

Project idea form - small projects

Version 2.1

Registration no. (filled in by MA/JS only)

Project Idea Form	
Date of submission	05/06/2025
1. Project idea identification	1
Project idea name	Novel solutions for mental health support in rural communities
Short name of the project	BringingMentalHealth
Previous calls	yes 🔵 no 🔘
Seed money support	yes 🔿 no 🔘
2. Programme priority	
	1. Innovative societies
3. Programme objective	
	1.2. Responsive public services
4. Potential lead applicant	
Name of the organisation (original)	Narva Haigla SA
Name of the organisation (English)	Narva Hospital
Website	https://narvahaigla.ee/
Country	EE





Type of Partner

Contact person 1	
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Contact person 2	
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Hospital and medical centre

Which organisation(s) in the planned partnership take part in a project within the Interreg Baltic Sea Region Programme for the first time? Please list the respective partners.

Narva Haigla is participating in an application in the Interreg BSR for the first time.

5.1 Specific challenge to be adressed

Mental health support and psychiatric care availability has been more sought after in the recent years starting with Covid related issues and deepening further during the war in Europe. The expanding need is unfortunately met with diminishing mental health support workforce, lowering access to mental health care and further reduced availability in smaller rural areas.

In addition, mental health issues are still stigmatized, especially in the smaller communities. The project aims to address the above problems with the help of digital technologies and telemedicine by engaging and empowering the population of rural population and enabling more costeffecitive professional time usage.

There are two main target groups that will benefit from the project outcome: 1) Laymen to evaluate their mental health status and patients with mental health problems 2) Primary healthcare (PHC) professionals (nurses and PHC doctors), and mental health specialist (psychologists, psychiatrists, psychotherapists)





Also, the local hospital management, offcials responsible for healthcare provison at local munipalities and patient organizations will be positivily affected by the project.

5.2 Focus of the call

At at three remote local municipalities int the BSR, the project will find, localize and pilot optimal digital/telemedine evidence based solution that enable the population of the munipalities to conduct remote digital mental health self-asessment, pre-appointment triage to the relevant level professional medical consultation, enhance capacity for local PHC service providers for mental health conditions' management, and if necessary, provide an option for health professional (psychiatrist or clinical psychologist) level telemedicine video consultation.

The process and outcome of the project will be disseminated in the BSR municipalities facing similar problems with access to mental healthcare services.

The project will help with:

Expanding healthcare access – Rural communities often struggle with limited medical services. Reducing stigma and improving well-being – Accessible services help to normalize mental health care and improve overall well-being.

Strengthening cross-border collaboration – The results of the project would support aligning regional health strategies through creating shared resources and best practices.

6. Transnational relevance

Many, if not most of the BSR rural municipalities, share the difficulties in securing sufficient access to quality mental healthcare services. Thus, developing a systematic approach on supporting remote regions with telemedicine solutions would be beneficial for the whole BSR region. Furthermore, the collaboration and knowledge exchange would ensure that the solutions developed are not directed for only one hospital or one area or country. Also, the need is extremely big in all participating countries, thus the simultaneous development of the mental health support services is highly needed. Collaboration and sharing the experience will enable more efficient circulation of best practices to find solutions for the rather complex aim in the limited financial and human resources.

7. Specific aims to be adressed

Building trust that could lead to further cooperation initiatives

The project activities will led for increased cooperation and trust among the participating municipalities and health specialists.

Furthermore, establishing cross-border good practices would raise the potential of creating joint regional plans on mental health policies. Hosting joint conferences and workshops fosters mutual understanding.

Initiating and keeping networks that are important for the BSR

The project can create a basis for permanent network of rural communities in addressing mental





health support issues.

Bringing the Programme closer to the citizens

Project activities will engage local citizens and patient organization that will learn more about opportunities created by the Programme.

Furthermore, the project has potential to directly influence the mental health status in the participating regions and countries through designed interventions helping the citizens to directly benefit from the Programme.

Allowing a swift response to unpredictable and urgent challenges

Digital telemedicine solutions can serve as resilence tools in the current complicated geopolitical environment and also can be useful in addressing mental health problems connected to potential epidemiologic events.

8. Target groups

Many rural hospitals face staff shortages, funding gaps, and infrastructure challenges, but policy reforms and digital health innovations are helping bridge these gaps.

The target groups involved will be patients and mental health care specialists in hospitals and clinics and also the citizens feeling in need for mental health support or evaluation.

In case of the mental health specialists the project will take advantage of the experience in working in the field, also more specifically in the rural regions. This knowledge would help to define the main issues, propose the solutions and help to develop them into actions applied in the hospital setting. For people living in the rural areas the project would engage them through the specialists to understand the specific needs.

In addition to the abovementioned two main target groups, the project will engage patient groups and municipalities. The patient groups are needed to make sure the patients' best interests are kept. The municipalities help to organize the provision of the mental health care and their involvement though information exchange and events will ensure the transfer of the results outside of the project partnership

Please	use the drop-down list to define up	Please define a field of	Specify the countries
to five	target groups that you will involve	responsibility or an	and regions that the
throug	h your project's activities.	economic sector of the	representatives of this
		selected target group	target group come
			from.





1.	Hospital and medical centre	Supporting in defining the issues, developing the program and carrying out the activities in pilots	Finland, Sweden and Estonia
2.	Local public authority	Will be involved in the design activities and will be presented the pilot results	Finland, Sweden and Estonia
3.	Interest group	Patient advocacy groups will be included in the project to ensure the maximum protection and value for patients	Finland, Sweden and Estonia
4.	National public authority	Participating in the project to ensure active involvement in the implementation after the project	Finland, Sweden and Estonia

9. Contribution to the EU Strategy for the Baltic Sea Region

Please indicate if your project idea has the potential to contribute to the implementation of the Action Plan of the EU Strategy for the Baltic Sea Region (https://eusbsr.eu/implementation/).

yes 💿 no 🔾

Please select which policy area(s) of the EUSBSR your project idea contributes to most.

PA Health

The MA/JS may share your project idea form with the respective policy area coordinator(s) of the EUSBSR. You can find contacts of PACs at the EUSBSR website (<u>https://eusbsr.eu/contact-us/</u>).

If you disagree, please tick here.

10. Partnership

Hospitals in the rural areas in Estonia, Finland, Sweden. ScanBalt as the communication, dissemination and exploitation partner. The partners involved have been selected from the countries, which pay attention to the mental





health of their citizens and are taking steps to improve the situation. We are inviting public sector entities and patient organizations as partners or associated partners.

11. Workplan

The main activities can be divided into three main groups with the following structure:

Mapping

1. Defining specific unmet needs of mental health support in the three involved local municipalities incl. mental health care provison system, integration with PHC and social services, availability and structure of human resource

2. Understanding the digitization, digitalization and digital literacy level in the system/institutions and target groups

3. Evaluating the readiness by the population/patients and professionals to adopt innovative digital solutions and for change in the current practices

4. Mapping regulatory environment and potential restrictions for digital solutions implementation
5. Funding and policy mapping – reviewing regional and national funding sources, policy frameworks, and cross-border initiatives to support mental health programs

6. Screening and evaluation of the existing digital tools suitable to address the aims for innovative mental health care service model integrating empowering population and integrating PHC and specialized care levels

Solutions

1. Selecting the most viable solution from the options screened and evaluated during the first phase

2. Preparatory work and change management

a. Evaluating the optimal level of integration with the local HER systems taking into account potential cost implications

b. Communication activities with local stakeholders incl patient and professional organizations

c. Conducting training to bring the users to maturity level to adopt the solution

d. Organization and technical preparations - securing needed level of professional for the piloting

e. Determining the quantitative and qualitative KPI-s for the piloting

f. Securing additional financing and remuneration, if necessary

Piloting

1. Communication activities with the population for engagement of target group

2. Actual piloting to test the suitability of the proposed digital tools for hospitals and patients

3. Analysis of the results

4. Communication of the results to local audience and in the BRS region





12. Planned budget

ERDF budget (planned expenditure of partners from the EU)	EUR 488,000.00
Norwegian budget (planned expenditure of partners from Norway)	EUR XXX
Total budget (including preparatory costs)	EUR 488,000.00

13. Project consultation

Please indicate if you wish to have a consultation (online meeting) with the MA/JS to discuss your project idea

yes 💿 no 🔾

14. Questions to the MA/JS

Questions related to the content of the planned project	(max.1.000 characters incl. spaces)
Questions related to budgeting and expenditure	(max.1.000 characters incl. spaces)
Any other questions	(max. 1.000 characters incl. spaces)

15. Additional information

(max. 1.000 characters incl. spaces)





Your account in BAMOS+

Please remember that to officially submit your application you need to access our electronic data exchange system BAMOS+. More information about the process of applying for your account in BAMOS+ you will find here:

https://interreg-baltic.eu/gateway/bamos-account

