



## Contents

<b>Letter from the Chair.....</b>	<b>3</b>
<b>About EUREGHA.....</b>	<b>4</b>
<b>Cross-border cooperation in German-speaking Community (BE).....</b>	<b>5</b>
<b>GGD Zuid Limburg (NL) and the EUprevent EMR Foundation.....</b>	<b>7</b>
<b>“Unlimited Health Together” in Lower Austria (AU).....</b>	<b>9</b>
<b>“Healthacross for future”, Lower Austria (AU).....</b>	<b>11</b>
<b>Cooperation in treatment of acute psychiatric disorders, Podlaskie (PL).....</b>	<b>13</b>
<b>“Healthy mother and child” – a pilot cross-border health programme, Podlaskie (PL).....</b>	<b>18</b>

## Letter from the Chair



**EUREGHA - the European Network for Regional and Local Health Authorities – aims to promote collaboration among regional and local health authorities across Europe**, to establish focused collaboration with the institutions of the European Union, and with international and public organisations related to public health and healthcare throughout Europe.

In all our activities, EUREGHA aims to encourage the creation of new partnerships between regions and relevant stakeholders and plays an influential role at the European level, giving regions and local health authorities a more powerful voice collaborating together. **EUREGHA is a key network for the establishment of successful partnerships in order to participate in new EU actions.**

**Every year, EUREGHA organises an annual conference with a theme of great importance to our members.** In addition, the network collects good practices from the members to showcase the important and innovative work implemented at the subnational level in Europe on the conference theme.

**In 2017, the focus is on cross-border cooperation in health.** There are numerous challenges linked to cross-border healthcare which range from patients getting healthcare across the EU, health professionals working in different EU countries, as well as practical and legal issues linked to the implementation of the Directive (2011/24/EU) and the Social Security Regulations.

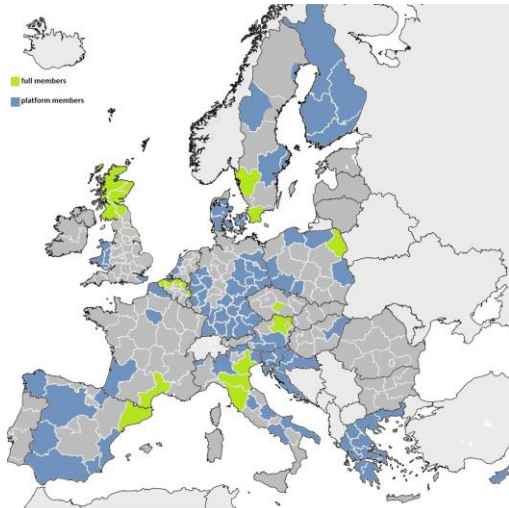
Innovative regional and local cross-border collaborative projects and initiatives are implemented throughout Europe. EUREGHA works towards increasing awareness of those and foster exchange of success stories and solutions to joint challenges.

**The present booklet shines a spotlight on a collection of EUREGHA Members' good practices in cross-border cooperation in health, demonstrating the range of novel and relevant developments taking place at subnational level.**

A handwritten signature in blue ink, appearing to read 'Nick Batey', written over a light blue grid background.

**Nick Batey**  
Chair of EUREGHA

## About EUREGHA



EUREGHA is the European go-to network for regional and local authorities in health-related issues and aims to promote collaboration in the field of health.

EUREGHA is a key network for the establishment of successful partnerships between its members and relevant stakeholders, and plays an influential role at the EU level, giving regional and local authorities a more powerful voice.

Active participation in EUREGHA has put many of the members at the frontline and increased their engagement at the EU level. EUREGHA brings together a critical mass of knowledge and expertise, and encourages diversity with the purpose of ***“Bringing Regional and***

***Local Authorities Together for Better Health”***.

Today, EUREGHA is a privileged interlocutor for the EU institutions and other stakeholders, offering a wide range of services and opportunities for cooperation.

The members of EUREGHA benefit from first hand intelligence on EU policy developments and funding opportunities in the field of public health and healthcare. They get access to exclusive opportunities to promote their regional profile and access to a privileged platform for cooperation and exchange of experiences. Members further benefit from the outcomes, and get first-hand information, from the European Joint Actions, initiatives and projects EUREGHA participates in.

On the following pages, you will find a number of regional and local good practices from several EUREGHA members on cross-border cooperation in health. The examples showcase the excellent initiatives implemented in EUREGHA member regions and prove the importance of bringing regional and local authorities together for better health.

## Cross-border Cooperation – German-speaking Community of Belgium and Germany

**Organisation name:** Government and ministry  
**Region:** German-speaking Community  
**Country:** Belgium  
**Total Region Population:** +/-77.000  
**Cooperation partners:**  
- University hospital Aachen  
- National institute for Disability and health insurance  
- Health insurance companies

### Main characteristics of the good practice

- My region has a **fully implemented** strategy/programme for cross-border healthcare
- My region is **in the process of implementing** a cross-border healthcare policy/strategy/programme

**Focus area:** Specialized cross-border acute care

### Summary

Cross-border cooperation is vital for the German-speaking Community, given its geographical location (NL, DE and LU) and the medical skill shortage the territory faces. The region is 854 km<sup>2</sup> in size and its official language is German. Because of the small territory, only basic services in health care can be offered. For this reason, the citizens must go elsewhere (for example Germany) for specialised medical services:

- a) The German-speaking community has a contract with the University hospital Aachen in stationary child and youth psychiatry. Every time, two places for children or young people are reserved for the German-speaking Community population.
- b) Another national project is the “Ostbelgienregelung”, lead by the National Institute for Disability and Health Insurance (LIKIV). It is a succession project to a previous project, “IZOM”, which offered an unrestricted access for medical treatments in Germany. IZOM was exploited and an adapted project was launched. The current project, Ostbelgienregelung, allows a greater flexibility regarding the right to specialized cross-border medical care (ambulatory and stationary) in a well-defined geographical area in Germany. The regulation is applicable since 1 July 2017 and is valid for insured persons residing in the German-speaking community (Belgium) and some neighbouring communes.

### Description

Cooperation was triggered through the requirement for specialised medical care for the inhabitants of the German-speaking community in their native language. The main objective is for persons residing

in the German-speaking Community in Belgium to receive access to specialized medical care in the native language.

## Methodology and processes

Contract of concept paper and continuous evaluation

## Involvement of other organisations/actors

- University hospital Aachen
- National Institute for Disability and Health Insurance (health insurances)
- Specialists (for example paediatricians)

## Funding source(s) of the initiative

- National Institute for Disability and Health Insurance
- German-speaking community

## How do you plan to sustain the initiative?

Through continuous evaluation with the involved actors and consequent adaptation of the projects.

## Innovation, Impact and Outcomes

- *Key innovative elements of your good practice*

No stationary child and youth psychiatry offer in German-speaking Community. Securing cross-border assistance in German language, if required.

- *What success criteria are used to determine that your initiative is working well?*

Psychiatric treatment for children and youth in their native language, reducing issues through the “Ostbelgienregelung”.

- *Evidence on the impact and outcomes*

Stationary child and youth psychiatry: annual occupancy statistics. For “Ostbelgienregelung”, annual statistics are collated, including number of requests for refund, annual costs for form S2, number form E125, etc.

## Legal and/or ethical issues

Different legislation for health policy and reimbursement in Belgium and Germany

## Transferability to other regions

Stationary child and youth psychiatry: easy to transfer because punctual contract between German speaking-community and university hospital Aachen (health institution).

For the Ostbelgienregelung project, this is more difficult, because of differences between the country legislation Belgium and Germany.

## Key learning points

Different legislation and reimbursement rules need to be addressed.

## Contact Person

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## Cross-border Cooperation in Health: GGD Zuid-Limburg

**Organisation name:** GGD Zuid-Limburg  
**Region:** South-Limburg  
**Country:** Netherlands  
**Cooperation partners:** Euregion Meuse Rhine (EMR)

### Main characteristics of the good practice

- My region has a **fully implemented** strategy/programme for cross-border healthcare
- My region is **in the process of implementing** a cross-border healthcare policy/strategy/programme

### Summary

In the Netherlands, there are 25 community health services (GGD's), each with their own region. One of the regions is South Limburg, the southernmost part of the Netherlands, which mainly borders Germany and Belgium. One of the legal responsibilities of the GGD is to monitor the health of the Dutch population. However, factors influencing health do not always stop at the borders, creating some challenges but also many opportunities.

South Limburg is part of the Euregion Meuse Rhine (EMR), covering several regions in Germany, Belgium and the Netherlands. Though each country has their own legal systems and (political) organisation of (public) health, the populations are rather similar. Age distributions, social-economic situations, life-styles and health profiles in the EMR are comparable as well as some historical and cultural factors. This indicates that future challenges may be similar for the regions, creating the opportunity to face them together.

The GGD South Limburg recognizes the importance of cross border corporation for better public health. As part of the EMR, the GGD is involved in sharing knowledge and best practices, creating synergies between stakeholders and bringing more unity in dealing with preventative health care in the EMR. Topics on which the cross-border collaboration in the EMR focuses include: addiction, overweight, patient safety and infection prevention, mental health, environmental health, health literacy and health data on local level.

One of the ways in which the GGD is structurally part of realizing effective cross-border collaboration is by being part of the management of the euPrevent | EMR Foundation, a foundation supporting cross-border cooperation between the professionals and organizations engaged in maintaining, promoting and improving public health in the EMR.

On a day-to-day basis this means that GGD professionals engage in (EU)regional networks and take part in several projects aiming to improve public health (monitoring). Within the projects, WHO policy

advices are translated into (EU)regional projects. Quality is guaranteed by an evidence-based approach.

Two examples of cross-border projects in which the GGD participates are:

- Data in the EMR
- Mental health: euPrevent Senior Friendly Community (SFC)

### **Data in the EMR**

Though data is often comparable within countries, the population of a border region might be more comparable to neighbour regions. The 'Data in the EMR' project was started to realise comparable data on demographics and health on regional and local level in the EMR. Making data comparable across borders could improve the interpretation of the health condition of a population. Furthermore, it could improve policy-making on all levels and help to determine trends in lifestyle and (public) health in the EMR. For the first time in the EMR, a project focusses on structural collaboration between data institutes in NL, DE and BE in the field of preventive health.

### **Senior-friendly Communities (SFC)**

One of the main challenges that each of the regions in the EMR faces is the ageing population. With older age, several health problems occur. Two of these issues are dementia and depression.

The SFC project focuses on elderly with dementia and Alzheimer as well as people with depression. The aim is to realise senior-friendly municipalities: municipalities that are care-friendly, carer-friendly and inclusion-friendly, so that senior citizens can continue to participate in a normal social life. The project involves 32 communities in the EMR. A range of activities is offered and customised per municipality to local requirements, taking future (political) priorities into account. The collaboration between the different communities in the EMR, makes this project a beautiful example of cross-border cooperation.

### **Further information**

<http://www.euprevent.eu/nl/>

### **Contact Person**

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## Gemeinsam Grenzenlos Gesund – Společně ke zdraví - Unlimited Health Together

**Organisation name:** Health and Social Fund of Lower Austria  
**Region:** Lower Austria  
**Country:** Austria  
**Total Region Population:** 1.65 million  
**Best Practice Target Population:**  
**Cooperation partners:** South Bohemia (CZ), South Moravia (CZ)

### Main characteristics of the good practice

- My region has a **fully implemented** a cross-border healthcare policy/strategy/programme
- My region is **in the process of implementing** a cross-border healthcare policy/strategy/programme

**Focus area:** The EU co-founded project "Gemeinsam Grenzenlos Gesund - Společně ke zdraví" between Lower Austria, South Moravia and South Bohemia focuses on cross-border hospital cooperation in radiotherapy and gynaecology (endometriosis) and emergency cooperation.

### Summary

The project, running until 2019, aims to achieve several goals:

- An endometriosis centre is being established in the Melk (Lower Austria) hospital. Currently, Lower Austria has no certified centre for endometriosis. This illness is barely known among the public, although studies say that one in four women are affected. The Czech hospital of Znojmo already has an EU-certified (level-2) endometriosis centre. Through knowledge transfer from Znojmo to Melk, joint training courses for medical specialists and joint surgeries in the hospital, Melk should become the first approved endometriosis centre in Lower Austria (with level-1 medical certification).
- Radiotherapy treatment of Austrian patients in the hospital in Znojmo is to be enabled. Radiotherapy in Lower Austria is carried out in two hospitals in the central region. For patients from the border region, the long journey from their homes to the hospital can be exhausting. However, the Czech hospital in Znojmo is not far from the border and has capacity for additional patients. Therefore, with the help of a pilot project, 15 patients from Lower Austria should receive radiotherapy treatment in the hospital of Znojmo.
- Cross-border emergency cooperation is to be established with Lower Austria, South Bohemia and South Moravia. In January 2016, the Federal Government of Austria signed a state treaty with the Czech Republic which enables cross-border emergency care. Within this project, the emergency control centres of Lower Austria, South Bohemia and South Moravia should be linked through a web application that enables cross-border dispatch of ambulances.

## Impact and Outcomes

The results of project should be:

- Standard operating procedures in the field of endometriosis and radiotherapy treatment.
- The hospital of Melk should become the first approved endometriosis centre in Lower Austria (with level-1 medical certification).
- 15 patients from Lower Austria should receive radiotherapy treatment in the hospital of Znojmo.
- In the field of cross-border emergency cooperation the emergency control centres from Lower Austria, South Moravia and South Bohemia should be linked together. This enables, that citizens who need medical attention in either country will be treated by the closest ambulance.

## Ethical Issues

Two forerunner EU co-founded projects defined the principles for this project: The "Zdraví – Health" project (2008-2011) set the first step in cross border cooperation between Lower Austria and its neighbouring region, South Moravia. Cooperation topics in health-care provision were established, identifying those problems that need to be resolved to streamline cross-border health-care provision. The follow-up project "Health without borders" (2012-2014) elaborated a strategic plan for cross-border hospital cooperation in the border region. These results formed the theoretical and legal basis for going one step further into practice.

## Transferability to other regions

The project results are applicable in regions with similar problems and other Euregios. The project aims to become a benchmark for other regional or transnational cooperation in the field of health care. The methods developed in the project for transferring medical methods and competences between hospitals can be used for other hospitals as well as the experiences of the pilot project in the field of radio-oncology. The technical connection of the emergency control centres and software adaptation is easily adaptable and can be adopted into the whole Austrian-Czech border region.

## Key learning points

Since the fall of the Iron Curtain, Lower Austria has moved closely to its neighbours, the Czech Republic and Slovakia. Unfortunately, health care is one of the few aspects of daily life that does not work well in cross-border aspects. Therefore cross-border cooperation is gaining in significance in the health sector. Cooperation arrangements between hospitals can help balance out regional demands and guarantee a better provision of health care to the population to reduce health and social inequalities. It can also help in optimizing costs due to the shared use of resources and a better return on resource investment. By leading and carrying out EU-co-founded projects, Lower Austria, through the Health and Social Fund of Lower Austria (NÖGUS) has not only taken responsibility for its own population but also for the population of the neighbouring regions: It's not about moving borders, but about reducing their separating character.

## Contact Person

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## Healthacross for future

**Organisation name:** Health and Social Fund of Lower Austria  
**Region:** Lower Austria  
**Country:** Austria  
**Total Region Population:** 1.653 million  
**Best Practice Target Population:**  
**Cooperation partners:** South Bohemia (CZ), South Moravia (CZ)

### Main characteristics of the good practice

- My region has a **fully implemented** a cross-border healthcare policy/strategy/programme  
 My region is **in the process of implementing** a cross-border healthcare policy/strategy/programme

#### Focus area:

The main objective of the EU co-founded project "Healthacross for future" between Lower Austria and South Bohemia is to set further steps to improve the quality of life and conditions of life for the population in the border region and to guarantee and expand access to high-calibre health care close to where they live.

### Summary

The project is co-funded through the INTERREG V-A Austria – Czech Republic programme and it includes all relevant stakeholders from the health sector in the border regions. Regular meetings and events between the project partners guarantee the implementation of the project.

The project focuses on two main pillars:

#### 1. *Cross-border health care provision*

Bring the benefits of the respective health systems in line with the needs of the local population to allow equal access to medical care on both sides of the border. This is to be achieved by the mutual and optimal use of health infrastructure and resources by focusing on. Main objective is to ensure inpatient cross-border healthcare and expand it to inpatient care for CZ patients.

#### 2. *Cross-border health cube*

Numerous international scientific studies show a stronger orientation of the health care system towards a decentralized, comprehensive primary health care for Europe. This primary care covers not only the general medical field, but also areas such as physiotherapy, logo therapy as well as the social component. To achieve this, a repositioning of the health professions as well as the establishment of corresponding structural and organizational framework conditions in the extramural care area is necessary. Therefore, the project will plan and prepare a "Cross-border health centre" for the border region.

### Impact and Outcomes

The main outcomes of the project are:

- Ensuring inpatient cross-border healthcare and expand to inpatient care for Czech patients

- Analyse possibilities of the exchange of medical treatments between Austria and Czech Republic.
- Organise study visits between the participating hospitals for different professional groups
- Analyse opportunities for a long-term cooperation
- Planning and prepare a "cross-border health cube" (= cross-border health / primary health care centre)
- Analyse of performance spectrum, personnel and financial situation for a "cross-border health cube"

### Legal or ethical Issues

The project aimed to provide optimum usability of health services and equal access to health care by all people living in the border region of Lower Austria and South Bohemia (Czech Republic), especially in the "divided" City Gmünd - České Velenice, through close cooperation among health service providers. Especially this region makes evident how cross-border cooperation makes people's everyday lives easier – after all, the hospital in Gmünd is situated directly on the border – and on the Czech side the nearest emergency doctor's vehicle is over 30 km away; indeed, the nearest hospital is 60 km away.

The precursor project "Healthacross" was the first large-scale project on cross-border cooperation in health care between an old and a new EU Member State and acts as a model for other border regions and the current EU enlargement. The follow-up project, "Healthacross in practice", enabled Czech patients from the border region of Lower Austria and South Bohemia to have simple and uncomplicated access to medical treatment at the hospital Gmünd in Austria. In the pilot period from 25 February 2013 to 30 June 2013, around 100 Czech patients received outpatient treatment in Austria. The pilot project was institutionalized and now about 4000 Czech patients have received outpatient treatment at hospital Gmünd. The new project "Healthacross for future" will use this already good foundation and will set further step in the field of cross-border health care.

### Transferability to other regions

The project serves as a best practice in cross-border healthcare for other regions within Europe. The project partners will share their experiences within their own networks (both nationally and internationally). The lead partner is a member of various European networks and ensures a transfer of knowledge to other regions of Europe. The procedures for medical treatment are available and can be transferred to other hospitals as an example for the transfer of knowledge, as well as the experience gained in in-and outpatient cross-border health care, as well as the planning and preparation of a cross-border health cube.

### Key learning points

Since the fall of the Iron Curtain, Lower Austria has moved closely to its neighbours, the Czech Republic and Slovakia. Unfortunately, health care is one of the few aspects of daily life that does not work well in cross-border aspects. Therefore cross-border cooperation is gaining in significance in the health sector. Cooperation arrangements between hospitals can help balance out regional demands and guarantee a better provision of health care to the population to reduce health and social inequalities. It can also help in optimizing costs due to the shared use of resources and a better return on resource investment. By leading and carrying out EU-co-founded projects, Lower Austria, through the Health and Social Fund of Lower Austria (NÖGUS) has not only taken responsibility for its own population but also for the population of the neighbouring regions: It's not about moving borders, but about reducing their separating character.

### Contact Person

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## A development of cooperation between medical facilities from a Polish-Belarusian borderland in a treatment of acute psychiatric disorders

**Organisation name:** Stanislaw Deresz's Independent Psychiatric Healthcare Centre in Choroszcz

**Region:** Poland, Podlasie Voivodeship, Choroszcz  
Belarus, Minsk Region, Minsk  
Belarus, Brest Region, Brest

**Total Region Population:**

Podlasie Voivodeship – 1 185,2 tys. (09.2017r.)  
Minsk Region - 1 409 500  
Brest Region - 1 388 500

**Cooperation partners:**

- International Public Charity Association "UNIHELP"
- Brest Oblast Psychoneurological Health Centre

### Main characteristics of the good practice

- My region has a **fully implemented** a cross-border healthcare policy/strategy/programme  
 My region is **in the process of implementing** a cross-border healthcare policy/strategy/programme

**Focus area:**

Improving the quality and availability of medical services in the treatment of acute psychiatric disorders.

### Summary

Implementation of the project supported the development of cross-border cooperation of psychiatric health care institutions in Poland and Belarus. The aim was to consolidate the initiated cooperation through the exchange of knowledge and experience. The long-term consequences of the project were met primarily by the conditions of social demand. The benefits for the citizens of Poland and Belarus, as well as the socio-economic indicators of the regions, were as follows:

- Reducing the disproportion in the reception of medical services by improving the comfort of services provided to residents and people staying in Podlaskie Voivodeship and the Brest region,
- Adjusting the organization of the health care system in Poland and Belarus to the standards of the European Union,
- Increasing safety during treatment,

- improving conditions of recovering patients and working conditions of the personnel.

Including the Belarus medical personnel in the project was a clear opening up to the opportunities offered by training courses and conferences promoting knowledge and skills, especially abroad. The project's activities initiated permanent changes in the attitude of hospital managers in Belarus to the issue of training their staff.

Educational activities in the form of an information campaign were aimed in the long run to influence the Polish and Belarusian societies, contributing to a gradual increase in awareness about the prevention of psychiatric disorders and limiting the negative stereotypes attributed to those affected.

## Description

The project partners decided to implement it in connection with existing problems in the treatment of acute mental disorders in Poland and in Belarus. Mental health is one of the most important issues of modern society. Political and economic changes from the end of the last century brought Poland and Belarus many opportunities, but also threats in the social area. Changes in lifestyle, work, family and social ties make the mental health of Poles and Belarussians continuously under the influence of factors, which may be difficult to handle. Every year the number of people addicted to alcohol and/or psychoactive substances, as well as crimes committed under the influence of the foregoing is increasing, which suggests the need to increase the efforts to help those at risk (medical, social, professional psychological and therapeutic help, etc.). In recent years, about 4% of psychiatric assistance has been provided in Poland, and 11% in Europe. This difference is due to system and social limitations. On one hand, access to psychiatric help is limited, and on the other – because of the place of mentally ill people in social consciousness– the willingness to make use of this type of help is low. Thus, it was important to build an optimal integrated care and support system for people with psychiatric disorders. Improving the quality and availability of medical services within the indicated range is easier after analysing problems among people with mental disorders.

Among them are:

- Stigmatization of patients with psychiatric disorders,
- Low availability of psychiatric services in Poland and Belarus,
- Lack of developed standards of help,
- Lack of suitable technical database to provide help to patients with psychiatric disorders,
- A large number of crimes committed by people with psychiatric disorders,
- Failure to take joint actions on an international level to the extent of improving the treatment of acute psychiatric disorders.

The World Health Organization provides information on the overall increase in the number of mental disorders worldwide, including Poland and in Belarus. Making joint efforts at the international level to implement the project contributed to solving the problems of medical care in the treatment of acute psychiatric disorders in Poland and Belarus in the situation of the continuously increasing number of people suffering from mental disorders in both countries. By implementing all the activities planned within the project, the situation of the target groups and final beneficiaries of the project - employees and patients of both hospitals improved.

The newly established and modernized branches in Poland and Belarus, as well as purchased equipment, help provide better care for mentally ill patients in the areas covered by the project. Establishing a *Department of Acute Treatment of Mental Disorders* in Choroszcz made it possible to significantly improve the conditions of treatment of patients admitted in acute conditions by isolating them from patients in a stable state and better monitoring. Improving the quality of specialist care implies a direct improvement in the social functioning and quality of life of these patients, prevents them from committing crimes, thus reducing the number of crimes committed on both sides

of the border. Actions taken as part of the project contribute to strengthening the security of national borders, as acute mental disorders are included in the list of diseases that pose a threat to public health. This is the project's added value.

All the projects planned were used by the target group, which is primarily the medical personnel employed by the Independent Public Psychiatric Healthcare Institution in Choroszcz and Regional Psychiatry and Neurology Centre in Brest, as well as employees of organizations and institutions dealing with mental health, which help the mentally ill – emergency services, police, crisis intervention centers for care workers. Among them were participants of seminars, conferences, trainings courses for doctors in Poland and Belarus, and study visits in both countries, which were complementary to investment activities. There were 200 people in total. Access to professional training courses and other forms of education for medical personnel, especially in Belarus, is rather difficult due to the limited resources of hospitals for this purpose. Training costs outside the country are very high, so Belarusian specialists rarely make use of such opportunities. Another problem of psychiatric care in Poland is also insufficient number of specialist doctors. Public hospitals are struggling with personnel shortages. Creating an opportunity to participate in free meetings, conferences, seminars was a solution to the foregoing problem. Within the project a social campaign was also carried out on the stigmatization of patients with acute psychiatric disorders. In the face of the growing number of disorders, it is necessary to raise awareness in Poland and Belarus of the specificities of individual mental illnesses in order to fight the negative stereotypes.

A campaign was carried out in various forms and means of communication - through publications, social advertising on television and the internet portal - thus the group of beneficiaries of the project was expanded to include all media beneficiaries, mainly in the Podlaskie Voivodship in Poland and the Brest and Minsk regions in Belarus (2.7 million inhabitants).

The project was implemented within the Poland-Belarus-Ukraine Cross-Border Cooperation Program 2007-2013, under Priority 3, Measure 3.1, aimed at improving cross-border cooperation capacity at local and regional levels. The project helped increase the institutional capacity of cooperation between the Project Partners, since it was aimed at building long-lasting contacts between partners on both sides of the border. Over the past two years the joint implementation of such a large project has been an excellent experience of international co-operation between mental healthcare institutions in the field of financial and psychiatric care. The foregoing actions, aimed at organizing cyclical meetings to exchange information and experience, both medical and administrative, undoubtedly contributed to mutual understanding and closer relations.

## Main objective

The main objective of the project was to improve the quality and availability of medical services for the treatment of acute mental disorders offered by health institutions in Poland and Belarus through the exchange of knowledge and experience. The objectives were reflected in:

1. An increase in the number of joint ventures aimed at the exchange of knowledge and experience in the treatment of acute psychiatric disorders between Polish and Belarussian partners after the completion of the project.
2. Increase in the quality of medical services for the treatment of acute mental disorders in the participating institutions after completion of the project.

Implementation of the project also means achieving the **more detailed objectives**, which are:

- Strengthening and consolidating cross-border cooperation between partners in the treatment of acute psychiatric disorders,

- Increasing the knowledge and skills of medical personnel in the Podlaskie Voivodeship and in the Brest region to the extent of patient care with acute psychiatric disorders through participation in trainings, seminars, study visits,
- Modernization of hospitals in Choroszcz and Brest by repair and purchase of medical equipment and appliances.

The following tasks were completed as part of the project:

1. Repair and construction works in Choroszcz and Brest.
2. Purchase of equipment and appliances at the Applicant and Partner.
3. Creation and maintenance of an Internet website on the subject of psychiatric disorders.
4. Educational and prophylactic publications on psychiatric disorders.
5. Study visit of the medical personnel (Belarus).
6. Study visit of the management personnel (Belarus).
7. Science seminar on the treatment of acute psychiatric disorders (Belarus).
8. Internships of specialists in Poland and Belarus.
9. Social campaign against stigmatization of mentally ill people.
10. Study visit of the medical personnel (Poland).
11. Medical summarizing conference (Poland).
12. Promotional activities.

The project was implemented within the Poland-Belarus-Ukraine Cross-Border Cooperation Program 2007-2013. The project's budget, including EU funds (in EURO): 1 958 865,30 €, including funding 1 762 782,88 €. Implementation period: 1 October 2013 - 31 December 2015.

Material effects of the project, i.e. renovated and equipped hospital departments functions within the structures of partner institutions.

Through implementation of the project, the Independent Public Psychiatric Healthcare Institution in Choroszcz was able to develop closer relations with partners and other health care institutions in Belarus, which resulted in further joint initiatives and projects in the field of mental health protection.

## **Impact and Outcomes**

The common denominator of the international project was primarily the cooperation of specialized medical institutions and institutions dealing with health education from two countries.

Infrastructural and investment activities carried out in the institutions allowed to create the appropriate base for the exchange of developed solutions in the treatment of acute psychiatric disorders in each of them. There is a material database that allows participants in the project to exchange experiences and medical practices in psychiatric patient care, as well as institutional foundations for co-operation through the joint implementation of soft activities – visits, seminars, conferences and internships to exchange knowledge and experience and to try new concepts in the diagnosis and treatment of acute mental disorders. Improving the quality of specialist care implies directly improving the social functioning and quality of life of patients, preventing them from committing crimes, thereby reducing the number of crimes committed on both sides of the border.

The project has created a bilingual web portal, addressed both to the medical personnel and to all interested parties. It contributes to increasing the level of knowledge and awareness of target groups and beneficiaries of the project in the area of prevention and treatment of acute psychiatric disorders. The joint operation of the portal by three partners has contributed to the strengthening of cross-border cooperation and continues on the developed principles. With the cooperation of medical institutions from both countries, broader efforts could be made to improve the quality and availability of medical services for the treatment of acute mental disorders offered by health institutions in Poland



and Belarus. Stable cooperation structures have been established, which has a long-term impact on the project. The developed mechanisms and collaborative systems are used to implement further projects. The technical base and purchased equipment and appliance allow for the organization of meetings, conferences and study visits also after the completion of the project. The recommended measures encouraged local institutions and citizens to engage in joint initiatives, which contributed to strengthening of social and economic relations between the inhabitants of the regions covered by the project and enabled them to build a positive perception of the support area, increase knowledge of their neighbours abroad and improve language skills among citizens of the second country.

### **Legal or ethical Issues**

The project did not address any legal and ethical issues to the extent of health.

### **Transferability to other regions**

The project may be an example to other mental health professionals of good cooperation aimed at improving the quality and availability of health services. The developed forms of educational campaigns may provide the basis for further similar forms of action for organizations dealing with the mental health of the society.

### **Key learning points**

- Difference in the applicable law concerning the implementation of the investment part, in particular in the procurement procedures
- Language barriers
- Financing of soft activities after project implementation

### **Further information**

<http://jednamedycyna.eu>

[http://www.sppchoroszcz.med.pl/index.php?option=com\\_content&task=view&id=416&Itemid=102](http://www.sppchoroszcz.med.pl/index.php?option=com_content&task=view&id=416&Itemid=102)

### **Contact Person**

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## Healthy mother and child – a pilot cross border health care program

**Organisation name:** Dr Ludwik Rydygier Voivodeship Hospital in Suwalki  
**Region:** Podlasie Voivodeship, Suwałki, Poland  
Mariampole county, Marijampole, Lithuania  
**Country:** Poland and Belarus  
**Total Region Population:** Podlasie Voivodeship – 1,18 mln.  
Mariampole county – 145 thous.  
**Cooperation partners:** Public Institution Marijampole Hospital

### Main characteristics of the good practice

- My region has a **fully implemented** a cross-border healthcare policy/strategy/programme
- My region is **in the progress of implementing** a cross-border healthcare policy/strategy/programme

**Focus area:** Improvement of health care for mother and child and thus improvement of quality of life in the PL-LT borderland.

### Summary

The project of Dr. Ludwik Rydygier Voivodeship Hospital in Suwalki and Hospital in Marijampole is a response to the identified problems of unequal access to high-quality medical services in the Polish-Lithuanian borderland for mothers and children. It includes the implementation of a pilot cross-border health care program "Healthy mother and child" which, because of its complexity and innovation, should be seen as an added value representing a significant cross-border effect.

The programme is targeted to the population perceiving an unmet need for health care, including people at risk of poverty and social exclusion and includes activities concerning improvement of quality of infrastructure, training courses for medical personnel, cross-border Academy of Health Leaders, preventive examinations for women and children.

The overall objective of the project is to develop the cooperation of healthcare institutions of the Polish-Lithuanian borderland in favour of equal opportunities in access to improved health services for mother and child, and thus improve the quality of life in the region.

### Description

One of the important factors affecting the quality of life of society is equal access to health care. According to the definition of health by the WHO, health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. Every person, regardless of race, religion, political belief, economic or social conditions, has the right to the best possible health.

Traditional evaluation of the effects of health-related programs is based on objective indicators such as reduction in mortality or improvement in clinical parameters. From the patient's point of view more important are subjective feelings about his state of health which include reduction in the sense of exclusion from society due to illness, financial constraints, family problems, etc.

The problem of social exclusion linked to unequal access to modern and comprehensive health care concerns in particular the area of Polish-Lithuanian borderland, which is a largely agricultural region with a low level of economic development, it shifts directly to less access to employment, lower level of income and, consequently, lower quality of life in the region. Besides, special attention should be paid to the problem of an aging population and a shorter life expectancy of the population than the average in the EU, carrying a significantly higher demand for high-quality comprehensive health services.

These general issues are influenced by many factors typical for the Polish-Lithuanian borderland, including in particular the insufficient level of awareness of women planning to become pregnant, during pregnancy and immediately after birth as well as children and their parents about the necessity of preventive examinations, including in particular diagnostic tests laboratory, limited availability of medical personnel to specialised modern medical knowledge, including the exchange of experiences and good practices, insufficient level of quality of medical infrastructure, limited access of inhabitants to preventive examinations, in particular laboratory, and insufficient level active attitudes and integration among the local community for the implementation of local initiatives in the area of health promotion, especially for mothers and children. One of the determinants of public health is the high level of availability of health promotion and prevention including broader actions to prevent diseases and other health disorders among children and women planning to become pregnant, pregnant and young mothers.

According to the experts in Poland and Lithuania, integrated actions involving both a preliminary diagnostic tests - necessary to identify deviations from standards development and detect potentially life-threatening and health (eg. serological conflict for pregnant women), high-quality medical care, health education and health promotion are required. Social and economic cohesion is closely linked to the quality of life of the entire society, including the level of health care and the provision of proper care in particular on mother and child. In the antenatal period, intranatal and after birth, mother and child health should be especially protected because of the many dangers infectious, biological characteristics and consequent threats, and provided with the optimum level of healthcare in the future. This requires above all healthcare for mother and child, including both prevention, diagnosis and treatment, and also health promotion Therefore, Partners decided to cooperate in the field of the above mentioned issued and created the project including comprehensive activities, forming an integrated solution in the field of healthcare for children and mothers in the form of a pilot cross-border health care program "Healthy Mother and Child".

The overall objective of the project is to develop the cooperation of healthcare institutions of the Polish-Lithuanian borderland in favour of equal opportunities in access to improved health services for mother and child, and thus improve the quality of life in the region. Objective will be achieved through the implementation of a pilot cross-border healthcare programme "Healthy mother and child."

Overall objective consists of a series of specific objectives, which will be possible to achieve through the implementation of mentioned pilot programme, including:

- increase of awareness of women as well as children and their parents from Polish-Lithuanian borderland area about the necessity of preventive examinations, including in particular diagnostics tests laboratory
- increase of availability of Polish and Lithuanian medical personnel to specialized modern medical knowledge

- enable to exchange experience and good practices among medical personnel of Polish-Lithuanian borderland area
- increase of quality of medical infrastructure in the field of mother and child healthcare of Polish-Lithuanian borderland area
- increase of access of inhabitants of Polish-Lithuanian borderland area to the preventive examinations, in particular laboratory
- develop active attitudes and integration among the local community for the implementation of local initiative in the area of health promotion, especially for mothers and children
- increase the level of use of the health care system for the promotion and health education
- increase in the level of the inhabitants of the Polish-Lithuanian borderland satisfaction with the quality of healthcare

The project “Healthy mother and child” is an effective innovative tool of improving health care system by combining a wide complex activities, aiming at improvement of quality of infrastructure of Polish-Lithuanian borderland region, personnel’s increase of medical specialist knowledge, enabling of exchange of experience and good practices, increase of awareness of borderland inhabitants of the importance of preventive examinations for the quality of life, activation of representatives of organizations and communities of borderland region to undertake joint local initiatives in the field of health promotion.

The project is co-financed by the EU within the Interreg V-A Lithuania-Poland Programme 2014-2020.

The pilot cross-border health care program is such solution that could be continued in the future in the field of mother and child and other fields of healthcare

### **Impact and Outcomes**

This project provides added value to the project through its complexity, and thus its innovation. It is an effective tool for equal opportunities in access to modern medical services, which consists of an optimal range of actions, i.e. the improvement of infrastructure, specialized training for medical personnel, training workshops to prepare local leaders in the field of health promotion and preventive examinations.

### **Transferability to other regions**

The project can be considered as a good example of successful cross-border cooperation of health care units in the Polish-Lithuanian border area in order to improve the quality of health care. Developed during the implementation of the implementation methods and established contacts should be treated as the basis for further cooperation of the partner institutions of the project, but also to extend this partnership to other health care providers in Poland and Lithuania.

### **Further information**

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