THE TRANSITION TO COMMUNITY-BASED CARE / EXPERT WORKSHOP
Project on community-based mental health care in Lithuania

Thursday, 17 February 2022
Project overview

Community-based mental health care in Lithuania
- The OECD is providing policy analysis and advice to inform the ongoing reform of community-based mental health services, with a particular focus on care for adult patients with complex needs in community settings
- Four main outputs:
  - Situation analysis to assess status quo in the field of mental health care provision
  - Analysis of EU best practices in field of integrated community-based mental health care
  - Recommendations report with strategy implementation plan on policy design for mental health services
  - Training on community-based mental health care for policy-makers, practitioners and providers

Timeline

- Situation analysis
- Best practice review
- Recommendations report
- Training
KEY FINDINGS
- OECD ANALYSIS -
Key challenges

1. Significant burden of mental ill-health in Lithuania, and considerable stigma
2. Lack of resources and capacity
3. Care delivery pathways should be clarified
4. Greater efforts required on care quality
1. The burden of mental ill-health in Lithuania is significant

More than 14% of Lithuanians experienced a mental health problem in 2019

Estimates of the percentage of people experiencing mental health problems in European countries in 2019

**Note:** Attention deficit, autism spectrum disorders, conduct disorders, eating disorders, idiopathic developmental intellectual disability and other mental and behavioural disorders are not included in this graph

**Source:** IHME, 2019
1. The number of diagnosed mental and behavioural disorders is increasing

Prevalence, diagnosed schizophrenic, mood affective and depressive disorders, per 100 000 population 2001 and 2019

Incidence, diagnosed disorders due to psychoactive substance and alcohol use, per 100 000 population 2001 and 2019

Source: Lithuanian Health Information Centre, 2019
1. Lithuania still has the highest suicide rate in the EU

The suicide rate is particularly high amongst groups with comparatively low rates of diagnosis (men and those in rural areas)

Standardised death rate per 100 000 population in 2011 and in 2017

Source: Eurostat, 2021
1. Significant stigma around mental illness persists in Lithuania

- Formal and informal modes of stigmatization remain

- Research conducted in Lithuania and interviews with stakeholders suggest these continue to act as a barrier to help-seeking and treatment
2. Spending on mental health care is low

Estimated mental health spending as a percentage of total government health spending, 2018 (or latest year)

Note: Reporting methods differ by country, including the range of services covered and whether spending can be disaggregated by age (adult only). Therefore, caution should be taken in comparing spending across countries.¹Includes dementia; ²Data for England; ³WHO Atlas 2017 – Percentage of total government health expenditure

Source: Adapted from (OECD, 2021)
2. Funding is geared toward inpatient care

Ministry of Health funding for mental health care, 2020

Note: Funding for Public Health Bureaus (PHBs) refers to the proportion of PHB funding allocated to mental health, and includes funding for prevention and promotion as well as the provision of preventative mental health care services (psychological counselling)
Source: Lithuanian Ministry of Health
2. The mental health workforce is inequitably distributed

Psychologists and mental health nurses per 1,000 population, 2018 or latest year

Note: ¹Data on number of psychologists taken from WHO Mental Health Atlas 2017 ²Data on mental health nurses taken from WHO Mental Health Atlas 2017 ³National sources used
Source: (OECD, 2021)
2. There are areas of service provision with acute shortages

Children and adolescents receiving mental health care services, 2019

Note: Data refers to the provision of services to children and adolescents aged up to 18 years old. It includes services for developmental disorders in primary care and excludes childcare services and specialised outpatient services for children and adolescents with developmental disorders.

Source: Lithuanian Ministry of Health
2. There is a lack of systems capacity for the provision of psychotherapy in community settings, and a heavy reliance on medication-based care.

Number of psychotherapeutic services provided in primary mental health care centres as a % of all services provided in PMHCs, 2019

Daily Defined Dosages (DDDs) per 1000 population, 2019

Note: Data includes dementia and developmental disorders. Psychotherapeutic services refers to the provision of incentivised psychotherapeutic interventions for individuals, families and groups. Source: Lithuanian Ministry of Health.

Source: OECD.Stat, 2021
3. Clinical care pathways should be clarified

There are high rates of onward referral amongst GPs

Number of visits made to primary care practices by service user’s diagnosis, 2019

Source: Lithuanian National Health Insurance Fund
3. The bulk of primary MH care is delivered in primary MH care centres, but there are resource constraints

Number of visits made to primary care practices and primary mental health care centres for specific diagnoses, 2019

Number of visits made to primary mental health care centres by service user’s diagnosis, 2019

Source: Lithuanian National Health Insurance Fund
3. The MH system remains hospital-centric and care coordination is a challenge

Rates of psychiatric beds per 1 000 population in the OECD, 2000 and 2018 or nearest year

Note: 1. Data from 2019; 2. Data from 2018; 3. Data from 2016
Source: (OECD, 2021[5])
4. Greater efforts are required to monitor and ensure care quality

Percentage of people admitted to inpatient care at least 3 times in a year, in 2019 (or closest year available)

Note: It is not possible to distinguish between ‘planned’ and ‘unplanned’ repeat admissions. Some countries may include transfers across inpatient services as admissions, while other countries exclude transfers. Data from years 2019, 2018, 2016. Source: (OECD, 2021[5])

Percentage of people who self-reported unmet needs for mental health services due to financial reasons in 2014

Source: (Eurostat, 2021[32])
4. Greater efforts are required to monitor and ensure care quality

Rate of avoidable hospitalization amongst patients with schizophrenia registered in primary mental health care centres, 2011-2019

Average rate of avoidable hospitalization (%)

Note: The pay-for-performance incentive metric for mental health centres was introduced in 2011
Source: Lithuanian National Health Insurance Fund
Preliminary recommendations

1. Promote good mental health, and reduce stigma
   - Remove/repeal remaining forms of formal **stigmatisation**, and
   - Continue existing efforts and consider new ways to **improve mental health literacy** across the general population, and across health care providers.

2. Ensure that MH resources and capacity meet population needs
   - Ensure **sufficient levels of funding** to meet population needs, and deliver high-quality mental health care
   - Increase **capacity to deliver psychotherapies** through a step-wise approach. Tackle key areas of service provision where there are acute shortages
   - Ensure **additional investments in primary care system** and primary mental health care workforce.

3. Clarify clinical care pathways
   - Clarify roles and responsibilities of different care providers and develop **treatment guidelines** grounded in established best practice in mental health care
   - Ensure **adequate funding and resources** to ensure providers deliver on their defined responsibilities
   - Ensure **incentive structures** are aligned with care delivery pathways and clinical guidelines to ensure robust transitions between inpatient and outpatient.

4. Promote and incentivise high-quality evidence-based care
   - Expand **collection and use of quality and outcome indicators**
   - Ensure **monitoring**, oversight and enforcement mechanisms are appropriately designed, funded and resourced to ensure providers meet specified requirements
   - Ensure **adequate guidance** is provided for professionals.