



19<sup>th</sup> January 2021

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*Re: Psychiatry & the Covid-19 Vaccine*

Dear Dr Henry,

I am writing to you about vaccination for patients with mental illness and the Psychiatrists who treat them. You and your office are to be commended on the Policy framework with clear sequencing for vaccine rollout based on patient need and risk due to clinical proximity. However, the College has been made aware of operational difficulties in adhering to this framework. I have outlined these below:

- (1) Equity of access to vaccination for patients with Mental Health Needs and comorbid physical illness compared to those patients with similar physical illness -

Many Mental Health Units are on the same campus as Physical Health Units. An example are long-stay residential units for those with physical health care needs, some due to underlying physical illness and some due to underlying mental health illness. Similar needs and similar COVID-19 risks, but the College is aware of some cases of differential access to vaccines.

- (2) Equity of access to vaccination for Mental Health Staff to Physical Health Staff -

Acute admission units for Mental Health patients are now usually on acute hospital sites with admission through the Emergency Department, but again the College is aware of some cases of differential access to vaccines.

This is despite, in some cases, Mental Health staff being re-deployed to administer the vaccine, but they themselves having effectively a different pathway to getting a vaccine compared to the other frontline workers they are vaccinating.

- (3) Equity of access to vaccination for Consultant Psychiatrist, who work in private practice to General Practitioners -

A number of Consultant Psychiatrists, who work in private practice, contacted the College seeking information on how to get vaccinated in a timely manner as possible. As you are well aware, those Consultants, by seeing patients are reducing the burden on the HSE or Emergency Systems and assessments which cannot be done remotely can take more than 15 minutes.

I would be grateful if you could let the College know if there is a system or process in place or plans for it, specific for Consultants in Private Practice similar to the process for GPs; portal for registration through ICGP, mass vaccination at designated centres.



The College estimates there are about 400 Consultants employed in the HSE and about 150-200 Consultant Psychiatrists working in areas outside of the HSE.

I am including Mr Jim Ryan, Assistant National Director-Head of Operations and Service Improvement in this correspondence to make aware of the operational challenges that have come to the attention of the College and am happy to liaise with him to give him information on the specific locations involved.

I am also forwarding a copy of this letter to Dr Siobhán Ní Bhriain, HSE Integrated Care Lead, and Dr Amir Niazi, National Clinical Advisor and Group Lead for Mental Health.

The College can offer support to any process or system for Consultant Psychiatrists in private practice by informing those listed with the College or advising those Consultants who contact the College about where and who to contact.

To end, thank you on the good work you and your office have already done.

Yours sincerely,

Dr William Flannery  
President

*Cc: Mr Jim Ryan, Assistant National Director-Head of Operations and Service Improvement  
Dr Siobhán Ní Bhriain, HSE Integrated Care Lead  
Dr Amir Niazi, National Clinical Advisor & Group Lead for Mental Health*