Annex No 1

to the Guidelines for applicants of the open call “ Introduction of the adapted and extended model of the provision of youth-friendly healthcare services (YFHCSs)” under the EEA financial mechanism programme “Health” 2014-2021

**DESCRIPTION**

**OF THE MODEL FOR THE PROVISION OF YOUTH-FRIENDLY HEALTHCARE SERVICES**

**SECTION 1**

**GENERAL PROVISIONS**

1. Description of the Model for the Provision of Youth-friendly Healthcare Services (hereinafter – the Description) establishes the vision, objective, tasks, structural-functional framework of the recommended model of the provision of youth-friendly healthcare services in municipalities and the recommended steps of introduction.
2. The Description has been prepared based on the Description of the Model of the Project “Creating a Model for the Provision of Youth-friendly Healthcare Services“ (hereinafter – the Project) of the European Economic Area and Norwegian Financial Mechanism 2009-2014 Programme LT11 “Public Health Initiatives“ and on the improvement of the Project of the European Economic Area Financial Mechanism for the period 2014-2021 “Adjustment and Coordination of the Model for the Provision of Youth-friendly Healthcare Services at National Level“.

**SECTION 2**

**VISION, OBJECTIVE, TASKS OF THE MODEL**

1. **Vision of the Model** – favourable, confidential services provided to young people (14-29 years old) that help to strengthen physical and mental health, to help develop healthy lifestyle habits, to reduce the morbidity of young people and to address in a targeted manner problems of concern to young people.
2. **Purpose of the Model** – to provide quality and accessible youth-friendly healthcare services that are consistent with the needs and to encourage young people to choose a healthier lifestyle.
3. **Tasks of the Model**:
   1. to coordinate provision of YFHCSs in the municipality, in pursue of the activities of the Coordination Centre;
   2. to improve the competencies of professionals and youth health coordinators;
   3. to strengthen inter-institutional cooperation network of already existing services providers for youth;
   4. to provide integrated youth-friendly services in municipalities.

**SECTION 3**

**STRUCTURAL-FUNCTIONAL FRAMEWORK OF THE MODEL**

1. Model structure of the service providers network in the municipality.

**Model of the provision of youth-friendly healthcare services**

**Structure of the service providers network**

**Personal Healthcare Facilities** (PHCC, mental health centres, etc.)

**Educational institutions** (schools, vocational education and higher education institutions, etc.)

**Law enforcement authorities** (police, Probation Service, Migration Service, etc.)

**Social sector institutions** (child rights, employment services, etc.)

**Businesses, youth organisations and other NGOs**

**Municipal units** (Youth Coordinator, Inter-institutional cooperation coordinators, municipality, physician, etc.)

1. **Mandatory elements of the Model:**
   1. **YFHCSs Coordination Centre in the municipality;**
   2. **Network of the institutions providing YFHCSs;**
   3. **Youth Health Online Portal (hereinafter – the Portal);**
   4. **Training for professionals working with young people;**
   5. **Publicity of YFHCSs in municipality.**

**7.1. The YFHCSs Coordination Centre (hereinafter – the CC)** - established in the territory of the municipality. The functions of the CC are performed by the municipal public health bureau (hereinafter - PHB), which organizes the provision of necessary services. The YFHCSs coordinator, appointed by the director of PHB, is employed in the CC. The PHB must ensure the provision of psychological services to young people by employing a psychologist (at least 0.5 full-time) or by acquiring psychological services in accordance with the procedure established by legal acts. CC functions may not be performed on PHB premises. The premises assigned to the CC must be strategically located for young people, close to youth gathering places (eg youth center, university, etc.), well-equipped, attractive to young people, ensuring confidentiality and privacy. The CC must be equipped with information technology, telephone and office equipment.

**The YFHCSs Coordinator** – a specialist working in the PHB and performing functions of coordinator and case management. The specialist must have acquired higher or equivalent education in the study field of health sciences and hold a diploma or other document confirming the awarded bachelor's or higher degree in health sciences; education in group psychology of the study field of social sciences, in the study field of social work, and must have obtained bachelor's or higher degree. The YFHCSs Coordinator shall follow the operational guidelines at his/her work.

**The functions of the YFHCSs Coordinator:**

1. to form a team of specialists on the basis of cooperation agreements (Model structure of the service providers network in the municipality) and to coordinate its activities; to initiate and/or organise regular meetings of these specialists - with service users, providers, administrators, politicians; to initiate the improvement of qualifications or competencies of these specialists in the field of the provision of youth-friendly healthcare services;

2. to coordinate provision in the municipality of youth-friendly healthcare services, such as health promotion, prevention, treatment, consulting and monitoring based on the algorithms provided on the Portal (www.sveikatostinklas.lt).

3. to carry out individual case management: to assess the health needs of the young person, to organize a motivational interview, to draw up a service provision plan to mediate when a young person applies to a personal healthcare facility for personal healthcare services, and, if necessary, when a young person applies to other institutions of non-health sector, to maintain constant contact with him or her (or his or her relatives) until the health problem of the young person is resolved;

4. to provide information to the Youth Health Online Portal ([www.sveikatostinklas.lt](http://www.sveikatostinklas.lt)) (to prepare articles, to inform on events taking place in the municipality);

5. to carry out an analysis of the health status of young people - to present to the inter-institutional Working Group and the municipality administration.

6. to provide the Head of the PHB with information on problems encountered and suggestions for the improvement of the development and organisation of services;

7. to participate in training organised by the National Coordination Centre;

8. to publicize youth-friendly healthcare services according to the Model publicity strategy;

9. to evaluate on a regular basis the Model activities and results. The evaluation shall be performed at the beginning of the model introduction, and later - every two years.

**7.2. YFHCSs providers network.** A complex cross-sector and inter-institutional functional network in the municipality, operating to provide healthcare services (health promotion, prevention, treatment, consulting and monitoring), which is described in eight algorithms of the Youth Health Online Portal:

1**.** Sexually transmitted infections and unplanned pregnancy prevention,

2. Use of psychoactive substances prevention,

3. Alcohol use prevention,

4. Depression prevention,

5. Suicide and self-harm prevention,

6. Health disorders associated with overweight and obesity prevention,

7. Sexual violence prevention,

8. Eating Disorders prevention.

**The algorithms** elaborate the sequence of service provision: what healthcare services, by which specialists, in which institutions, when, how and to what age people are provided. The proposed types of application of the algorithms*: in case of direct contact with a person,* when a specific person applies for a specific personal health problem or for health improvement issues; *systemic* when institutions, organizations or a specific person apply for health-related issues, the issues concerning health determinants or provision of health-related services or health improvement (or problems are identified during monitoring) and such appeal is not for a specific personal health problem, but for the issues addressing of which requires systemic, organizational, financial, legal and political solutions.

**7.3. Youth Health Online Portal (www.sveikatostinklas.lt).** The Portal is administered by the Center for Health Education and Disease Prevention. The Portal provides a science-based, youth tailored information which encourages choosing a healthy lifestyle. The Portal consists of two parts: for young people - news, events, recommended literature, first aid, “ASK the specialist“ section; for specialists - algorithms, methodologies, training material, various databases.

**7.4. Training for professionals working with young people.** Training is organized in the municipality to raise the qualification and competences of professionals who provide services to young people, and to improve cooperation between professionals from different sectors in addressing various youth health problems. Training for the YFHCSs Coordinators is organised at national level by the Center for Health Education and Disease Prevention.

**7.5. Publicity of YFHCSs in the municipality.**

Publicity of the YFHCSs in accordance with the Model Publicity Strategy developed by the National Coordination Center. It is a unified publicity strategy adapted to all municipalities, the measures of which must be adapted to young people and other stakeholders. This strategy will explain each publicity measure of the information campaign, indicating the pros and cons, where, when and how often it is appropriate to use them and for which target group they are intended. A layout of the YFHCSs poster suitable for all municipalities and a logo reflecting the idea and purpose of the YFHCSs will also be developed.

1. **Recommended elements of the Model:**
   1. **Provision of personal healthcare services in a “green corridor“ principle;**
   2. **Provision of mobile services in the municipalities.**

**8.1. Provision of personal healthcare services in a “green corridor“ principle.** A “green corridor” is a possibility for a young person to receive effective and confidential personal health services in the shortest possible time.

* 1. **Provision of mobile services in the municipalities.** The aim of this service is to strengthen the representation of the community members of residential areas that are remote from the CCe in the health interests of young people, the interdepartmental and inter-institutional cooperation, organisation of joint health projects and events, support of youth health initiatives. Mobile teams in the municipality are formed from specialists in various fields depending on the need. The specialists in the mobile teams provide a young person with information about YFHCSs: access to medical, social, psychological or other assistance in the municipality.

**SECTION 4**

**RECOMMENDED STEPS OF MODEL INTRODUCTION**

1. Access to this Description and the methodological recommendations for the introduction and evaluation of the Model of youth-friendly healthcare services (<http://sam.lrv.lt/lt/veiklos-sritys/programos-ir-projektai/norvegijos-paramos-programa/jaunimui-palankiu-sveikatos-prieziuros-paslaugu-teikimo-modelio-diegimo-ir-vertinimo-metodines-rekomendacijos>), assessment of possibilities to introduce the Model in the municipality, making the political and organizational decisions required to implement the Model (*the municipality intending to introduce the Model*).
2. Discussion of the elements of the Model that are planned to be implemented in the municipality and of other selected YFHCSs initiatives, preparation of a plan of implementing measures (*the municipality intending to introduce the Model*).
3. Earmarking of funds for the activities of the CC (*the municipality intending to introduce the Model*).
4. Establishment of the CC, fitting-out of premises (*the municipality intending to introduce the Model*).
5. Recruitment of the YFHCSs Coordinator and psychologist, and assurance of the activities (*the municipality intending to introduce the Model*).
6. Conclusion of cooperation agreements with other municipal institutions and bodies *(the CC).*
7. Training for service network providers in the municipality *(the municipality that introduces the Model).*
8. Drawing up of a list of institutions and organizations involved in the provision of YFHCSs (healthcare facilities, public health, education, social sector and other institutions), preparation of functional and subordination relations between them, and assessment and description of compliance with the requirements for the provision of YFHCSs (*the CC*). This information about the institutions and a brief description of their contact information are required in order for the Algorithms in a particular municipality to be linked with the service providers of the relevant municipality and in order for the existing infrastructure of service providers to be taken into account. As many as possible municipal institutions should be involved in the provision of services - budgetary institutions, non-governmental organizations, municipalities and businesses not only involved in the provision of services but also able to perform organizational functions, to participate in the initiation of new initiatives of YFHCSs provision.
9. Provision of YFHCSs in the municipality by applying the adapted Algorithms (the CC in cooperation with other representatives of the institutions concerned).
10. Evaluation of the Model functioning (of the process and results) *(the CC).*
11. Earmarking of funds for the publicity of YFHCSs (*the municipality that introduces the Model, the CC).*
12. Securing the financing of the Model and ensuring of activities for a period of at least five years after the implementation of the project/development of the Model *(the municipality that introduces the Model).*