



## College of Psychiatrists of Ireland

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### *2022 Budget Submission*

Covid-19 has caused a tsunami of negative effects on secondary specialist mental health services. These services continue to see increased severity of referrals, emergency presentations and greater numbers of patients with serious mental illness experiencing relapse.

This is in the context of an already grossly inadequate budget for mental health services and makes provision of a modern, fit for purpose, equitable service for all, unattainable.

The goal of achieving parity of esteem for individuals with mental illness as compared to physical illness is a long way from being realised.

*EAP Department October 2021*

*The College of Psychiatrists of Ireland is the professional and training body for psychiatrists in the Republic of Ireland. The Mission of the College is to promote excellence in the practice of psychiatry and advocate for supports and services for those with mental illness.*

If the mental health and wellbeing of the nation is truly to be a priority going forward, particularly in the wake of Covid-19, the College of Psychiatrists of Ireland proposes the following key actions:

- Address issues around recruitment and retention of psychiatrists, with an urgent overhaul of the national recruitment process and the provision of a fully-funded training programme.
- Budget 2022 must urgently provide ring-fenced funding (over €2billion) and full resourcing of mental health services, including the National Clinical Programmes in Mental Health.
- Additional Mental Health funding is also required in order to address the specific impact of Covid-19 on services.
- Urgent funding and implementation of a mental health ICT system is further needed.
- The government must re-establish the role of Mental Health Director/Lead and Mental Health Division as a matter of urgency.

No one could have predicted the arrival of the global Covid-19 pandemic, yet what we do know for certain is that pandemics greatly exacerbate inequalities. Nowhere has this been more evident than in the experiences of the most vulnerable in our population – those who require mental health services.

It is now over thirteen years since the publication of the National Mental Health Policy, *A Vision for Change*, and still, financial and philosophical commitments to the development of a world class mental health service continue to lag far behind those envisioned in that document. This has resulted in some of the most vulnerable people in Irish society - those people of all ages who suffer with severe mental health disorders - continuing to lack the supports they need in order to realise their potential and live socially and economically good quality lives. The College continues to advocate for budgetary commitments to rectify deficits in service provision, to the benefit of those most in need. In order to now realise the aims of *'Sharing the Vision: A Mental Health Policy for Everyone'* along with those originally laid out in *'A Vision for Change'*, there must be a genuine, measurable commitment to the allocation of funding, accompanied by well-defined timelines, transparency and accountability in relation to the implementation of that funding.

1. Address issues around recruitment and retention of psychiatrists, with an urgent overhaul of the national recruitment process and the provision of a fully-funded training programme

Without immediate consideration of recruitment and retention issues, the provision of any additional funding for mental health will do little to bring about necessary improvements in service provision and delivery. It is therefore essential that we acknowledge the ongoing mass exodus of psychiatrists and other essential allied health professionals from our mental health services and in doing so, begin a process to re-attract and retain quality clinical staff from all necessary disciplines, at community and hospital care level.

The College holds sole responsibility for the training of doctors to become specialists in psychiatry. This is achieved through teaching, clinical examinations and final certification. The College provides these mandatory, basic components of training under agreement with the Irish Medical Council, which has the statutory powers to regulate doctors, and is funded for this training by the HSE National Doctors Training and Planning unit, which has the statutory power to determine how much funding is allocated to training. However, the funding allocated for these both mandatory and basic components of training remains woefully inadequate, at 40% below what it should be. This needs to change. The ramifications of this deficit in funding for the training of our specialist psychiatrists are also likely to become even more evident, given the projected increase in consultant numbers required to maintain our mental health services into the future. The College welcomes the call by Government for more psychiatrists, but this call needs to be supported by adequate and appropriate funding for specialist training.

**2. Budget 2022 must urgently provide ring-fenced funding (over €2billion) and full resourcing of mental health services, including the National Clinical Programmes in Mental Health.**

For many years now, the College has consistently advocated for mental health services to be funded with 12% of the overall Health Budget, as recommended by several documents and in line with similar jurisdictions internationally. The actual percentage allocation has remained scandalously low at 5-6% percent, for over ten years. Previously, the College suggested an incremental approach over 5 years, to increase the mental health budget from 5-6% to 12% of the Health Budget. We are now beyond that suggested 5 year time period. To make matters more stark, the consequences of Covid-19 in Ireland have now added huge additional pressure to services, with the results of recent survey of specialist members showing that the well-being of mental health professionals and outcomes for the patients they work with have been severely affected.

In 2021, the circa 1 billion Euro currently provided needs to be doubled to over 2 billion Euro (to reach 12%). This will go some way to affording mental health parity of esteem with physical health in our society and services. Without this investment, urgent implementation of mental health policy and provision of appropriate supports and interventions for those who need them, when and where they need them, will not be not feasible.

In order to further ensure equity of access to care that is both patient centred and evidence-based, priority funding must be given to the established National Clinical Programmes (NCPs) in Mental Health. These programmes include those for Early Intervention in Psychosis, Eating Disorders and Deliberate Self-Harm, all of which have been developed in close partnership with the College. These NCPs underpin the delivery of models of care which been expertly developed to ensure early intervention, evidence-based care and faster personal recovery for individuals. It is essential that these programmes receive ring-fenced, multi-year funding and that they move beyond the pilot stage to see proposed hubs rolled out nationally. There are currently just five Early Intervention in Psychosis Teams in Ireland and three teams for Eating Disorders, all of which are at various levels of development and resourcing. The Covid-19 pandemic has increased pressure on these services even further, and we continue to receive reports of increasing numbers of individuals with psychosis and eating disorders presenting at a later stage, more acutely unwell, and more frequently requiring hospital admission.

### 3. Additional funding to address the specific impact of Covid-19 on mental health and services

The impact of Covid-19 continues to have demonstrably negative effects on mental health across the wider community. The College has surveyed our specialist psychiatrist members at a number of points in time during the pandemic as to the effects of Covid-19 on the delivery of secondary mental health services, as well as on their personal wellbeing. The overall conclusions drawn show that along with surging numbers of crisis presentations, referrals of suicidal ideation, self-harm, depression and anxiety, and episodes of relapse, psychiatrists are also reporting increasingly unrealistic workloads, burnout and inequitable provision of I.T. resources. What is even more worrying and impactful for the future delivery of services, is the severity of presentations reported by a large majority of our members. Those with presentations of eating disorders, suicidal ideation, self-harm and other acute mental disorders are presenting with heightened severity, in greater crisis and requiring more frequent admission to inpatient care along with longer bed stays.

The pandemic has heaped this enormous strain onto a mental health service that was fragile and under-resourced to begin with, and has thus greatly amplified fiscal need. Problems that have been bubbling under the surface for some time have now been exacerbated to crisis point and we cannot overstate how serious the situation has become. A third iteration of the survey was circulated in July 2021 and although results have not yet been published, we can assume the figures have worsened in recent months.

Aside from the obvious human level of suffering that needs to be addressed, this strain has added a further layer of economic burden and loss of productivity to Irish society. We need to see increased funding and resources for mental health services before it is too late for thousands of people under severe and, in many cases, life-threatening levels of pressure. We must act now; the stakes are too high and the cost to people's lives too great.

### 4. Urgent funding and implementation of a mental health ICT system

A mental health service ICT (information and communication technology) system with adequate access to Wi-Fi, devices and facilities in services nationwide, is essential in order to plan and deliver efficient, safe and supportive services. This is even more crucial in the wake of the HSE cyber-attack and as we continue to work under certain Covid safety guidelines. Sufficient budgetary and development planning, in phases if necessary, is required to facilitate the following: communication between mental health professionals (both Psychiatry and Primary Care); communication between the system and patients/service users; development of adjunct tools, where appropriate, to enable flexible, alternative supports and services using digital technologies; and audit and review processes that ensure efficient use of resources. It is scandalous and bewildering that in 2021, in a country praised for its technologically advanced skill-sets and industries, our health service still uses paper files. In Mental Health Services this further creates risky and dangerous situations.

## 5. The government must re-establish the role of Mental Health Director/Lead and Mental Health Division as a matter of urgency

In order to achieve necessary developments in our mental health service and to ensure proper timelines, accountability, and transparency for mental health funding, strong governance structures need to be in place. The College strongly believes that a National Mental Health Director/Lead and a Mental Health Division with accountability to the Department of Health are key elements of a robust governance structure. These should be reinstated as a matter of urgency. The College believes that a necessary focus on mental health is lacking in the day to day planning and development of health services. The lack of this senior leadership role for mental health also sends out a negative message about the place of those with mental health problems in our health services. Additionally, addressing the recruitment and retention crisis should be a major objective for any newly established Mental Health Division.

### **In conclusion:**

Without addressing the issues outlined above, a recovery-oriented, person-centred mental health service that is equitable, modern and fit-for-purpose is not attainable, and inaction will simply increase the economic burden. UK research shows that for every one Pound invested in mental health services, four Pounds are saved in the economy as a whole and we believe this applies to the Irish economy also.

*There are many other areas in need which have been referenced and advocated for in previous [pre-budget submissions \(see documents here\)](#).*