

Summary

Personalising mental health care services through a new locally organised person-centered special care service, Estonia

The proposed new model is person-centered, providing assistance to a person with special mental health needs as one complete integrated service organised by the local government, where all necessary activities to support a person are guaranteed. This is in contrast to the current model which is services-centered and organised at state level. The new model allows for the maximum use of the community's available resources to ensure easy and quick access to a comprehensive but flexible combination of services based on personal needs. It also aims to provide these supports to the person in need, and their caretakers or relatives, as close to home as possible, based on the principles of deinstitutionalisation. In the new model, each municipality identifies the service needs of its region and develops services and/or creates a favourable environment for service providers to ensure the availability of services.

The approach to deliver this new innovative person-centered service is based on consistent personal case management. It includes the creation of an action plan and the monitoring of its implementation. A case manager (an employee of the local government) is appointed to work with the person with disabilities to define their needs, prepare a comprehensive assistance package, and establish a personal budget. The new model has 26 service components (e.g. peer support; supporting the creation/maintenance of social relationships (with loved ones, friends, children or parents); supporting movement outside place of residence; supporting recovery and coping with illness) covering seven areas of life (these are: social relations, mental health, physical health, employment, free time and hobbies, living environment, activities of daily living)

and is formed from the activities that are now part of the special care and social rehabilitation services necessary to support a specific person and in addition, service components that are not covered by the current service system. .

The model is currently being piloted, and has been funded by the ESF since 2017 (funding for the pilot will end at the end of 2025). The number of persons with disabilities supported by the project is so far **1503**. The intention then is to implement the model into national law and the state budget.

Annex Table

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Title of the practice (in original language)	Isikukeskse erihoolekande teenusmudel kohalikus omavalitsuses (Service model of person-centred special care in local government)
In which country/region is/was the practice implemented?	Estonia
Who is/was implementing the practice?	<ul style="list-style-type: none">• National Federal Government - Department of Social Welfare, Ministry of Social Affairs, Republic of Estonia• Local/Municipal government
Which other organisations are/were involved in the practice?	In 2017, a prototype of the person-centered model was completed in cooperation between the Ministry of Social Affairs and a private joint adventure, Trinidad Wiseman. The prototype was developed together with people with special care needs, their relatives, service providers, representative organisations, and the Social Insurance Board.

What are/were the main objectives of the practice?	<ul style="list-style-type: none"> • To make the supporting system for adults with intellectual, psychosocial or developmental disabilities more person centered; • To improve people's understanding of their rights and opportunities; • To improve the timing of interventions, ensuring people receive appropriate interventions as early as possible; • To improve support to caretakers and families looking after people with special care needs; • To provide comprehensive service to the person in need and their family as close to home as possible.
What is/was the timeframe of the practice?	2017 – end of 2025
Who is/was targeted by the practice?	<ul style="list-style-type: none"> • Adults with intellectual, psychosocial or developmental disabilities who are not users of special care or social rehabilitation services; • Older persons with disabilities; • Families/informal carers.
What activities are/were carried out?	<ul style="list-style-type: none"> • The person-centered model prototype was developed together with people with special care needs, their relatives, service providers, representative organisations, and the Social Insurance Board; • In 2017, the prototype was completed in cooperation between the Ministry of Social Affairs and a private joint adventure, Trinidad Wiseman; • The approach to deliver this new innovative person-centered service is based on consistent personal case management; • It includes the creation of an action plan and the monitoring of its implementation; • A case manager (an employee of the local government) is appointed to work with the person with disabilities to define their needs, prepare a comprehensive assistance package, and establish a personal budget; • Supports to the person in need, and their caretakers or relatives, are provided as close to home as possible.
What are/were the sources of funding and amounts?	<p>ESF funding 2020-2027 conditions for granting support Access to social protection and long-term care, sub-activity "Testing of an integrated, person-centered and flexible system of special care services."</p> <p>The cost of the pilot during 2017-2022 was EUR 7 million; and for the years 2023-2025 a total of approximately EUR 12 million has been allocated.</p>
What are/were the outputs: people reached and products?	<ul style="list-style-type: none"> • The project supports 1955 people; • Evaluation by a body independent of its implementation; • Monthly participant monitoring report; • Twice a year interim reports on project implementation.
What are key sources of information?	<p>Social Insurance Board website: https://sotsiaalkindlustusamet.ee/puue-ja-hoolekanne/erihooletamine/isikukeskse-erihooletamise-teenusmudel</p>