

The end of year one of Northern Ireland's Mental Health Strategy

Mental ill-health causes significant suffering in our population, and many people are not able to access the right services. The Mental Health Strategy is the plan for transformation to bring about the necessary changes. As we reach the end of Year One of the Strategy's implementation, it is time for me to take stock of what has been achieved. Year Zero focused on enabling actions, notably the development and staffing of the Strategy Implementation Unit and plans for the Regional Mental Health Service and Regional Crisis Intervention Service. The Strategy's Funding plan set out the need for £9.59 million for this current year (2022-2023). However, the Department of Health allocated only £2.5 million to the Strategy's implementation, leaving a shortfall of over £7 million. The support for the Mental Health Strategy is clear, every party recognised its importance, making significant pledges of support within their manifestos. Whilst the funding for the Strategy was included in a draft 3-year budget, this budget was not approved before the Executive dissolved.

We are now entering Year 2 of the strategy and £24.38 million is needed for the full implementation of actions from April 2023-2024. Again, the Department has stated they cannot deliver the Strategy within the existing budget. Last year's allocation, £2.5 million, constitutes only a tenth of the funds needed to deliver this coming year's actions. Meanwhile, poor mental health costs NI £3.4 billion annually. A piecemeal or reduced implementation cannot achieve the necessary reform. In real terms, people in NI will wait longer, or never receive the treatments and support they urgently need.

This comes at a time when front facing services across the statutory sector and community and voluntary sector report an increase in people presenting in distress. The need will increase further with the loss of the European Social Fund, and cuts to youth services, both of which provide vital support to our most vulnerable.

There has been progress on many key actions, including the plans for a Regional Mental Health Service, and the Review of Addiction Services. A Regional Coordinator is in place to develop CAMHS teams in schools, to support young people and families. A plan for an impressive Regional Crisis Service is now available, but progress on the service itself, particularly the expansion of services away from the Emergency Departments, has been painfully slow.

One of the Strategy's successes is the development of Specialist Perinatal Mental Health Services who are now delivering interventions to new mothers with severe mental illness. However, it is disappointing that there has been little progress on the establishment of the much needed, Mother and Baby Unit. In addition, perinatal mental health services have experienced recruitment challenges, and face underspend in the current financial year. Workforce is a significant difficulty across mental health services, and it is a problem I consistently hear about when I visit services on the ground. They find it impossible to recruit qualified clinicians, and when they do, they are moving from different parts of the Service, leaving gaps elsewhere. Service users tell me that they still have difficulties accessing their key workers, and a lack of continuity means that people still need to repeat painful stories to

different services without ever getting treatment that is beneficial. The Workforce Plan, included in the Mental Health Strategy is under development. It needs to be finalised urgently, and training places need to be increased. These challenges again highlight the importance of all parts of the Strategy.

The absence of an Executive means that there is little hope that full funding will be available in year 2, I am therefore now in the difficult position of considering which actions need to be prioritized, based on evidence of need, for my guidance to the Department of Health. I am also exploring alternative funding sources for key actions. I and others are looking at ways of maximizing the benefits of existing work, so that we spend money effectively and create efficiencies within the system. Many people are working in the background to expand services to save lives and stem the flow of distressed individuals into a pressurized system. They will not be enough. We need funding allocated for the full implementation of the Mental Health Strategy for the transformation that is necessary, to reduce the suffering and create a better Northern Ireland for everyone.