

MAP Statement 2024 - Our Vision for the Maltese Mental Health System

The Maltese Association of Psychiatry (MAP) attended the conference Mental Health. Health - Forward, organised today 13th May 2024, by the Ministry of Health.

We wish to reiterate our position which can be accessed in full in the Alliance 4 Mental Health (A4MH) [Statement of 2016](#) and again in [February 2019](#) in response to the consultation process of the National Mental Health Strategy.

Our position remains the same. In short:

1. All the services - current and future - **are in place for the benefit and service of the service user and their caregivers**. It follows that when experts are consulted **service users and their caregivers must be consulted**.
2. Safeguarding and promotion of **Human Rights** should be integral to Mental Health Services. Not only should human rights and the legality of the process govern every aspect of the provision of these services, but they should be manifestly seen as doing so. **Access to free patient advocacy, free legal representation** and printed or equivalent patient information leaflets about their rights and expectations, are to be immediately available at each point of access to all mental health services.
3. **Integration** of Mental Health Services within all health services is key, with real and respectful integration. The idea of acute in-patient service being on the footprint and connected to Mater Dei is what was proposed by the A4MH. This needs to be done with a successful gradual transition to more robust Community Services, that facilitate care in the community as well as appropriate Rehabilitation Services that include alternative residential options that provide a safe and dignified environment to support clients in transit from inpatient to community services. This will allow gradual **decentralisation of services** away from Mount Carmel Hospital.
4. **Mount Carmel Hospital (MCH) must be shut for mental health purposes** once robust community services are in place. MCH can be used eventually, and productively, for activities that it has not tainted by association. MAP is contrary to its being repurposed for any psychiatric treatment provision, since this will inevitably lead to two unfortunate outcomes:
 - a. keeping MCH open for psychiatry will create a two-tier system for patients, and
 - b. keeping MCH open will discourage the shift towards community care that needs to be imposed upon the current system.
5. In the spirit of **decentralisation** and integration of mental health services, certain areas including Homelessness, Forensic Mental Health, and Substance Use need further attention and development with an emphasis on **inter-ministerial collaboration**.
6. A **functioning clinical governance structure** to oversee and uphold good clinical governance is required.