

FACTORS INFLUENCING THE INTEGRATION OF HEALTH CARE AND SOCIAL SERVICES AT THE OUTPATIENT LEVEL IN LITHUANIA

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Abstract

The Lithuanian Progress Strategy “Lithuania 2030” enshrines the vision and development priorities of the state, and the measures for their implementation, which must be implemented by 2030. One of the development directions in the strategy is the development of personal health care services and the promotion of a healthy lifestyle. In order to achieve this strategic goal, it is planned to: improve the quality of health care services, increase patients' health literacy and involvement in the treatment process, increase the efficiency and resilience of the healthcare system, move from inpatient to model care, strengthen primary health care and outpatient health care. to increase the availability of care services, and to implement a long-term care model that integrates nursing and social services (Council implementing decision, 2021). The document states that the implemented long-term care model could help to make more efficient use of available resources in Lithuania: reduce the need for medical staff, ensure the availability and quality of long-term care services, reduce the burden on the health care system and facilitate patient care for informal caregivers. The current quality indicators of the outpatient and inpatient health care in Lithuanian state that the efficiency of the health care system could be significantly increased by moving from inpatient to outpatient health care services (OECD, 2019). Lithuania needs stronger long-term care (LTC) system to meet current and future needs. The share of the population aged 65 years and over is expected to grow from 20% in 2019 to 32% in 2050, about 30% of older Lithuanians have LTC needs. The governance of long-term care is fragmented between the Ministry of Health, the Ministry of Social Security and Labor, and the municipalities. About 2.9% of older people received home social/assistance care services in 2020 from social services and over 7.3% of older people received at least one outpatient home nursing service. OECD (2022) is argued that the provision of health and social services cannot meet the growing demand for these services, as more than 30% of over 65 older people have a need for a variety of care services. Legislation providing for the joint provision of nursing and social care exists but does not

appear to be implemented in practice (OECD, 2022). The current gap between legislation on health care and social services can be seen as a conflict between health care and social services, which currently hinders the integrated organization and delivery of these services. Researchers acknowledge that fragmentation of health and social care services in Lithuania is evident: a lack of collaboration between the team of GPs and social workers providing services to patients at home, which is particularly pronounced in the provision of care for elderly patients with dementia (Kontrimiene et al. 2021). The authors point out that the path towards service integration is not an easy task, as cooperation often depends on the characteristics of personal care providers rather than the correct implementation of legal requirements, and it is proposed to promote effective cooperation mechanisms between providers, effective partnership-based cooperation mechanisms that go beyond formal health and social care.

The aim of this study is to analyze the contradictions in the organization and provision of health care and social services at the outpatient level in Lithuania, to identify measures and proposals to address these contradictions, to find out the components of the model of integrated outpatient health care and social services, cooperation mechanisms, implementation measures impact on the quality of services.

Design/methodology/approach. The empirical study was conducted by applying a semi-structured individual expert interview. The interviews were conducted in February-March 2021. The selection of experts was carried out using the purposeful sampling method. Selection criteria: professional experience in organizing, providing, and analyzing care services at the outpatient level; representation of stakeholders to cover all aspects of policy formulation and implementation. Fifteen selected experts (representatives of policymakers and implementers, service providers, and researchers) participated in the study. Qualitative data were analyzed according to the method of qualitative content analysis, in order to increase the accuracy of text coding and to facilitate the coding standardization process, the qualitative analysis information Nvivo was used.

Results. Based on the results of the analysis of scientific literature and data of other studies the main data categories were distinguished: the legal framework, and the need for a change which was influenced by the increased need for outpatient care services. These findings were the basis for a semi-structured interview of experts to elaborate on the problems and solutions that will help to integrate health care and social services at the outpatient level. Analyzing the quantitative parameters of the interviews – the frequency of statements in each category, it can be seen that the issues of integrated health care and social services and their solutions are the most relevant for the informants (237 statements). Decisions on the organization of services at the state level (110 statements) and on the financing of services (96 statements) and the coordination of services (88 statements) were less frequently discussed.

Informants point out that integrated health care and social services are needed not only for patients but also for informal caregivers. Informants primarily emphasize patient-centered, coordinated services that require sustainable, politically validated, and statutory health care and social services organized, coordinated, and delivered on a team basis. The

development of integrated health care and social services for patients at home requires a political consensus on the prioritization of these services, as the integration of these services is a long process lasting parliamentary term, therefore it is necessary to establish a political solution. Assessing the importance of the service funding mechanism, our study revealed that service funding does not currently meet the needs of patients and providers, so it is proposed to combine available resources and have a separate funding fund for integrated health and social services, with a flexible, non-restrictive funding system. Our study showed that the fund should consist of the National health insurance fund, state and municipal budget funds for the provision of social services, and individual funds, reviewing targeted nursing and care benefits paid directly to patients. Our study emphasizes the need to expand the range of services provided to patients at home, reduce bureaucratic requirements for social services, strengthen self-help services, and at the same time reduce the burden of care on patients' relatives. Our study found that the provision of integrated health care and social services should be delegated to the primary chain of personal health care and that nurses should be used to coordinate services. It is emphasized that services must be provided in a coordinated and collaborative way to meet the needs of the patient and their relatives. The study focused on the availability of additional personal health care services at home for people with mental health problems (Alzheimer's, dementia) and their relatives, while proposing to address the situation by setting up mobile teams of mental health professionals and helping and supporting patients' relatives. The biggest challenge is to ensure the dissemination of information between providers, to obtain and pass on information on the health status of the patient being cared for at home on time and on the spot. The lack of funding for services has not been seen as the only challenge facing integrated health and social care or long-term care. Our study found that: the complex organization of services, especially the restriction of the social sector by complex bureaucratic formalities, hinders the development of long-term care services, as well as integrated health care and social services for patients at home; the lack of properly coordinated services increases the burden of care on informal caregivers, suggesting that better coordination tools are needed between the social and health sectors; informants perceived society to be alienated and distant from the elderly, to integrate people with disabilities into society, and to understand the importance of the need for care services. Particular attention is paid to the importance of public education and information, involvement of members of the public in the provision of integrated health care and social services to patients at home, education to the public about chronic diseases, services provided, involvement of members in to educate the public by demonstrating the benefits of these services to the patient and their immediate environment.

Research limitations/implications. The model of long-term care is still being developed (defined in the strategic development documents) in Lithuania, at present, there is no integration of health care and social services at the outpatient level in Lithuania, and there is no experience in organizing and providing such integrated services, therefore it is not possible to boil them in detail, as the level of integration is only in the first stage.

Practical implications – The results of the research may be useful in the development and practical implementation of integrated health care and social services for long-term care patients in Lithuania in the implementation of the long-term care model provided in our states’ and international organizations’ strategic documents.

Originality/Value – There is a lack of research evaluating the principles of organizing integrated health care and social services at the outpatient level and long-term health care in our region countries, therefore our research will contribute to the development of research on these services in Lithuania and the region.

Keywords: integrated health care and social care services, coordinated care, long-term care.

Research type: research paper.

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