

High Level Taskforce on Mental Health and Addiction challenges of Persons interacting with the Criminal Justice System

Subgroup 2: Irish Prison Service and CMH Capacity

Wednesday 20th October 2021

14:00 – 16:00 via Video Conference

Minute:

Agenda:

- Minutes/Apologies
- Matters arising
- Consideration of Report
- Legislation consideration
- AOB

Attendees:

- **Chair** - John Devlin, Clinical Director, Irish Prison Service
- Prof. Harry Kennedy, Executive Clinical Director, Central Mental Hospital
- Mary O'Regan, Dept. of Justice, Principal Officer, Penal and Policing Policy
- Patrick Bergin, Head of Service, Forensic Mental Health Service, HSE
- Enda Kelly, National Nurse Manager, Irish Prison Service
- Seamus Hempenstall, Principal Officer, Mental Health Unit, Department of Health
- Dr Narayanan Subramanian, Consultant General Adult Psychiatrist & HSE National Clinical Lead in Dual Diagnosis, HSE
- Deirdre O'Flaherty, Administrative Officer, Mental Health Unit, Department of Health
- **Secretariat** – Oonagh Ffrench and Kerrie Keegan, Dept. of Justice, Penal and Policing Policy

Apologies:

- Michael Murchan, Assistant Principal Officer, Dept. of Health, Mental Health Unit
- Ben Ryan, Assistant Secretary, Criminal Justice Policy, Dept of Justice
- John Dunphy, Dept. of Justice, Penal and Policing Policy

1. Welcome from the Chair

- 1.1 The Chair opened the meeting, welcoming everyone and acknowledging apologies from the above
- 1.2 The minutes from the previous meeting were approved
- 1.3 It was agreed by the Group that the meeting would be better served by reviewing the text submitted from the HSE and D/Health as opposed to following the Agenda
- 1.4 A Primary Care representative for SG2 was discussed and a request for a nominee from HSE would be followed up by Secretariat in communication with DoH

2. Interim Report

- 2.1 There was a discussion regarding the urgency of finalising the draft interim report
- 2.2 The Chair gave a further update on the plenary meeting with regards to the importance of the future model, capacity and resourcing. The area of costings was also discussed and if this should be included now or at the end of the process
- 2.3 It was stated that the DoH/HSE had recently sent on their observations on the previously circulated Interim report and that report circulated to the group with meeting papers would not include these observations.
- 2.4 The Chair advised it would be best now to try and reconcile the text and review the latest amendments. DoH offered to share their consolidated version of the interim report, which reconciled the differences between the two versions of the interim report in circulation.
- 2.5 IPS advised that there was further clarification required with regards to the Health Needs Assessment conducted by CROWE Ireland before the final text can be submitted
- 2.6 There was a discussion regarding recommendation 56 of Sharing the Vision which refers to the need for an evaluation of ICRU to be developed in Portrane. The timeframe and the nature of the evaluation and how this might be prioritised was queried by members of the group. DoH agreed to raise this issue with the secretariat of the National Implementation and Monitoring Committee.
- 2.7 The group reviewed suggested changes to the report by DoH. These were discussed by the group, some were accepted and others requiring re-drafting.
- 2.8 The Group agreed to include the table of Sharing the Vision's recommendations that relate to the work of the Taskforce. The table was suggested for inclusion by DoH to provide an overview of the policy context.
- 2.9 There was a discussion regarding dual-diagnosis and point 2.1.27 referring to Reducing Harm, Supporting Recovery. It was agreed that further text would be required from IPS and Dr. Narayanan to reflect the additional progress made by the National Clinical Programme for Dual-Diagnosis. It was raised that there should be further discussion between the subgroup and the Programme, to ensure that their respective work aligns.
- 2.10 The Chair advised that there is still ongoing work with regards to the analysis and data modelling conducted by Dr. Mary Coughlan

3. Legislation

- 3.1 There was a lengthy discussion regarding the various aspects of legislation and how this impacts the work of the Group

3.2 It was agreed that legislation would be handled overall by the Plenary and this body of work would be examined as part of the Plenary's future work, subject to allowing flexibility to Sub Groups to consider as appropriate any potential relevant legislative issues.

4. Timelines

4.1 It was agreed that the D/Health would reconcile their text changes and the changes discussed above and submit a final draft to the Chair at the earliest possible opportunity.

4.2 Secretariat indicated the need to finalise SG2's interim report quickly, noting that there is still a further phase of work to be completed in the coming months in preparation for the final report of the HLTF. Chair to link in with Secretariat to progress completion of interim report text once DOH draft (see 4.1) received.

5. AOB:

5.1 The Chair advised that the next meeting would be scheduled after submission of the Interim report and the data modeling exercise was available to WG2.

Actions:

- D/Health will share their version of the report with added changes suggested during the meeting
- Dr. Bergin to discuss Primary Care nominations with Jim Ryan and Secretariat to follow up with DoH