

Implementation of Belgian Best Practices – Mobile Teams in Croatia

BACKGROUND

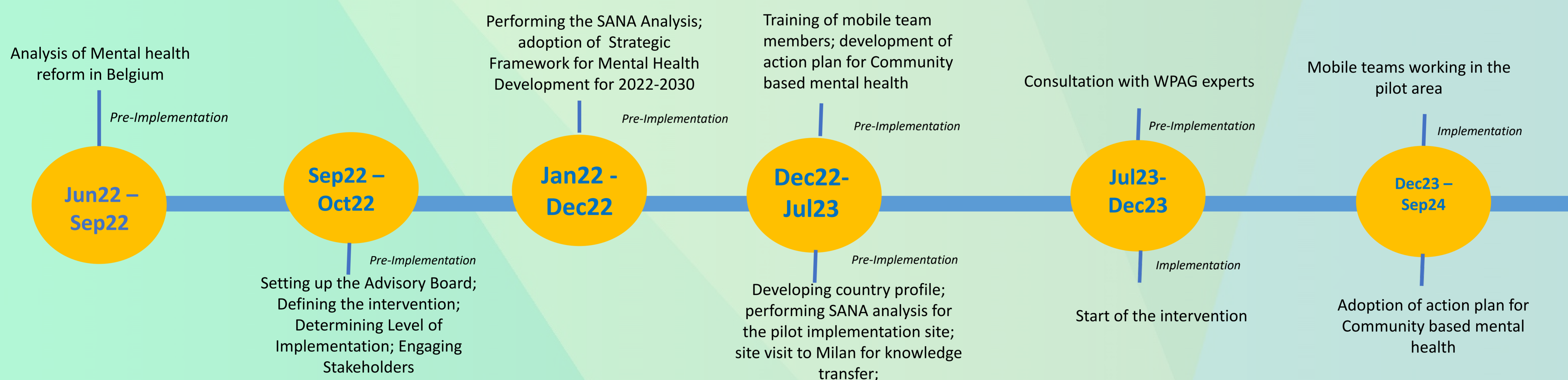
Localized centrally in Europe, Croatia is a republic consisting of 4 regions and 20 counties, with the capital City of Zagreb acting as the 21st county. Croatian mental health services still rely on psychiatric hospitals (seven of them for the population of 3 878 981 people). In the end of 2022, the Croatian government adopted the Strategic Framework for Mental Health Development for 2022-2030 period in which Community mental health care is one of the prioritized areas. An action plan for Community based mental health has already been drafted but is still not in effect.

General Purpose - implementation of mobile teams and shifting to more community-oriented mental health services

Level of Implementation - west part of the City of Zagreb (city areas Črnomerec, Trešnjevka, Podsused-Vrapče)

Target Population – people with severe mental illnesses treated in University Psychiatric Hospital Vrapče living in the catchment area

Timeline of Implementation Process



SA1 Ensure (strong) governance structures/mechanisms – adopting an action plan for Mental Health with measurable goals and outcomes based on the Strategic Framework; regular engagement with University Psychiatric hospital Vrapče to ensure their active participation in planning, decision-making, and implementation; inclusion of experts by experience

SA2 Development or transformation of MH services and interventions (incl. multidisciplinary approach) - Introducing multidisciplinary mobile mental health teams; involvement of users in the definition of the individual service plan; nomination of care manager; development of individual service plans

SA3 Extensive global training program of stakeholders - Training on FACT model; Provision of information on trainings to mental health professionals on evidence-based psychosocial interventions

SA4 Intensive continuous communication, information and awareness raising among/towards stakeholders and users- dissemination at regional level about the project to the relevant stakeholders and to the general population

SA5 Data collection, monitoring & evaluation - monitoring of implementation of the best practice

KEY LEARNINGS

CHALLENGES & SOLUTIONS

- Resistance to change from MH practitioners - opportunity to change view through presentation of best practices and trainings
- Engaging more stakeholders – opportunity to network and make new connections

POSITIVE OUTCOMES

- Better collaboration with stakeholders
- Better understanding of the system and the processes of health care

KEY LESSONS LEARNED

- How to communicate with stakeholders
- How to approach them and how to lead them to paradigm shift

GAINS FROM JA ImpleMENTAL NETWORK

- Share of knowledge
- Share of experience
- General support