## Honorable Prime Minister!

Despite three decades of preparations, decisions and promises, state of implementation of the National Mental Healthcare Program (NMHP) – that is, of the major reform of the Polish mental healthcare system, significantly improving the ways of providing care to people experiencing mental health crises as well as their life prospects – engenders most serious doubt about its future.

# Therefore:

- awaiting the meeting of the community implementing NMHP on its own (May 8<sup>th</sup> 2017, I Mental Health Congress – Reforming Polish Psychiatry, www.kongreszp.org.pl),

- feeling responsible for preserving the achievements of subsequent Committees created by Ministers of Health (presently: Committee for piloting the program of community psychiatry within NMHP, created April 19<sup>th</sup>, 2016)

after having broadly consulted the contents of this letter among professionals who have for years realized the goals of NMHP, despite the many attempts to devalue and marginalize it in the years 2011-2015 (as visible in the Government Accountability Office Report of January 24<sup>th</sup>, 2017)
responding to numerous social signals indicating a dire need of NMHP's implementation

### we turn to You with this appeal.

The years of efforts on behalf of NMHP undertaken *pro publico bono* by many communities, as well as the numerous examples of good local practice realized against the current of systemic inertia (see Civic Rights Ombudsman Office Report, Mental Healthcare in Poland, Warsaw 2014), may be utilized as critical social and professional capital for NMHP's realization in 2017-22 period. This effort, this capital, this hope – they cannot be wasted.

We address You with grave worry, as the danger of them being wasted is, unfortunately, all too real. To counteract this danger, three basic political actions are necessary.

### 1. Coherent Communication, Coordination and Supervision

Effective realization of NMHP in 2017-22 period requires the Ministry of Health delegates an agent "plenipotentiary in matters of NMHP piloting". We believe that effecting such complex transformations within mental healthcare, Institute of Psychiatry and Neurology may be such an agent, given the experience, competence and potential at its disposal. Lack of a single unified coordinator has so far introduced informational chaos and disorientation into the related communications originating with many institutions and groups.

2. Financing.

The Council of Ministers is currently in the process of drafting an executive order regarding NMHP in 2017-22 period. The executive order does not set the rules of financing the program, nor does it bind National Healthcare Fund or other institutions in disposal of public funds to finance provided services on the "global" budgeting basis, i.e., according to the amount assigned per inhabitant of the district containing a Mental Healthcare Center (MHC). Solutions that have been proposed so far would, if adopted, lead to chaos, dividing healthcare delivery into that directed at less severely ill, registered at the planned MHCs, and into those with most serious issues, left to be financed via the old system. The planned executive order needs to be quickly integrated with the funding provided by the European Union, already distributed in Operational Programme - Knowledge Education Development towards the projects of social macro-innovation d-institutionalizing psychiatric care. The executive order does not assign any measures towards efficient central coordination, nor does it

create within the Ministry of Health with any mechanism stimulating investments into community infrastructure at the local level. We call for the document to contain specific numbers and/or indicators of budgetary growth to be achieved in order to provide wholesome and universally available mental healthcare: "ensuring growth of funding for psychiatric care and addiction therapy to reach the level of at least 5% more than growth of funding for other types of care, with the ultimate goal of psychiatry and addiction therapy claiming no less than 6% of the overall healthcare expenditures".

# 3. Responsibility.

The executive order's "attachment of responsibility on a territorial basis" clause, i.e., a provision dividing the country into districts of roughly equal number of inhabitants and establishing an MHC charged with providing them with mental healthcare, needs to establish a single institution as responsible for that task being realized. Only the Minister of Health in his capacity as a proper representative of governmental administration should have the power to draw and create MHC districts in cooperation with regional and local government. Only when responsibility for the state of mental healthcare's functioning is clear and transparent will it be possible to adequately tailor it to the needs of the local communities, control its effectiveness and the efficiency with which it utilizes allotted funding.

All of the other provisions of the executive order concerning NMHP will necessarily depend on the decisions made in these three key areas. Motivation driving us to assist creation and implementation of that project is the well-being of our patients and their families, as well as the idea of person-centered psychiatry, finding its basic goal in inclusion of people undergoing mental health crises in the life of their local community.

The first step towards these noble goals are the political decisions necessary for their realization. We call for such decisions to be made. The time of preparations for undertaking this reform so essential for the social well-being of our country is over.

Courtesy copy:

- Mr. Andrzej Duda, President of Poland
- Mr. Marek Kuchciński, Speaker of the Sejm
- Mr. Stanisław Karczewski, Speaker of the Senate
- Mr. Konstanty Radziwiłł, Minister of Health

We attach our best regards,

Agata Szulc, President, Polish Psychiatric Society

Janusz Heitzman, Chief Director, Psychiatry and Neurology Institute

Andrzej Cechnicki, Chairman, Alliance for the National Mental Healthcare Program

Marek Balicki, Chairman, Psychiatric Wards of General Hospitals Society

Marek Jarema, Chairman, Mental Health Council

Filip Rybakowski, National Consultant for Children's And Youth Psychiatry

Jacek Wciórka, Chairman, Committee for Psychiatric Healthcare Reform of the Polish Psychiatric Society

Joanna Krzyżanowska-Zbucka, Chairman, Mental Health Congress Organizing Committees

Piotr Gałecki, National Consultant for Psychiatry