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Greater cohesion and continuity needed in the care sector for people with chronic mental health problems

A large number of people have mental health problems or are vulnerable. The demand for mental healthcare is set to increase in the coming years. This growth is leading to increased pressure on the provision of mental healthcare for vulnerable people with chronic mental health problems.

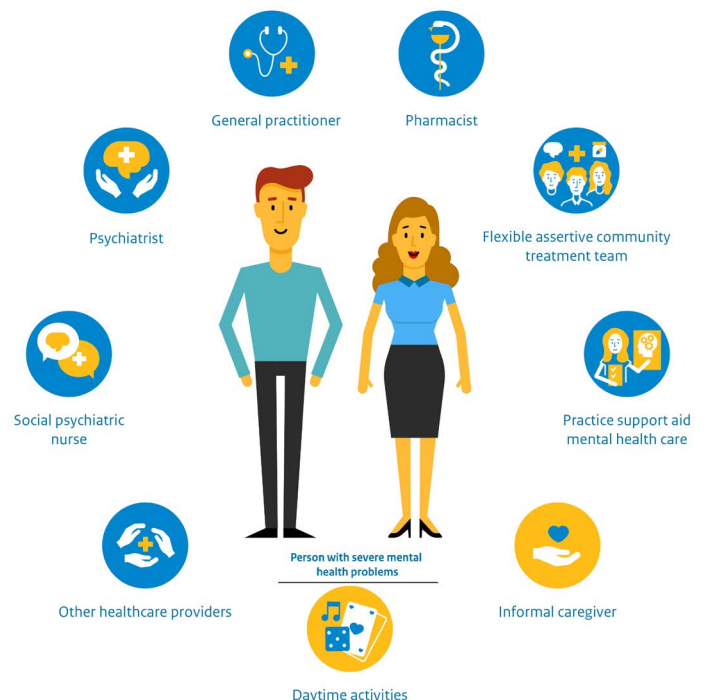
The Health and Youth Care Inspectorate (IGJ) appreciates the effort and involvement of the care providers, despite the (often) high workload.

However, the result for the target group in question is still below par. Frequently, the ambulatory care capacity appears to be insufficient and there is a lack of cohesion in the care provided. The often inadequate coordination between general practitioner care and mental healthcare is one of the causes of insufficient continuity. This creates risks for clients, for example in the context of somatic screening, medication safety and coping with crises.

In 2018 IGJ published an alarming report about the lack of cohesion and continuity in (ambulatory) mental healthcare. Subsequently the Inspectorate started supervising the mental healthcare networks in 6 regions in the Netherlands. The way in which ambulatory mental healthcare and the cooperation around clients with chronic mental health problems is organised differs per region. In a report the Inspectorate shares its findings on 10 themes which affect the development of high-quality ambulatory mental healthcare. This document is a summary of the Inspectorate's report.

Acute care and (compulsory) admissions of clients can be avoided more often by coordinating the care better during the clients' voluntary treatment phase. Involving the social domain as well makes it easier to provide care in the home situation before and after admission to a mental healthcare institution, improves flow throughout the care system and enables waiting times to be reduced.

The Inspectorate has observed an absence of a shared regional vision and ambition with regard to care offered to the most vulnerable mental healthcare target group. This applies at national and regional and/or local levels. Parties within the care networks have not yet made enough agreements about the care that needs



to be provided. Also there is still not enough cooperation and sharing of responsibilities within the care networks.

The Inspectorate believes that a greater effort is required within the care networks and it is challenging care providers to do more in their sphere of influence. At the same time the Inspectorate is of the opinion that a number of preconditions must be fulfilled and, with that in mind, it is making recommendations to healthcare insurers, municipalities and the Ministry of Health, Welfare and Sport (VWS). The mental healthcare for a vulnerable group of clients will only improve if there is a joint effort on numerous fronts.

The IGJ is going to continue its supervision of regional ambulatory mental healthcare with the aim being to promote cooperation in the regions and reduce mental healthcare waiting times. To achieve this the Inspectorate is collaborating with the Dutch Healthcare Authority [Nederlandse Zorgautoriteit] and the Joint Inspectorates for Social Support [Toezicht op het Sociaal Domein].