



FOLKETINGET
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FOLKETINGET
RIGSREVISIONEN

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**Extract from Rigsrevisionen's report
submitted to the Public Accounts Committee**

The care pathway of citizens with mental health illnesses

1. Introduction and conclusion

1.1. Purpose and conclusion

1. This report concerns the mental health care pathway for a section of citizens who have been admitted to a psychiatric health facility and subsequently been residents of or offered supported housing.

For the past ten years, the authorities have had difficulties establishing a coherent pathway for these citizens that covers the stages from their admission to a psychiatric hospital to the social services provided by the municipality post discharge. The issue was addressed in the 2013 evaluation of the structural reform from 2007 and highlighted again in 2018 in the government's national mental health action plan for the years leading up to 2025.

Following the adoption of the action plan, the Danish parliament passed an amendment to the Mental Health Act in 2019. The objective of the law amendment was to increase the number of hospital discharge agreements to improve the cohesion between regional and municipal social services provided to vulnerable citizens when they are discharged from hospital. The amendment imposed an obligation on the municipalities to coordinate the social services offered to the patients through the discharge agreements.

2. Under the Danish Health Act, the regions and municipalities share the responsibility for providing coherent pathways for citizens with mental illnesses who are discharged from psychiatric care and need social services. The regions work out the discharge agreements, and the municipalities refer the citizens to appropriate social services. According to the Danish Social Service Act, the role of the Ministry of Social Affairs, Housing and Senior Citizen is to support the municipalities in the referral process.

Hospital discharge agreement

This is an agreement on the treatment and social services available to the patient. It is an agreement between the patient and the psychiatric ward and other relevant authorities, healthcare professionals in private practice, etc. If a patient refuses to be part of such an agreement, a coordinating plan is worked out instead, addressing the same issues and involving the same parties.

In this report, reference to *hospital discharge agreements* includes *coordinating plans*.

Tilbudsportalen

This website was launched in connection with the implementation of a structural reform programme in 2007.

The website assists the municipalities in selecting relevant social services for the citizens and increases the clarity and transparency of the services on the website.

Homeless shelters and reception centres

Under § 110 in the Service Act, homeless shelters and reception centres offer temporary housing to citizens who have no home or cannot live in their own homes and need support, care and assistance to live independently. References in the report to shelters include reception centres.

3. Supported housing may be an option for citizens with mental illnesses who cannot live alone and require social care services. The municipalities are responsible for supplying suitable supported housing and referring the citizens to this type of housing based on a specific and individual assessment of their need for social care. The municipalities can fulfil their supply obligation by referring to appropriate housing within the borders of the respective municipality or by cooperating with other municipalities, regions, or private-sector providers of supported housing. The Ministry of Social Affairs, Housing and Senior Citizens support the municipal referral process through a website called *Tilbudsportalen* which allows the municipalities to compare and select the relevant supported housing for their citizens. Additionally, the ministry is responsible for monitoring and ensuring that the municipalities or regions provide the required highly specialized social services to citizens with mental illnesses.

4. The study includes a data analysis comprising 1,893 citizens from the two largest municipalities in each of the five regions. All the citizens had been admitted to a regional psychiatric hospital at least once from 2019 to 2021, and they had minimum stayed at one supported housing facility: a temporary or long-term housing facility, a homeless shelter, a reception centre or a women's refuge. Rigsrevisionen has only had access to cases subject to government reimbursement. The municipalities' expenditure for assistance and care provided under the Service Act exceeding DKK 860,000 annually (2022 prices) is reimbursed by the government. The same principle applies to expenditure relating to services and support provided to citizens who are staying at homeless shelters and women's refuges. Thus, the study comprises only a section of the citizens living in supported housing facilities, as they do not all receive social services in an amount that entitles the municipalities to government reimbursement.

The study provides new cross-cutting and detailed knowledge about the pathway for a section of citizens with mental illnesses based on data analyses across the Danish Health Data Authority and the municipalities.

The purpose of the study, which includes the regions, ten selected municipalities and the Ministry of Social Affairs, Housing and Senior Citizens, is to assess whether the authorities' effort to provide a coherent pathway for citizens that have been admitted to psychiatric care settings and subsequently been residents of supported housing has been satisfactory.

The report answers the following questions:

- Have the regions worked out the statutory discharge agreements for citizens with mental illnesses?
- Have the municipalities referred citizens with mental illnesses to approved supported housing facilities with staff qualified to address the residents' needs?
- Has the Ministry of Social Affairs, Housing and Senior Citizens supported the municipalities in the referral of citizens with mental illnesses?

5. Rigsrevisionen initiated the study in August 2022.



Main conclusion

Rigsrevisionen assesses that the authorities' effort to establish a coherent pathway for citizens who have been admitted to a psychiatric hospital and subsequently lived in a supported housing facility has, overall, been very unsatisfactory. The statutory services offered to the group of citizens with mental illnesses that we have looked at in this study were not coordinated between the relevant region and municipality. As a result, these citizens may not receive the municipal services that they are entitled to under the Service Act.

The regions have, on many occasions, failed to comply with the requirements of the Danish Mental Health Act to work out discharge agreements to ensure a coherent pathway for the citizens. Rigsrevisionen finds that unsatisfactory.

Rigsrevisionen's analysis of 4,483 hospital admissions shows that 73% of the admitted patients were discharged from the hospital without a statutory discharge agreement. Rigsrevisionen's review of 90 randomly selected cases shows that none of the 19 discharge agreements that were worked out met the requirements concerning content listed in the guidance to the Mental Health Act. For instance, information about future treatment and responsibility for re-assessing the agreement was missing.

Findings in the study indicate that the municipalities have not to a sufficient degree referred discharged citizens to registered supported housing with staff qualified to address the citizens' needs. This is not considered satisfactory by Rigsrevisionen.

The study found that the municipalities referred 11% of the citizens with mental illnesses to supported housing facilities that were not sanctioned to care for this target group. This number does not include citizens that are not referred by the municipalities, including, for instance, citizens staying at homeless shelters. Slightly more than half of the cases involving citizens with mental illnesses and substance abuse are referred to supported housing facilities that are not approved to address both mental illness and substance abuse. The municipalities have informed Rigsrevisionen that, in some cases, there may be sound professional reasons to refer the citizens to such facilities. The study also indicated that the municipalities were aware that every 5th stay at a homeless shelter for citizens with mental illnesses is a long-term stay, even though the purpose of homeless shelters is to provide only temporary accommodation.

The Ministry of Social Affairs, Housing and Senior Citizens has not supported the municipalities sufficiently in the referral of citizens with mental illnesses to supported housing.

Firstly, the Ministry of Social Affairs, Housing and Senior Citizens has overall responsibility for the website *Tilbudsportalen* but has not sufficiently ensured that the website fulfils the objective of making comparable and transparent information accessible to municipalities searching for suitable supported housing facilities. Secondly, the ministry has not had an adequate data basis for assessing whether the supply of highly specialised social services for citizens with mental illnesses meets the need.