

Coercion and mental health services: a Slovenian perspective

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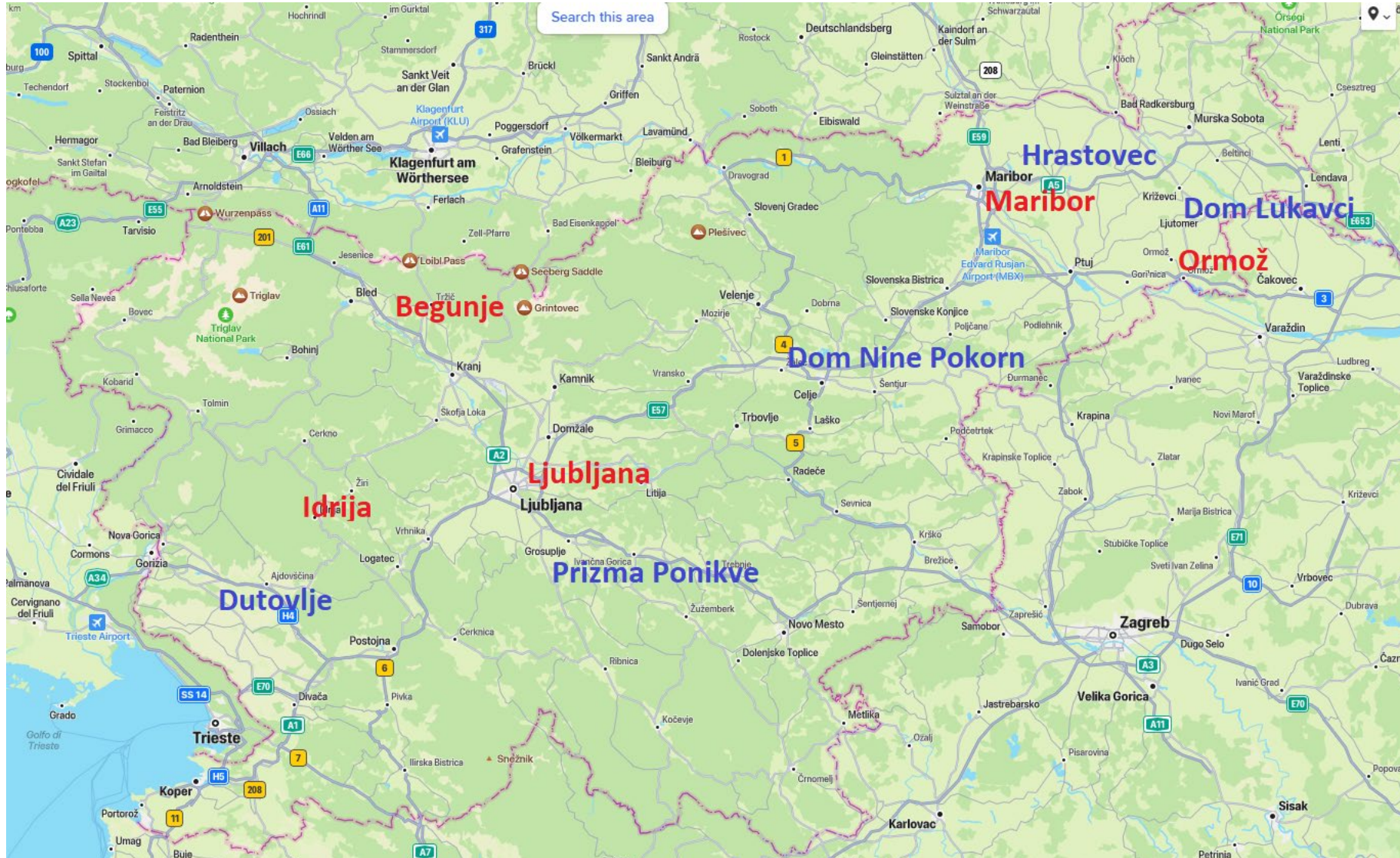
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Mental health services (institutions)

- Psychiatric:
 - 5 psychiatric hospitals
 - A forensic psychiatric unit
 - Primary care: psychiatry clinics in community health centres; mental health centres
- Social (long-term):
 - 5 special social institutions
 - „mixed“ units in some social institutions (elderly and people with mental health needs)
 - 4 institutions for people with intellectual disabilities

Psychiatric hospitals and special social institutions



Ljubljana psychiatric clinic



Social care home „Hrastovec“



Some numbers about the residential (only social) care capacities (Source: Institute for social welfare)

Type of institution	Number of institutions	Number of people
Homes for elderly	97	18.977
Special social care homes	10	2.108
Centres for training, work and protection	5	1.043
Protective working centres	27	801
NGO	6	165
Total	145	23.094

Castle Cmurek, the only abolished institution, currently „The museum of madness“



Mental Health Act (2008)

- Two types of locked units:
 - A unit under special supervision is a unit of a psychiatric hospital
 - A secure unit is a unit in a social institution
- The first is designed for acute treatment and the second is aimed at providing care for users who do not need acute psychiatric but continuous social care treatment.
- Voluntary or involuntary placement

Mental Health Act (2008) (cont.)

- Special protective measures:
 - Mechanical restraints (belts)
 - restriction of movement within one room
- Involuntary placement and special protective measures as „last resort“, but in practice...
- Condition which has to be met: a person endangers his or her life or the lives of others, seriously endangers his or her health or the health of others, or causes serious property damage to himself or others.

Reducing coercion?

- Guidelines for the use of special protective measures in psychiatry (2018)
- Slovenia does not have a strategy, or a programme aimed at reducing coercion.
- Quite the contrary:
 - a new locked forensic psychiatric unit was opened in 2011;
 - a new locked adolescent psychiatric unit was built in 2019;
 - there have been some infrastructural investments in secure units in 2020.
 - 2 pilot projects of secure unit for people with intellectual disabilities

Deinstitutionalisation in social care

- two social care institutions in a project of deinstitutionalization (one of them has a secure unit)
- National strategy of deinstitutionalization (2023-2033) will be confirmed shortly
- Efforts are made to write an action plan for transformation of secure units within the strategy

Secure units

- 2 types of the secure unit
 - for dementia (in elderly homes),
 - for people with mental health support needs (in special social institutions)
- **November 2022** (source: Ministry of Labour, Family, Social Affairs and Equal Opportunities):
 - Capacity: 724 beds (128 in special social institutions)
 - Occupied: 763 beds (39 over the capacity)
 - Waiting list: 2553 users
- Secure units have been overcrowded for years (Ombudsman, Supreme court, ...)
- The only proposal: more beds in secure units; court order of involuntary placement would expand the maximum stay from 1 to 2 years

Action-research in Dom na Krasu



- Around 170 users
- Mean age of users is around 57 years
- Around 50% of users have been placed for 10 years or more

Action-research

- action-research as getting commission from those in power, if we want our research to be seriously considered and its findings put in practice
 - among the 9 basic principles of the transformation one can find that “Care will be delivered with zero tolerance of seclusion and coercion”
 - In December 2022, the director guaranteed that 4 users of the secure unit would be resettled in one of the new-built group homes
 - By the end of the project, we are about to confirm the transformation plan of the secure unit

Action-research (cont.)

- Person-centred planning:
 - Locked doors as an obstacle to person-centred care
 - Personal plans orientated towards living in a community, each user appoints a key-worker

Action-research (cont.)

- Risk assessment:
 - Involuntary placement in the secure unit can be best understood as a risk management measure.
 - analysing hazard, danger, gain, and constructing a plan with proactive measures of risk reduction (preventing, minimising, and fixing harm)
 - The method is aimed at
 - empowering the users to take risks (e.g., move out of an in-stitution) or
 - keeping them safe by restricting them only to what is absolutely necessary and for the minimum amount of time.