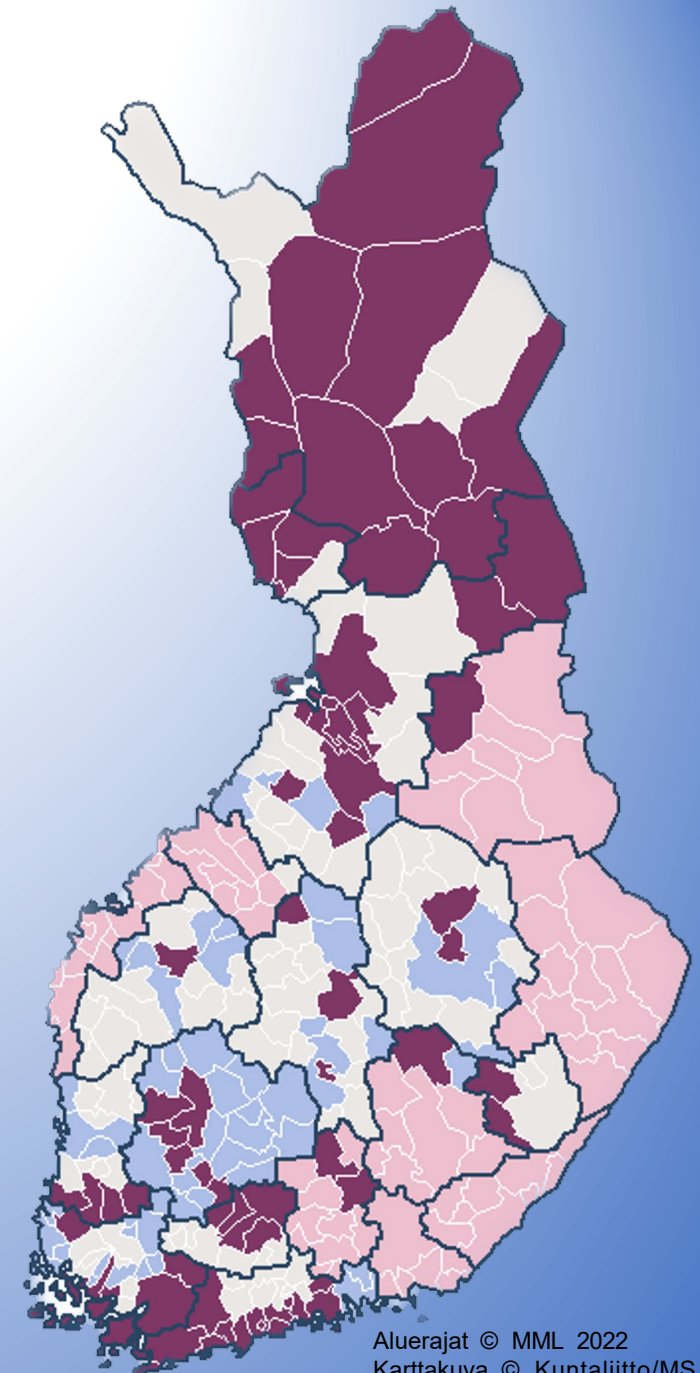


Population Health Management in Finland

SOTE-reform, health centres,
digitalization and broad usage of EHRs
(PAEHRs) as some of the key components

SOTE-Reform – shifting responsibilities

- The Finnish „Social and Health Care Reform“, SOTE-Reform in short, is Finland's largest-ever social and healthcare reform.
- Started already in 2005, it finally came into effect on the 1st of January 2023, after five consecutive governments failed in completing the reform.
- Main disagreements: proper number of counties, financing of the counties and role of private sector service providers.
- The overarching goals of the reform are to strengthen the financial basis of service delivery, to guarantee equal access to health and social services, and to reduce inequalities in health and well-being.
- Means: reshaping of a highly fragmented system of municipalities responsible for health and social services to bigger self-sustaining entities.
- Before the reform: 309 municipalities, 20 hospital districts.



After the reform: The new welfare counties

- The task of the welfare counties is to organise health, social and rescue services.
- There are 21 counties, the city of Helsinki and the autonomous region of Åland.
- The welfare counties are bodies governed by public law that exercise autonomy within their own areas.
- The highest decision-making body in each wellbeing services county is a county council elected by popular vote. The county councils decide on the detailed organisational structure. Elections took place in the beginning of 2022, next election in 2025.



Health centres as main providers and entry point for primary care

- In Finland, health centres (Terveyskeskus/Terveystieteiden keskus) are the main providers and access points for primary care.
- Implemented since 1972, the main goal was and is to provide and ensure local outpatient and inpatient primary care – also in rural settings with low population density.
- Central tasks:
 - Basic care for acute and chronically ill patients, health advice, mother-child advice centers, vaccinations, check-ups, dental care, basic diagnostics
- Partly equipped with inpatient departments
 - for the observation of acutely ill patients and for the short-term care of chronically ill patients (especially older patients), as long as no specialist care is required in the hospital
 - Also short-term follow-up-care after serious operations etc. as well as rehabilitation
- If necessary, medical and nursing care for patients in their own home



Excuse: how do health centres work?

- Responsible bodies/operated by: Welfare regions, the city of Helsinki, Åland islands
- Funding through government grants and customer fees
 - Base: population and burden of disease
- A total of currently 130 health centers with 510 locations
 - For example: In addition to the headquarters, there are a total of 23 locations throughout the city of Helsinki (“Terveysasema”)
- consultation hours of nurses, doctors (predominantly general practitioners), dentists, dental hygienists, physiotherapists, etc.
- At larger locations, additional diagnostics (e.g. X-rays) and sometimes inpatient departments
- Laboratory diagnostics usually carried out jointly with hospitals

Excuse: Role of nurses in primary care

- Nurses play an important role in primary care (as well as in hospitals)
- Trained in universities of applied science
 - Nurse (Sairaanhoitaja) studies take about 3,5 years and comprise 210 ECTS-points
 - The goal of training registered nurses is to enable them to work independently and autonomously in the field of nursing
- These studies are the basis for further training as “Terveydenhoitaja” (health nurse, six months, 30 ECTS-points) with a strong focus on public health. These nurses are the “gatekeepers” in health centres.
- In Finland, there is the possibility for additional training (45 ECTS-points) that entitles a nurse to prescribe certain medicines as well as to renew certain prescriptions issued by a physician.
- Nurses fulfill important tasks in case management and triage (for example, experienced and specially trained nurses decide if a patient is admitted to the emergency room)
- Cooperation of different professions in hospitals is characterized by multi-professional teams.

Digitalization and EHRs

- Digitalization has long been a central means of delivering better care in Finland.
- Electronic health records were first implemented in 2007, OmaKanta (patient accessible national electronic health record, (PAEHR) was launched in 2010.
 - Patients can access their data, lab reports etc., additionally, they can see who accessed their data and when it was accessed.
- The system is adopted and used by most of the population – opt out is possible, but rarely used.
- E-prescriptions were launched in 2008, they can be retrieved at any pharmacy.

Population health and science

- There is a variety of projects doing scientific research on population health:
 - The Centre for Population Health Research (POPC, www.popc.utu.fi) at the University of Turku has the purpose of advancing multidisciplinary health research, focusing on different phases of the life cycle. Further, the scientists aim to develop new modelling methods with the help of which national register and clinical population research data could be utilised for predicting and promoting population health and well-being.
 - FinnGen (www.finngen.fi), started in 2017, is a large public-private partnership aiming to collect and analyse genome and health data from 500,000 Finnish biobank participants. It is one of the very first personalized medicine projects at this scale and brings together Finnish universities, hospitals and hospital districts, THL, Blood Service, biobanks, FINBB and international pharmaceutical companies. Goals are to provide novel medically and therapeutically relevant insights but also construct a world-class resource that can be applied for future studies.
 - The Finnish Benchmarking System for Health Promotion Capacity Building (BSHPCB) is a nationwide system developed to assess structures, capacities and actions taken to develop health promotion practices at local level. Data has been collected since 2010 and is published online: www.teaviisari.fi

Thanks for listening!

If you have any questions or are looking for more information or sources, feel free to contact me via email: sven@preusker-healthcare.de