

MENTAL HEALTH ACTION PLAN

2024

Sinn  *Féin*

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Executive Summary

Sinn Féin's *Mental Health Action Plan* would transform how we deliver mental health services across the country. It sets out our absolute commitment to delivering widespread and significant change and a fresh start in mental health care. Sinn Féin would ensure that access to services is based on need and not where you live or your ability to pay privately. Our plan is based on fairness, access to high quality local services, early intervention, prevention, and suicide reduction. We would ensure parity of esteem between mental and physical health, and that mental health is seen as an all of government priority.

We want to develop universal access to community-based therapy, counselling, and support, alongside addressing the crisis in emergency, urgent, and acute services. We also want to see better care and outcomes for children and young people up to the age of 25, ending the cliff edge faced by many young adults and the barriers that disadvantage people with disabilities.

The big difference between Sinn Féin's plan and Fianna Fáil/Fine Gael's approach is that we will move away from decades of crisis management and underinvestment to community-based, proactive care. This would be backed up by multi-annual funding, long-term planning, and workforce planning.

The Government has paid lip service to mental health and wellbeing but have failed to deliver on the promises of *Vision for Change and Sharing the Vision*. The result is that mental health services are in a state of emergency. Funding has been stagnant, reform has been stalled, and waiting lists have reached crisis point.

Since Fianna Fáil/Fine Gael came into office Primary Care psychology waiting lists have doubled. The number of young people waiting for appointments with CAMHS has increased from 2115 to 3842, with 491 children waiting more than a year. There has been little to no new funding in 2024 for the National Clinical Programmes, such as for Eating Disorders or for Suicide Reduction. People with dual diagnoses are not being properly supported. HSE recruitment embargoes and a lack of strategic workforce planning at Government-level have left mental health teams understaffed across the country with devastating consequences.

The community and voluntary mental health sector provide vital services for people that otherwise would not be seen in the public system. The sector is essential for providing cost-effective, wide-reaching community services. Our priority is to develop public services and we would work with core service partners to develop an efficient, sustainable mental health ecosystem.

Investment in mental health and wellbeing is a no-brainer. The social and economic benefits of a healthy and happy society are numerous. The impact on young people's development, and our own growth as we age, cannot be overstated.

Sinn Féin's plan would deliver:

1. Local services as the first port of call for people with mental health difficulties, with universal counselling, statewide access to Jigsaw, and strong links with GPs.
2. A new Child and Youth Mental Health Service to replace CAMHS and increase the upper age limit from 18 to 25 for access to these services.
3. 20 additional eating disorder inpatient beds and community-based services.

4. Joint care plans between addiction and mental health services to support people who have a dual diagnosis and re-open Keltoi, the residential dual diagnosis facility closed since 2020.
5. Fully staffed emergency mental health services and regional crisis response teams.

Making it happen:

- Multi-annual funding of clinical strategies and improvement programmes.
- Build and support the workforce through strategic workforce planning across further and higher education, and the health service.
- Integration and digital transformation.
- Progress based on reform and accountability, including a new Mental Health Act which puts patient safety front and centre.

Key Measures

1. Reform the Mental Health Act
2. Deliver universal counselling in primary care and statewide access to integrated mental health and wellbeing community services, including Jigsaw
3. Deliver a new Child and Youth Mental Health Service to replace CAMHS and provide integrated early intervention services for children and young people to the age of 25
4. Deliver 47 additional community CAMHS teams, 17 CAMHS-ID teams, 41 inpatient CAMHS beds, and 20 Early Intervention in Psychosis teams
5. Provide multi-annual funding certainty to clinical programmes
6. Fund 20 additional eating disorder inpatient beds and community-based services
7. Full Emergency Department rollout of the self-harm and suicide reduction programme and embed across primary care and everyday clinical practice
8. Fund the medium-term development of all early intervention in psychosis and ADHD teams, integrated with child and youth, and adult mental health services as appropriate
9. Develop and implement an Action Plan to Combat Loneliness and Isolation
10. Embed mental health and wellbeing in community services for minority groups, marginalised people, and older people
11. Legislate to obligate any Government to uphold No Wrong Door policies and support health and social care services to implement such policies
12. Fund the re-opening of Keltoi, the residential dual diagnosis facility
13. Develop regional crisis resolution and de-escalation teams
14. Fund Consultant Liaison Psychiatrists at every Emergency Department
15. Fund Suicide Crisis Assessment Nurses in Emergency Departments and Primary Care
16. Roll out Crisis Cafés in every city
17. Develop all-island mother and baby perinatal mental health unit
18. Advance professional regulation with CORU
19. Fund all trainee counselling and educational psychology positions in line with their clinical counterparts
20. Implement a multi-annual strategic workforce plan and significant increase graduate and postgraduate training places

Mental Health Reform

The Mental Health Act, 2001 is outdated and there have been calls for reform since 2015. Government have delayed the publishing of this Bill until July 2024, leaving little time for it to progress through the Houses of the Oireachtas. Sinn Féin in Government would prioritise the reform of the Mental Health Act to ensure robust and comprehensive person-centric mental health legislation that will protect the rights of people with mental health difficulties in the decades ahead.

Sinn Féin Priorities

1. **Reform the Mental Health Act**

Primary Care, Counselling and Wellbeing

Primary care should be the first port of call for people who are experiencing periods of mental health difficulties, and the vast majority of mental health or psychosocial needs can be met through community services.

Primary care psychology waiting lists have more than doubled since this Government took office in 2020, from 10,466 to 21,707. Over 19,000 of these are under the age of 18. There are no counselling services for children in primary care.

Sinn Féin would deliver an accessible mental health service which is rooted in local communities. We would build up primary care wellbeing, counselling, psychotherapy services and fund equitable, universal access. We would ensure consistent relationships between GP medical services, core community partners such as Jigsaw, and secondary and acute care services.

Sinn Féin Priorities

1. **Deliver universal counselling in primary care**
2. **Fund statewide access to integrated mental health and wellbeing community services**

Child and Youth Mental Health

Youth mental health services are at breaking point. Waiting lists for Child and Adolescent Mental Health Services are up by 80% since this Government took office, with the number waiting over a year up 140%. Early intervention is key to reducing the chance of lifelong ill-health, but that chance is passing young people by. 75% of mental health conditions are established by the age of 25, but young people aged 18-25 are not specifically targeted for early intervention.

To develop a robust and practical policy for improving youth mental health services, Sinn Féin engaged with key stakeholders in Ireland and internationally, facilitated by Orygen, the leading Australian centre of excellence in youth mental health. We published this policy, *Priorities for Change in Child and Youth Mental Health*, in full in 2023.

We are proposing to develop child and youth mental health and wellbeing services which

provide care for young people up to the age of 25 before transitioning to general adult services. This service would be multi-disciplinary and integrated across care sectors, with strong links to relevant mainstream and disability services. Part of this expansion would include state-wide coverage of Jigsaw's dynamic services, as well as the full complement of HSE services including community-teams, inpatient places, intellectual disability teams, and specialist early intervention in psychosis services.

The Mental Health Commission has recommended that community CAMHS be regulated under the Mental Health Act, 2001, to give oversight to the Commission and the statutory powers to implement change. Sinn Féin has introduced legislation to do this, and we would include this in legislation to reform the Mental Health Act, 2001.

Sinn Féin Priorities

- 1. Deliver a new Child and Youth Mental Health Service to replace CAMHS and provide integrated early intervention services for children and young people to the age of 25**
- 2. Expand access to Jigsaw and primary care mental health services to deliver equitable access across the state, and deliver universal counselling in primary care**
- 3. Deliver 47 additional community CAMHS teams, 17 CAMHS-ID teams, 41 inpatient CAMHS beds, and 20 Early Intervention in Psychosis teams**
- 4. Reform the Mental Health Act to include the regulation of community CAMHS**

Clinical Improvement Programmes for Mental Health

There are four HSE National Clinical Programmes in Mental Health: Eating Disorders, Self-Harm and Suicide Reduction, Early Intervention in Psychosis, and ADHD in Adults. People in need cannot access these services in much of the country because they do not exist. People cannot be referred to another catchment area, leading to a postcode lottery.

Eating disorders have the highest mortality rate of any mental health difficulty. However, there are only 3 public adult inpatient eating disorder beds in the state, all located in one catchment area. People in need of emergency care are often admitted to A&E due to the lack of alternatives. The self-harm and suicide reduction programme is only available in 26/29 emergency departments in the state. Only 5 Early Intervention in Psychosis teams have been established, out of 25, and 4 Adult ADHD teams are still needed.

Sinn Féin Priorities

- 1. Provide multi-annual funding certainty to these clinical programmes**
- 2. Fund 20 additional eating disorder inpatient beds and community-based services**
- 3. Full Emergency Department rollout of the Self Harm and Suicide Reduction programme and embed across primary care and everyday clinical practice**
- 4. Fund the medium-term development of all EIP and ADHD teams, integrated with child and youth, and adult mental health services as appropriate**

Loneliness, Isolation and Inclusion

Many people experience loneliness and isolation at different stages in their lives. Most of us were impacted by the Covid-19 pandemic, and we are all challenged as we become a more-and-more technology dependent society. People with physical and psychosocial disabilities, people from minority backgrounds, and older people can face particular isolation. Sinn Féin would fund an action plan to support inclusion and wellbeing, supporting those most at risk of isolation.

Sinn Féin Priorities

1. Develop and implement an Action Plan to Combat Loneliness and Isolation
2. Embed mental health and wellbeing in community services for minority groups, marginalised people, and older people

No Wrong Door

People who present for help for dual diagnosis often fall between the gaps that exist in addiction and mental health services. An addiction may lead to the onset of mental health difficulties or a mental health difficulty can lead to people using substances as a coping mechanism. Sinn Féin would urgently implement a fit-for-purpose model of care for people presenting with dual diagnosis as laid out in Sharing the Vision. Mark Ward TD and Thomas Gould TD introduced the Dual Diagnosis: No Wrong Door Bill. This bill will ensure that no matter what door the person knocks on for help for addiction and mental health difficulties, that they are treated with dignity. A joint care plan between addiction and mental health services needs to be developed to make sure people get the care they need, when they need it and where they need it. There can be No Wrong Door for dual diagnosis treatment.

Keltoi, a trauma-informed, state-run residential facility treating addiction and mental health dual diagnosis was closed in March 2020 during Covid Restrictions and has not re-opened since. Sinn Féin would re-open this vital rehabilitation service to help people to fully recover from dual diagnosis and to learn new coping skills.

Similar challenges face people who are neurodiverse or who have physical disabilities when accessing mental health services. Sinn Féin would embed clear and accountable care pathways to deliver access to mainstream and specialist services as appropriate.

Sinn Féin Priorities

1. Legislate to obligate any Government to uphold No Wrong Door policies
2. Support health and social care services to implement No Wrong Door policies
3. Re-opening of Keltoi, the residential dual diagnosis facility
4. Ensure joined care planning between services and appropriate training for inclusion

Crisis Intervention

Mental health difficulties do not just occur between the hours of 9-5, Monday to Friday. A&E is often not the most appropriate place for people in a crisis.

Sinn Féin would develop a mix of 24/7, community-based multidisciplinary services to provide rapid assessment and varying degrees of support to people who are in a mental health crisis. Access to services from call lines to Crisis Resolution Teams is essential. There is a role for new Solace or Crisis Cafés within the community.

When a person is a danger to themselves or others, crisis de-escalation teams can be deployed to assist the Gardaí where necessary and appropriate. These teams would comprise of mental health professionals and a paramedic. These can make the most appropriate interventions and referrals where necessary. A pilot programme in Limerick has been promised for the previous two years but has not been delivered. We have seen the successes of this service where a pilot was rolled out in Belfast.

Sinn Féin Priorities

1. Develop regional crisis resolution and de-escalation teams
2. Fund 2 WTE Consultant Liaison Psychiatrists at every Emergency Department
3. Fund Suicide Crisis Assessment Nurses in Emergency Departments and in Primary Care in line with the National Clinical Programme on Self Harm and Suicide Reduction
4. Roll out Crisis Cafés in every city
5. Support access to urgent mental health support and advice

Maternity Hospital Mental Health Perinatal Care

There is currently no dedicated mother and baby perinatal mental health unit on the island of Ireland. This means that mothers who need to be admitted for inpatient care are separated from their newborns. Sinn Féin would provide funding to advance the Mother and Baby Perinatal Mental Health Unit at Elm Park, which will host the new National Maternity Hospital. This would be an all-island service for all those who need it.

Sinn Féin Priorities

1. Develop all-island mother and baby perinatal mental health unit

Workforce Development and Professional Regulation

Ambitious plans cannot be delivered without equally ambitious workforce planning. Government after Government has expected mental health professionals to appear out of thin air. Sinn Féin would deliver a new, multi-annual approach to workforce planning. We would ensure joined up thinking across Further and Higher Education and Health.

Professional regulation of allied health and social care professionals remains an ongoing saga. Regulation of Counsellors and Psychotherapists began in 2018 and has yet to be completed.

Professional regulation is essential to protect patients and professionals and guarantee the highest quality of care. This process must be supported so that certainty can be given to professionals and people seeking supports. Sinn Féin would also fund trainee counselling and educational psychologists in line with their trainee clinical psychologist colleagues.

Sinn Féin Priorities

1. Implement a multi-annual strategic workforce plan across the health service and higher education institutes to address short-, medium-, and long-term workforce challenges
2. Advance professional regulation with CORU
3. Double CAO entry undergraduate places, expand access to medicine for domestic students, and reduce fees for graduate entry to medicine
4. Fund all trainee counselling and educational psychology positions in line with their clinical counterparts
5. Establish a high-level group, including the Taoiseach and the Ministers for Health and Further and Higher Education, to oversee implementation of a multi-annual health workforce strategy
6. Legislate for safe staffing levels and fund staffing accordingly across wards, emergency services, community care, and long-term care
7. Give Irish-trained healthcare professionals a job guarantee, and mandate the HSE to work with them as they approach graduation to ensure timely placement into work
8. Engage with Irish healthcare workers abroad to ensure they can return to work in the health service where they want to





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