

2. Mental Health Services

Introduction:

The Board's Mental Health Service Initiative (1997) and subsequent service plans provide a comprehensive framework for the achievement of the strategic goals of the mental health services. The Service Plan for 2000 aims to build on the work carried out in 1999 in achieving the vision of a comprehensive mental health service for the population of the Midland Health Board.

Mission Statement

To secure and maximise health and social gain for people with mental illness, their carers and families, the Board will:

- promote positive mental health
- treat acute mental illness promptly and appropriately
- provide care and support for those suffering from long term mental illness

Action areas for achieving the vision have been identified and will be prioritised in 2000. Immediate objectives are reflected in the Service Plan

Review of Performance Against 1999 Service Plans

The primary focus of the 1999 Service Plan was on the further development of a comprehensive integrated service providing a range of services for mental health promotion, prevention, treatment and rehabilitation. A systems approach to development of the services included the strengthening of linkages with primary care and voluntary services, interagency working and strengthening of management of the services.

Mental Health Promotion

- A Mental Health Promotion Action Plan has been developed in association with voluntary agencies, representatives of carer and service user groups and statutory service providers. **£0.010m** was allocated, by the Board, in 1999 toward the development of the action plan. This project was initiated in 1998 in association with the Office for Health Gain and the Office for Public Management (U.K.)
- **£0.190m** was allocated, in the final quarter of the year toward the development of a Counselling Service for Adults who experienced Abuse in Childhood. This new service will be fully operational in 2000 and will adhere to national standards and guidelines.

Suicide Prevention

- In response to the recommendations of the Report of the National Task Force on Suicide, a Suicide Prevention Resource Officer was recruited in February 1999. Projects commenced in 1999 included the provision of counselling services for persons bereaved through suicide, training of statutory /voluntary / community representatives in facilitating groups bereaved through suicide, a media campaign, teacher training on issues of sudden death in schools, directory of services and the establishment of a Help-Line in partnership with the Samaritans

£0.059m was allocated to these projects by the Board towards costs incurred.

Substance Abuse Prevention

- A Senior Health Education Officer was appointed
- A Drugs Education Policy was completed
- Training courses on Smoking Cessation through Brief Intervention training programmes for General Practitioners and health professionals were provided
- A number of training programmes for youth workers and community groups were provided

Linkages with Other Services

- All General Practitioners (G.P.s) in the Board's area have been surveyed in relation to the development of shared care protocols and other aspects of the mental health services. G.P.s have participated in service reviews and discussions with sector and catchment area management teams.
- The Board carried out a series of focus groups for service users and carers across all sectors. The aim was to ascertain perceptions of how the service meets needs and identify desired quality improvements. These will be further addressed within the context of the Board's Continuous Quality Improvement programme.
- Voluntary agencies actively contributed to the development of action plans for Mental Health Promotion, Suicide Prevention and focus group discussions with carers and service users.
- Service Agreements have been entered into with a number of the voluntary agencies working in the area of mental health.

- The Board entered into discussions with the Department of Justice regarding any possible implications for the Board's Mental Health Services as a result of the extension of Portlaoise Prison.

Individualised Care Planning in Mental Health Services

The aim of care planning is to ensure prompt identification of the psychological, physical, social and residential needs of each person in receipt of care. Care plans seek to ensure that an individual is provided with the most appropriate response to his/her needs, in an appropriate environment, with care being planned in association with the individual and his / her family in order to achieve maximum potential in his/her life. Documentation and aggregation of the individual's needs assists in the planning and development of present and future services. (*Refer also Service Plan Introduction*)

- The pilot phase of care planning for persons attending Community Mental Health Centres was completed and audited. An Action Plan for implementation on a Board wide basis will be developed in 2000. There will be significant resource implications for extending the pilot programme and the Board will be making an application for funding to the Department. (*see targets 2.36., 2.61*)

Community Mental Health Services

- The planned opening of a High Support Hostel in the Longford sector did not materialise in 1999. Negotiations have resumed again with the staff associations on staffing levels and in the context of the rationalisation of community residential accommodation for the Longford Sector. (*refer to Target 2.64.6*)
- All sector teams now have full time secretarial support based at each Sector Headquarters. **£0.020m** was allocated in 1999.
- There was an increase in the number of referrals to Day Hospital and Day Centre services in line with 1999 Service Plan targets. Examination of the organisation of clinics resulted in the cessation of clinics in one location.
- Gaps in services continue to be evident because of the absence of Social Workers and Occupational Therapists on the multidisciplinary teams. It will be possible to partially redress this problem from the additional allocation received for 2000.

- Limited reorganisation of the practice bases of staff operating in the sectors commenced in 1999 and will be extended as additional members of the multidisciplinary team are recruited.
- The review of Psychology Services commenced in the last quarter of the year.
- **£0.025m** was allocated to provide for the full year cost of psychologists recruited in the latter half of 1998. The Board continued to experience difficulties in recruiting psychology staff. An Acting Senior Psychologist was appointed to the Laois / Offaly catchment area in September. Waiting lists and times for assessment and therapy by the Psychology Service in Longford / Westmeath have been reduced through expansion in the number of Psychologists recruited.

Drug and Alcohol Services

- The Review Group on Drug and Alcohol Services reported its findings and made recommendations. Implementation of its recommendations will commence in 2000.
- A counselling service for opiate abusers was established in the Athlone sector during the year. **£0.050m** was allocated for the development of the service in 1999. The problem of unsuitable accommodation has been resolved thus enabling the services to be developed further in 2000.

Child and Adolescent Psychiatric Services

- The Review Group of Child and Adolescent services completed its review and the final report is being drafted for submission to the Board in 2000.
- The allocation of additional monies already earmarked for the development of these services will be prioritised having regard to the findings of the Review Group

Psychiatry of Old Age

This new community based service commenced operation in Laois / Offaly in January of 1999. **£0.150m** was provided for 1999 revenue costs of 1998 developments.

- Planning for the introduction of a Day Hospital service in Laois / Offaly continued during the year. This will be opened in 2000. **£0.200m** was allocated toward the capital costs of this project in 1999.

Hospital and Long Stay Care

Acute in-patient care.

- Provision for an acute psychiatric in-patient unit in the next phase of the Capital Development at the Longford / Westmeath General Hospital is being addressed in the context of the Brief being prepared for Phase 2B of the capital development at this hospital.
- The Board carried out a preliminary review of operational policies and protocols within the framework provided in '*Guidelines on Good Practice and Quality Assurance in Mental Health Services.*' This work will be continued in 2000.

Long Stay Care and Support

- One ward closed in St. Fintan's Hospital, Portlaoise in line with the Board's policy to transfer elderly mentally infirm patients to more suitable and appropriate community based accommodation.
- **£0.521m** was allocated for upgrading and minor capital works in 1999 at St. Loman's Hospital and work is progressing at present.
- An assessment of the long stay care and accommodation needs of residents in both hospitals was completed and preliminary accommodation plans developed.

Management and Organisation of the Sectors.

- Work continued on devolution of budgets to sector teams during the year
Further

progress will be possible when the Board has fully implemented its new financial system.

- Deployment of a number of nursing staff to sector services was arranged during the year.
- **£0.010m** was allocated in 1999 for staff training in management/clinical areas. The Board is supporting a management education initiative being developed with the Association of Senior Psychiatric Nurse Managers and the Office for Health Management.
- An internal working group has completed a review of the future role, function and viability of the Training Centre in Portlaoise. The number of persons attending the centre has fallen and European Social Fund finance has diminished. In the light of these developments, an action plan is being prepared which will define the future role and funding of the centre.

Trends 1999

1999 projected activity (based on returns for 10 months ending 31/10/1999)

Out patient services	1998	1999
No. clinics held	740	716
No. of new referrals	618	690
No. of return appointments	9,950	10,445
Total attendances	10,568	11,135

Day Hospital	1998	1999
No. of new referrals	315	418
No. Registered	240	330
Total attendances	6,968	7,265
No. Discharges		265

Day Centres	1998	1999
No. Registered	161	211
Total attendances	24,871	21,645
No. new referrals		55
No. discharges		32

Community Residences	1998	1999
Number of places.	210	204
No. Residents	205	196
Bed days used	74,825	71,540

Hospital Care	1998	1999
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All Admissions	1,504	1,455
First admissions	319	330
Bed numbers	303	294
Substance Abuse Service	Laois / Offaly	L'ford / W'meath
No. new referrals	276*	485

*2 Substance Abuse Therapists currently in post in Laois / Offaly will complete training in 2000

Child and Adolescent Psychiatric Service	Laois / Offaly	L'ford / W'meath
No. clinics held	585	498
No. new referrals	193	189
No. referrals seen	132	122
No. returns	1,042	1,300
No. children referred For hospital care	9	20
Average waiting time	0 – 3 mths	0 – 6 mths

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Emerging Issues Identified during 1999

- Continued difficulty in the recruitment of Psychologists in the Laois / Offaly catchment area. This highlights the need for different approaches to be adopted in seeking solutions as to how best to recruit and retain such staff.
- Increasing demands for in-patient treatment facilities for children. This highlights the need for the Board to enter into Service Agreements with external providers thus avoiding the need to place children in inappropriate adult care facilities.
- Inadequate physical facilities for the child psychiatric services in Longford / Westmeath which limits the number and range of interventions which can effectively be offered.

- Need for respite care facilities for elderly mentally infirm throughout the region.
- Continued difficulties in accessing appropriate placements for the elderly mentally infirm and persons with mental handicap and chronic physical disability.
- A need for family therapy services to be established has been identified
- A number of beds in acute psychiatric in patient admissions units are occupied by persons who do not need such acute levels of care. A major contributing factor is the absence of appropriate alternative accommodation e.g. short/medium term community residential respite accommodation
- Under-investment in Community Mental Health Centres / Day Centres / Sheltered Workshops is limiting the potential of teams to provide the range and frequency of interventions available to meet needs. This is particularly so in the Tullamore, Birr and Athlone sectors. Bids for funding to provide such facilities will be made to the Department of Health and Children in the context of the National Development Plan.
- The requirement to provide high support, and special care facilities for a number of persons who will require on-going care following closure of the main hospitals.
- There is a need for further investment in staff training and development, particularly in the area of counselling and family therapy in the context of client needs and implementation

of the Report of the Commission on Nursing.

- Requirement for investment in integrated information technology systems to support data collection, management information, analysis and clinical audit.

The Government published a new Mental Health Bill in December 1999. The possible implications for service delivery arrangements and funding as a result of changes in mental health legislation are not addressed in the annual Service Plan for 2000.

Strategic Direction 2000:

The Board has been pursuing a policy, over the years, of developing integrated and comprehensive community – based mental health service for people in this care group.

Services include:

- Primary care provided by General Practitioners
 - o Out-Patient clinics provided by Consultant Psychiatrists

- Low, Medium and High support community residential accommodation
- Day Hospital / Day Centre / Activation Units
- Acute Psychiatric in- patient care

Acute Psychiatric in-patient services will be provided in purpose built acute psychiatric units attached to the Board's General Hospitals at Portlaoise and Mullingar.

An integral part of the strategy adopted is to provide for Mental Health Promotion, Prevention, Treatment and Rehabilitation services, including Drug and Alcohol services, Psychiatry of Old Age, Counselling Services and mechanisms to reduce the incidence of Suicide.

Development Funding – 2000 Allocation

A sum of **£0.914m** has been allocated for the continuation of ongoing initiatives and for the development of new mental health services. The Board acknowledges that this allocation represents a significant increase in investment over that received in previous years and welcomes the investment as a mark of future intent to improve services to those with, or at risk of developing, mental illness.

Service Area	£m
<p>Enhancement of paramedical requirements (half year costs)</p> <p>Appointment of 2WTE Psychologists Laois/Offaly</p>	0.083
<p>Provide administrative support to Sector HQ's in the services (half year costs) 1999 - 2000</p> <p>Continuation of 1999 development</p>	0.020
<p>Implementation of the Recommendations of the Task Force on Suicide</p> <p>See Targets for Suicide Prevention</p>	0.100
<p>Old Age Psychiatry Services, Longford / Westmeath New (half year costs) 2000-2001</p> <p>Appointment of 1 WTE Consultant Psychiatrist</p> <p>1 WTE Non Consultant Hospital Doctor</p> <p>3 WTE Nursing Staff</p> <p>1 WTE Senior Occupational Therapist</p>	0.250

1 WTE Secretary	
Paramedical staff (full year costs) 2000 – 2001	0.200
Appointment of: 2 WTE Senior Mental Health Social Workers	
2 WTE Basic Grade Mental Health Social Workers	
2 WTE Basic Grade Occupational Therapists	
Nursing Staff –additional posts	
Appointment of : 1 WTE to Birr Sector services	0.200
2 WTE to Day Hospital Old Age Psychiatry, Portlaoise	
1 WTE Nurse Therapist Longford / Westmeath	
Additional staff to address identified areas of need	
Support services – Omagh Bombing Tragedy	0.036
Research Associate (3 year NRB / INSURE collaborative research project on Suicidal Behaviour in Major Psychiatric Disorders) year 1	0.025
See under Targets for Suicide Prevention	
Total	0.914

In addition to the above, the following allocations are included under the Mental Health Service Plan.

Counselling services for adults who experienced abuse in childhood	0.190
Appointment of: 1 WTE Director of Services	
up to six WTE Counsellors	
Provision of Adoption Tracing Service	

Drug Services	
See Targets for: Substance Abuse Prevention	0.200
Appointment of: 1 WTE Senior Counsellor	
1 WTE Secretary	
Development of service for Opiate users in Athlone	
Total	0.390

SPECIAL EFFORTS WILL BE NEEDED TO ENSURE THAT THE ADDITIONAL PARA-MEDICAL GRADES OF STAFF IDENTIFIED FOR THE MENTAL HEALTH SERVICES ARE RECRUITED AND RETAINED. THIS WILL BE DONE IN CONSULTATION WITH THE PERSONNEL DEPARTMENT AND ACROSS CARE GROUPS

Proposed Developments In 2000

Performance Indicators

A number of performance indicators have been identified in the Board's service plan.

- Progress in relation to mental health promotion activities and strategies and enhancement of the partnership with voluntary bodies in the achievement of progress.
- Evidence of progress in acting on the recommendations of the National Taskforce on Suicide, in so far as they affect health boards.
- Evidence of progress in the development of Psychiatry of Old Age services
- Evidence of examination of the long term care needs of long stay patients e.g. measures taken to transfer patients to more appropriate care facilities in the community
- Evidence of providing additional community based places for people with mental illness
- Identification of progress, if any, on the transfer of acute psychiatric services from Psychiatric Hospitals to Acute General Hospitals
- Additional number of persons in long stay hospital care provided with individualised care plans

Health Promotion

Mental Health Promotion

Strategic Focus	Service Developments, Targets and Performance Indicators
<p data-bbox="236 320 501 568">Promotion of Positive Mental Health, prevention and reduction of mental health problems and illness.</p> <p data-bbox="236 763 440 864">Mental Health Promotion in Schools</p> <p data-bbox="236 1133 408 1200">Information provision</p> <p data-bbox="236 1391 496 1424">Staff Development</p> <p data-bbox="236 1615 496 1648">Community action</p> <p data-bbox="236 1984 480 2018">Addressing needs</p>	<p data-bbox="539 320 1361 465">The Board will build on work carried out in 1999 in association with staff and voluntary agencies. A number of short to medium term projects will commence - listed below. <i>(refer to Linkages in Review of Progress on 1999 Service Plan)</i></p> <p data-bbox="539 506 679 539">Target 2.1</p> <p data-bbox="539 580 1342 680">Strategies to reduce stigma. To set in place regional structures to support the Royal College of Psychiatrists anti-stigma campaign.</p> <p data-bbox="539 721 679 754">Target 2.2</p> <p data-bbox="539 795 1361 940">To establish a project team to provide for the integration of Mental Health Promotion into the Schools Health Promotion Programme in partnership with the Board's Health Promotion Department, Psychologists and the Mental Health Association .</p> <p data-bbox="539 981 679 1014">Target 2.3</p> <p data-bbox="539 1055 1305 1155">To examine strategies for the provision of improved information on the resources available to at risk groups and service users.</p> <p data-bbox="539 1196 679 1229">Target 2.4</p> <p data-bbox="539 1270 1342 1348">To develop a training package for staff groups on the delivery of Mental Health Promoting activities</p> <p data-bbox="539 1388 679 1422">Target 2.5</p> <p data-bbox="539 1462 1241 1574">To support the establishment of a voluntary / statutory agency alliance, to harness community resources.</p> <p data-bbox="539 1615 1201 1715">for mental health promotion. The Mental Health Association of Ireland will co-ordinate the alliance.</p> <p data-bbox="539 1756 679 1789">Target 2.6</p> <p data-bbox="539 1830 1281 1908">To commence a preliminary investigation of the needs of carers</p> <p data-bbox="539 1948 1361 1982">across all care groups, in order to maximise responses to carers</p>

<p>of carers</p>	<p>needs</p> <p>Total Cost: £0.015m</p> <p>Performance Indicator:</p> <p>Progress in relation to mental health promotion activities and strategies and partnership approach to same with voluntary bodies</p>
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Suicide Prevention

Strategic Focus	Service Developments, Targets and Performance Indicators
<p>The Board will work, in association with voluntary and statutory groups, to develop and implement health promotion initiatives which may contribute to reduction in the incidence of suicide in the Midland Health Board region.</p>	<p>Target 2.7</p> <p>To provide an additional facilitators training scheme for staff and voluntary groups (approx. 60 people) providing services to persons bereaved through suicide.</p> <p>Target 2.8</p> <p>To provide to people in crisis and other concerned persons, appropriate information on the services available.</p> <p>This information will also be available on the Board's web site.</p> <p>Target 2.9</p> <p>To sustain the conjoint Health Board / Samaritans Helpline, and associated promotional material.</p> <p>Preliminary evaluation of the help-line will also be carried out.</p> <p>Target 2.10</p> <p>To provide training for Health Board staff in dealing with self harm and para / suicide</p> <p>Target 2.11</p> <p>To hold a community 'dumping campaign' of unused drugs and medications. The project will be co-ordinated by the Board in</p>

	<p>association with community pharmacists</p> <p>Target 2.12</p> <p>To become a partner in the NRB / INSURE multi-centered research study to identify age specific treatment and prevention strategies.</p> <p>A researcher will be appointed to carry out the required research.</p> <p>Total cost £0.125m</p>
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Substance Abuse Prevention

Strategic Focus	Service Developments, Targets and Performance Indicators
<p>The Board will further develop information and support services at local level.</p>	<p>The Board will take a lead role in the development of a Regional Youth Health Programme.</p> <p>Target 2.13</p> <p>To develop an integrated and co-ordinated approach to youth service provision in the region.</p> <p>Target 2.14</p> <p>To provide support to projects which respond to the needs of young people:</p> <p>Tullamore Youth and Community Project, Athlone Drama Group, Connect 2000 – Integration Project, and Portlaoise Youth and Community Project.</p> <p>The Board will implement strategies for improving communications on substance misuse</p> <p>Target 2.15</p> <p>To hold a media campaign focussing on key messages relating to substance misuse</p> <p>Target 2.16</p> <p>To commence a Key Communications Project on interagency services</p>

Target 2.17

To appoint 2 Substance Misuse Health Education Officers

The Board will begin the process of developing a regional Substance Misuse Strategy in partnership with the key stakeholders from voluntary and statutory agencies.

Target 2.18

To develop an electronic data base on the educational initiatives and substance misuse prevention programmes provided by the Board

Target 2.19

To support the development of action plans by local community health networks / DQLA groups

Target 2.20

To provide support to development of 'Walk Tall Programme' for primary schools.

Target 2.21

To establish an interagency working group for development of schools substance misuse policies.

The Board will provide appropriate initiatives with Athlone Institute of Technology

Target 2.22

To develop with the Institute programmes to respond to smoking, alcohol and illegal drug use

Target 2.23

To provide an extra-mural course focussing on issues of substance misuse

The Board will work in partnership with national and regional bodies in providing training on models of good practice and evidence based research.

Target 2.24

To provide 3 in-service education and information events for

	<p>community care and health promotion staff.</p> <p>Target 2.25</p> <p>To provide 5 regional training events for service providers in youth work settings</p> <p>Target 2.26</p> <p>To provide 2 interagency training events for Health Board staff and Dept. of Justice staff.</p> <p>Total cost: £0.135m</p>
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Counselling Services for Adults who have Experienced Abuse in Childhood

Strategic Focus	Service Developments, Targets and Performance Indicators
<p>To provide appropriate responses to individuals seeking counselling.</p>	<p>A project steering group will be established to oversee the development of this new community based service.</p> <p>£0.190m was allocated in 1999 for the introduction of this service an additional £0.190 has been allocated in 2000</p> <p>Target 2.27</p> <p>Appointment of a Director of Counselling , up to 6 Counsellors, and secretarial support.</p> <p>Performance Indicator:</p> <p>Counselling services available to individuals requiring service.</p>
<p>To ensure seamless access to other services and supports required.</p>	<p>Target 2.28</p> <p>To develop protocols and procedures in line with best practice and legislation.</p> <p>Target 2.29</p> <p>To provide support services in adoption and family tracing for individuals in need.</p> <p>Performance Indicator:</p> <p>Adoption tracing services available. Staff recruited.</p>

<p>To monitor service delivery, utilisation and outcomes</p>	<p>Target 2.30</p> <p>To carry out research in accordance with nationally defined parameters, and establishment of a data base</p> <p>Total Cost: £0.190m</p>
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Linkages with other services

<p>Strategic Focus</p>	<p>Service Developments, Targets and Performance Indicators</p>
<p>The Board will continue to foster closer linkages and working relationships with other service providers and external agencies</p>	<p>Target 2.31</p> <p>To develop a mental health module for Gardai, Public Health Nursing and Community Social Work in service training programmes.</p> <p>Target 2.32</p> <p>To examine and implement mechanisms for strengthening linkages and referrals between community Drug and Alcohol Services and Acute General Hospitals.</p> <p>Target 2.33</p> <p>To continue to liase closely with the Department of Justice regarding possible implications for the mental health services as a result of the extension of Portlaoise Prison.</p> <p>Target 2.34</p> <p>To investigate the possibility of developing a Health Promotion Programme within the Prison Education Unit at the Midland Regional Prison, Portlaoise</p> <p><i>(See also Mental Health Promotion / and Substance Abuse Prevention Targets)</i></p>

Community Mental Health Services

Strategic Focus	Service developments, Targets and Performance indicators
<p>People in need of assessment and treatment services will be provided with rapid access to the services, and be provided with care by suitably qualified and experienced staff.</p>	<p>The Board will expand the existing package of services provided across sectors and achieve greater multidisciplinary input into the provision and co-ordination of care and support.</p> <p>Target 2.35</p> <p>To appoint 2 WTE Senior Mental Health Social Workers</p> <p>To appoint 2 WTE Basic Grade Social Workers</p> <p>To appoint 2 WTE Basic Grade Occupational Therapists</p> <p>To appoint 2 WTE Basic Grade Psychologists to Laois /Offaly area.</p> <p>To appoint 1 WTE Nurse Therapist Longford / Westmeath</p> <p>To appoint 1WTE Nurse to Birr sector.</p> <p>Total Cost: 0.353m</p> <p>The pilot project completed in Tullamore Sector identified a need for significant funding to be made available in order to expand the care planning programme. Audit and review are essential elements of care planning and service planning. Investment in computer information systems will be required when protocols and information flows are agreed.</p>
<p>Care Plans to be provided for persons attending services</p>	<p>Target 2.36</p> <p>To extend the care planning approach to needs assessment and delivery of care for persons attending Community Mental Health Centres. An action plan to enable the expansion of the programme will be developed during the year and cost will be identified.</p>
<p>To assist staff in professional development</p>	<p>(Refer also to targets for Long Stay Care)</p> <p>Target 2.37</p> <p>To provide team development programmes to sector teams which will facilitate enhanced sector management.</p> <p>Target 2.38</p>

<p>The Board will continue its policy of ensuring access to suitable treatment and rehabilitation facilities, and accommodation for individuals requiring on going care and support in the community.</p>	<p>To carry out a detailed ‘Education Needs Assessment’ of nursing staff operating in community mental health services, in the context of existing population health needs and the Report of the Commission on Nursing.</p> <p>The Board will seek to develop the range of physical facilities required to provide a comprehensive service to persons attending community mental health centres.</p> <p>This is particularly relevant to the Athlone, Tullamore and Birr sectors, and submissions will be made to the Department of Health for funding in the context of The National Development Plan.</p> <p>Target 2.39</p> <p>To implement sector accommodation plans within the level of resources available to the Board (Cross reference with Long Stay Care Targets)</p> <p>Performance Indicator</p> <p>Evidence of providing additional community based places for people with mental illness</p> <p>Target 2.40</p> <p>To implement a programme of backlog maintenance for community facilities, and to provide a planned programme of maintenance for all of the Board’s facilities.</p>
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Drug and Alcohol Services

Strategic Focus	Service developments, Targets, Performance Indicators
<p>The Board will provide drug and alcohol services on a sectorised basis and in a manner which is responsive to</p>	<p>To commence implementation of the recommendations of the Review Group on Drug and Alcohol Services 1999</p> <p>Target 2.41</p> <p>To appoint 1 WTE Senior Counsellor to community drug and alcohol teams.</p> <p>To appoint 1 WTE Clerical Officer and provision of</p>

<p>developing needs within the Board's area.</p> <p>The Board will continue to develop services for opiate users in the Midland Health Board Area.</p>	<p>appropriate I.T. system to community drug and alcohol teams.</p> <p>Performance Indicator:</p> <p>Staff appointed</p> <p><i>Services for Opiate users.</i></p> <p>This service is provided as part of an overall integrated package of services to substance mis-users.</p> <p>Target 2.42</p> <p>To further develop the service and facilities available in Athlone. This service will be provided by a General Practitioner, Substance Abuse Counsellor, Nursing and Attendant staff.</p> <p>Target 2.43</p> <p>To continue education and training for General Practitioners in the Board's area.</p> <p>Cost: £0.100m</p>
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Child and Adolescent Mental Health Services

Strategic Focus	Service Developments, Targets and Performance Indicators
<p>The Board will continue to support developments in the Child and Adolescent Mental Health Service and its interface with other service providers in the context of child health</p>	<p>Target 2.44</p> <p>To publish the Report of the Review Group on Child and Adolescent Psychiatric Services and commence development of the service in line with the recommendations and resources available to the Board. This will take into consideration the need to expand current services through recruitment of Psychologists, Occupational Therapists and Speech and Language Therapists.</p> <p>Performance Indicator:</p> <p>Report of the Review Group presented to the Board.</p> <p>Target 2.45</p> <p>To improve the accommodation for the Longford / Westmeath</p>

	<p>Service.</p> <p>Target 2.46</p> <p>To complete and evaluate the pilot phase of electronic patient administration and information system.</p> <p>Target 2.47</p> <p>Subject to the provision of suitable physical facilities, training groups for parents of children with behavioural difficulties will commence.</p> <p>Target 2.48</p> <p>To develop an assessment and treatment package for children with Attention Deficit Hyperactivity Disorder.</p> <p>Target 2.49</p> <p>Commencement of Patient Satisfaction and Outcome research project.</p> <p>Target 2.50</p> <p>Development of an information pack for agencies referring to the service.</p> <p>Performance Indicator:</p> <p>Information pack developed</p>
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Psychiatry of Old Age Service:

Strategic Focus	Service developments, targets, performance indicators and costs 1999
The Board will provide specialist support and advice relating to the special needs of elderly persons with mental health problems / dementia.	<p>Target 2.51</p> <p>A community based Psychiatry of Old Age service will be introduced in Longford / Westmeath.</p> <p>Recruitment and training of the full range of professional staff will commence.</p> <p>Cost: £0.250m (1/2 year)</p> <p>Protocols for referral and service delivery developed will be</p>

	<p>standardised across the Board's area</p> <p>Target 2.52</p> <p>To commence operation of a Day Hospital Service in Portlaoise.</p> <p>To appoint 2 WTE Nursing Staff</p> <p>To appoint 1 WTE Non Nursing Staff</p> <p>Cost: £0.080m</p> <p>Performance Indicator</p> <p>Evidence of progress in the development of Psychiatry of Old Age service</p>
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Hospital and Long Stay Care

Acute in patient care

The Board will continue to upgrade the facilities at St. Loman's Hospital and to provide acute in-patient services at appropriate levels.

Strategic Focus	Service Developments, Targets and Performance Indicators
<p>The Board will ensure that Hospital Services will be delivered to meet the needs of each sectors population.</p> <p>It will ensure discharge planning is co-ordinated in order to deliver seamless care between hospital and community services.</p>	<p>According to the Report of the Irish Psychiatric Services (1997) 20.3% of all admissions to hospital were for alcoholic disorders. In the corresponding period 28.8% and 30.5% of all admissions to St. Fintan's and St. Loman's Hospitals respectively were for alcohol disorders.</p> <p>Target 2.53</p> <p>To develop and implement in so far as is practicable a plan to bring the Board's admission rate for alcohol disorders into line with the national average.</p> <p>Performance Indicator</p> <p>Plan developed and implementation targets agreed.</p> <p>The publication of the National Development Plan (1999), which envisages half of the monies made available being allocated to non acute hospital, presents an opportunity for</p>

further bids to be made to the Department of Health and Children, for the development of infrastructure for the care of persons with a mental illness. A submission for funding will be made by the Board in 2000.

Target 2.54

To continue development and refurbishment of the Acute Admissions Unit at St. Loman's Hospital in line with the level of resources available.

Target 2.55

To carry out a study of the precipitating factors, needs and supports required by persons with schizophrenia who are readmitted to hospital on a frequent basis. The Psychology department will co-ordinate this study with a view to determining supports and services required by patients and families to reduce hospitalisation rates.

Target 2.56

Acute psychiatric in-patient services will in the future be provided in General Hospitals. The proposed units will provide 50 beds each including provision for the elderly mentally infirm. The aim of the Board is to establish practices and admissions protocols which will enable services to be delivered within the proposed bed compliment for new units. This implies a reduction in the utilisation of acute in-patient beds and occupancy rates across the region.

Target 2.57

To provide a 50 bed Acute Psychiatric in-patient Unit at the General Hospital Portlaoise. Time frame: By 2003

Target 2.58

To provide a 50 bed Acute Psychiatric in-patient Unit at the General Hospital Mullingar Time frame: By 2004

Target 2.59

To continue to address identified and necessary nurse staffing levels throughout the region

Cost: £0.070m

	<p>Target 2.60</p> <p>To continue the process of Policy and Procedure review in the context of the Board's Continuous Quality Improvement programme and with regard to the recommendations set out in the Report of the Inspector of Mental Hospitals, and</p> <p><i>'Guidelines on Good Practice and Quality Assurance in Mental Health Services.</i></p>
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Long Stay Care and Support

Strategic Focus	Service Developments, Targets and Performance Indicators
<p>The Board will continue to implement its policy of providing assessment, care and support to long stay and older patients with mental health problems in settings suitable to their needs.</p>	<p>The Inspector of Mental Hospitals has, in successive reports, called for the closure of some long stay wards, and the de-designation of elderly care wards in the Board's Psychiatric Hospitals. In addition, suitable alternative community residences, improved access to Care Centres for Older People and Mental Handicap facilities must be provided.</p> <p>The total number of patients in St. Fintan's Hospital at present is 91 of which 51 are long-stay. Of 183 residents in St. Loman's Hospital, 133 are long-stay.</p> <p>Target 2.61</p> <p>All persons in long stay care will have health/ social/residential care needs identified and documented on an individualised care plan. This care plan will be the basis upon which future service needs will be identified, planned and delivered.</p> <p>Performance Indicator</p> <p>Persons in long-stay hospital care provided with individualised care plans.</p> <p>Target 2.62</p> <p>To consolidate existing rehabilitation programmes for persons in Long Stay Psychiatric Hospital Care through appointment of an Occupational Therapist. (<i>see Community Mental Health Services and Psychiatry of Old Age</i>)</p> <p>Following an assessment of the residential needs of all long stay patients in St. Fintan's and St. Loman's Hospitals the residential accommodation required to implement the Board's</p>

policy of development of community services and transfer of acute in-patient care to General Hospitals were identified.

The Board has chosen three performance indicators of progress on targets to providing alternative residential accommodation which are in line with the Board's policy and Inspector of Mental Hospital's recommendations.

Performance Indicator

- Evidence of examination of the long term care needs of long stay patients e.g. measures taken to transfer patients to more appropriate care facilities in the community

- Evidence of providing additional community based residential places for people with mental illness.

- Reductions in number of new long stay patients.

Subject to the availability of exchequer funding to facilitate the additional residential accommodation required, the Board will proceed with the following targets

Target 2.63

To attend to identified maintenance priorities in all hospital / residential facilities throughout the region. (See also target 2.40).

Laois / Offaly

Target 2.64

As a result of the transfer of patients from Female Ward 6, St. Fintan's Hospital, Portlaoise, to St. Vincent's Hospital Mountmellick and St. Bridget's Hospital Shaen, the option now exists to provide better conditions by the transfer of Male 6 ward patients to the former Female 6 Ward which has been vacated.

Target 2.64.1

To establish the process of transferring Male 6 ward patients to former Female 6 ward. Time Frame: By 2000

Target 2.64.2

To establish the process of de-designation of Male 6 ward

Time Frame: By 2000

The existence of a Psychiatrist of Old Age and his team provides the Board with an opportunity in this regard.

Target 2.64.3

To transfer 21 male patients from Male 6 ward to care centres for the elderly. Time frame: By 2002

Target 2.64.4

To provide 1 High Support Residence (Portlaoise Sector) 15 / 20 places Time frame: By 2003

Target 2.64.5

To provide 1 Extended Care Residence (Portlaoise Sector) 12 places necessary to provide for persons requiring similar levels of care to that provided in hospital. Time frame: By 2003

Longford / Westmeath

The assessment of accommodation needs for residents in St. Loman's Hospital indicates that there are a number of persons suitable for community residential accommodation

Target 2.64.6

To further pursue with staff groups the Rationalisation Plan for Community Residential Accommodation for Longford Sector originally put forward in the 1999 Service Plan.

Time frame: By 2000

A number of persons at each of the Board's psychiatric hospitals require special care which cannot be adequately catered for in the current structures. A Department of Health discussion document (1998) proposed the development of a number of Intensive Care Units on a national basis.

Target 2.64.7

	<p>To agree, in 2000, a Board-wide policy and procedure to care for persons in the region requiring special care. The proposal to develop a Special Care Unit, as outlined in the Development Plan for St. Loman's Hospital in May 1998, will be re-appraised in light of the National Discussion Document.</p> <p>Time frame: By 2000 Target 2.64.8</p> <p>To provide additional community residential places for patients from the Mullingar sector.</p> <p>Time frame: By 2000</p> <p>Target 2.64.9</p> <p>To further progress upgrading of elderly care wards at St. Loman's Hospital,</p> <p>Target 2.64.10</p> <p>To establish the process of de-designation of St. Brigid's Block as an elderly care facility Time Frame: By 2000</p>
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Organisation and Management of the services.

Strategic Focus	Service Developments, Targets and Performance Indicators
<p>The Board will continue to emphasise the primacy of the sectors and to reorganise services to deliver treatment care and support locally where possible and practical. Services will be delivered in the most effective and efficient manner possible</p>	<p>Supports identified as required to strengthen sector management and to support budgetary development will be put in place.</p> <p>Target 2.65</p> <p>The Board will continue its policy of basing all new appointees to the service primarily in the sectors where services are provided as the full compliment of staff required are recruited.</p> <p>Services will be provided to the level and quality agreed in operational plans drawn up by service providers in exchange for budgets provided.</p> <p>Target 2.66</p>

taking into consideration the range of skills and resources available.

Each management team will be required to stay within budget and to stay within the approved WTE control number
Monitoring will be carried out on a monthly basis at sector, catchment area and Board level, and corrective action taken where targets are not being met.

Progress on implementation of Operational and Service Plan targets will also be reviewed at the Annual General Meeting of the Mental Health Services