HSE Mental Health Division

Report on the Listening Meetings
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HSE Mental Health Vision, Mission and Strategic Priorities

Mental Health Vision
Support the population to achieve their optimal mental health

Mental Health Mission
Promote and protect the mental health of the population, to provide effective services to those who need them making the best use of existing resources and to seek to continuously improve those services making best use of the resources available.

Mental Health Strategic Priorities

1. Promote the mental health of our population in collaboration with other services and agencies including reducing loss of life by suicide.

2. Design integrated, evidence based and recovery focussed mental health services. Deliver timely, clinically effective and standardised safe mental health services in adherence to statutory requirements.

3. Ensure that the views of service users, family members and carers are central to the design and delivery of mental health services.

4. Enable the provision of mental health services by highly trained and engaged staff and fit for purpose infrastructure.

5. Demonstrating maximum value for available resources.
Foreword

It is with great pleasure that I present the Mental Health Division’s Report on the Listening Meetings held throughout the country in 2014. The Listening Meetings represented one of the largest consultations ever undertaken by the HSE’s Mental Health Division with service users, family members and carers. This focused on what we were doing well as a Division and what areas required improvement. A team from the Mental Health Division held open forums across the country, seeking the views of 1,100 people. Attendees were invited to give their views in an open, transparent and respectful manner in an unstructured format. Responses were recorded and themes emerged. Many of the comments are included as examples in the body of the report. The responses were not validated and were not ordered in terms of importance. Our aim as a Division, as set out in the Mental Health Policy “A Vision for Change” 2006, is to ensure collaboration and partnership with services users in designing, planning, delivering, monitoring and evaluating our services. The Mental Health Division welcomes this feedback and have taken the responses seriously. The feedback has informed our Service and Operational Plans for 2015 and 2016.

These views and experiences have and will continue to help inform the design and development of Mental Health Services. As a Division, we acknowledge the delay in publishing this report but have established the governance required to ensure that the issues highlighted within the report have been actioned.

On a personal level, I would like to thank Mr. Paddy McGowan, Interim Head of Services, Family Member and Carer Engagement and his team, HSE local services, area management teams and their representatives and voluntary organisations, who assisted with and promoted the Listening Meetings.

Most importantly, I would like to thank all of the service users, family members, carers and their friends who shared their views and experiences of the Mental Health Services. I recognise that people showed tremendous openness, courage and trust in sharing their experiences. Your contributions are part of our journey in delivering safe and quality mental health services to those who need them. We want to deliver the best outcomes for people attending our services and provide a service of which we can all be proud.

Ms Anne O’Connor
National Director
HSE Mental Health Division

March 2016

Purpose of the Listening Meetings

The HSE’s Mental Health Division is committed to ensuring that the views of service users, family members and carers are central to the design and delivery of Mental Health Services. The national mental health policy, “A Vision for Change” 2006, has challenged us to ensure that services users, family members and carers are partners in designing, planning, monitoring and evaluating our services.

In building this partnership, we are developing and designing initiatives and programmes that include the views and input of our service users and our staff.

A priority for us was the appointment of Mr. Paddy McGowan, Interim Head of Service User, Family Member and Carer engagement to the national Mental Health Management Team to inform discussion and decision-making at that table. Our ambition is to ensure that this perspective is at the table for all of the area mental health management teams, embedding this approach as a way of working.

Hearing the views and experiences of service users, family members and carers is important to us. As a new Division, we wanted to hear the experiences of those using our services and the Listening Meetings initiative was chosen as a way to do that.

The HSE’s Mental Health Division is committed to working with these views and experiences and ensuring that we use them in our operational plans.

For further information on useful resources and links or to make contact with us regarding the report, see www.hse.ie/mentalhealthengagement
1,100 People attended

27 Meetings held throughout the country

75 Staff attended
Themes identified from the Listening Meetings

In this report from our Listening Meetings, we present the opinions and views that were discussed at the meetings, in a thematic way.

These themes encompass a wide range of personal opinions that were expressed by those who attended and participated in the Listening Meetings. Those views and opinions have been collated and developed into ten key themes.

- **Theme 1**: Developing Respectful and Empathetic Relationships
- **Theme 2**: Service User, Family and Carer Involvement
- **Theme 3**: Challenging Societal Attitudes
- **Theme 4**: Providing Continuity of Care and Supporting People in their Recovery
- **Theme 5**: Providing Specialist Services
- **Theme 6**: Accessing Helpful Information
- **Theme 7**: Peer Support
- **Theme 8**: Providing the Full Range of Interventions
- **Theme 9**: Access to Out-of-Hours Care
- **Theme 10**: Avenues for Assessment and Admission
Theme 1
Developing Respectful and Empathetic Relationships

“Most of the shortcomings are not to do with money they are about respect”
Dublin

“People need time to be listened to and only then can a sense of what is going on be identified”
Ennis

“It is important to listen to peoples’ stories”
Tralee

“Most nursing staff were viewed as brilliant and very approachable”
Central Mental Hospital

“We only seen as a number in a file”
Limerick City

“People are picking up slack”
Cork City

“People should be seen and listened to as a person – not as symptoms and illness”
Tullamore

“People should be treated with dignity and respect”
Arklow

“I wanted to be treated respectfully and politely”
Dublin

“People have a right to expect to be treated well”
Central Mental Hospital

“Some staff attitudes need to improve”
Killarney

“People only seen as a number in a file”
Limerick City

“People have a right to expect to be treated well”
Central Mental Hospital

“I wanted to be treated with dignity and respect”
Arklow

“People should be treated respectfully and politely”
Dublin

“People only seen as a number in a file”
Limerick City
“The services sometimes over care and people lose their independence and can’t see their potential as a result”

Ballina

“People left in the home to deal with the issues – it’s not a one person situation”

Dublin City

“What affects the person receiving care also affects the children at home”

Roscommon

“We need to work alongside professionals”

Waterford City

“A kind word softens the blow”

Clonmel

“There’s willingness for everyone – the inmates, the staff and the agencies to work together”

Mountjoy Prison

“Listen to families, really listen”

Castlebar

“There is very little human and personal understanding from staff”

Roscommon

“Services are more open to listening – there has been a shift – depends in Ireland where you are”

Ballina

“Families and carers not listened to”

Roscommon

“People didn’t look at me as a person but instead looked at the diagnosis and the symptoms”

Galway City

“Services extremely good with a great key worker system that links in with psychiatrist”

Ennis

“Nurses need to be more humane”

Cork City

“Key worker system is good”

West Cork

“Staff should not be using their phones when dealing with service users”

Ballina & Dublin

“It is a good system and I got good help”

Cork City

“Too many forms and not enough love”

Cork City

“Tribunals are terrifying – people did not listen to me”

Arklow

“Psychiatrists do not listen”

Tullamore

“Communication is key if we use it well, we will get there”

Dungarvan

“Feel like a bad parent as I am not being listened to”

West Cork

“I’m delighted and I am on first name basis with all my carers and doctors so its all good news from me”

Dublin

“Psychologist, nurses and doctors I met along the way are fabulous – I would not be here today only for them”

Wexford

“Tribunals are terrifying – people did not listen to me”

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Ardfert
Theme 2

Service User, Family and Carer Involvement

“Families not being listened to – families need support”
Limerick, Roscommon

“Carers for children with serious mental health issues feel very alone and very isolated”
Sligo

“Families and carers are not being heard – all we want to do is work together”
Ballina

“The system is failing families”
Limerick

“Family support needed as services not dealing with the whole picture”
West Cork

“Families find it impossible to access information as regards loved ones”
West Cork, Tullamore

“Never asked to talk to anyone about my parents’ care plan”
Ennis

“Being left out – service users and carers want our voice heard”
Cork City

“Confidentiality is a challenge for families”
Galway City

“Professionals should listen to relatives as not every service user can give an accurate picture”
“Families and carers need to be included in every step of the process”
Dublin City

“Family member not listened to by mental health services”
Drogheda

“Encourage the person nearest to service users to be involved”
Cavan

“Family meetings with service users could be more structured and less informal”
Cavan

“I was never asked if my mum could speak to the psychiatrist”
Cavan

“Preparation is needed for family members when service user is being discharged”
Cavan

“Doctors do not listen to us as a family”
Waterford

“Families are dismissed and they themselves suffer depression”
Tralee

“My family member had a poor understanding of mental health”
Kilkenny

“Services haven’t got better – I am a carer”
Clonmel

“Medical people hold themselves a little bit away because of legislative issues re confidentiality”
Arklow

“Families are central to recovery”
Galway City, Tralee

“Carers need to be understood more”
Galway City

“The service is brilliant in Galway”
Clifden

“Parents should be informed as carers particularly when people have mental disability”
Cavan

“Family members want to be able to access information from service providers”
Ballina

“Carers need support as they can get depressed and anxious, as always caring”
Sligo

“Social worker won’t talk to us because of confidentiality issues – we are not heard”
Tullamore

“It is difficult for carers today”
Letterkenny

“Doctors do not listen to us as a family”
Galway City

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Arklow

“Confidentiality should be broken with family if it helps suffering person”
Galway City

“Decisions made when client was not present”
Galway City

“Has a person the right to bring in a person of their choice to the consultation or MDT meeting?”
Ballina

“Families are central to recovery”
Galway City, Tralee

“Carers need to be understood more”
Galway City

“The service is brilliant in Galway”
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“Services haven’t got better – I am a carer”
Clonmel

“Medical people hold themselves a little bit away because of legislative issues re confidentiality”
Arklow
“Parents were given no tools on how to help me”
Dublin

“Day centre staff are excellent”
Galway City

“I have lived in the area for a number of years and the mental health care is excellent locally”
Killarney

“Families should be sat down with the service user and should be given advice”
Arklow

“Political correctness gone to extremes when people are so unwell they are not capable of making a decision, yet we could not be kept abreast of the situation because of confidentiality”
Arklow

“Families are being left out”
Cork City

“Services not the same in all areas, this is not fair”
West Cork

“Need structures in place to hear points of view”
Cork City

“Confidentiality as an issue needs to be explored”
Castlebar

“Families are not allowed information”
Limerick City

“The adherence to absolute confidentiality means that parents and siblings are not listened to”
Central Mental Hospital

“Families got no support I educated myself on the illness”
West Cork

“Families are being left out”
Cork City

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Castlebar

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Limerick City

“The adherence to absolute confidentiality means that parents and siblings are not listened to”
Central Mental Hospital

“Person was allowed home despite being unwell”
Dublin City

“Shocked at lack of family support services”
Dublin City

“Confidentiality as an issue needs to be explored”
Castlebar

“Families are not allowed information”
Limerick City

“The adherence to absolute confidentiality means that parents and siblings are not listened to”
Central Mental Hospital

“Clondalkin has no support group for patients. I would like to see one set up”
Dublin

“The adherence to absolute confidentiality means that parents and siblings are not listened to”
Central Mental Hospital

“Great support given to a service user and their family by the rehabilitation team”
Letterkenny

“jigsaw is a great resource”
Letterkenny

“I am 40 years in the service, they have done everything they can to help me”
Dublin City

“I have lived in the area for a number of years and the mental health care is excellent locally”
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Killarney
Theme 3: Challenging Societal Attitudes

One in four people have a mental health issue so one central figure saying “I have a mental health issue.” And then 8 other figures with speech bubbles from 2 of them saying: “So do I”, “Me too”, “That’s me” “My friend too and that’s ok.”

“Stigma is an issue”
Cork City, Limerick

“Stigma is attached to mental health and stops people finding work”
Galway

“Admission and assessment through A&E creates stigma and increases the anxiety of person waiting”
Ennis, Letterkenny, Tralee, Kilkenny

“There is a stigma to having a mental health issue and being a Traveller”
Letterkenny

“There should be no stigma in relation to using services”
Ballina

“Refused admission to 3 gyms as a result of disclosing mental health issues on form”
West Cork

“Set up a user group to look at stigma and isolation”
Dublin

“Garda cars best not seen as causes stigma”
Cork City

“Go back to schools and teach young people”
West Cork

“Community development projects are vital and need to be recognised”
Limerick City
“We need to deal with mental health problems as a community and change how we think about supports”
Ennis

“The taboo with mental health persists”
Tullamore

“Support staff recovery, it’s the elephant in the room”
Ennis

“Services should be culturally appropriate”
Dublin City

“In psychiatric wards the doors are locked, it’s like a prison service”
Galway City

“Stigma is a big thing, friends drop away when they hear people have mental health issues”
Tralee

“You must be open and ready to embrace the service”
Ballina

“There is stigma in this country in relation to mental health”
Clonmel

“Still huge stigma in Ireland when talking about mental illness”
Arklow

“Stigma around mental health is still there in society”
Wexford

“People should get together for the purpose of taking a more collaborative community responsibility for mental health care”
Sligo

“Mental Health is taboo, we have to change the mindset of people”
Tallaght

“The Traveller community finds it problematic getting into services”
Kilkenny

“Anything that opens debate on mental health is good”
Wexford

“Stigma attached to having mental health issues - less visits than someone with other physical illnesses”
Central Mental Hospital

“Mental Health has a stigma, now it is fashionable to have a bi-polar illness”
Kilkeny

“A stigma goes with mental health I don’t want my son labelled”
Dublin

“Stigma is a big thing, friends drop away when they hear people have mental health issues”
Tralee

“THERE is stigma in this country in relation to mental health”
Clonmel

“Vision for Change is here but attitudes are not changing there is still alot of stigma around”
Dublin
Theme 4

Providing Continuity of Care and Supporting People in their Recovery

“Discharge planning is important”
Kilkenny

“People can't find work”
Limerick City

“People need proper employment and social rehabilitation”
Offaly

“Community Development projects are vital and need to be recognised”
Roscommon

“People need support with life skills and how to cope”
Limerick City

“Travellers need supports and culturally appropriate services”
Dublin City

“Should be more support services when one leaves hospital”
Castlebar

“The service is under resourced in terms of Community Mental Health Teams”
Clifden

“Had to move my son as better facilities in other catchment services, not the same in all areas”
Cork City

“Families not happy with the transition from child and adolescent to adult services”
Sligo

“Having to see a different psychiatrist every 6 months is unhelpful”
Roscommon

“My son should have been supported in finishing and achieving qualifications”
Dublin City
“Carers for children with serious mental health issues feel very alone and very isolated”

“Mental Health not good at discharging people from the service”

“The service after you have been treated needs to be improved 100% - the person needs to be told where to go and what services are available”

“There is difficulty in accessing services in the city as there are transport difficulties when coming from the country”

“6 psychiatrists have been and gone in the area recently”

“Frustrating when you go to a doctor and they keep changing”

“Waiting times to be seen need improving”

“Waiting rooms were found to be depressing – no music”

“Unhappy with child and adolescent service – my daughter could not get a bed”

“One should see same person rather than different psychiatrist all the time”

“Transport important for people in rural areas”

“Services are positive and advanced in West Cork”

“I lost faith in the system and doctors due to the rotation of same”

“There is a gap between leaving hospital and living in the community”

“People have had bad experiences when presenting to GPs”

“Do GPs think of alternative methods of treatment – they need education.”

“A lot of support at the start – not so much at the end of my stay”

“Needs to be a lot of education and we need to encourage people to ask for support”

“Low rates of suicide in the area and we consider ourselves very lucky”,

“Huge gap between practitioners and administration”

“People with mental health difficulties need a job – they have nothing to do mentally or physically”

“Co-ordination of the voluntary organisational supports would prove helpful”

“More hostels should be available for people in recovery to assist reintegration into the community”

“The last two times I was discharged there were no exit meetings”

“Central Mental Hospital”

“Dungarvan”

“Arklow”

“Waterford”

“Ennis”

“Cork”

“Sligo”

“Dublin City, Castlebar”

“Trapee”

“Killarney”

“Clifden”

“Cavan”
Theme 5

Providing Specialist Services

- Dublin City, Limerick, Letterkenny, Wexford & Kilkenny: “Should be more dual diagnosis services”
- Dublin City: “It is difficult to get people accepted by the mental health service if there are addiction issues”
- Killarney, Dungarvan & Clonmel: “Dual diagnosis and supports for teenagers around this need to be developed”
- Arklow: “Vulnerable men with addiction need to be helped”
- Wexford: “Dual diagnosis services need to be resourced”
- Cork City: “Services should be equally dispersed and available in all areas”
- Galway City: “Not enough dual diagnosis services – where are people going to go if they have no home?”
- Tullamore: “Once there is a drug addiction issue the mental health services seem not to want to engage”
- Killarney: “Child and Adult Mental Health services criteria is different throughout the country”
- Drogheda: “There is a need for more psychotherapy and dialectical behavioural therapy programmes”
- Limerick City: “Addiction treatment centres won’t take people on anti-psychotics”
“I get phone calls that people fall between two stools, addiction services and mental health services”
Arklow

“There is difficulty with substance abuse and mental health in the county”
Dunganvan

“Two children attend child and adolescent mental health services, one child is waiting six months for a play therapist”
Sligo

“Squashy Couch is a good service in the city and its working well”
Dunganvan

“You could be 10 weeks waiting to see a psychologist”
Mountjoy Prison

“There are men here who should be in Dundrum”
Mountjoy

“There are no real services for people with Aspergers Syndrome or Autism apart from Inspire. I would like the HSE to do more for people with Autism”
Clonmel

“If you have a dual diagnosis you go from one service to another – there are no links”
Clonmel

“Friends of mine with Autism feel abandoned – they feel depressed and alone”
Arklow

“GROW mental health group gave me the tools to help”
Letterkenny

“Housing associations are very useful, they should be integrated more with the council housing and protected tenancy given to people with mental health needs”
Letterkenny

“The Recovery Bus and Triologue are helpful”
Cork

“Early intervention services are needed”
Ennis

“More integration between Child and Adult Services is needed”
Kilkenny

“Children have been admitted to adult units”
Waterford

“More supported accommodation needed especially in the area of dual diagnosis”
Tralee

“Allow access to alternative therapies”
Central Mental Hospital

“It is difficult when young people in the country go to their GP and are referred to services in the city”
Waterford

“Squashy Couch is a good service in the city and its working well”
Dunganvan

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“You could be 10 weeks waiting to see a psychologist”
Mountjoy Prison

“There are men here who should be in Dundrum”
Mountjoy

“There are no real services for people with Aspergers Syndrome or Autism apart from Inspire. I would like the HSE to do more for people with Autism”
Clonmel

“If you have a dual diagnosis you go from one service to another – there are no links”
Clonmel

“Friends of mine with Autism feel abandoned – they feel depressed and alone”
Arklow

“GROW mental health group gave me the tools to help”
Letterkenny

“Housing associations are very useful, they should be integrated more with the council housing and protected tenancy given to people with mental health needs”
Letterkenny

“The Recovery Bus and Triologue are helpful”
Cork

“Early intervention services are needed”
Ennis

“More integration between Child and Adult Services is needed”
Kilkenny

“Children have been admitted to adult units”
Waterford

“More supported accommodation needed especially in the area of dual diagnosis”
Tralee

“Allow access to alternative therapies”
Central Mental Hospital

“It is difficult when young people in the country go to their GP and are referred to services in the city”
Waterford
Theme 6
Accessing Helpful Information

“Information poor from services”
West Cork

“No information for families on outside services”
Roscommon & Cavan

“No family support or education around mental health illnesses”
Castlebar

“Got no support – educated myself”
Cork City

“Voluntary services in the area need to link in with each other”
Ennis

“How do people get people into hospital?”
Castlebar

“Information not recorded and passed on”
Sligo

“How should GPs be aware of authorised officers available locally”
Ballina

“GPs need to know what services are out there”
Ennis

“More information around medication management needed”
Castlebar

“We are not aware of any local services, my family member goes up to Dublin for an hour of treatment”
Dublin

“Coordination of the voluntary organisational supports would prove really helpful”
Ennis

“Knowledge banishes fear”
Galway City

“Is there any document that will give information on medication?”
Ballina

“Hostels and day services are closed and people have not been informed and consulted”
Letterkenny
Theme 7

Peer Support

“Service Users needed with good recovery to talk to people and offer honest appraisal”
Cork

“Clubhouses that are non medical are very good and they are a positive side to the HSE”
Tralee

“It is important when you are in hospital that people come in who are experts by experience – they give you hope”
Dublin City

“There should be a support worker like a liaison officer”
Waterford City

“We do recovery groups in Kells, I was asked my opinion and it’s helpful to talk to other patients and tell your story”
Drogheda

“Help for families needed – a resource where people can talk to other families that have experience”
Sligo

“A mental health advocate would have helped me – there was no need for ambulance and police – no need for drama”
Roscommon

“A group and peers give people hope”
Drogheda

“Peer support is an excellent idea”
Drogheda, Dublin City
"Peer advocates should be on every multi-disciplinary team"

Dublin City

"Services in the community should be run by people with self experience of mental health"

Dublin City

"More clubhouses are a good idea"

Dublin City

"Peer to peer support is not available"

Mountjoy Prison

"There is a peer support initiative in Nenagh and we are hopeful"

Clonmel

"Peer relationships are very helpful – we have one in Bray"

Arklow

"Peer led training is needed"

Ennis

"No supports for people out of hours – support worker needed for same"

Roscommon

"How can a doctor or a nurse understand where you are coming from if they have not been through it?"

Clonmel

"The message needs to be given that recovery is possible"

Wexford

"More experts by experience needed and they should be valued more"

Ennis

"Peer supports are a great help to family members"

Castlebar

"More peer support groups needed"

Dublin City

"Peer advocates are coming into roles in Kerry"

Killarney

"Peer-to-peer support training should be offered in the prison service"

Mountjoy Prison

"Peer advocates are needed and they should be valued more"

Ennis

"More carers needed on teams, they have a voice and need to be listened to"

Dublin City

"The message needs to be given that recovery is possible"

Clonmel

"More clubhouses are a good idea"

Dublin City

"Peer advocates should be on every multi-disciplinary team"

Dublin City

"More carers needed on teams, they have a voice and need to be listened to"

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Dublin City

"Peer advocates are coming into roles in Kerry"

Killarney

"Peer-to-peer support training should be offered in the prison service"

Mountjoy Prison
Theme 8

Providing the Full Range of Interventions

“Shift needed from medical model towards recovery model”

“Got side effects from my tablets”

“More therapists needed”

“Talking therapy helped me”

“Arts are an alternative medium to help people with healing”

“Comasu Recovery bus and Triologue are helpful as is the family resource centre”

“Is recovery based solely on medication?”

“Heavily medicated – on too much medication to take part in activities”

“I want empathy not someone who will overmedicate me”

“More alternative therapies needed in health centres”

“Alternative systems good such as Slí Eile and nutrition helps”
“Camden Place a great example of supporting people through the arts”
Cork City

“Give treatment choices”
Ennis

“Tablets are not for everyone”
Ennis

“Make more options available – possibly psychology led”
Clonmel

“Over-reliance on medications”
Limerick City

“Therapist got me well”
Limerick City

“Seems like therapies are being ignored”
Galway City

“Information needed about other options of treatment – alternatives”
Galway City

“Wellness Recovery Action Plan (WRAP) and occupational therapy services very good”
Roscommon

“I went through counselling and used medication and found the service really good”
Galway, Roscommon

“People need support with life skills and how to cope”
Limerick City

“Wanted access to psychological services but never happened”
Ballina

“Psychiatrists and psychologists don’t listen to each other”
Sligo

“Psychiatric units are like prisons – is there an alternative?”
Letterkenny

“Impossible to get counselling and psychotherapy – was waiting 4 weeks”
Donegal

“Waited 6 months for cognitive behaviour therapy – occupational therapist was amazing”
Sligo

“More discussion groups in hospital needed chaired by a leader or nurse”
Letterkenny

“Psychiatrists have too much power – who do they report to?”
Tullamore

“More therapies such as art needed”
Galway

“A local advocacy course for personal potential (APP) is really good”
Donegal

“Clients need activities not just medication”
Castlebar

“Over-reliance on medications”
Limerick City

“Too much emphasis on drugs – I’m on 14-16 tablets a day”
Limerick City

“More Triologue and open dialogue meetings needed”
Galway

“More discussion groups in hospital needed”
Sligo

“Theatre is a great example of supporting people through the arts”
Castlebar

“Seems like therapies are being ignored”
Galway City

“Information needed about other options of treatment – alternatives”
Galway City

“Waiting 6 months for occupational therapy and getting 10 tablets a day”
Letterkenny

“More discussion groups in hospital needed”
Sligo

“Psychiatric units are like prisons – is there an alternative?”
Letterkenny

“More therapies such as art needed”
Galway

“A local advocacy course for personal potential (APP) is really good”
Donegal

“Clients need activities not just medication”
Castlebar

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“Talking alone greatly helped – should be possible not to go on to medication”

“I was treated for depression after domestic abuse – I was treated with tablets”

“Programme called So Fab is fabulous, farming projects, crafts and outdoor activities working with animals, should be continued and funded”

“There is not enough emphasis being put on physical exercise as a treatment”

“I have been trying to get counselling but no-one is listening”

“He provide huge funding, a lot of that is on the medical side of things, but when you get down on the ground the vision becomes very thin”

“People telling their story is so important”

“An internet service for support groups would be helpful”

“Improving and repair physical infrastructure and facilities”

“More educational opportunities should be made available”

“Tablets have a limited use”

“Community centred approach is good”

“Arts – are an alternative medium to help people with healing”

“Alternative and constructive ways of supporting people needs to be offered such as mindfulness and nutrition”

“People telling their story is so important”

“More access to physical exercise and fitness classes to aid with weight management, etc”

“There is a resistance to move away from the medical model”

“I am still waiting to see a psychologist – 18 months”

“I have been trying to get counselling but no-one is listening”

“HSE provides huge funding, a lot of that is on the medical side of things, but when you get down on the ground the vision becomes very thin”

“Community centred approach is good”

“Arts – are an alternative medium to help people with healing”

“Alternative and constructive ways of supporting people needs to be offered such as mindfulness and nutrition”

“People telling their story is so important”

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“More educational opportunities should be made available”
# Theme 9

Access to Out-of-Hours Care

- Need for out-of-hours service
  - Sligo, Offaly, Waterford

- Crisis team with triage co-ordinator would work well
  - Mayo, Ballina

- Person-to-person phone line services for out-of-hours needed
  - Ballina

- Develop home-based crisis team
  - Galway

- Set up equivalent to Slí Eile/Crisis House
  - West Cork

- There is a need for crisis houses
  - Dublin, Limerick, Tralee, Ballina, Sligo

- Why only 9 - 4.30? We need 24 hour services
  - Limerick, City, Donegal

- Lack of crisis services in the area – many services overlapping
  - Mayo

- No supports for people out-of-hours after 9-5.30pm – Support worker needed for same
  - Roscommon

- A professional should be designated to work out-of-hours
  - Ballina
“There should be a counsellor on call in the area”

Sligo

“No-out-of-hours services available – nothing after 5pm or at 3am in the morning”

Tullamore, Kilkenny

“Mental health does not stop at 5pm on a Friday – we need services outside 9-5”

Waterford

“We went to the service at 19:15 – I was told to come back in the morning at 9”

Kilkenny

“9 to 5 services are great in Gorey, but there is nothing in the evening after hours”

Arklow

“Should be a support worker like a liaison officer”

Waterford

“Should be open houses where people can go when in crisis”

Sligo, Cork City

“What services are available at 7pm at night or at weekends in the community?”

Arklow

“Services only 9-5pm – should be psychiatrists on call”

Donegal

“SCAN initiative piloted first in Wexford, this is now rolled out to 8 other areas around the country. We also need to adopt other things that are good from elsewhere”

Wexford

“Liaison service in A & E is now 7 days a week”

Waterford

“Should be 24 hour multidisciplinary teams in the area”

Donegal

“Heartening to hear of such things as crisis houses”

Dublin City

“There is a Nurse Liaison Service now in A & E”

Arklow

“Should be better on call service”

Dublin City
Theme 10
Avenues for Assessment and Admission

“Process of waiting in A & E is not on”
Limerick

“A & E is seen as a disaster for people to be admitted through”
Galway

“Accessing the services is deplorable – told my husband is on a waiting list”
Castlebar

“A & E was packed – told to sit down and wait”
Cavan

“A & E is not a good experience”
Arklow

“When one is in crisis that admission unit is seen as daunting”
Ennis

“Waiting time in A & E too long”
Galway City

“Person turned away from A & E twice – not safe”
Castlebar

“Admissions through A & E not satisfactory as there is a long waiting time”
Ballina

“A & E not appropriate for many referrals”
Sligo
“Mental health hospitals should have their own A & E. Families are peoples’ assets and should be treated as so”

“A & E does not work, that is the feedback out there – it is not working”

“A & E not appropriate for people with mental health problems, there needs to be a separate unit for people to go to”

“On admission and discharge things could be improved, when a person is an inpatient it was very good and could not fault it”

“24 hour cover is needed – A & E isn’t ideal to be going through”

“I had a good experience in A & E”

“Admission procedure very distressing for family member and I – Gardaí being with them was upsetting”

“Communication between inpatient and out-patient needs to improve”

“I have had bad experiences being admitted to hospital, no compassion from A & E professionals”

“A & E is not appropriate for mental health – I was left sitting on my own in A & E and then I was moved to a room. The psychiatrist who saw me had no file and did not know me”

“The Gardaí should be trained to deal with people with mental health difficulties and on how to deal with people who require assisted admissions”

“A & E is not appropriate for mental health presentations”

“24 hour cover is needed – A & E isn’t ideal to be going through”

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“Communication between inpatient and out-patient needs to improve”

“I have had bad experiences being admitted to hospital, no compassion from A & E professionals”

“A & E is not appropriate for mental health presentations”

“The Gardaí should be trained to deal with people with mental health difficulties and on how to deal with people who require assisted admissions”
The feedback from the Listening Meetings and participation by service users, family members and carers was and will continue to be important and helpful for the Mental Health Division. There was an acknowledgement of good work within the Mental Health Services but also recognition that more can be achieved. We are fully committed to listening to the views and voices of those who use our services and their families and carers. What was heard at the meetings informed our work during 2014 and 2015. It was and will continue to be reflected in our priorities and plans for the services. Into 2016, we will continue to work to ensure that those views remain central to the design and delivery of our services. They are reflected in the HSE’s Service Plan and the Mental Health Division’s Operational Plan for 2016.

In August 2014, a Reference Group was set up comprising of nine service users and four family and carer representatives. The Group made recommendations for promoting widespread and regular engagement and consultation with service users, family members and carers at local and national level and completed its work in July 2015. These recommendations have been approved by the national Mental Health Division Management Team and are now being implemented.

Our priorities for 2016 have included the appointment of a National Head of Service User, Family Member and Carer Engagement, who is a full member of the national Mental Health Management Team. We will appoint nine leads of user, family member and carer engagement in each of the Community Health Organisations (CHO). They will be full members of the CHO’s Mental Health Management Teams.
We have reviewed the effectiveness of the Listening Meetings and have enhanced how we engage with service users, family members and carers. In light of the delay in publishing this Listening Report, there will be alternative engagement approaches used when listening to the views and experiences of those who use the Mental Health Services and those who support and care for them. We are engaging in an independent consultation process through the Mental Health Reform. This process will enable the sharing of experiences about our services.

We will gather your views and analyse the data in a way that is in-keeping with ethical consultation practice. We will endeavour to ensure that they are incorporated into the design, planning, delivery, monitoring and evaluation of Mental Health Services.

For further HSE links and resources and/or access to an online version of the report go to http://www.hse.ie/mentalhealthengagement