



RC  
PSYCH  
ROYAL COLLEGE OF  
PSYCHIATRISTS

# Time to Bridge The Gaps

RCPsych NI Policy Strategy Briefing  
2025-2028



# Core Problem

The crisis in mental health care in Northern Ireland cannot be overstated. Immediate action on staffing, infrastructure and investment is required to address the significant risks to both patients and professionals. Failure to act is leading to a collapse in services, with devastating consequences for everyone involved.

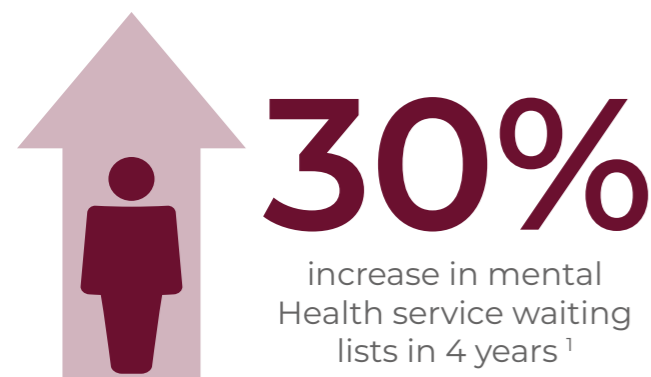
Psychiatry in Northern Ireland is in crisis. Northern Ireland has the worst consultant vacancy rate in the UK. We have not been able to train enough psychiatrists in Northern Ireland due to lack of investment in expansion of Resident Doctor\* posts to fill the vacancies that currently exist.

# Current Situation At A Glance

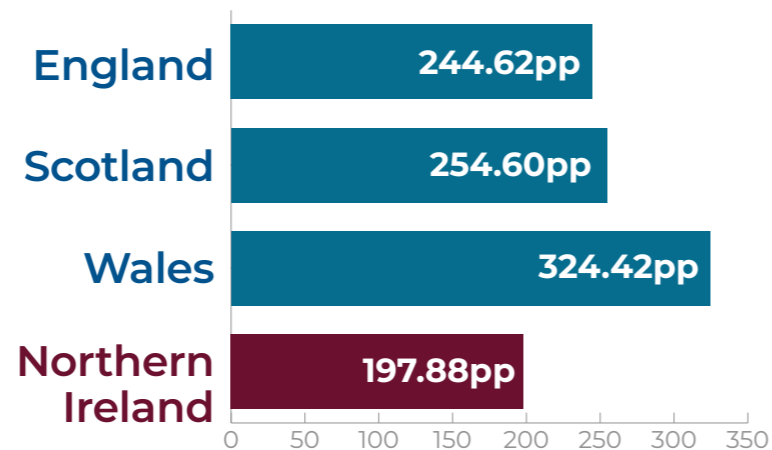
The data highlights multiple alarming trends that emphasise the scale of the issue. The particular challenges facing mental health services can be lost within the overall noise of the health system with competing priorities.

Northern Ireland urgently needs decisive action to fill vacancies and secure the future pipeline to ensure the future prosperity of Northern Ireland is not jeopardised by the poor mental health of its people.

## Increased Waiting Lists

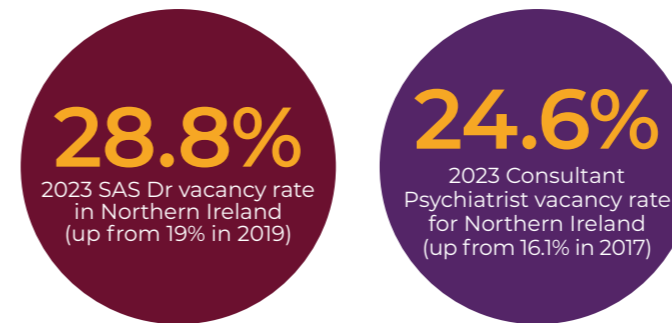


## The Share Of Spending On Mental Health, Per Capita Equates To <sup>2-5</sup>



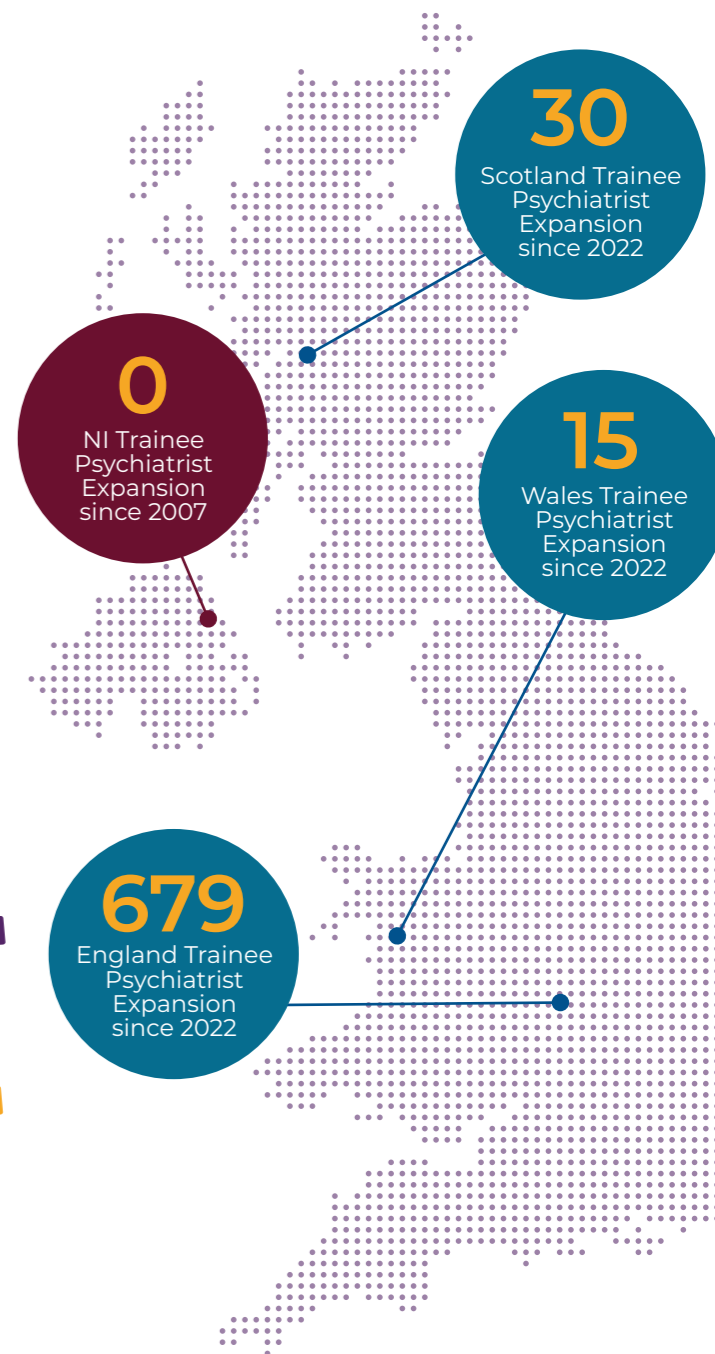
## Increased Psychiatrist Vacancy Rates

Based on the RCPsych workforce CENSUS data the vacancy rate for psychiatrists has increased considerably. The number of vacant Psychiatrist posts in Northern Ireland are shown below (as of July 2023) <sup>6</sup>

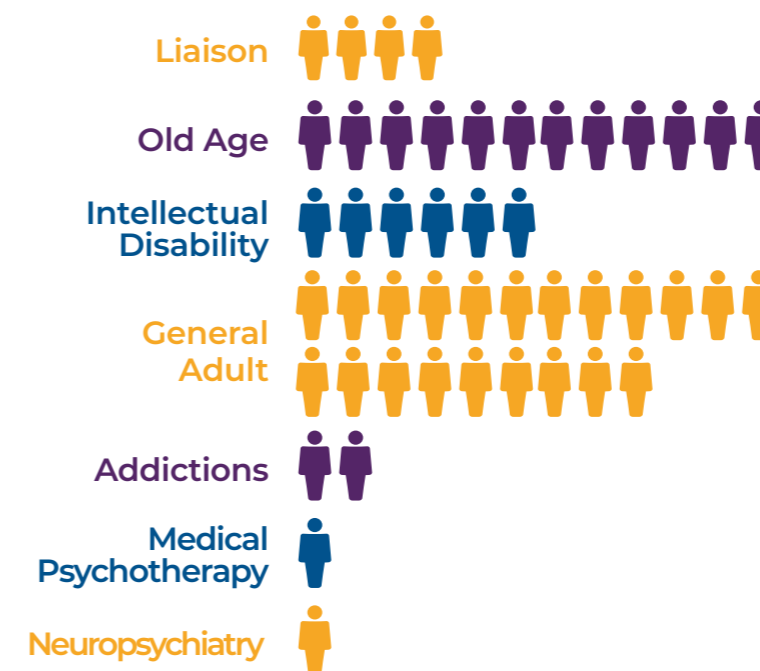


The DOH Northern Ireland Mental Health Services Workforce Review 2022-2032 specifically proposed the need for a 100% increase in CAMHS workforce given the increasing complexity of cases <sup>7</sup>

## Expansion In Psychiatry Training Places Across The United Kingdom



## Vacancies By Speciality <sup>6</sup>



\* Doctor Training to specialise in Psychiatry

# Central challenge

The mental health crisis in Northern Ireland is a deeply concerning and urgent issue. As highlighted, there is a significant gap between the growing demand for services and the profession's ability to meet that demand. This situation is having serious implications for patients, mental health professionals, and the overall reputation of the profession itself.

Here's a more detailed look at the consequences of the current crisis



## Unacceptable Gap Between Demand and Capacity

The mental health system is struggling to keep up with a rapidly growing demand for services. **The increasing prevalence of mental health conditions**, coupled with **insufficient staffing levels**, has created a backlog in care. There is a clear disconnect between the needs of the population and the resources available to address them. This is exacerbated by a **shortage of psychiatrists and other key healthcare professionals**.



## Services in Peril and Unsafe

Due to the high vacancy rates, inadequate resources, and rising demand, mental health services are at risk of becoming **unsafe**. The **lack of sufficient staff** can lead to **inadequate care**, increasing the likelihood of errors, delayed interventions, and overwhelmed clinicians. Services are **struggling to cope with existing pressures**, putting both patient safety and the well-being of the workforce in jeopardy.



## Impact on Patients

Patients are the most affected by this crisis. Delays in treatment, inadequate care, and **overburdened services** lead to worsening conditions, longer waits for treatment, and potentially irreversible harm. Many individuals in need of urgent care face **long waiting lists**, which can lead to deterioration in their mental health before they can receive proper support. Vulnerable groups, in particular, are at risk, with **serious consequences** for individuals with mental illnesses who are not receiving timely intervention.



## Impact on Mental Health Professionals

The heavy workload, emotional toll, and overwhelming patient demand are contributing to moral injury which is causing burnout, stress, and frustration among **existing** Consultants, SAS Doctors, and Resident Doctors. Dealing with such unmanageable workload is leading to a decline in job satisfaction and retention. **This is unsustainable**, and many are leaving the profession or considering early retirement. The **long-term sustainability** of the profession is at risk, with fewer professionals entering the field due to lack of training opportunities and the difficult working environment.

# Mental Health Strategy 2021-2031

There is a significant gap between the goals outlined in the 10 year Mental Health Strategy and the actual funding provided for its implementation.

Despite the stated priority of mental health within the Northern Ireland Executive, the allocated funds - just £15.5 million- are far from the £76.7 million required, covering only 20.2% of the necessary costs. This significant shortfall has led to slow progress in the strategy's rollout, with much of the current efforts focused on preparatory work that hasn't yet translated into meaningful improvements for patients, carers, and mental health service staff.

The ongoing funding gap threatens the ability to achieve the strategy's objectives within the planned 10-year timeframe. If this continues into 2025-26 and beyond, the risk grows that the strategy will not only fall behind schedule but also become obsolete, failing to meet the evolving needs of those it was developed to support.

Scan QR Code to view DOH Mental Health Strategy



# Existing Government Reports

The Department of Health (DOH) has commissioned two workforce reports; however, these reports have not been funded or fully implemented. The blueprint of solutions and recommendations are available. RCPsych NI urgently recommends that funding is made available and action is taken to address the solutions contained within the DOH reports.

We need immediate action to address the current shortfall in Psychiatry staffing, however this will not be enough to provide a future-proofed service which is fit for purpose.

## Medical Workforce Plan for Psychiatry Specialties Report 2021-2031



Scan QR Code to be taken to the report on [Health-NI.gov.uk](http://Health-NI.gov.uk)



## Northern Ireland Mental Health Services Workforce Review 2022-2032



Scan QR Code to be taken to the report on [Health-NI.gov.uk](http://Health-NI.gov.uk)



# Our Three Strategic Pillars & Recommendations

## Reducing Vacancy Levels

### Priority 1

#### Vacancy Core Recommendations

**DOH commit to a funded plan of implementation** for the 'Medical Workforce Plan for Psychiatry Specialties report 2022-2031 and Northern Ireland Mental Health Services Workforce Review 2022-2032.

**DOH to prioritise, a recruitment campaign, to fill current consultant and SAS Doctor vacancies in HSCTs**

The Vacancy levels are only worsening and the use of expensive locums increasing.

**DOH to increase the number of SAS posts available across NI**

ensuring that the Specialty doctor and Specialist grade doctor routes are positively promoted as a viable career opportunity within HSCT recruitment strategies.

**DOH to commit to a meaningful listening exercise with stakeholders**

Regarding Dr experience in order to promote/influence effective retention policies in each trust.

## Fixing Pipeline Shortfalls

### Priority 2

#### Pipeline Core Recommendations

**DOH as a priority, give a commitment to increasing recruitment into psychiatry by expanding training places** at core and higher training levels (in line with 'medical workforce plan for Psychiatry Specialties report 2021-2031'). Expansion of training places will allow us to retain local graduates within NI and ensure that our Psychiatry training scheme, one of the most successful and competitive in the UK, is able to supply our workforce needs going forward.

**DOH and NIMDTA develop and implement a Resident Doctor retention and incentive package**

which will ensure those trained in NI, stay in NI for a set period of their consultant career.

**DOH, collectively with the HSCT's and NIMDTA coordinate anticipated HSCTs needs for consultants across the specialties annually.**

**DOH provide assurance that any further specialist services developed, and the workforce required for such, is given appropriate planning for generalist workforce backfill.**

## Addressing Specialist Services' Needs

### Priority 3

#### Specialist Core Recommendations

**The priority must be to fully staff existing community and inpatient services across Northern Ireland and to deliver the currently commissioned services in a safe and effective manner.**

Service development in Northern Ireland trails behind the rest of the UK. The priority must be to fully staff existing community and inpatient services across Northern Ireland and to deliver the currently commissioned services in a safe and effective manner.

This will reduce pressure on acute mental health services in the long term.

**Once investment in the workforce is secured, we also need clear plans for next steps in service development.**

Among the issues that need to be addressed include but are not limited to the DoH regional review of Neurology services, a Mother and Baby Unit to be operational in Northern Ireland by 2027 and Strategies for Dementia and Substance Use.

In identifying the 3 strategic pillars of our strategy we have also added clear objectives, KPIs and timings so that we can ensure actions are completed. The Action Plan is available upon request.

## RSPsych NI is the voice of the profession in Northern Ireland and we will:

- Campaign for resources to address the complex and multifactorial issues that serve to cause the treatment gap, including disproportionately low funding levels, an under-resourced workforce, and fragmented services.
- Ensure that the Northern Ireland Executive is held to account for improving mental health services, including inequity of access, experience and outcomes for the citizens of NI – through the appropriate funding and implementing of the Mental Health Strategy.
- Ensure that the NI health system delivers parity and improvements in access and outcomes.
- Speak up for the needs of our members, their patients, and their families.

## RCPsych NI

northernireland@rcpsych.ac.uk

[www.rcpsych.ac.uk/members/devolved-nations/rcpsych-in-northern-ireland](http://www.rcpsych.ac.uk/members/devolved-nations/rcpsych-in-northern-ireland)

 @rcpsychni

## References

1. Public Accounts Committee - Report on Mental Health Services in Northern Ireland ([niassembly.gov.uk](http://niassembly.gov.uk)) Northern Ireland Mental Health Services Workforce Review 2022 – 2032 | Department of Health
2. Wales: NHS expenditure programme budgets: April 2022 to March 2023 <https://shorturl.at/YEuJr> and Stats Wales Population Estimates by local health boards and age <https://shorturl.at/kuioE>
3. Scotland Health Service Costs 22/23 <https://shorturl.at/ay3nx> and Mid 2023 population estimates <https://shorturl.at/tZtH2>
4. England <https://shorturl.at/mcfd5>
5. Northern Ireland <https://shorturl.at/h8liX> and Public Accounts Committee - Report on Mental Health Services in Northern Ireland ([niassembly.gov.uk](http://niassembly.gov.uk))
6. RCPsych CENSUS 2023
7. <https://shorturl.at/RpftQ>
8. Mental health services in Northern Ireland, NI Audit Office Report 2023 <https://shorturl.at/h3EPc>
9. <https://shorturl.at/f2WRA>