Mental Health Services, Malta
Since 1861, when Mount Carmel Hospital received its first patients, psychiatry in Malta has come a long way.

In its early days MCH’s purpose was to segregate patients – today we are aiming to reintegrate people back into the community.
Mental Health Services

- Mental Health Services, including Mount Carmel Hospital (MCH) and the community services, are an integral part of the health system in Malta.

- MCH is one of the various government hospital services, which upholds the national objective to provide diagnosis, treatment and medical care facilities, on an in-patient and out-patient basis.
Sub-Speciality Services

- There are currently ten consultant-led multi-disciplinary clinical teams supported by the nursing services;
- Four para-clinical departments (occupational therapy, physiotherapy, psychology and social work), the pharmacy department and laboratory.
- Each of the ten consultant-led multi disciplinary teams offers both general adult psychiatric services and a sub-specialty service.
Where are services provided?

If the person is ‘on leave’ or is an ‘out-patient’, s/he is given an appointment and venue for a clinical multi disciplinary meeting. This can be held at one of the following services:

- The Psychiatric Out-Patient (P.O.P.) Department at Mater Dei Hospital
- Peripheral Health Centre Clinics (previously known as “Polyclinics”)
- Day Centres
- Community and Outreach Teams

In-patient services:

- The Psychiatric Unit at Mater Dei Hospital which offers a fifteen bedded short-stay service.

- Several wards, both acute and specialised at Mount Carmel Hospital, including the Young People’s Unit (YPU)
Manager Nursing Services

- Departmental Nursing Manager
  - Acute and Forensic

- Departmental Nursing Manager
  - Rehabilitation

- Departmental Nursing Manager
  - Learning Disabilities; Child & adolescent

- Departmental Nursing Manager
  - Psychogeriatric & Geriatric

Nurse Education Department
Mixed Admission Ward

- MAW caters for 38 persons experiencing a first and/or an acute psychiatric episode.
- The ages of patients can vary from 12 to 90 years.
- Patients are normally discharged or transferred to other wards if their stay exceeds 8 weeks.
Female Ward One

- Medium to long term admission ward and caters for persons who experience the whole spectrum of psychiatric disorders.
- There are a number of dormitories with a total of 24 beds.
- There are also 5 single rooms and the Multi-Purpose Unit that provides care for female patients with a dual diagnosis of substance misuse and mental health problems.
Male Ward One

- MW1 is an acute ward and has a capacity of 20 beds.
- Male patients are admitted to the ward during acute psychiatric and substance misuse episodes.
- The person can remain in the ward as long as necessary.
Secure Unit

- The Secure Unit has four one-bedded rooms.
- Patients here are normally going through a phase in which normal supervision in other wards would not be enough.
- As soon as the person’s mental illness becomes more stable, he is discharged or transferred to an appropriate ward.
Dual Diagnosis Unit

- Caters for 8 adult male patients with a dual diagnosis of substance misuse and a concomitant psychiatric problem.
- They follow a day program in the Unit for a maximum of 6 weeks.
- During their stay, patients are encouraged to make use of other community services, agencies and non-governmental organisations.
- They eventually either go back to the community, or are transferred to a drug rehabilitation program or, if requiring further stabilisation, are transferred to other wards within MCH.
Short Stay Psychiatric Unit

- The Psychiatric Unit is an acute, short stay, mixed gender unit within Malta’s general hospital.
- Patients can stay up to a maximum of 3 weeks.
- If required, following discharge, day facilities are available for a period of 4 weeks.
Forensic Unit (Males)

- This Unit caters for people in need of specialist psychiatric care who have a criminal sentence.
- There are wardens and protocols to guide professionals during the course of the patients’ care.
- Nurses within the unit provide general nursing care and elevated supervision, observe, administer and monitor the treatment.
- Caters for a mixed gender population of 17 females and 16 males.
- Liaison with other essential services is central to the service offered at the Half-Way House, including for example working hand-in-hand with non-governmental organisations.
- Follow-up once the resident is discharged is another fundamental part of the service offered by the staff at the Half Way House.
Male Ward 3A

- Rehabilitation / chronic long-stay ward
- 40 beds
- Not an admission ward – patients are transferred from within the hospital
- Length of stay is indefinite
- Main aims / goals:
  To reintegrate patients back into society where possible and to provide care which makes the patients life as comfortable as possible
Male Ward 3B

- Rehabilitation / chronic long-stay ward
- 40 beds
- Not an admission ward – patients are transferred from within the hospital in order to prepare for rehabilitation back into the community (either own home or hostels or residences)
- Length of stay is indefinite
- Average age is 60+
- Main aims / goals:
  To work in conjunction with the multi-disciplinary team, specifically the occupational therapists & social workers with the primary aim of community reintegration
Female Ward 3A

- Rehabilitation ward
- 40 beds
- Admission criteria: those patients who are stabilised and willing/able to benefit from a rehabilitation programme
- Length of stay is indefinite
- Main aims/goals: To reintegrate patients back into society and their family by following a general rehabilitation programme, where necessary liaising with other entities such as Richmond Foundation.
Female Ward 3B

- Geriatric rehabilitation long stay ward
- 35 beds
- Main aims / goals:
  Patients are encouraged to remain as independent as possible in order to promote rehabilitation, especially in activities of daily living. Furthermore nurses work closely with the occupational therapy department to provide recreational and social activities for the patients.
Male Ward 2

- Psycho-geriatric unit
- 30 beds (including 4 emergency beds) & 4 bedded isolation unit
- Admission criteria:
  - 4 emergency beds for those patients who develop medical problems whilst in-patients of other wards;
  - Patients with psychiatric problems resulting from physical illness;
  - Patients with a psychiatric illness complicated by physical illness
  - Patients with a degenerative mental disease / organic mental syndromes / psycho-geriatrics;
  - Patients requiring medical nursing interventions;
  - No urgent admissions – admission is following referral and acceptance by firm, depending on bed availability
Female Ward 2

- Psycho-organic long stay ward
- 30 beds (including 4 emergency beds) & 3 bedded isolation unit
- Admission criteria:
  - Internal transfers or direct admissions
  - Patients with a psychiatric condition and concomitant medical condition
  - Patients with debilitating or deteriorating conditions
- Aims / goals:
  Holistic care provided within a safe, caring and dignified environment
Male Ward 7

- Psycho-geriatric ward
- 25 beds
- Admission criteria:
  Patients are transferred in from other wards within the hospital
- Main aims / goals:
  To provide nursing care within a safe and comfortable environment
Female Ward 7

- Psycho-geriatric ward
- 31 beds
- Admission criteria:
  Patients are transferred in from other wards within the hospital with the criteria being age or mobility. The average age is 75 years +
- Main aims / goals:
  To provide a safe and comfortable environment
Asylum Seekers Unit

This unit is a medium secure unit that caters for 10 irregular immigrants transferred from detention centres due to episodes of mental illness.

As there is a ‘mixed gender’ policy in this ward there are a female and a male nurse, together with a Police Officer for security reasons.

Patients may also be transferred to and from Mater Dei Hospital and Mount Carmel Hospital as necessary.
Intellectual Disability Rehab Unit

- Day unit
- Maximum capacity of 10 service users
- Initially in-patients from MCH but later to include referrals from Child Guidance Unit
- Main aims/goals:
  To facilitate community living & social inclusion; teaching lost or new skills
Female Ward 8

- Psycho-education ward
- 25 beds
- Admission criteria:
  Patients are transferred in from other wards within the hospital after a period of observation where severe behavioural problems prevent them returning back to the community
- Main aims / goals:
  To encourage independent living and when severe disability precludes this, to provide the patient with a comfortable, safe and homely environment
Male Ward 8

- Learning disability long stay ward
- 22 beds (includes 2 emergency beds)
- Consultant: Dr. JP Giorgio
- All patients must have some degree of learning disability
- Main aims/goals:
  To provide general nursing care aimed at meeting the holistic long term needs of the patients
Juvenile

- Learning disabilities ward (severe to moderate)
- Admission criteria:
  Patients are transferred in from other wards within the hospital.
- Main aims / goals:
  To encourage independent living and when severe disability precludes this, to provide the patient with a comfortable, safe and homely environment.
Young Persons Unit

- Mixed gender short to medium stay unit
- 12 children
- Inclusion criteria
  - Adolescents up to 16 years of age
  - Psychiatric problems especially conduct & emotional disorders with or without family relationship problems or development disorders
- Main aims / goals:
  Assisting young people with mental health problems who require specialist treatment and care as well as support for their social network. Providing a caring, safe and supportive therapeutic environment for adolescents with emotional and behavioural problems
Child Guidance Clinic

- The CGC is situated at St. Luke’s Hospital, Guardamangia.
- It provides psychiatric multi disciplinary services for children through clinical assessment and follow-up.
- Assessments are administered by psychologists and psychiatrists & includes clinical interviewing and the use of psychometric testing in order to identify the strengths of the child, areas which require further support, and whether there exists a learning disability requiring early intervention.
- The CGC plays an important role in liaising with other agencies including Appoġġ, Sedqa and Aċċess and in carrying out home visits or assisting the child within the school context.
Community Mental Health Services
Primary and Secondary Mental Health Clinics

- The Primary and Secondary Clinics are provided within polyclinics by teams of care workers, nurses, psychiatrists, psychologists, social workers and specialist doctors.
- Any member of the general public who is struggling with any aspect of their mental well-being can refer themselves to the Primary Teams for assessment and subsequent care planning. Alternatively they can request a referral by their doctor.
- Secondary Teams offer more intensive treatments and interventions for individuals with more complex needs; referral to these teams is via the Primary Teams and the Psychiatric Out Patient Department at Mater Dei Hospital.
Roaming Clinics

- The Roaming Clinics are provided in areas where there are yet to be established Primary and Secondary Teams.
- The team consists of nurses, care workers and specialist doctors who visit all polyclinics in Malta on a rotational basis to provide mental health services similar to the Primary and Secondary Teams.
- The team receives their referrals via the Psychiatric Out Patient Department at Mater Dei Hospital.
Day Centres

- Day centres have been set up in a number of villages and towns, providing a comprehensive package of activities.
- They undertake psychological, interpersonal and practical living skills group work.
- Individual assessment and care planning.
- Individuals are referred to Day Centres by their psychiatrist.
- The long term plan is to increase the number of Day Centres within the Maltese Community.
The Psychiatric Out Patient Department (P.O.P.)

- P.O.P. is situated in Mater Dei Hospital. This service is managed by a team of nurses and care workers and provides scheduled and urgent appointments with a multi-disciplinary team.

- The service is designed for individuals who are new to psychiatric services, for those who have recently been discharged from inpatient services and/or for persons who have ongoing complex care needs.
The Community Outreach Team

- The team consists of nurses, social workers and care workers who support service users in their homes but who also have strong and direct links with all other aspects of the community services, the psychiatrists and in-patient services in order to fully support the service users and respond to their needs.
- The Outreach Team provides a key working system where each service user is supported individually by a nurse or social worker to ensure that their care plan is followed and progress or problems are monitored closely.
- The aim of the team is to enhance the mental well being of service users and to assist them to maintain and enjoy community living by reducing the occurrence of hospital admission by providing a robust care and support package, improving their quality of life.
Hostels and Community Homes

- A collection of Hostels and Community Homes have also been established by Community Services which provide safe and secure housing for individuals who have experienced long term in-patient care and need extra support to live in the community again.

- The Community homes offer care systems which deliver short and long term support allowing individuals to enjoy community life with a multi professional staff team close at hand who help to develop skills and abilities for independent and semi independent living.
Crisis Intervention Team

- Operates from Mater Dei Hospital, and will eventually be providing 24/7 support in various crisis situations related to mental health.

- The team will follow patients for a maximum of 3 weeks, with the aim of reducing harm to the patient or others, reducing the number of admissions to Mount Carmel Hospital, as well as making admissions a less traumatic experience.
Next steps ......

- New Mental Health Act
- Streamlining of services
- Needs led care
- Patient centred approach
- Review of current practices
The Mental Health Act 2012

- The previous Act dealt only with confinement of patients, in line with the prevalent patriarchal system.
- The implementation of the new Mental Health Act (2012) will take place over the next 5 years.
- Implementing the Act will revolutionise mental health services in Malta.
- The new Act is person centred and recognises the rights of patients and carers.
- Will be overseen by the Commissioner for Mental Health – who will advocate for patients & carers.
The Act will regulate mental health services
For the first time, legislation covers care in the community
The Act calls for greater accountability and transparency from health care professionals
As a result of the Act, major changes in practice will be called for
An example – care plans to which all members of the multidisciplinary team (including the patient) must contribute to
Thank you for your attention