999 due to Psychologist being on leave

# SOCIAL WORK DEPARTMENT REFERRALS

Sector	1998	1999
North	43	27
South	37	45
East	41	52
West	66	54
TOTAL	187	178

Reason for Referral/Social Work	No. R	eferred
Department	1998	1999
Social Work Assessment/Family Intervention	48	46
Placement/Needs	43	33
Welfare Needs	50	39
Family Law	19	22
Childcare	14	9
Other	13	29
TOTAL	187	178

### NON MEDICAL ACTIVITY

# OCCUPATIONAL THERAPY DEPARTMENT

Contac		Patients Treated					
Sector	In-Par	tients	Out-P	atients			
	1998	1999	1998	1999			
North	143	158	276	284			
South	198	203	324	412			
East	204	286	230	273			
West	295	233	163	296			
TOTAL	840	880	993	1265			

## **ADDICTION COUNSELLING SERVICE - 1999**

Sector	Patients Treated	No. of Contacts
North	46	286
East	57	322
TOTAL	103	608

### REASON FOR REFERRAL

Sector	Alcohol	Illicit Drugs	Prescribed Drugs	Other	
North	28	2	3	13	
East	46	10	1	21	
TOTAL	74	12	4	13	

### AGE ANALYSIS OF CLIENTS

Sector	15-19 years	20-44 years	45-74 years	75+ years
North	4	21	20	1
East	4	35	17	1
TOTAL	8	56	37	2

# NON MEDICAL ACTIVITY

## SOURCE OF REFERRAL

Sector	Consultant Psychiatrist	G.P.	Self Referrals	Other
North	15	21	5	5
East	40	17	-	-
TOTAL	55	38	5	5

# BREAKDOWN OF REFERRALS

Sector	New Referrals	Ongoing Referrals from 1998	Re-Referrals
North	33	5	8
East	39	12	6
TOTAL	72	17	14

# OCCUPATION

Sector	Employed	Unemployed	Disability	Student	Retired	Housewife
North	21	13	1	3	5	3
East	15	25	5	1	4	7
TOTAL	36	38	6	4	9	10

# MARITAL STATUS

Sector	Married	Single	Divorced/Separated	Widowed
North	19	22	5	-
East	12	35	7	3
TOTAL	31	57	12	3

## GENDER

Sector	Male	Female
North	28	18
East	37	20
TOTAL	65	38

### ACUTE IN-PATIENT SERVICE - ADMISSION UNIT

## **ADMISSIONS: BY SECTOR**

Sector	Total Admissions		1st Admissions		1st Admission as a % of Total Admissions	
	1998	1999	1998	1999	1998	1999
North	95	106	18	13	18.9%	12.26%
South	124	114	34	31	27.4%	27.19%
East	184	188	56	34	30.4%	18.09%
West	77	83	24	20	31.2%	24.1%
Others	16	15	10	5	62.5%	33.3%
TOTAL	496	506	142	103	28.6%	20.36%

## ADMISSION RATE PER '000 BY SECTOR

Sector	Population	Admi	ssions	Rates per '000	
Sector	ropulation	1998	1999	1998	1999
North	17,093	95	106	5.5	6.2
South	29,505	124	114	4.2	3.9
East	28,115	184	188	6.5	6.7
West	19,293	77	83	4.0	4.3
Others	14-1	16	15	19	
TOTAL	94,006	496	506	5.3	5.4

# ADMISSIONS: LEGAL STATUS

Ten	Temp	oorary	Volu	Voluntary		P.U.M.	
Year	Male	Female	Male	Female	Male	Female	
1998	27	9	232	196	20	12	496
1999	23	13	265	186	15	4	506

# ADMISSIONS: AGE ANALYSIS

Year	< 15	15-19	20-44	45-64	65-74	> 75	All Ages
1998		15	214	198	49	20	496
1999	1	10	248	168	61	18	506

# ACUTE IN-PATIENT SERVICE - ADMISSION UNIT

## **ADMISSIONS: DIAGNOSIS**

Year	Organic/ Demantia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	12	128	2	105	61	50
1999	7	123	•	118	53	35
	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Unspecified	All Diagnoses
1998	10	92	25	4	7	496
1999	5	112	34	6	13	506

## ADMISSIONS: WARD USAGE

Sector	Beds Available		Average Len	gth of Stay
	1998	1999	1998	1999
North	8	8	18.5	25.1
South	8	8	17.7	23.6
East	8	8	25.2	23
West	8	8	26.1	25.8
Other	+:		13.25	12.3
TOTAL	32	32	21.1	23.7

## OUR LADY'S HOSPITAL

## POSITION AT 31ST DECEMBER

Year	Number of Beds	Number of Wards	Number in Residence	Male	Female
1998	186	8	194	132	62
1999	190	8	191	124	67

# IN-PATIENTS: LEGAL STATUS AT 31ST DECEMBER

Year	Temporary	Voluntary	P.U.M.	TOTAL
1998	11	171	12	194
1999	9	172	10	191

## **NEW LONGSTAY**

Number who became New Longstay During the Year					
Year	< 65 Years	> 65 Years	Total		
1998	9	2	11		
1999	4	3	7		

## IN-PATIENT DIAGNOSIS

Year	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	8	79	2	19	9	1
1999	6	88		29	11	2
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Other	Ali Diagnoses
1998	5	10	20	40	1	194
1999	5	6	6	35	3	191

### OUR LADY'S HOSPITAL

# IN-PATIENTS AGE AND LENGTH OF STAY AT 31ST DECEMBER

Age		15-19	20-44	45-64	65-74	>75	All	% of Hospital/
Length of Stay				V S			Ages	Unit Population
< 3 Months	'98	3	8	10	4	5	30	15.5%
	'99	1	15	10	7	3	36	18.8%
3-12 Months	'98	1	3	3	5	3	15	7.7%
	'99	(4)	3	6	6	1	16	8.4%
1-5 Years	'98		8	17	13	2	40	20.6%
	'99	•	6	13	13	1	33	17.4%
> 5 Years	'98		14	54	22	19	109	56.2%
a transfer of the state of the	'99	(6)	12	56	22	16	106	55.5%
All Lengths of	'98	4	33	84	44	29	194	100%
Stay	'99	1	36	85	48	21	191	100%
% of Hosp./Unit	'98	2.1%	17%	43.3%	22.7%	14.9%	52	100%
Population	′99	.52%	18.8%	44.5%	25.1%	10.9%	1	100%

## DISCHARGES

Sector	Discharges (Inc	cluding Deaths)	Dea	oths
	1998	1999	1998	1999
North	102	99	2	2
South	120	116		(5)
East	183	189	3	2
West	83	89	1	6
Others	17	15		1.0
TOTAL	505	508	6	10

# HOSPITAL REHABILITATION UNIT

Name	Year	Number of Residents at 31st December	Total Number who Resided in Rehab during year	Average Length of Stay
Teach na Beithe	'98	6	18	20 weeks
	'99	6	23	19 weeks

# TIPPERARY (N.R.) - PROFILE 1999

# **COMMUNITY SERVICES**

## DAY HOSPITALS

Location	Sector	Places	Attenders	Attendances
Thurles	3A	12	287	4771
Nenagh	3В	13	238	3910
TOTAL		25	525	8681

# OUTPATIENT CLINICS

Location	Sector	Clinics	Attenders	Attendances
Thurles	3A	121	398	1857
Nenagh	3В	144	341	1795
TOTAL		265	739	3652

## DAY CENTRES

Location	Sector	Places	Attenders	Attendances
Thurles	3A	20	74	3620
Nenagh	3В	3	29	401
TOTAL		23	103	4021

EXPENDITURE 1998	
Pay Non-Pay	.580m .131m
TOTAL	£0.711m

#### 1 BACKGROUND

The position regarding the strategy agreed between the Mid-Western Health Board, the South Eastern Health Board and endorsed by the Department of Health for the development of dedicated Mental Health Services in the Tipperary North Riding Catchment Area has not changed and progresses slower than was originally anticipated. The delay impacts in no small way on operationalising the commitment set out in the service statement of mission.

All acute admissions for the Tipperary N.R. catchment area continued to be treated in St. Michael's Unit, Clonmel in 1999.

#### 1.1 DEVELOPMENTS

- Department of Health approval to the appointment of a design team for the new Acute Unit on the grounds of Nenagh General Hospital was granted in June 1998. The Board is still waiting to advance to planning permission stage.
- Progress was also made in advancing the provision of a day centre facility for the Nenagh sector a property was purchased in 1998 for this purpose. Plans are in progress to modify this building for use as a Day Centre.
- The availability of a comprehensive range of appropriate community residential facilities for clients who are new long stays and for
  those with enduring mental health issues requiring ongoing rehabilitation is now critical to the functioning of Mental Health Services in
  the catchment area.
- As part of the new Community Hospital in Thurles, a brief has been prepared which includes 20 EMI (Elderly Mentally III) beds for the catchment area.

### 1.2 RESEARCH

### **Evaluation of North Tipperary Psychological Services**

This study aims to examine the process of a community based psychology service by evaluating the service in Tipperary N.R. This evaluation will address three major areas:-

- 1. What activities are psychologists engaged in?
- 2. What do the stakeholders think of the service?
- 3. What is the impact of this service on the consumer?

Research is contingent on availability of resources. Further research will take place among those with enduring mental health issues as resources are made available.

#### 13 SOCIAL WORK SERVICE

The Social Work service has been an integral part of the North Tipperary Mental Health teams for almost two years. One Social Worker is employed and has involvement in both sectors.

The number of new referrals to the Social Work Dept. during 1999 was 35. Total domicilary visits for 1999 amounted to 137 and there were 550 contacts during the year:

#### 1.4 ADDICTION COUNSELLING SERVICE

The Addiction counselling service is based in Thurles and provides services for clients from both Thurles and Nenagh. A total of 105 clients had 1,373 attendances in 1999 compared to 79 attenders with 741 attendances in 1998. The Addiction counselling service had 84 new attenders in 1999.

### 2 THURLES SECTOR

287 attenders had a total of 4,771 attendances in the Day Hospital in Thurles during 1999 compared to 242 attenders with 4,935 attendances in the previous year. 74 clients had 3,620 attendances in the Thurles Day Centre in 1999, a slight increase on the previous year. 121 out-patients clinics were held in this sector during 1999, with 398 attenders having 1,857 attendances, a minor decrease on the previous years activity.

#### **3 NENAGH SECTOR**

The Day Hospital in Nenagh had 238 attenders with 3,910 attendances in 1999 - a decrease on activity in the previous year where 256 attenders had 4,252 attendances. 29 attenders to the Day Centre in Nenagh had 401 attendances in 1999 - an increase on 1998 activity when 24 attenders had 300 attendances. Out patient clinic activity was broadly in line with the previous year - 144 clinics were held in 1999 with 341 attenders having 1,795 attendances.

### 4 ADMISSIONS

There were 342 admissions from the Tipperary N.R. catchment area during 1999, a slight decrease on the previous year's figure of 351. The admission rate per '000 fell marginally from 6 to 5.9. 50% of admissions were in the 20-44 years category compared to 53% the previous year. 27% of admissions were in the 45-64 years age group, 15% were in the category 65-74 years, 4% were over 75 and 3% were under 20 years of age - an increase of 1.3% on the 1998 figure. Similar to the previous year, the dominant admission diagnosis was Depressive Disorders, accounting for 29% of admissions, followed by schizophrenia with 17% and Alcohol Disorder with 16%. Drug Dependence increased from 1.4% to 2.6% in the year under review.

# DAY HOSPITALS

Location/Year		No. of Places	Attendances		Attenders	
				New	Return	Total
Thurles	'98	12	4935	80	162	242
	'99	12	4771	110	177	287
Nenagh	′98	13	4252	69	187	256
\$500	'99	13	3910	62	176	238
TOTAL	′98	25	9187	149	349	498
	'99	25	8681	172	353	525

# DIAGNOSIS: DAY HOSPITAL ATTENDERS

Year	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	3	66	4	141	33	116
1999	2	95	3	153	51	119
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Unspecified	All Diagnoses
1998	14	108	11	-	2	498
1999	7	80	9	*	6	525

# DAY CENTRES

Location/Year		Places Available	Attenders	Attendances
Thurles	'98	20	70	3450
	'99	20	74	3620
Nenagh	'98 '99	3	24 29	300 401
TOTAL	'98	23	94	3750
	'99	23	103	4021

# CLINICS

# MENTAL HEALTH OUT-PATIENT CLINIC ACTIVITY Y/E 31ST DECEMBER

Sector/Location/Year		No. of Clinics	No. of Attenders	No. of Attendances		
		A SECOND DAVIS.		New	Return	Total
Thurles:	Day Hospital '98	100	362	104	1615	1719
	Roscrea	23	77	18	322	340
	TOTAL	123	439	122	1937	2059
	Day Hospital '99	97	313	67	1464	1531
	Roscrea	24	85	15	311	326
	TOTAL	121	398	82	1775	1857
Nenagh:	Tyone Day Hosp '98	111	247	92	1155	1247
The State of the S	OPD General Hosp	25	57	4	489	493
	Newport	11	18	1	112	113
	TOTAL	147	322	97	1756	1853
	Tyone Day Hosp '99	109	265	108	1009	1117
	OPD General Hosp	23	57	1	559	560
	Newport	12	19	4	114	118
	TOTAL	144	341	113	1682	1759
	OVERALL TOTALS '98	270	761	219	3693	3913
k	199	265	739	195	3457	3652

# DIAGNOSIS: OUT-PATIENT CLINIC ATTENDERS

Year	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	2	264	8	214	113	94
1999	1	301	11	158	117	92
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Others	All Diagnoses
1998	6	57	3			761
1999	7	50	2		2	739

### NON-MEDICAL ACTIVITY

# PSYCHOLOGY DEPARTMENT

		Thurles	Nenagh	Total
Clients	'98	114	148	262
	199	**	**	**
Consultations	s* '98	1130	556	1686
	199	**	**	**

<sup>\*</sup>Includes telephone contacts \*\*Statistics not available for 1999

# ADDICTION SERVICE

	1998	1999
Clinics	79	105
New Referrals	N/A	84
Consultations	741	1373

## SOCIAL WORK DEPARTMENT

	Year	Thurles	Nenagh	TOTAL
Referrals	'98	22	26	48
	199	13	22	35
Domiciliary Visits	'98	35	67	102
	'99	56	81	137
Contacts	'98	333	227	560
Contacts	'99	280	270	550

REASON FOR REFERRAL	Thurles		Nenagh	
REASON FOR REFERRAL	1998	1999	1998	1999
Social Work Assessment/Family Assessment	3	1	6	8
Placement/Accommodation Needs	6	4	4	4
Welfare Needs	6	2	4	2
Family Law	1	3	. 6	8
Child Care	5		3	•
Other	1	3	3	E
Totals	22	13	26	22

# IN-PATIENT SERVICES ST. MICHAELS UNIT/ST. LUKES HOSPITAL

### POSITION AT 31ST DECEMBER

Year	Number in Residence Male		Female
1998	30	15	15
1999	31	16	15

# IN-PATIENTS: LEGAL STATUS AT 31ST DECEMBER

Year	Temporary	Voluntary	P.U.M.	TOTAL
1998	1	29		30
1999	6	25		31

## IN-PATIENT DIAGNOSIS

Year	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	) <del>-</del>	18	-	2	2	1
1999	1	16	•	5	2	1
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Others	All Diagnoses
1998	1	5	20	14	1	30
1999	21 <b>=</b> 3	3		1	2	31

### ADMISSIONS: BY SECTOR

Sector	Total Admissions		1st Admissions		1st Admission as a % of Total Admissions	
	1998	1999	1998	1999	1998	1999
Thurles	220	226	16	19	7.3%	8.4%
Nenagh	131	116	13	16	9.9%	13.8%
TOTAL	351	342	29	35	8.1%	10%

# IN-PATIENT SERVICES ST. MICHAELS UNIT/ST. LUKES HOSPITAL

## ADMISSIONS: AGE ANALYSIS

Year	< 15	15-19	20-44	45-64	65-74	> 75	All Ages
1998		6	187	103	46	9	351
1999		11	172	94	52	13	342

# ADMISSION RATE PER '000 BY SECTOR

Sector	Population	Admi	ssions	Rates per '000	
		1998	1999	1998	1999
Thurles	29,558	220	226	7.44	7.64
Nenagh	28,463	131	116	4.6	4.0
TOTAL	58,021	351	342	6	5.9

## **ADMISSIONS: LEGAL STATUS**

	Temp	Temporary		Voluntary		P.U.M.		Total	
Sector	1998	1999	1998	1999	1998	1999	1998	1999	
Thurles	20	23	200	92	-	-	220	115	
Nenagh	15	24	116	202	-	1	131	227	
TOTAL	35	47	316	294	- 4.1.1	1	351	342	

## **ADMISSIONS: DIAGNOSIS**

Year	Organic/ Dementia	Schizophrenia	Other Psychoses	Depressive Disorders	Mania	Neuroses
1998	1	80	-	107	34	16
1999	3	57	2	99	41	24
Year	Personality Disorder	Alcoholic Disorder	Drug Dependence	Mental Handicap	Others	All Diagnoses
1998	8	66	5	3	31	351
1999	1	56	9	4	46	342

## DISCHARGES

Year	Thurles	Nenagh	TOTAL
1998	218	136	354
1999	224	113	337

# APPENDIX I - MENTAL HEALTH EXPENDITURE

	1998			1999		
(1	£ Pay	f Non-Pay	TOTAL	£ Pay	£ Non-Pay	TOTAL
Limerick Mental Health Service	10.931m	1.553m	12.484m	11.914m	1.949m	13.863m
Clare Mental Health Service	8.005m	1.776m	9.781m	8.706m	2.066m	10.772m
Tipperary N.R. Mental Health Service	.549m	.119m	.668m	.580m	.131m	.711m
TOTAL EXPENDITURE	19.485m	3.448m	22.933m	21.2m	4.146m	25.346mm

: <del></del>		
	NOTES	

# NOTES

### NOTES