



**An Roinn Dlí agus Cirt,
Gnóthaí Baile agus Imirce**
Department of Justice,
Home Affairs and Migration



An Roinn Sláinte
Department of Health

High Level Taskforce on Mental Health and Addiction

Third Annual Progress Report

September 2024 - 2025



Table of Contents

Update from the Co-Chairs of the HLTF Steering Committee	3
Executive Summary	4
High Level Taskforce (HLTF) Steering Committee	5
Sharing the Vision Aligned Service Developments & Enhancements	7
Dual Diagnosis Model of Care	7
Consultation Liaison Psychiatry Model of Care	7
Early Intervention Psychosis	8
ADHD Model of Care	8
Crisis Resolution Services and Pathways.....	8
Care in the Community: Memorandum of Understanding.....	8
Ministerial Visit to the National Forensic Mental Health Service	9
Care Pathways	9
Case Study 1: CAST - The Forum Client	12
National Forensic Mental Health Service.....	13
Central Mental Hospital.....	13
Capital Investment	13
Case Study 2: Intensive Care Rehabilitation Unit (ICRU).....	14
Prison Healthcare.....	15
Mental Health and Addiction Lead	15
Dublin Drug Treatment Court	15
Mental Health Promotion Plan - Pathways to Wellbeing.....	16
Alternatives to Custody and Supporting the Judiciary	16
Healthy Prisons Framework	17
Connecting for Life Aligned Service Developments and Enhancements in 2025	18
National Clinical Programme for Self-Harm and Suicide Related Ideation.....	18
National Probable Suicide Monitoring System (NPSMS)	18
Mental Health Staff Training	19
Housing	20
Alignment of Recommendations	21
Mental Health Legislative Reform Update.....	22

Update from the Co-Chairs of the HLTF Steering Committee

We welcome the Third Annual Progress Report of the High Level Taskforce (HLTF) on Mental Health and Addiction which highlights the significant work carried out by both Departments and our agencies from September 2024 to September 2025 to deliver on the recommendations set out in the HLTF Final Report 2022. Many of these recommendations build on existing infrastructure, creating better connectivity and linkages between services to better support those in the criminal justice system with mental health and/or addiction issues and to make a meaningful difference to their treatment.

Good progress has been made overall since publication of the Second Annual Report in February 2025, and it is particularly encouraging that the strong commitment to progress the HLTF Report has been maintained by all agencies. A focus has been to bring about new and real options around diversion, including more person-centred and integrated care by all relevant health services for this small but highly vulnerable group. This recommendation has been realised through the establishment of a partnership pilot project in the Limerick Garda Division known as the Community Access Support Team (CAST).

The Taskforce's recommendations relating to the health and justice sectors continue to be progressed in line with Sláintecare, Sharing the Vision, the IPS Health Needs Assessment and other relevant policies. Under Budget 2025, funding was provided to enhance a range of other healthcare measures across mental health, primary care, addiction services and social inclusion that directly or indirectly support many of the objectives of the HLTF Report.

Significant progress has been made during September 2024-2025 on rolling out the Models of Care for Dual Diagnosis, Attention-Deficit Hyperactivity Disorder (ADHD), Early Intervention in Psychosis, Crisis Resolution Services, and the National Clinical Programme for Self-Harm and Suicide Related Ideation. The Irish Prison Service (IPS) has appointed a Mental Health and Addiction Lead and the Department of Justice, Home Affairs and Migration published "Community or Custody? A Review of Evidence and Sentencers' Perspectives on Community Service Orders and Short-Term Prison Sentences". The development of Standard Operating Procedures (SOPs) to create easy access to case management services is under way and a proposal to allow for the provision of Virtual Care to those in custody is progressing.

A collaborative approach has underpinned the work of the Taskforce to build and sustain progress in this space. Both Departments look forward to this close cooperation continuing over 2026, to address acknowledged challenges on a collective basis.



Siobhán McArdle
Assistant Secretary
Department of Health



Rachel Woods
Assistant Secretary
Department of Justice, Home Affairs and Migration

Introduction

The Third Annual Report of the High Level Taskforce (HLTF) on Mental Health and Addiction again highlights the good progress and concerted efforts over the last year to better support those in the criminal justice system with mental health and/or addiction issues and to make a meaningful difference to their treatment.

Tracking progress on meeting this key commitment of Government ensures that the critical mental health needs of people in prison are improved, that addiction treatments are provided and that appropriate primary care supports are available on release. We know that the needs of those who interact with the criminal justice system are complex and given how often they are influenced by mental health and addiction challenges, a collaborative approach remains essential to sustain progress for some of the most vulnerable, and indeed forgotten people within our society.

Providing proper care to this group and ensuring rehabilitation, both in terms of health needs and to prevent future contact with the criminal justice system, means that acknowledged challenges cannot be addressed by the health or by the criminal justice systems alone. Improving outcomes for the individuals concerned and for society as a whole remains a key objective of the HLTF and in particular of the highly dedicated professionals collaboratively working in our respective agencies each day to provide the best possible care for all.

Executive Summary

Key progress on High Level Taskforce (HLTF) recommendations over the last year includes:

1	Launch of the Community Access Support Team (CAST) pilot project in Limerick.
2	€2.1 million provided to open the remaining 18 beds in the Central Mental Hospital .
3	€2 million provided for new talk therapies and counselling supports specifically for men.
4	Appointment of Irish Prison Service (IPS) Mental Health and Addiction Lead .
5	Continued rollout of the following Models of Care : Dual Diagnosis, Consultation Liaison Psychiatry, Early Intervention in Psychosis, ADHD and Crisis Resolution Services.
6	Development of Standard Operating Procedures (SOPs) under way to create easy access to case management services to ensure that mental health difficulties can be treated within social inclusion/primary care and prison settings.
7	Passage of the Mental Health Bill through Committee Stage in the Dáil in June 2025, Report stage in July 2025 and Second Stage in the Seanad in September 2025.
8	Publication of “ Community or Custody? A Review of Evidence and Sentencers’ Perspectives on Community Service Orders and Short-Term Prison Sentences ”.
9	Healthy Ireland seminar entitled “Developing a Healthy Prisons Framework for Ireland – Improving the health and wellbeing of those who work and live in prisons”.
10	Development of the next Suicide and Self-Harm Reduction Strategy , informed by an evaluation of Connecting for Life 2015-2024 and a public consultation process.
11	Launch of Ireland’s first Mental Health Promotion Plan - ‘Pathways to Wellbeing’.
13	Proposal progressing to provide Virtual Care to prisoners that embeds a structured, specialist-led pathway to manage high-burden chronic diseases.

High Level Taskforce (HLTF) Steering Committee

The HLTF recommended that the Department of Health and the Department of Justice, Home Affairs and Migration should agree on an appropriate mechanism to coordinate the work relating to the HLTF.

A Steering Committee comprising representatives from the Department of Health and Department of Justice, Home Affairs and Migration was established in 2022 to monitor and support the implementation of recommendations. The Committee is jointly chaired at Assistant Secretary level and the Group coordinates reporting to the Ministers for Justice and Health to inform them of progress annually. The Group have met and continue to meet on a quarterly basis.

On 10 September 2025, a stakeholder engagement event took place in the Central Mental Hospital, Portrane. The event brought together key stakeholders from the Department of Justice, Home Affairs and Migration, the Department of Health, the HSE, the Probation Service, An Garda Síochána (AGS) and the Irish Prison Service (IPS). The event provided an opportunity for stakeholders to engage directly with one another, address issues and highlight recent positive developments.

An appropriate interagency structure has also been established by An Garda Síochána (AGS) and the Health Service Executive (HSE) to oversee the development of a coherent and integrated approach to diversion from the criminal justice system to the healthcare system under the auspices of the Community Access Support Team (CAST).

Good progress was made overall over the course of the third year to advance recommendations. Looking forward to 2026, further steering committee meetings are already planned, as are meetings with the wider agency representatives involved in the delivery of the HLTF recommendations.

As this Third Progress Report focuses on the medium to longer term recommendations, the Steering Committee and key stakeholders are now shifting focus toward progressing the longer-term recommendations. The mental health and addiction challenges of those who come into contact with the criminal justice sector remains a priority for both the Department of Justice, Home Affairs and Migration and the Department of Health. The Steering Committee remains committed to further supporting development of these recommendations.

Dates of HLTF Steering Committee Meetings September 2024 – September 2025:

- 25 November 2024
- 13 March 2025
- 2 July 2025
- 10 September 2025

HLTF Steering Committee Members:

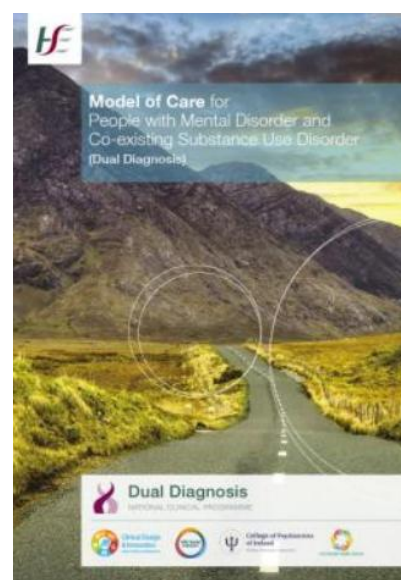
- Ms Rachel Woods, Assistant Secretary, Department of Justice, Home Affairs and Migration (Co-Chair)
- Ms Siobhán McArdle, Assistant Secretary, Department of Health (Co-Chair)
- Ms Mary O'Regan, Principal Officer, Department of Justice, Home Affairs and Migration
- Dr Siobhán Hargis, Principal Officer, Department of Health
- Dr Philip Dodd, Consultant Psychiatrist/Clinical Professor Mental Health Policy & Clinical Specialist, Department of Health
- Ms Biddy O'Neill, National Policy Lead, Health and Wellbeing, Department of Health
- Mr Michael Murchan, Assistant Principal, Department of Health
- Mr Robert Hansberry, Assistant Principal, Department of Justice, Home Affairs and Migration
- Ms Claire Beauchamp, Administrative Officer, Department of Health
- Ms Lauren Taylor, Administrative Officer, Department of Justice, Home Affairs and Migration
- Ms Ingrid Doyle, Administrative Officer, Department of Health

Sharing the Vision Aligned Service Developments & Enhancements

Sharing the Vision 2020-2030 sets out an ambitious programme for the continued improvement of Irish mental health services. Sharing the Vision is Ireland's ten-year mental health policy to enhance the provision of services and supports across a broad continuum - from the promotion of positive mental health to specialist mental health service delivery. The policy contains 100 recommendations for the development of mental health services. Certain recommendations interlink with the objectives of the HLTF and are being implemented on this basis. In April 2025, An Taoiseach Micheál Martin and Minister Mary Butler launched the 2025-2027 Implementation Plan for Sharing the Vision. This comprehensive plan provides a clear and detailed roadmap to enhance services over the next three years, including for those coming into contact with the criminal justice system. Key progress over the period September 2024-2025 that aligns with the work of the HLTF is outlined below.

Dual Diagnosis Model of Care

Dual diagnosis means a person experiences both a substance abuse problem and a mental health difficulty. Any treatment options must address both issues. The HSE developed a Model of Care which recommends the development of 12 Adult Specialist Dual Diagnosis Teams nationally, 4 Adolescent Hub Teams, and a National Dual Diagnosis Rehabilitation Centre. During September 2024-2025, significant progress was made to rollout the Model of Care for Dual Diagnosis. Further recruitment resulted in adult teams in Limerick and Cork commencing service in 2024, and a team in Waterford was in recruitment. Two Adolescent Hub Teams in Dublin have also been developed, supported by funding from HSE Social Inclusion. In addition, through the National Clinical Programme for Dual Diagnosis, an in-reach service to support the prison population in Cork commenced. The HSE continues to work closely with Irish Prison Service to progress this Dual Diagnosis pilot and expand the service nationally.



Consultation Liaison Psychiatry Model of Care

A new national Model of Care for Consultation Liaison Psychiatry was launched by Minister Butler on 29 May 2025. Developed jointly by the HSE, the Faculty of Liaison Psychiatry and the College of Psychiatrists of Ireland, the model of care sets out a roadmap for the continued development of liaison mental health services in Irish hospitals. Service enhancements will be implemented adopting a phased approach, aligned with service readiness and workforce planning, to support a sustainable and coordinated roll-out of the model of care. Work in Q3, 2025, focused on planning for its phased rollout.



Early Intervention Psychosis

Early Intervention in Psychosis (EIP) is an evidenced-based approach that can transform the experience and outcomes of young people facing psychosis. During September 2024-2025, 5 teams were operational and rollout of this Programme was progressed with 3 additional EIP teams in the process of development based on funding secured in Budget 2025. A Key development from HSE Data shows that the duration of untreated psychosis reduced from 16 weeks in 2021 to 6.5 weeks in 2024.

ADHD Model of Care

Work on the Attention Deficit Hyperactivity Disorder (ADHD) model of care was initiated in collaboration with stakeholders from primary care and mental health services. Refinement of the draft model is under way, with alignment to existing service frameworks. Preparatory work has begun on an associated implementation plan. Engagement with service users and non-governmental organisations is ongoing to ensure an inclusive and practical approach for a phased rollout. During September 2024-2025, funding was secured under Budget 2025 for 4 additional ADHD teams to facilitate the roll out of the total number of ADHD teams envisaged in the Model of Care.

Crisis Resolution Services and Pathways

Various key initiatives and new care options continue to be developed by the HSE. The model of care for Crisis Resolution Services recognises that people experiencing a mental health crisis need specialist services to provide timely brief intensive supports. An evaluation of the Model of Care is under way across five HSE learning sites. Crisis Resolution Teams (CRTs) are also of particular relevance to the HLTF as they provide out of hours support for vulnerable people in a crisis and provide rapid assessment and intensive intervention. During September 2024-2025, CRTs were operational in Galway, Sligo/Leitrim, Cork City (two teams), South Dublin/Wicklow, and Waterford City. Solace Cafés also provide a range of crisis supports in the community. Cafés help divert individuals from Emergency Departments, An Garda Síochána (AGS) and the criminal justice system as a whole. During September 2024-2025, Cafés were opened in Cork City, South Dublin, and Sligo. The Suicide Crisis Assessment Nurse (SCAN) service also provides a timely response to requests for assessment of patients in suicidal crisis. Funding was provided for a further six SCAN nurses under Budget 2025, with further plans to develop access to the service nationally.

Care in the Community: Memorandum of Understanding

A Memorandum of Understanding (MoU) between the Irish Prison Service (IPS) and the Central Mental Hospital (CMH) was signed in early 2024 to deliver a partnership approach that creates easy access to case management services to ensure that mental health difficulties can be treated within social inclusion/primary care and prison settings. An oversight group was established at the time, and the Data Sharing Agreement has been completed and signed. The development of Standard Operating Procedures (SOPs), as identified in the MoU, has commenced.

Ministerial Visit to the National Forensic Mental Health Service



Ministers Carroll MacNeill, O'Callaghan and Butler visited the National Forensic Mental Health Service (NFMHS) in Portrane in May 2025. A meeting of the three Ministers was convened with key stakeholders from the HSE, the Department of Health's Mental Health Unit, the Department of Justice's Criminal Justice Policy Function, and the Irish Prison Service. Issues covered included increasing capacity at the Central Mental Hospital; improving prisoner health approaches; enhancing patient transfer arrangements, including developing better pathways to primary care and mental health services from prisons; expansion of the NFMHS Prison In-Reach and Courts Liaison Service (PICLS) for remand or sentenced prisoners; and progressing future capital developments envisaged under the HLTF.

Care Pathways

The HLTF recommended the establishment of clear, formalised pathways for access to primary care, community and mental health services. Care pathways are being developed on various fronts, including through the Probation Service Mental Health Action Plan 2024-2026. In 2024, the NFMHS and the Probation Service agreed to progress a Memorandum of Understanding (MoU) and Standard Operating Procedures (SOPs) to facilitate collaborative pre-release planning for shared clients and establish direct referral pathways. A first draft MoU is currently under review by both services. The HSE, in association with the IPS, has developed a proposal to provide Virtual Care to prisoners that embeds a structured, specialist-led pathway to manage high-burden chronic diseases. Telemedical Care or Virtual Care is the delivery of healthcare services and information remotely through telecommunication technologies, such as video calls and phone consultations. If approved, this initiative will be initially rolled out in Castlerea prison due to its remote location. This will reduce the security, cost, and disruption of external hospital escorts and therefore enhance the level of care afforded to those in custody.



Community Access Support Team (CAST)

The establishment of Crisis Intervention Units was initially recommended by the Commission on the Future of Policing in Ireland (CoFPI) as set out in their 2018 report, *The Future of Policing in Ireland*.

Crisis Intervention Teams are specialist uniformed units who jointly work with health professionals to provide a rapid and integrated 24/7 response to people with mental health issues.

Crisis Intervention Teams have become a globally recognised model within contemporary policing for safely and effectively assisting people who experience mental health crises or related problems within the community. The Crisis Intervention Team model promotes strong community partnerships among law enforcement, health professionals and appropriate follow-on support agencies.

The CAST pilot project was officially launched in Limerick on 7 October 2024 by the then Minister of State for Mental Health and Older People, Mary Butler, and Minister of State at the Department of Justice for Law Reform, International Law and Youth Justice, James Browne. The project commenced operation on Monday, 13 January 2025.

The Community Access Support Team (CAST) is a pilot project currently being trialled in the Limerick Garda Division. It is a partnership pilot between An Garda Síochána and the Mental Health Services of HSE Mid-West Community Healthcare. By co-responding to the public based on individual need, a key element of CAST is to signpost members of the public to the right person, at the right time, in the right place.

Community Access Support Team (CAST)

CAST is based on significant international evidence and experience demonstrating improved outcomes for adults requiring the intervention of a policing response at times of mental health crisis or situational trauma. There has been extensive engagement between AGS, HSE, Crisis Intervention Team members in other jurisdictions, and those with lived experience of engaging with the Gardaí at times of a mental health crisis.

Ireland is the first country in the world to employ a model where a national health service is embedded within a national police service while also delivering control room triage, on scene response, case management and aspects of criminal diversion for those experiencing a mental health crisis or situational trauma.

At the core of this project is a desire to explore, identify and operationalise alternatives to arrest for vulnerable persons and to enhance assessments and non-conditional referrals that are more aligned to the community health care model. This approach enhances diversionary practices for relevant individuals. The dual-response model aims to support individuals while also providing a sustainable response to the individual in crisis. A Multi-Agency Support Forum has also been established to provide intensive interagency supports to a number of complex cases.

In summary, CAST is:

Partnership: A collaborative initiative between An Garda Síochána and the HSE Mid-West Community Healthcare.

Purpose: To provide a compassionate response to people in distress due to mental health crises or situational trauma.

Goals:

- Divert individuals from the criminal justice system.
- Reduce the likelihood of future offending.
- Promote recovery and reduce stigma associated with mental health issues.
- Enhance community safety.

Location: The pilot project is being trialled in the Limerick Garda Division and the team is based at Henry Street Garda Station.

Team: The team consists of both mental health professionals and members of An Garda Síochána who work together collaboratively. They have received additional training in mental health, self-harm, suicide prevention, and substance misuse.

An evaluation of CAST is currently under way by the University of Limerick, due for completion in early 2026.



Case Study 1: CAST - The Forum Client

Background

The person involved in this case has struggled with addiction and mental health issues and/or suicidal behaviour for over 20 years. This person struggles with family conflict, frequent homelessness and a poor support network. They are also a superuser of services.

CAST Response

The client joined the CAST Forum in March 2025 after a call-back following detainment under Section 12 of the Mental Health Act 2001. The CAST Forum provides intensive interagency supports to a number of complex cases. CAST engaged with this client almost weekly since March. The support provided included liaising with the Ana Liffey Drug Project, Sláintecare, the Probation Service, Rehabilitation, General Practitioners and community mental health teams. The CAST Forum provided the client with access to services on a more regular basis and diverted this person from two drug offences.

Outcome and Impact

The client is currently awaiting a rehab bed and transitional housing. Since this client joined the CAST Forum, Gardaí incidents reduced by 62% from 2024 to 2025, with no incidents reported since June 2025. Emergency Department presentations reduced by 67% from 2024 to 2025 and acute psychiatric admissions have reduced to zero. Case Study 1 demonstrates the impact of the CAST Support Forum and how it supports clients.

National Forensic Mental Health Service

Central Mental Hospital

The Central Mental Hospital (CMH) is a purpose-built facility and is registered to provide a service for 130 residents, with an operational capacity for 114 residents as of Q3 2025. Registered accommodation consists of five single storey separate units, each with a distinct function for care and treatment of patients with major mental illness and associated violent behaviour. The forensic community pathway also provides a structured step-down option for patients detained in the CMH under the Criminal Law (Insanity) Act 2006, having been found not guilty by reason of insanity or unfit to be tried, as well as a small number of patients subject to high court orders. The CMH pathway includes 30 community beds, stratified by levels of support—from 24-hour nursing care to 24-hour social care support, to flexible social care arrangements.

The HSE recognises that staff recruitment and retention is fundamental to achieving safe and high quality patient care. Under Budget 2025, an additional €2.1 million was provided to open the 18 remaining beds within the CMH. These beds will allow patients to be moved more efficiently through the various levels of support offered by the care pathway in the hospital, which will in turn allow for further admissions. This will advance key recommendations of the HLTF and will help to alleviate pressures on referrals from the Irish Prison Service.

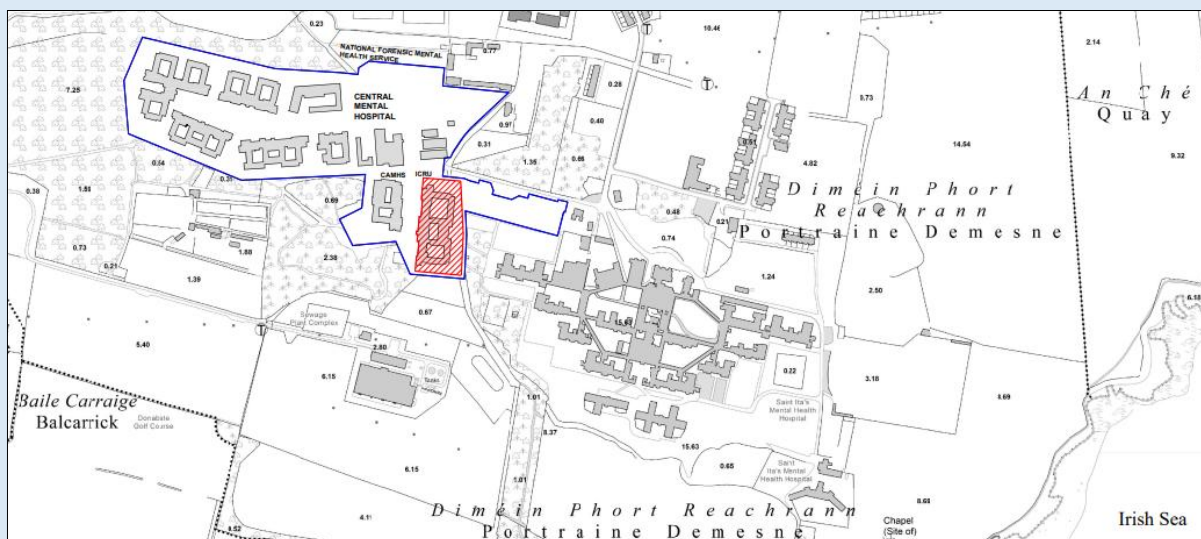
A Chief Pharmacist commenced with the NFMHS in February 2025, while a Senior Pharmacist was appointed and was due to commence in December 2025. The NFMHS established a Drugs and Therapeutics Committee in Q2 2025, which is tasked with reviewing polypharmacy. Medication regimes continue to be reviewed and monitored as patients progress from acute care through the NFMHS pathway and the majority of patients in pre-discharge and community beds are on only one antipsychotic. Every newly prescribed item is reviewed by a pharmacist. Pathways are in place to procure access to external assessment and treatment services for disciplines not yet available in the NFMHS multidisciplinary team.

The HSE is also moving towards recording patient information online (the Community Connect initiative), which will greatly assist with achieving key HLTF objectives.

Capital Investment

Sharing the Vision's recommendation concerning capital investment to redesign or build inpatient services in acute settings, in a manner which creates a therapeutic and recovery supportive environment was progressed by a National Mental Health Capital Planning Group. The group has been tasked with mapping existing infrastructure, identifying priorities for the next three years and overseeing the development of a ten-year mental health capital plan. Each Health Region has been supported to develop Regional Capital Plans that address short-, medium- and long-term capital objectives.

Case Study 2: Intensive Care Rehabilitation Unit (ICRU)



The new 30-bed ICRU at Portrane is a major development to enhance forensic mental health care, and is the first of its kind nationally. Care will be provided in a therapeutically safe and secure setting that is less secure than the high and medium secure Central Mental Hospital. The ICRU will be opened on a phased basis. The ICRU will allow patients to be moved more efficiently through the various levels of high-quality supports offered by the care pathway within the hospital. This will in turn allow for further admissions across the wider NFMHS and will alleviate pressures in the prison system. Evaluation of the new ICRU will inform the development of further ICRUs in other regions.



Prison Healthcare

Under the HSE National Service Plan 2025, the HSE National Forensic Mental Health Service (NFMHS) received an allocation of 4.5 Whole-Time Equivalents (WTE) to enhance the Prison In-Reach Courts Liaison Service (PICLS) Team supporting Limerick Prison and Court. The service received Primary Notification of these additional posts in May 2025, and recruitment commenced immediately. Arrangements for Cork PICLS team to come under the NFMHS model of governance was approved in 2025 and progressed.

The HSE has been working closely with the IPS and Probation Service to progress research on the mental health needs of the prison population. A directory of mental health and addiction services is currently being developed.

The IPS is due to issue a Call for Tender (CFT) in November 2025 to progress a Mental Health Needs Analysis (MHNA) for the prison population. It is anticipated that the analysis will cover a range of areas alongside mental health including disability and addiction. The MHNA is a recommendation of both Sharing the Vision and the HLTF.

The HSE is also developing guidance documents for mental health recovery-based education programme for prison staff.

Mental Health and Addiction Lead

A key recommendation of the HLTF was to appoint a Mental Health and Addiction Lead in the IPS to support the work of the HLTF. The IPS appointed a National Clinical Lead for Mental Health and Addiction in 2024. The National Clinical Lead is making significant strides to enhance care for those experiencing mental health difficulties and/or addiction issues across the prison estate.

Dublin Drug Treatment Court

The HLTF recommended that the Department of Justice, Home Affairs and Migration in conjunction with the Department of Health, should develop a framework, achieving the aims of a Problem Solving Court (such as the Drugs Court) to enable positive treatment and behavioural outcomes for persons appearing before the court. The framework could potentially involve models of bail supervision, an increased use of community sanctions, a specific mental health court or other such options.

The Dublin Drug Treatment Court (DTC) was established in 2001 as an alternative to custody for individuals whose offending behaviour is driven by an underlying drug dependency. The DTC programme aims to provide an intensive, supervised treatment, education and recovery pathway. Individuals may be eligible to participate after pleading guilty to, or having been found guilty of, a non-violent offence. The programme operates on a voluntary supervision model, meaning individuals must consent to participate. Relevant charges are paused during participation and, if the participant demonstrates satisfactory engagement, these charges may be struck out. Although the DTC has been operating for over two decades, it technically remains in pilot status. However, Ireland's evolving National Drugs Strategy has encouraged a move towards a health-led approach to drug use, which has created a renewed policy interest in evaluating the DTC's effectiveness and future role. An independent review of processes and

eligibility for the DTC to increase catchment of individuals sentenced to low-level drugs-related crimes was carried in 2025. Its findings are currently under consideration by the Department of Justice, Home Affairs and Migration and the Department of Health.

Mental Health Promotion Plan - Pathways to Wellbeing

Ireland's first Mental Health Promotion Plan - 'Pathways to Wellbeing' was launched in December 2024. This plan sets out a shared national approach to improving mental health and wellbeing at a population level. The Plan delivers a whole of government response to address both universal needs across the population and targeted supports addressing the needs of those most at risk of experiencing mental health difficulties. In line with Sláintecare, the Plan shifts the focus towards promotion and prevention – strengthening protective factors for good mental health, reducing risk factors and addressing the wider social and structural determinants of mental health. Under Goal 3 of the Plan—Strengthen Community Belonging and Connectedness—a key objective seeks to enhance access to tailored mental health promotion supports for the prison population, recognising this group's heightened vulnerability and need for targeted intervention.

Alternatives to Custody and Supporting the Judiciary

The HLTF recommended that the Department of Justice, Home Affairs and Migration, working with relevant stakeholders, conduct research to assess the impact of the alternative sanctions available under law, any barriers to their utilisation and any opportunities to improve their uptake and effectiveness. It also recommended that the judiciary are fully supported in the application of such alternatives to imprisonment. In November 2024, the Department published "Community or Custody? A Review of Evidence and Sentencers' Perspectives on Community Service Orders and Short-Term Prison Sentences". The report examines the impact of the Criminal Justice (Community Service) (Amendment) Act 2011 with the expressed intention of encouraging greater use of community service orders (CSOs) for people convicted of minor crimes for which a sentence of imprisonment is deemed appropriate.

The Probation Service continues to implement the Judicial Engagement Strategy and engage with the Judiciary to encourage the use of CSOs rather than the imposition of sentences of 12 months or less. In addition, the Minister approved publication of the Community Service: New Directions Implementation Plan 2025-2027 in April 2025. The Plan signifies the third phase of the Probation Service's review of the operations and delivery of community service in Ireland. The Plan sets out a range of specific actions and targets to increase the uptake, consistency and availability of CSOs with the aim of increasing awareness and confidence in the use of such sanctions as an effective community-based alternative.

Healthy Prisons Framework

In April 2025, Healthy Ireland hosted approximately 80 attendees at the first seminar in relation to work in this area entitled “Developing a Healthy Prisons Framework for Ireland – Improving the health and wellbeing of those who work and live in prisons”. There was representation from organisations such as the Department of Justice, Home Affairs and Migration, the Irish Prison Service, Prison Officers Association, the HSE, the Institute of Public Health, the Health Research Board and various agencies and advocacies.

The aim of the seminar was to provide a platform to consider the evidence and identify the challenges and opportunities in relation to promoting health and wellbeing in Irish Prisons.

The Health Research Board presented on an evidence review they had conducted on behalf of the Department in relation to health promoting interventions in prisons. The Institute of Public Health presented on work they are conducting on behalf of the Department within the prison system and there was a presentation on the work of the Red Cross Community Based Health and First Aid (CBHFA) volunteers in prisons.

Minister Murnane O'Connor joined the seminar to hear the feedback from roundtable discussions and to close the event. Work will now continue in relation to the development of a framework for both prisoners and staff.



Healthy Ireland

The vision for Healthy Ireland is where everyone can enjoy physical and mental health and wellbeing to their full potential and where wellbeing is valued and supported at every level in society.

A National Policy Lead for Mental Health Promotion commenced in the Department of Health on 1 September 2025, with responsibility for leading on delivery of Pathways to Wellbeing, the national mental health promotion plan.

The Healthy Ireland Strategic Action Plan (2021-2025) is focused on improving the health and wellbeing of the people of Ireland and the prison is identified as one of the settings at an international level where health promotion interventions can have a positive impact on the prison population.

Under the auspices of Healthy Ireland, the Department of Health in collaboration with the Institute of Public Health, Irish Prison Service, Prison Officers Association, HSE and the Department of Justice, Home Affairs and Migration are developing the Healthy Prisons Framework for those who work and live in prisons. Key deliverables include:

- An evidence synthesis of what works in prisons to promote health and wellbeing published by the HRB in 2025 will inform the development of the Framework.
- Focus groups held with prisoners in 13 sites during May and June 2025. The findings from this process are currently being finalised.
- Healthy Ireland to fund a Healthy Prisons Coordinator in the IPS for three years. Recruitment is currently underway.

Connecting for Life Aligned Service Developments and Enhancements in 2025

The Government's approach to suicide reduction, intervention and postvention (support after a tragedy has occurred) is set out in the policy Connecting for Life. It provides a comprehensive plan, based on the best international evidence, for how we can reduce levels of suicide in our country. Connecting for Life was launched in 2015 and came to an end in 2024. Over 2025, the Department of Health was developing the next suicide and self-harm reduction strategy. This work has been informed by an evaluation of Connecting for Life, Ireland's national suicide reduction strategy 2015-2024.

It has also been informed by a comprehensive public consultation process. The public consultation, which ran from March to April 2025, received 1,895 responses from individuals and organisations across all 26 counties of Ireland. Separately, there were almost 200 participants involved with in-person consultation sessions. In addition, both an Expert Advisory Group and a Lived Experience Reference Group were established to support the development of the new strategy. Representatives from the Department of Justice, Home Affairs and Migration and the IPS sit on the Steering Group. The Department, the IPS, AGS and the Probation Service have contributed to the development of the new strategy. Ireland's new suicide and self-harm reduction strategy is at an advanced stage of development and transition to this strategy will commence in 2026.

National Clinical Programme for Self-Harm and Suicide Related Ideation

The model of care for this service envisages a dedicated mental health assessment room within hospitals to provide a more appropriate environment for assessments to take place. Given most acute mental health in-patient units are co-located with our acute hospital network, it's important people in distress are assessed in clinically appropriate environments when they present for support. Building on site visits of assessment rooms in emergency departments for people presenting after self-harm completed in Q1, 2025, a draft report of findings was prepared for the HSE National Clinical and Group Lead – Mental Health and the HSE Chief Clinical Officer. The report identified eight sites with a lack of suitable assessment rooms and the national clinical programme is working with those sites to deliver / monitor required improvements.

National Probable Suicide Monitoring System (NPSMS)

The first meeting of the National Probable Suicide Monitoring System (NPSMS) Advisory Committee was held on 26 June 2025. Terms of reference were discussed in addition to potential data linkage opportunities and other issues of relevance to NPSMS. The Central Statistics Office (CSO) suicide statistics liaison working group continued to meet to discuss developments and enhancements in the area of suicide statistics. The NPSMS also works with key stakeholders in AGS and IPS to enhance data recording. As part of Connecting for Life (CfL), Ireland's National Strategy to Reduce Suicide, the IPS has committed to reviewing, analysing and identifying learning for each episode of self-harm within the prison estate. To this end, the IPS supported by the HSE National Office for Suicide Prevention (NOSP) and the National Suicide Research Foundation (NSRF), has been collecting data on episodes of self-injury using the Self-Harm Assessment and Data Analysis 'SADA' project since 2017 for the Irish Prison Service's National Suicide and Harm Prevention Steering Group (NSHPG). This involves

collecting data on every episode of self-injury (including information on typology of prisoner, severity & intent, and contributory factors). SADA Reports are prepared annually and are available to view on irishprisons.ie.

Counselling Supports for Men

Of relevance to the Probation Service, Minister Butler announced €2 million in funding to provide access to a suite of new talk therapies and counselling supports specifically tailored for men. Access to the services will begin from September 2025. This initiative is embedded within Ireland's approach to mental health policy implementation. Sharing the Vision – A Mental Health Policy for Everyone, and Connecting for Life, Ireland's national strategy for suicide prevention, clearly state that talk therapies should be considered a first-line treatment option for most people who experience mental health difficulties.

This recurring funding is allocated from Budget 2025 as part of an integrated series of initiatives led by the Minister to ensure people with mental health difficulties are able to access the appropriate range of supports, from mental health promotion and prevention, through to specialist services and clinical programmes. The funding is targeted at assisting with stigma reduction and to actively encourage men who otherwise would not usually avail of counselling to seek help with their mental health, to assist men in accessing mental health services, and to provide much-needed support for men experiencing a mental health crisis. The funding will provide over 15,000 free counselling sessions to men and establish accessible supports over the phone and in-person.

This initiative will widen access to supports for men, from mental health promotion activities, right through to counselling services and specialist support. These new supports will be made available to every GP in the country for direct signposting to men during consultations. They will also be available directly to men through the HSE helpline and yourmentalhealth.ie website and promoted in a targeted national marketing campaign beginning from September 2025.

Mental Health Staff Training

To embed a recovery ethos among mental health professionals working in community mental health teams as well as those delivering services elsewhere across services, further training and supports have been put in place. By Q3, 2025, a total of 8,893 people (staff and non-staff) had engaged in recovery education.

The Mental Health and Addiction Chief Nurse Officer (CNO) delivers mental health and addiction training to nurses on induction and as part of continuous professional developments (CPD). The CNO also delivers addiction awareness to the Recruit Prison Officers (RPOs) during their training in the Irish Prison Service College. Between September 2024 and September 2025 approximately 350 officers (RPOs and nurses) received this training. This training remains ongoing, and numbers will continue to increase.

The Probation Service delivers staff training in mental health, trauma and self-harm awareness. The Probation Service Mental Health Working Group continues to engage with the Confederation of European Probation (CEP) to scope out a Pan European Mental Health Training Curriculum for Probation Officers.

Housing

A key aim for Sharing the Vision's 2025 – 2027 Implementation Plan is to develop a guidance document on integrated mental health service provision for people experiencing homelessness. As part of this process, a mapping of current service provision has been completed for internal review. Separately, a meeting was arranged with Depaul Ireland to explore potential areas of collaboration. The same approach is being taken to expand assertive outreach teams so that a stepped model of integrated mental health support that provides mental health promotion, prevention and primary intervention are available to people experiencing homelessness. In conjunction with supports provided by HSE including Intensive Recovery Support teams, Sharing the Vision also recommends that sustainable resourcing should be in place for tenancy-related/independent living supports for service users with complex mental health difficulties. As part of the mental health budget for 2025, funding was allocated for an additional five housing coordinators. The National Placement Oversight and Review Team (NPORT) continues to support HSE Health Regions in their decision-making on external residential placements for people with complex mental health difficulties and intellectual disabilities. Data is currently being collated and a report prepared on NPORT activity and progress achieved.

The Criminal Justice Housing First Project ran from October 2020 to December 2024 and delivered on a commitment contained in the Housing First National Implementation Plan 2018-2021. The Criminal Justice Housing First Project was a joint initiative between the IPS and Probation Service that provided help to people with a criminal background (those leaving prison and/or subject to Probation Service Supervision) and a history of homelessness to obtain and sustain a tenancy upon release from prison.

The service was delivered by Peter McVerry Trust on behalf of the Dublin Regional Homeless Executive, the IPS and the Probation Service, the HSE and the four Dublin local authorities. The Criminal Justice Housing First Project completed the pilot phase and was extended to December 2024. Over the pilot project period, the Criminal Justice Housing First strand supported 43 individuals to acquire a tenancy on release from prison. An independent evaluation of the project will be completed in October 2025. The learnings arising will inform future developments as the criminal justice strand is mainstreamed within national Housing First.

The Programme for Government 2025 *Securing Ireland's Future* commits to ensuring a holistic, cross departmental approach to homelessness prevention. In 2021, the National Homeless Action Committee (NHAC) was established under the auspices of Housing for All. The NHAC ensures that a renewed emphasis is brought to collaborating to instil a whole of Government approach to implementing actions contained in Housing for All, the national housing plan, along with bringing better coherence and coordination of homeless-related services in delivering policy measures and actions to address homelessness through targeting high risk groups,

including those leaving prison. Representatives from the Department of Justice, Home Affairs and Migration, the Department of Health, the HSE and Cuan are members of the NHAC. The Committee continue to address these matters as work remains ongoing.

Alignment of Recommendations

The IPS Health Needs Assessment (HNA) Steering Committee monitors and supports the implementation of HNA recommendations. The HNA Steering Committee acknowledges the overlaps with the HLTF regarding recommendations pertaining to mental health and ensures reporting to both the HNA and HLTF Committees are aligned. The HNA First Progress Report was published in October 2024 and the HNA Second Progress Report is due to be published shortly. The IPS is developing an Action Plan incorporating all health-related recommendations for the prison service, including HNA, HLTF and Sharing the Vision recommendations. This will ensure alignment of recommendations in order for those in prison to have timely access to the full range of specialist forensic mental health services where clinically required.

Mental Health Legislative Reform Update

The Mental Health Bill 2024 is a landmark piece of legislation to update our mental health laws. The Bill represents the largest overhaul of mental health legislation since the introduction of the Mental Health Act 2001, making our legislation more person-centred and in closer alignment to Ireland's international human rights obligations, such as under the UNCRPD. The Programme for Government commits to enacting this legislation to modernise mental health services for those who need them, and to put in place the necessary safeguards to ensure the rights of people with mental health difficulties are protected in the decades to come.

The Mental Health Bill 2024 represents an important development in the legal treatment of individuals with mental disorders. It will complement the Criminal Law (Insanity) Act 2006 and the integration of mental health and criminal law. Together, they will provide a more humane and equitable approach to the legal system, ensuring those with mental health difficulties are treated with greater dignity and respect.

The Bill secured passage through Committee Stage in the Dáil in June 2025, Report stage in July 2025 and passed Second Stage in the Seanad in September 2025. Committee Stage introduced various amendments to the Assisted Decision-Making (Capacity) Act 2015 and to the consent to treatment provisions in Part 3 Chapter 3 of the Bill. This was to ensure that involuntarily admitted people lacking the capacity to consent to or refuse treatment and lacking a relevant, valid decision support arrangement can be treated following his or her admission. The Committee stage debate ensured this vitally important Bill is as robust as possible. The Bill, as passed by the Dáil on 9 July 2025, comprises 9 Parts and 222 sections.

