

OFFICE OF THE COMMISSIONER FOR MENTAL HEALTH & OLDER PERSONS

Annual Report 2012



to protect and promote

28th February 2013

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Chapter 1: Background

Introduction

The Office of the Commissioner for Mental Health and Older Persons was officially set up in October 2011 following the appointment of the Commissioner by the Prime Minister in July 2011. Appendix I lists the Terms of Reference assigned to the Commissioner in his letter of appointment. This report covers the performance of this Office from October 2011 up to the 31st December 2012.

Mission

The mission of this Office is to promote and protect the rights and interests of older persons and persons with mental disorders and their carers, such that they can benefit from a better quality of life through the maximisation of their potential.

Strategic Approach

The Office aims to achieve this mission through the adoption of a person-centred approach, empowerment, advocacy, strategic leadership, influencing policy, monitoring relevant developments and best practice, fostering a quality improvement culture, and through working in partnerships and facilitating synergy within an all-inclusive society.

Core key commitments

The core key commitments of this Office are:

- equal opportunities and equal treatment,
- the elimination of all forms of discrimination, and
- zero tolerance to abuse.

Ultimate Vision

The ultimate vision of this Office is that of an all-inclusive society, wherein older persons and persons with mental disorder are fully empowered to maximise their health, to contribute actively to the community in all spheres of life, including but not

limited to the labour market, and wherein the sustainability and prosperity of the social community at large will be positively enhanced.

Overlapping Areas

Although persons with mental disorder and older persons form two distinct population subgroups, a degree of overlap exists and will continue to increase along with the demographic trends which we are experiencing. With a projected increase of 37,000 in the population aged 65+ (a 57% increase) between 2012 and the year 2025, the problem of dementia is also expected to increase. Apart from dementia which is an obvious and easily recognisable link between persons with mental disorder and older persons, these two population subgroups also share similar significant health and social risks such as those of physical and economic dependency, poverty, social exclusion, and variable degrees of lack of mental capacity. This Office has acknowledged and affirmed the overlap in these care subgroups since its inception. The legislative amendments leading to the new Mental Health Act and the introduction of adult guardianship will apply to both. Continuing to adopt a common trunk approach to these areas will secure uniformity and synergy within the Office, whilst increasing the efficiency as well as the effectiveness of intervention.

Logo



The logo for this office was designed by Elizabeth Camilleri, a seventeen-year-old Sixth Form student at St Aloysius' College, B'kara. The simple design visually imparts the dual role of this Office – that of protecting whilst at the same time promoting the human rights and best interests of the two population sub-groups. The two solid circles represent an individualised and holistic approach to the needs of these vulnerable persons. Finally the two opposing curves signify neutrality since the ultimate vision for this Office is the attainment of a level playing field for all.

Accountability

The Office of the Commissioner is directly accountable for its performance to the Minister responsible for health.

Organisational set-up

The organisational set-up of the Office as on 1st January 2012 was as follows:

- Dr J Cachia, Commissioner
- Dr M Camilleri, Consultant in Public Health Medicine, Head of Services
- Ms R Curmi, Officer in grade 5, Head of Administration
- Dr A Sammut, Specialist in Public Health Medicine with responsibilities for Mental Health
- Mr N Zammit, Clerk
- Mr E Zammit, Messenger/Driver

By the 31st December 2012, the Office was expanded with the recruitment of:

- Ms N Barbara, Assistant Director, Research, Policy Review and Investigation

Vacant posts/positions as on 31st December 2012

On the 31st December 2012, the following posts/positions were still unfilled:

- Health Care Specialist (with responsibilities for Older Persons)
- Expert Services
- Manager Communications
- Manager Legal Services
- Communications Officers
- Research Officers
- Case Management Officers
- Legal Officers
- Administrative & clerical support staff

The projected office organogram is attached at Appendix II. Shaded areas show the unfilled posts/positions.

Chapter 2: Performance

The main areas of performance which the Office has undertaken throughout the reporting period can be grouped under the following headings:

- Influencing Legislation
- Influencing Policy
- Investigation of complaints alleging breach of human rights
- Visits and inspections
- Working in partnerships through participation in:
 - Meetings
 - Working together on specific actions
 - Conferences, seminars, workshops & other events
- Media Participation
- Gender equality and gender mainstreaming

Influencing Legislation

Throughout the reporting period, the Office of the Commissioner has been instrumental in positively influencing enactment of four pieces of legislation as follows:

- Various Laws (Disability Matters) (Amendment) Act, 2012, enacted 30th March, 2012
- General Elections (Amendment) Act, 2012, enacted 17th July 2012
- Mental Health Act, 2012, enacted 7th December 2012
- Code of Organisation and Civil Procedure and the Civil Code (Amendment) Act 2012, *known as the Guardianship Act*, enacted 7th December 2012

Various Laws (Disability Matters) (Amendment) Act, 2012

From December 2011 up to March 2012, the Office of the Commissioner was actively involved in the discussions of the proposed amendments to the Code of Organisation of Civil Procedure and the Civil Code initiated by the then Ministry of Education, Employment and the Family. In the course of these discussions the Office managed to extend the proposed amendments to persons with mental disorders, such that this sector of the population could also benefit from the proposed amendments. Representatives from the Office attended and participated

also in the ensuing Parliamentary Sessions which culminated in the enactment of the Act on the 30th March 2012. This Act effectively removed much of the discriminatory terminology and restored dignity in legal texts referring to persons with mental disorder and persons with disability.

General Elections (Amendment) Act, 2012

In 2011, the Office of the Commissioner requested a meeting with the Chief Electoral Commissioner with respect to the possibility of introducing amendments to the General Elections Act in order to restore more dignity and reduce risk inherent in the process whereby over the years, old and infirm hospitalised persons have had to go through in order to be transported to and from local polling stations in order to exert their fundamental right to vote. Office representatives later met the Speaker of the House of Representatives to discuss the matter further. Subsequently the Office's recommendations were referred to the Parliamentary Committee on Legislation and to the Chief Electoral Commissioner. This process led to the amendment of the General Elections Act in a way which reflected the proposals put forward by the Office of the Commissioner. The Act was enacted by Parliament on the 17th July 2012. Its provisions are expected to be in force during the forthcoming General Elections due to be held on 9th March 2013.

Mental Health Act, 2012

From the moment it was set up the Office of the Commissioner began a process of review of the then draft Mental Health Act. After a series of internal discussions and consultations with representatives of key stakeholders within the Mental Health Services, the Commissioner for Children, the Commissioner of Police together with the Deputy Commissioner and Assistant Commissioners, the Attorney General, the Registrar of the Courts of Voluntary Jurisdiction, the Parliamentary Secretary for Elderly and Community Care and the Minister for Health, the Office proceeded to amend the draft in order to overcome the longstanding impasse that had been previously reached. This strategic leadership and consultative approach led to the successful acceptance of the draft with minimal changes by Cabinet on the 30th April 2012 and its publication in the Government Gazette in June 2012. The Office was present for the discussion in plenary in Parliament on the 26th and 27th November 2012. It also took an active part in the two sittings of the Parliamentary Standing

Committee on Consideration of Bills which resulted in a few minor amendments. Finally the Office was honoured to be present in Parliament when the third reading of the Mental Health Act, 2012, was unanimously approved on the 7th December 2012. The Act is not yet in force.

Code of Organisation and Civil Procedure and the Civil Code (Amendment) Act 2012, known as the Guardianship Act

In February 2012 representatives of the Office of the Commissioner joined forces with the Chief Executive Officer of the National Commission for Persons with Disability (KNPD) within the Ministry for Social Policy and together with the Attorney General formed the drafting team to introduce the possibility of guardianship for persons with a mental disorder or disability which renders them incapable of taking care of their own affairs. This concept of guardianship is aimed to preserve the rights and dignities of such persons to the maximum extent possible and offers a more humane and less restrictive and autocratic approach than the currently available options of incapacitation or interdiction. The Office was subsequently actively involved in the Parliamentary Standing Committee debates which culminated in the law being enacted on the 7th December 2012. The Act is not yet in force.

Influencing Policy

The Office has been influential in influencing national policy by the full involvement culminating to four main pieces of legislation as highlighted in the section *Influencing Legislation*.

Investigation of Complaints alleging breach of human rights

Since it came into being, the Office of the Commissioner has received a number of complaints alleging a breach of human rights in respect of either persons with mental disorder or older persons. Complaints have reached the office either directly by the complainant coming to the Office, via telephone, letters or email. Complaints have been received from persons alleging breach of human rights on their own behalf, a family member, or person for whom they were caring either formally or informally. Complaints referred to both the public sector, private sector as well as to domestic settings.

In each case, the Office listens to the complainant or reviews the complaint/allegation and undertakes any necessary investigation as appropriate. Cases of a sensitive nature, particularly those of a legal or civil nature, are first discussed internally at senior level and then followed by meetings with the individuals concerned and / or their relatives, where they are offered advice as to how to proceed to seek assistance depending on the nature of the case under review. In many instances the Office acts as facilitator and mediator, directly consulting with appropriate bodies and monitoring action taken to resolve the case. The complainant is informed of the outcome of the investigation.

Visits and inspections

Throughout the reporting period, the Office of the Commissioner held a number of visits and inspections at the following premises:

- The Young People's Unit (YPU) & Hostel at Mount Carmel Hospital (MCH)
- Richmond Foundation and Community Mental Health Services
- St Vincent de Paule Residence (SVPR)

The main aim of these visits/inspections was to meet with service users and service providers and to gain an appreciation of the physical and social environment within which services were being provided.

The Young People's Unit (YPU) & Hostel at Mount Carmel Hospital (MCH)

In March 2012, the Commissioner and his Deputy accompanied the Parliamentary Secretary for Mental Health and the Elderly and the Commissioner for Children on an on-site visit to the Young People's Unit and the Hostel at Mount Carmel Hospital. This visit was held in the context of ongoing meetings between the Office, the Commissioner for Children, and the Clinical Chairperson at Mount Carmel Hospital to upgrade the provision of mental health care services to children and adolescents. Infact the visiting team also included the Clinical Chairperson of Psychiatry and the Consultant responsible for most children and adolescents at YPU. During this visit it was agreed to provide more space for children and adolescents in the YPU by transferring the female residents accommodated in the hostel on the first floor of the YPU building to community facilities. It was agreed that with this move, the YPU

could then accommodate 16 children and adolescents. MCH management proceeded to implement this and this was completed by end 2012.

Richmond Foundation and Community Mental Health Services

In April 2012, on the invitation of the CEO, Richmond Foundation, the Senior Management Team visited the Male Hostel in Paola, the premises of the Kids-in-Development (KIDS) Programme, community supported housing in Sta Venera and Fleur-de-Lys, and Villa Chelsea, B'kara. These services offer supportive therapeutic community environments to persons with mental health problems. Throughout these visits, the Team spoke with the residents/service users. The Team finally met the Chairperson of Richmond Foundation in the Foundation's Office. This visit served to build strong liaisons between the Office and the Foundation which augured well for the future.

Mount Carmel Hospital

In May 2012, the Office of the Commissioner visited Mount Carmel Hospital where it mainly focused on the admission processes and the nature of documentation held by the hospital in relation to involuntary admissions and the patient's status under the current Mental Health Act. The Team met with the Senior Management Team, the Departmental Nursing Manager, Medical Records personnel, and Nursing Officers in the mixed admission ward. This visit highlighted the fact that the current state of documentation employed by the hospital does not efficiently keep track of the patients' status with respect to involuntary admissions and that better and more efficient means of tracking the patient's stay have to be found by management especially in view of the new requirements of the Mental Health Act which was being drafted at the time.

St Vincent de Paule Residence (SVPR)

In October and November 2012, the Office Senior Management Team visited St Vincent De Paule (SVPR) residents, conducted general inspections and spoke with a number of professionals providing services there. These site visits/inspections included the mixed admission ward, a number of male and female wards, dementia wards, respite wards, the Physiotherapy Department, the Occupational Therapy Department, the Speech Language Pathology Department, the Pharmacy

Department, and the kitchens. These visits and inspections were conducted together with the SVPR Senior Management Team in the context of a series of joint meetings held together between the two sides, aimed at reviewing and improving the quality of services and care provided to elderly residents.

Working in Partnerships

Since its inception and throughout the period of reporting, the Office of the Commissioner has sought out ways of building networks and working in partnership with key actors coming from various sectors whether public, private, church or social, in order to facilitate synergistic action.

This it has done through seeking out and accepting requests for meetings, setting up of focus groups for multidisciplinary action, actively participating in conferences, seminars, workshops and other events, and working together on specific actions.

Meetings

Meetings with the following entities were held at the request of the Office:

- Director Foundation for Social Welfare Services & Director Appoġġ (20th December 2011)
- Director Elderly and Heads of Services (25th January 2012)
- Police Commissioner and senior police officers at General Police Headquarters (8th February 2012)
- SVPR Management together with Director Elderly (16th April 2012)
- MCH Management (25th May 2012)
- SVPR Management together with Director Elderly (20th June 2012)
- Superintendent of Public Health & Director Health Care Standards (7th August 2012)
- SVPR Management (18th September 2012)
- Chief Operations Officer, MCH & persons in charge of Medical Records, MCH (8th October 2012)
- SVPR Management together with Director Elderly (16th October 2012)
- Head of Elderly Day Centres (26th October 2012)
- SVPR Management together with Director Elderly (19th November 2012)

The following meetings were held at the request of the entities themselves:

- Commissioner for Children (3rd October 2011)
- Commissioner for Children (2nd November 2011)
- Caritas Helpage, Curia (24th January 2012)
- Commissioner for Children at her premises in Sta Lucia (15th February 2012)
- CEO & Chairman, Richmond Foundation at their premises, Sta Venera (20th April 2012)
- Malta Red Cross Society (2nd May 2012)
- Management of Dar Pirotta, B'kara (16th May, 2012)
- Malta Health Network (25th May 2012)
- Police Commissioner and senior police officers at the General Police Headquarters (29th May 2012)
- A group of physiotherapists (8th August 2012)
- Director, Fundamental Human Rights Agency and representatives from AG's office (17th December 2012)

Working together on specific action

Drafting of Legislation

It is needless to say that in its work which culminated in the enactment of four pieces of legislation (see above), the Office has worked in partnership with various stakeholders and entities. Special partnerships were established in this respect with the Ministry of Education, Employment and the Family with respect to the Various Laws (Disability Matters) (Amendment) Act, 2012; the CEO KNPD with respect to the Code of Organisation and Civil Procedure and the Civil Code (Amendment) Act 2012, *known as the Guardianship Act*; various stakeholders with respect to the Mental Health Act, 2012; and the Attorney General in respect of all the above as well as the General Elections (Amendment) Act, 2012.

Adolescent Mental Health Services

The meetings held with the Commissioner for Children discussed issues concerning child and adolescent psychiatry services, with particular focus on the gaps in the treatment of children and adolescents with behavioural and social problems who

require psychiatric interventions. The Commissioner for Children is concerned that the current set up in MCH is not enough and is currently inappropriate to meet the needs of children with severe mental, behavioural and social problems. In February 2012, it was agreed that a consultant with expertise in child psychiatry would be holding clinics on a weekly basis on site in the two children care homes Fejda and St Jeanne Antide. It was also agreed that Crisis Intervention will also be extended to include adolescents under the age of 19 years. Discussions about how best to increase the capacity for children and adolescent inpatient services at the YPU were held. It was agreed that the then current residents in the hostel on the top floor of the YPU building would be moved into the community to find more space for children and adolescents.

SVPR management

The Office has been working closely with SVPR management and the Director, Elderly. A series of meetings took place during 2012 and joint visits and inspections were carried out in SVPR (see above). The aim of this ongoing collaboration is to ensure that the best possible service is being provided to SVPR residents. In its first meeting with SVPR management, the Office imparted its wish for SVPR management to actively work in the five major issues identified by the Office as a priority for action in the field of older persons in line with current EU policies. These areas are: (1) Polypharmacy and appropriate use of medicines, (2) Nutrition, (3) Prevention of falls, (4) Clinical Treatment Protocols and (5) Age Friendly Environment. It is the hope of this Office that SVPR management would be the first to address these issues and that their experience could then eventually be rolled out to homes for the elderly and to community care facilities. Other aspects such as cleanliness and personal well being of the residents were also stressed.

The Police

The Office had two meetings with the Commissioner of Police and senior police officers at the General Police Headquarters. The first of these meetings was held as part of the consultative approach adopted by the Office in the refining of the draft of the Mental Health Act. The second meeting was requested by the Commissioner of Police following the Court conclusions in respect of an incident ending up with the death of a person with mental disorder. In the second meeting, the senior

management of Mount Carmel Hospital also participated. During this meeting it was acknowledged that persons with mental health problems should be treated in a more dignified way when being escorted from their homes by the police to a mental health facility. The police authorities requested that professionals in mental health assist the police during such interventions. It was agreed that there has to be better collaboration between the Police and the Mental Health Services and that the latter would provide basic training to all police officers and more specialised training to a core group of higher officials. A working group composed of the MCH management team, 3 Senior Police Officers and a representative of our Office was set up to identify ways for better co-operation and mutual assistance.

Standards of care

A meeting was held with the Superintendent of Public Health and the Director for Health Care Standards to initiate the discussion on standards of care in licensed facilities providing mental health care and in homes for the elderly.

MCH Utilisation Statistics

A meeting with the Chief Operations Officer and the persons in charge of medical records at MCH was held in October 2012. A number of problems with statistics as provided by MCH were identified. It was agreed as a first step to separate statistics concerning the patients in the geriatric wards from those on patients in the psychiatric wards. It was agreed that MCH management would look into the relevant problems identified during the meeting.

Polypharmacy and the Appropriate Use of Medicines in the Elderly

Having identified 5 major themes for priority action in the field of active ageing, in line with current EU policies, the Office embarked upon taking action on the first of these issues ie polypharmacy and the appropriate use of medicines. To this effect the Office set up a multidisciplinary focus group chaired by the Deputy Commissioner and tasked with holding a Conference in 2013 aimed at improving the awareness of healthcare professionals on this issue, and to enable the participants to come up with an interdisciplinary position statement and recommendations for action. The focus group met for the first time in October 2012 and includes active representation

from geriatrics, clinical medicine, family medicine, public health medicine, medicines regulation, pharmacy, nursing and allied health care professions.

Participation in Conferences, Seminars, Workshops & other events

The Commissioner and/or members of the staff actively participated in a number of events organised by various Government entities and NGOs, both locally and abroad. These seminars and conferences include:

Local events

- Mass organised by Caritas in honour of the Day of the Elderly Person (30th September 2011)
- Seminar of the European Platform against poverty & social exclusion organised by MEUSAC (17th November 2011)
- Pre-Announcement of the Eighth Call for Project Proposals under the European Social Fund, briefing session (15th December 2011).
- A healthy weight for life National Strategy, conference organised by the Directorate for Health Promotion and Disease Prevention (22nd February 2012)
- KNPD 25th Anniversary Conference (23rd March, 2012)
- Official opening of the European Year 2012, Conference organised by the European Year for Active Ageing Committee, during which the Commissioner gave the closing address (13th April 2012)
- MEUSAC meeting for Local Councils in which the Commissioner gave a presentation on Age-Friendly cities (19th April 2012)
- Understanding the other: The challenge of providing culturally-competent care, Conference organised by the Jesuit Refugee Service (26th – 27th April 2012)
- The 9th Infection Control Conference (4th May 2012)
- Meeting with 2012 HOPE Exchange participants, MCH, during which the Commissioner gave a presentation on Older Persons (15th May 2012)
- Freedom of Information Act Seminar (11th June 2012)
- NCPE Seminar (13th June 2012)

- Freedom Of Information seminar for Senior Officials within the Ministry for Health, elderly and community care (10th July 2012)
- FP7 Proposal Writing Workshop (19th July 2012)
- Launch of 2 Health Care Standards documents organised by the Superintendence of Public Health (31st July 2012)
- A taste of Europe: Introducing EU Health Policy and how civil society can advocate for better health at EU level, organised by Malta Health Network together with the European Public Health Alliance, in which the Commissioner briefed all the health NGOs in Malta about the progress reached in the approval process of the new Mental Health Act at the time and about the proposed active ageing agenda for Malta beyond 2012 (11th September 2012)
- Mass organised by Caritas in honour of the Day of the Elderly Person (1st October 2012)
- *Uff xi stress!!! X'nista' nagħmel?*, organised by the Malta Association of Occupational Therapists, in which the Commissioner gave the opening address (5th October 2012)
- Launch of CareMark (9th October 2012)
- Working beyond retirement, Conference by the European Year for Active Ageing Committee & SBG, in which the Commissioner gave a presentation (15th November 2012)
- Ageing in the digital age, Conference by the Malta Communications Authority in association with the European Year for Active Ageing Committee (16th November 2012)
- National Conference on Looked after children by the Office of the Commissioner for Children in which the Deputy Commissioner was rapporteur of the Workshop "Children's Mental Health Needs (22nd November 2012)
- The 8th Malta Medical School Conference, 2012, in which 2 presentations were delivered and a poster submitted by the medical staff of the Office (29th November – 1st December 2012)
- European Year 2012 End of year Conference, by the European Year for Active Ageing Committee, in which the Deputy Commissioner gave a presentation entitled The Way Forward (4th December 2012)

International events held in Malta

- WHO 62nd Regional Committee (13th September 2012)
- European Association of Homes and Services for the Aged Conference (27th – 28th September 2012)
- Alzheimer's Diseases Research News: alternatives to hospitalisation and assistance to caregivers, international conference organised by Caritas-Fiapa (23rd to 24th October 2012)
- European Public Health Association Conference held in Malta, during which the Commissioner, Deputy Commissioner and the other Public Health Specialist in the Office chaired and moderated workshops and poster sessions (8 – 10th November)

International events held abroad

- European Hospital and Healthcare Federation (HOPE) Liaison Officers Meeting, Brussels (15th March, 2012)
- European Innovation Partnership on Active and Healthy Ageing: From Plan to Action, organised by the European Commission, Brussels, (3rd April 2012)
- European Hospital and Healthcare Federation (HOPE) Presidents Committee Meeting, Brussels (26th April 2012)
- European Hospital and Healthcare Federation (HOPE) Liaison Officers Meeting, Berlin (11th June, 2012)
- European Hospital and Healthcare Federation (HOPE) HOSPAGE Conference, Berlin, in which the Commissioner gave a presentation on the Active Ageing Agenda for Malta (11th to 13th June 2012)
- International Conference on Hospital Management to mark the launch of the Polish Hospital Federation, in which the Commissioner delivered the opening address and a presentation on the conclusions of the HOPE HOSPAGE Conference, Warsaw, (14th June 2012)
- Conference on Autonomy and Inclusion of people with intellectual disabilities and people with mental health problems, organised by the European Agency for Fundamental Rights (FRA), Copenhagen (7th – 8th June 2012)
- WHO Mental Health Consultation Meeting – Oslo, September 2012
- European Hospital and Healthcare Federation (HOPE) Liaison Officers Meeting, Paris (22nd November 2012)

- Workshop on the role of mental health and social emotional learning in promoting educational attainment and preventing early school leaving - Luxembourg, October 2012

It is to be noted that the Commissioner was the former President of the European Hospital and Healthcare Federation (HOPE) up to October 2011. He continued attending meetings of the Board of Governors in his personal capacity until the appointment of his successor in June 2012. A public health specialist in the Office continues to act as the European Hospital and Healthcare Federation's (HOPE) Liaison Officer. This representation on the European Hospital and Healthcare Federation is a bonus to our Office because of the important implications in upholding rights of elderly patients and patients with mental disorders.

Media Participation

During 2012 the Commissioner and the Deputy Commissioner participated in a total of 5 radio and 3 television programmes, during which they discussed issues related to persons with mental disorders and/or older persons, advocated the upholding of their rights, gave an insight into the roles, objectives and functions of this Office and replied to queries made by the public, offering advice and guidance in a spirit of advocacy and empowerment.

Gender Equality and Gender Mainstreaming

The Office is committed to equal opportunities and equal treatment in respect of both staff and client base.

A Gender Equality Policy was drawn up for the Office of the Commissioner. A Gender Equality Committee was set up to lead the process of gender mainstreaming within the Office. A focal point was identified to represent the Office of the Commissioner during meetings / seminars on gender equality and gender mainstreaming organised by the National Commission for the Promotion of Equality.

The Office is committed to ensure that all data produced, received or handled in relation to its functions is gender disaggregated and to ensure that the various

services provided for our client group are gender sensitive and meet the particular requirements of individuals.

As one of its gender-mainstreaming exercises, the Office analysed the statistics of day centre utilisation from a gender perspective and followed this up with a meeting with the Head of Day Centres. Gender-related issues were explored together. The Office will continued monitoring the situation in this regard.

Chapter 3: Professional Development

The Office is committed to the professional development of all staff and to their contribution to the professional development of others. This it achieves by encouraging the uptake of continuous professional development activities, involvement in academic and professional development of others and through recruitment of persons with the necessary skill mix and expertise to embrace the vision of the Office and deliver a quality service.

Continuous Professional Development

Throughout the reporting period, a number of training initiatives were taken up by various staff members. These include:

- Currently ongoing part-time Diploma in Public Management organised by the Training and Development Unit, Office of the Prime Minister (CDRT) which is being undertaken by a senior medical member of the staff
- Ongoing CPD training sessions for public health specialists organised by the Malta Association of Public Health Medicine
- CPD training sessions for Consultants organised by the Ministry for Health in 2012
- Ongoing CPD training sessions for senior and middle managers organised by the Ministry for Health
- Better Regulation Course organised by the Management Efficiency Unit and co-funded by European Social Fund
- A course on Microsoft Access organised by the CDRT for all Office staff delivered in 8 4-hour sessions
- Various one-day courses organised by the CDRT for senior and middle managers
- Various one-day courses organised by the CDRT for clerical staff grades
- A number of training sessions provided by the Freedom of Information Unit concerning the Freedom of Information Act

Involvement in academic and professional development of others

Throughout the reporting period, medical staff members of the Office have been involved in:

- Teaching in the MSc Public Health Course at the University of Malta
- Teaching in the undergraduate MD Course at the University of Malta
- Training Supervision of postgraduate specialist trainees in public health medicine
- Assessors in the postgraduate specialist training programme for public health medicine
- Members of the Postgraduate Public Health Training Committee
- Members of a Subcommittee reviewing the Postgraduate Framework for specialist training in Public Health Medicine
- Giving a number of presentations locally and abroad
- Members of the Executive Committee of the Malta Association of Public Health Medicine

Recruitment

The Office is committed to recruit staff as per organogram depicted in Appendix II. To this end, the Commissioner and Deputy Commissioner were Chairperson and member respectively on a Selection Board for the recruitment of Assistant Director (Research, Policy Review and Investigation) with the Office. The third person on the Board was the Director Human Resources, MHEC. The Interviews were held on 19th December 2012. The post will be successfully filled on 16th February 2013.

Dr John M. Cachia
Commissioner

APPENDIX I:

Functions and Duties of the Commissioner

Older Persons

(a) to provide the necessary technical advice to the Minister, if specifically so required, so that a draft Bill as may be necessary, is enacted by Parliament;

(b) to promote awareness of matters relating to the interests of older persons and of the need to safeguard those interests;

(c) to keep, under regular review, the adequacy and effectiveness of services provided for older persons by relevant authorities;

(d) to promote the provision of opportunities for older persons;

(e) to promote the elimination of discrimination against older persons;

(f) to encourage best practice in the treatment of older persons;

(g) to promote positive attitudes towards older persons and encourage participation by older persons in public life;

(h) to advise the Minister on matters concerning the interests of older persons:

(i) as soon as reasonably practicable after receipt of a request for advice; and

(ii) on such other occasions as the Commissioner thinks appropriate;

(i) to take reasonable steps to ensure that:

(i) older persons are made aware of the functions of the Commissioner; the location of the Commissioner's office; and the ways in which they may communicate with the Commissioner;

(ii) older persons are encouraged to communicate with the Commissioner;

(iii) the views of older persons are sought concerning the exercise by the Commissioner of the Commissioner's functions;

(iv) the services of the Commissioner are, so far as practicable, made available to older persons in the locality in which they live;

(j) to undertake, commission or provide financial or other assistance for research or educational activities concerning the interests of older persons or the exercise of the Commissioner's functions;

(k) to issue guidance on best practice in relation to any matter concerning the interests of older persons, after consultation with such bodies or persons as the Commissioner thinks appropriate;

(l) to conduct such investigations as the Commissioner considers necessary or expedient for the purposes of any of the Commissioner's functions;

(m) to compile information concerning the interests of older persons;

(n) to provide advice or information on any matter concerning the interests of older persons;

(o) to publish any matter concerning the interests of older persons, including the outcome of any research or activities; the outcome of any investigations conducted; and any advice provided by the Commissioner;

(p) to make representations or recommendations to any body or person about any matter concerning the interests of older persons.

Mental Health

(a) to provide the necessary technical advice to the Minister so that the draft Mental Health Act and any amendments thereto that may become necessary, are enacted by Parliament by end December 2011;

(b) to prepare the necessary technical infrastructure so that the provisions of the draft Mental Health Act can enter into force in the shortest possible timeframe following the approval of the Act by Parliament;

(c) to promote and safeguard the rights of persons suffering from a mental disorder and their carers;

(d) to prepare or review any policies and make such recommendations to safeguard or to enhance the rights of such persons and to facilitate their social inclusion and wellbeing;

(e) to investigate any complaint alleging breach of patient's rights and make recommendations which may be required to protect the welfare of that person;

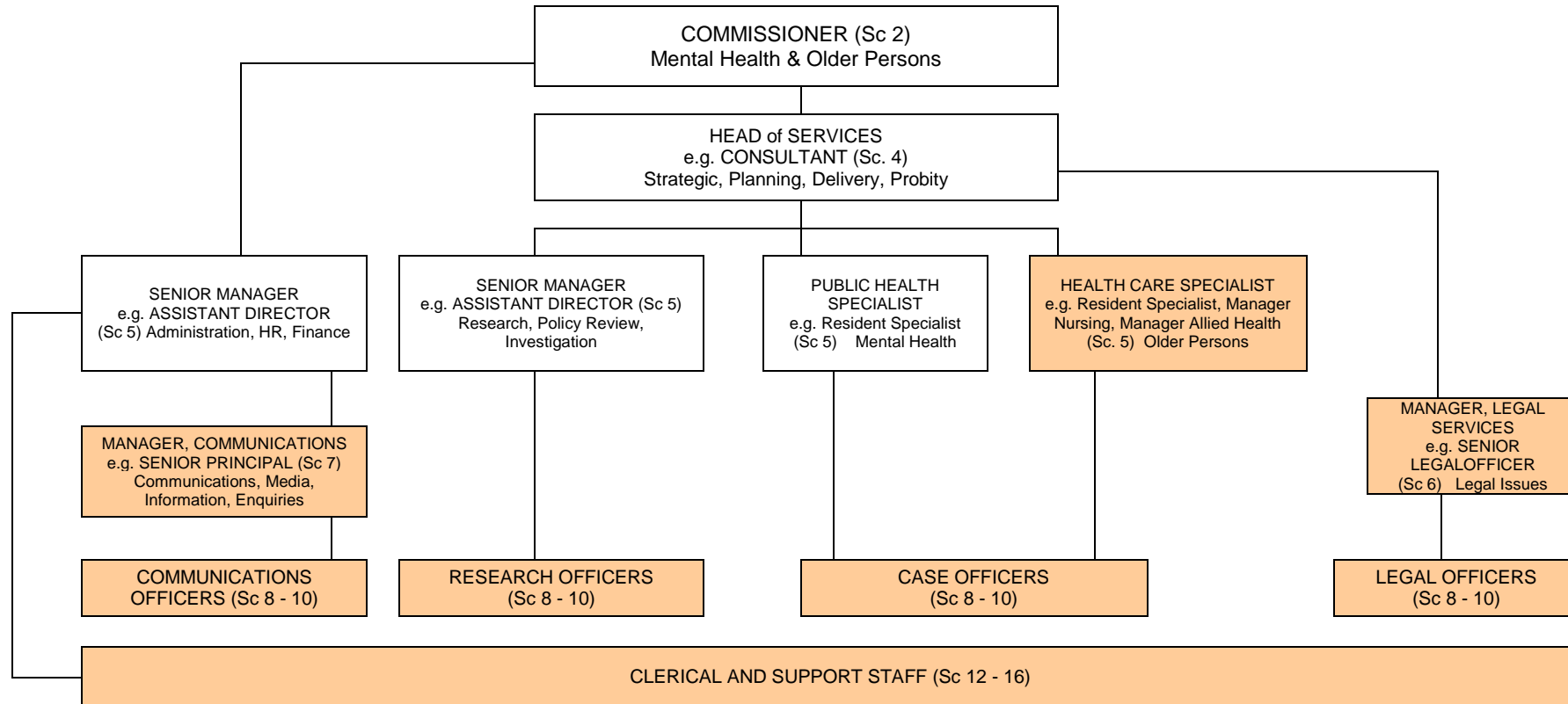
(f) to investigate any complaint about any aspect of care and treatment provided by a facility or a healthcare professional and make any recommendations that are required;

(g) to conduct initial inspections of all facilities to assess and ascertain that the rights of patients are being upheld. During such visits the Commissioner shall have unrestricted access to all parts of the facility and patients medical records as well as the right to interview any patient in the facility in private;

(h) to report any case amounting to a breach of patient rights to the appropriate competent authority recommending the rectification of such a breach;

(i) to present to the Minister responsible for mental health an annual report of his activity.

Appendix II: Projected Office Organogram



- a. Communications Officers (Scale 8 - 12) to interface with the public, respond to requests for information and guidance, assist the public to lodge a complaint
- b. Research Officers (Scale 8 - 10) to conduct background data collation and research, and participate in research projects
- c. Case Officers (Scale 8 - 10) to investigate and prepare case reports for decision of the commissioner within legal timeframes d.
- d. Legal Officers (Scale 8 - 10) to assist the Manager Legal Services, liaise with Judiciary and legal representatives, liaise with curators appointed by Court, represent the Commissioner in Law Courts