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Quality and cost-effectiveness in long-term care and dependency prevention



POLICY SUMMARY: Latvia

De-institutionalization

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Policy theme	De-institutionalization and development of alternative care services
Design and implementation level	National design, locally implemented
Policy objective	National action plan to implement the DI process through: <ol style="list-style-type: none"> 1. efficient management of DI process, achievement and evaluation of planned results; 2. single approach in all planning regions; 3. use of European Common Guidelines and Manual on the Use of EU Funds to implement the transition from institutional to community-based care.
Start date – End date	2015 – 2020 (some activities in 2023) interim report in 2018

Aims

- with ESF support, made an assessment of individual needs for 2,100 adult persons with mental impairments
- closed three long-term social care and social rehabilitation institution / affiliates
- five reorganization plans elaborated for SSCS affiliates that will be closed
- 850 persons with mental impairments to receive ESF supported social care services at the place of residence in December 2018 and 2,100 persons in December 2023
- 700 persons with mental impairments to have started independent living outside long-term social care in social rehabilitation institutions in 2023
- proportion of persons with mental impairments who live outside institutions and receive community- based services to increase from 20% in 2012 to 45% in 2023

Implementation

The necessary regulatory framework was developed during 2015. In November contracts for implementation of the projects were concluded in all planning regions and cooperation agreements are now concluded with the municipalities.

Zemgale planning region continues to work on the project and procurement for

development of de-institutionalization plan in the region was announced on 20 September 2016, with an estimated contract price of €123,967. The other planning regions are planning similar procurements, hence the MoW believes that more active implementation of the projects will take place in 2017 and 2018.

Target group

Adult persons with mental disability in care institutions

Eligibility criteria

n/a

Resources

The programme is funded mainly from EU funds, budgeted as follows:

- For DI process management at regional level – €51,000
- elaboration of communication strategy and action plan – €30,000
- implementation of communication strategy and action plan – €900,000
- for assessment of individual needs of clients and elaboration of support plan for DI target groups, taking into account the individual wills and aims – €897,600
- training of staff of social service providers – €135,100
- preparation of clients for transition process and support at the place of residence – €294,000
- provision of social services in municipalities – €35,136,671
- implementation of ERDF projects – €44,441,977
- creation of information system for monitoring the DI process – €2,000,000.

Performance assessment and monitoring

- DI monitoring process will be carried out by the Social Services Development Council involving representatives from the Ministry of Finance - Managing Authority, Ministry of Economics, Ministry of Education and Science, Ministry of Transport, Ministry of Health, Ministry of Environmental Protection and Regional Development, Latvian Association of Large Cities and other NGOs;
- for management of DI process at national level a DI steering group will be established by the MoW, composed of representatives from responsible departments and the State Secretary;
- for targeted DI planning, implementation and monitoring at regional level it is planned to establish a regional DI steering group, which will include the Head of the Planning Region administration, representatives delegated by the Planning Region Development Council, DI project manager of planning region, regional governments and NGOs;
- groups of experts will be established for assessment of the needs of clients and for elaboration of support plans – for assessment of the needs of persons with mental disorders and for elaboration of support plans by including, at least, social worker, clinical psychologist, psychiatrist, occupational therapist, mental health care nurse; for assessment of the needs of children with a disability in institutions and local governments, including, at least, social worker, special pedagogy teacher, neurologist, clinical psychologist, physiotherapist, speech therapist, occupational therapist;
- the expert teams are planned to work in close cooperation with the institutions and staff of social service offices for assessment of the individual needs of clients, for the development of support plans, as well as for coordination of processes and preparation of a summary of the necessary social and general services and the desired location of these services.

Evidence of success

(outcomes, quality, satisfaction, awareness)

There are no quality assessment publicly available yet.

Transferability/
Uniqueness.

Difficult to assess at this stage.

Is this an
emergent
practice? Degree
of innovation

Planned measures should not be considered as innovative, but it cannot be excluded that, by developing services in municipalities, such services could be developed.

Sustainability

Local governments will be involved in the implementation of the measures, therefore it is considered that the sustainability of the plan will be provided.

Academic
literature on this
action

Not yet in place.

Documents

Action Plan for Implementation of De-institutionalization for 2015–2020;
www.lm.gov.lv/upload/aktualitates/null/2015_15_07_ricplans_final.pdf
