

**High Level Taskforce on Mental health and Addiction Challenges of Persons interacting with the Criminal Justice System**

**Subgroup 1: Diversion**

**Meeting by video conference**

**Thursday 7<sup>th</sup> October 2021**

**10am -11am**

**Attendees:**

- Chair – Chief Superintendent Gerard Roche, An Garda Síochána
- Dr Eamon Keenan, National Clinical Lead-Addiction Services, HSE
- Inspector Andrew Lacey, An Garda Síochána
- Eoin Ryan, Regional Manager with responsibility for prisons regions, Probation Service
- Enda Kelly, National Nurse Manager, Irish Prison Service
- Seamus Hempenstall, Principal officer, Department of Health
- Michael Murchan, Assistant Principal Officer, Department of Health
- Deirdre O’Flaherty, Administrative Officer, Department of Health
- Secretariat – John Dunphy, Oonagh Ffrench and Kerrie Keegan, Dept. of Justice, Penal and Policing Policy

**Apologies:**

- Brendan Sheehy, Assistant Principal Officer, Community Safety Policy, Dept. of Justice
- Tony O’Donovan; Dept. of Children, Equality, Disability, Integration and Youth, Principal Officer, Child Welfare Advisor, Children Detention Unit

**1. Welcome from the Chair**

- 1.1. The Chair welcomed the Group to the meeting and advised that this would be a short meeting to give an update on the interim report
- 1.2. The minutes of the previous meeting dated 16<sup>th</sup> September were approved

**2. Interim Report:**

- 2.1. The Chair advised that both process maps had been reviewed again and it was agreed there would be no further changes made to the final process map
- 2.2. In relation to the expansion of the Adult Caution Scheme the ODPP is satisfied that there is no requirement for additional legislation to be enacted in order to expand the Scheme. However there will be changes required to the Prosecutor’s Guide and follow up pieces on how the Scheme will be assessed
- 2.3. It was discussed by the Group that there could be an increased cost implication with regards to the expansion of the CIT programme on a nationwide level. This involves using existing accommodation and training from existing resources. There may be administrative difficulties initially but if the policy is bedded in both AGS and HSE then it will become strong as a nation plan over the coming 5 years.

- 2.4. It was stated that the matter of consideration of costs are not in the Terms of Reference of the HLTF. If more people are diverted then HSE will need to take account of the savings made however it may lead to additional costs on the health system. It was agreed by the Group this will need to be taken into consideration but also the importance to examine the long term savings of such programme
- 2.5. It was agreed by the Group that a Memorandum of Understanding (MOU) between HSE and AGS as this would clearly outline each parties responsibilities.
- 2.6. It was discussed that assigning responsibilities would occur at a later stage in the process
- 2.7. It was raised by the Group the importance of aligning this framework with the Dept. Health led diversion programme and to ensure consistency in both systems. Further discussion involved procedure on appropriate body and way to seek funding for the Scheme.
- 2.8. The CAST project timeframe is over 5 years for the whole country. AGS willing to wait to early 2022 for commencement in order to carry out correctly the expanded Scheme nationwide but are aware that there may need to be compromise to do it right. DOH reps highlighted that neither Corporate HSE Mental Health nor DOH had received any new development funding bids in relation to this initiative from any CHO (including Limerick), as part of the 2022 Estimates Process.
- 2.9. It was stated that if the Scheme is done right then looking back retrospectively in 2-3 years, it will be clear to see significant savings for other Departments but may lead to additional costs on the health system.
- 2.10. There will be benefits for both AGS and HSE. There will no longer be a need in bringing some patients to A&E, psychiatric units and channelling them through the services and then the necessary follow-up with HSE.
- 2.11. It was stated that the overall cost to run the Scheme nationwide through 19 Divisions of AGS may run into €8-9 million over the 5 year period. However the costings for the project are in the very early stages and could run to a lot more by the end of the 5 year period.
- 2.12. It was said that a synopsis of the eligibility of the Scheme should be carried out for the Interim report which would outline the roles and responsibilities of subdivisions and local agencies. This could be clarified in the final report because if it isn't then it will be very hard to progress.

### **3. AOB**

The next meeting will be scheduled for 4<sup>th</sup> November