<u>Report of High-Level Taskforce to consider the mental health and addiction challenges of those</u> who come into contact with the criminal justice sector

HLTF Implementation Steering Committee 4th Meeting

<u>Thursday, June 29th at 2.30pm – in-person in Department of Justice HQ, 51 St Stephens' Green,</u> <u>Dublin 2</u>

Minutes of meeting

Attendees:

- Chair Ben Ryan; Assistant Secretary, Department of Justice
- Siobhan McArdle; Assistant Secretary, Department of Health
- Mary O'Regan; Principal Officer, Department of Justice
- Dr. Philip Dodd; Policy and Clinical Specialist, Department of Health
- Siobhan Hargis, Principal Officer, Department of Health
- Alan King; Assistant Principal Officer, Department of Justice
- Michael Murchan; Assistant Principal Officer, Department of Health
- Niamh Richardson, Administrative Officer, Department of Health
- Chief Superintendent Gerry Roche, AGS
- John Devlin, IPS
- Emma Regan, Clinical Psychologist, Head of Psychological Services
- Pat Bergin, Director, CMH Portrane
- Paul Braham, Senior Operations Manager, HSE Mental Health
- Fíona Ní Chinnéide, Deputy Director, The Probation Service
- Secretariat: Oonagh Ffrench; Higher Executive Officer, Department of Justice

Agenda:

- 1. Welcome DoJ Chairperson
- 2. Minutes of meetings of 31st May 2023
- 3. Mapping process –outline of work undertaken to-date

Draft Guidance Note

- 4. Outline of progress to date on the implementation of the HLTF recommendations:
 - i) Department of Health; Siobhan McArdle, Assistant Secretary
 - ii) Department of Justice; Ben Ryan, Assistant Secretary
 - iii) Irish Prison Service; Dr John Devlin and Emma Regan, Head of Prison Psychology
 - iv) The Probation Service; Fíona Ní Chinnéidhe, Deputy Director
 - v) An Garda Síochána; Gerry Roche, Chief Superintendent

vi) Health Service Executive; Pat Bergin, Director of CMH and Paul Braham, Senior Operations Manager, HSE Mental Health

- 5. Preparation of progress update to Ministers
- 6. AOB next meeting date of Steering Committee

Minutes:

1. Welcome - DoJ Chairperson

1.1 Chair opened the meeting by welcoming everyone especially the agency representatives who were in attendance. This would facilitate review of HTLF progress generally, including for the report to Ministers in September this year.

2. Minutes of meetings of 31st May 2023

2.1 The minutes of the third Steering Committee (SC) meeting were agreed by the Steering Committee.

3. Mapping process –outline of work undertaken to date

3.1 Chair outlined that the mapping process is nearing completion. It has grown with the HNA and other pieces of work to be added to it and when ready, it will be shared with all members of the SC and the stakeholders.

Draft Guidance Note

3.2 Chair acknowledged that all stakeholders were sent the draft Guidance Note and requested any observations on same to be returned to the relevant parent Department by cob on Thursday, 6th July. He stated that a reporting template is being finalised by the SC which will be sent to all stakeholders for completed return by end July 2023.

4. Outline of progress to date on the implementation of the HLTF recommendations:

4.1 Department of Health; Siobhan McArdle, Assistant Secretary

The Mental Health Information Bill is at Second Stage and due before the Dáil in Autumn session this year. The key benefits of this in terms of information sharing, patient pathways and greater efficiencies overall was outlined.

There is work being carried out by DoH colleagues on the HLTF recommendations and stated that the short/medium term recommendations are potentially achievable within the relevant timeframes, subject to evolving resource and capacity issues for the health sector.

Details were also outlined on the STV Bed Capacity review, staffing recruitment and retention challenges, and work by DOH on Strategic WorkForce Planning, to include EU and wider perspectives.

4.2 Department of Justice; Ben Ryan, Assistant Secretary

The publication of the Health Needs Assessment (HNA) report is completed. Mr Ryan stated that the InterAgency Group (IAG) and in particular the Central Statistics Office (CSO) who sit on this Group are keen to co-ordinate the work they are carrying out for the IAG on homelessness with the work of this Group.

Approval has been given for inclusion of in the Policing, Security and Community Safety (PSCS) Bill. However, it is not known whether this Bill will be used as the vehicle for publication of same.

<u>4.3 Irish Prison Service; Dr John Devlin, IPS and Emma Regan, Clinical Psychologist, Head of</u> <u>Psychological Services</u>

There are 3 main areas to strengthen provision of MH services for vulnerable prison population:

- 1. Support and mandate the "Portrane Model of Care" which means the provision of sufficient beds and capacity to meet the needs and generate increased activity and increase admissions to the level of 2013/14;
- 2. The provision of CMH long term medium secure stepdown beds to relieve pressure on current CMH bed complement;
- 3. Strengthen the current arrangements relating to the provision of mental health care across the IPS estate.

IPS is working closely with NFMHS on these as well as being represented on the HSE Justice Workstream group tasked with implementation of StV.

Specifically in relation to IPS actions:

a) HNA has been published and will form basis of provision of healthcare over coming year. IPS has developed a tender RFT document which will be published shortly through OGP – this relates to the organisation and design of health care in IPS;

b) Development of a central facility to manage patients on transfer back from CMH. Mountjoy is proposed location and IPS is working with NFMHS and established Operation and Clinical Working Groups to progress this. Part of this work will involve consideration of existing arrangements (HSU) for patients awaiting transfer to CMH;

c) Mental Health and Addiction Study – the existing information is very dated and IPS is working with NFMHS and Probation Service with a view to going for tender to complete this work;

d) IPS is progressing recruitment of a Mental Health and Addiction Nursing lead;

e) Dual Diagnosis – IPS will engage with HSE on the development of a pilot prison programme.

Dr. Dodd stated that Minister of State Butler recently launched the Dual Diagnosis Model of Care and associated services in three locations (two adult and one CAMHS team). Dr Devlin said that the IPS would be keen to explore this further especially the one in North Dublin. Dr. Dodd also gave an update on recent developments covering Self Harm data, Training/Intervention and relevant national mental health Clinical Programmes.

Action point: Relevant issues should be pursued via StV Justice workstream.

In relation to point c above, Mr. Bergin explained that the 2004 research carried out was very different to the analysis for this Study which will be much broader. Dr Devlin stated that it is hoped that this research will identify the risk factors in the long term which will help to mitigate risks and plan for the future.

The Chair stated again that the CSO are very interested in this topic.

Ms Regan stated that prison psychologists are now dealing with broader issues such as very severe eating disorders, anxiety, addiction issues, ADHD and autism. She added that the research carried out needs to be conducted by clinicians.

Mr. Bergin stated that the tender to procure for this research has been prepared and will be completed by the end of this year. The research will then take 18 months in total to compile.

Ms McArdle referenced the Health Information Bill which supports the development of care pathways. The timeline for same is to be provided.

Ms Regan stated that there has been a spike in self harm in prisons over the previous few weeks and the IPS Psychological Service is trying to get a resource to gather and collect this data.

4.4 The Probation Service; Fíona Ní Chinnéide, Deputy Director

The Probation Service participates in StV. The main structural developments are the Working Group on MH and the finalised Mental Health Action Plan which came out of research undertaken by The Probation Service in 2021. Training for the Mental Health Action Plan is being carried out currently until the year ahead when a feasibility study will then be carried out.

There are 2 HLTF recommendations still to be embedded relating to screening and assessment which will involve a multi-agency management approach.

An Assistant Principal (AP) has been assigned to the area of Social Inclusion and Outreach and there has also been an AP assigned for young people.

The Chair stated that the President of the District Court is eager to communicate the work of diversionary Court programmes such as restorative justice to other relevant persons. Lastly, the Fines Act is currently with the Minister for Justice for consideration together with a policy paper on the review of same.

4.5 An Garda Síochána; Gerry Roche, Chief Superintendent

The 2 main diversionary schemes to be discussed are :

1) The Adult Caution Scheme (ACS) : This scheme is ongoing in AGS. The Office of the DPP is expanding the study being carried out throughout the AGS organisation. It may mean that there is an extension of the range of offences covered by the ACS, to also include drugs perhaps, however this needs to be discussed further with the Commissioner. Legislative changes may be required and are in touch with Crime and Legal Unit of AGS.

2) CAST : The Multi-Agency Initiation Document has been signed off together with the HSE Steering Committee's Terms of Reference.

The 9 month pilot will be rolled out in November 2023 in CHO3 in Limerick. The recruitment campaign for clinical nurses for the CAST project has been advertised. Three suitable applicants from AGS have been identified to work on CAST. A suitable location to act as the central hub has also been identified. There will be a triage carried out on emergency calls received for relevant cases to be assigned to the CAST project. AGS envisage that CAST will be rolled out across all 17 AGS Divisions after the pilot is complete.

<u>4.6 Health Service Executive; Paul Braham Senior Operations Manager) and Pat Bergin, Director CMH</u> (b)

(a) There are 10 STV Workstreams, including the Justice Workstream. HSE have developed a HTLF mapping exercise, linked to relevant StV recommendations. HSE/DOH will publish the STV 2023 Q2 progress in the near future.

(b) Overall bed capacity in the CMH has gone from around 95 patients following the move to Portrane, with 110 beds now open. Around 25 patients have been admitted since November 2022. There are acknowledged challenges around increasing current bed provision, including the HSE having to take account of Mental Health Commission requirements around Night Time Confinement, new resource implications etc. There are 10 further beds for women and 10 for **the MHID, which is currently at capacity.**

There are acknowledged difficulties to recruit staff for the 30 bed ICRU building and the 10 bed CAMHS unit, that will take some time to address.

Two HLTF recommendations refer, one of which is the requirement for analysis, which is jointly progressing. The other is Court Diversion which encompasses the prison In-Reach Scheme in Cloverhill prison. The expansion of same around the country to other prisons is being proposed and there is ongoing engagement with the prisons In-reach teams regarding same.

IPS asked whether there was any plan for a stepdown facility for prisoners requiring CMH facilities to become operational. HSE responded that they are looking at how they can move patients out into the community and are looking at assessing patients' suitability to move.

HSE and DoH are progressing a strategic bed capacity review for mental health under STV, including resourcing implications. It may mean that further staff resources for CMH may be from outside this jurisdiction.

The Group was informed that a long-term medium-secure facility is not likely over the next few years. This is not in STV or the HSE Capital plan, but ICRUs and PICUs are envisaged Separately, the HSE is examining a proposal for a new 42 bed facility, which is not at present captured under the HSE capital programme. It may have to be the case that a private facility, such as Nua Healthcare, is used to relieve the pressure on the current situation despite this being an expensive option.

The Chair stated that the DoJ Secretary General had recently written to Bernard Gloster, CEO, HSE in relation to CMH admissions. Pat Bergin acknowledged receipt of same and will respond in the coming weeks.

5. Preparation of progress update to Ministers

The Chair stated that it is intended that the Reporting Template currently being drawn up by the Secretariat would be issued to all Stakeholders in the coming weeks. It is anticipated that it would be completed by them and returned to the relevant parent Department by the end of July 2023 in order for the first report to the relevant Ministers be prepared in September 2023.

6. AOB – next meeting date of Steering Committee

Next meeting date proposed for the beginning of September.