

Health care in Finland

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Open Day

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The Association of Local and Regional Authorities

- Represents as is owned by and [represents municipalities / local authorities](#) that provide basic public services for their residents, **the most important of which relate to social welfare and health care**, education and culture, the environment and technical infrastructure
 - » Some 432 000 employees provide services for municipal residents, more than 200 000 employees working in the field of social welfare and health care
- Protects the interests and promotes development of Finnish municipalities and provides services for them and for the entire local government sector
 - Co-operates with regional councils, hospital districts, special care districts and other municipal organisations
 - Co-operates with national authorities such as [THL](#), the Institute of Social and Welfare (in the deployment of the national strategy of eHealth, [eArchive](#) etc.)
 - Maintains and promotes the usage of [ICPC in Finland](#), and hosts the ICPC Expert Group

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Some facts about Finland



Some facts about Finland

Population: 5 471 753 inhabitants, incl. Åland
Area: 338 424 km²

Population density: 17,6 inhabitants/km²
 (0,2 inhabitants/km² - 2730,3 inhabitants/km²)

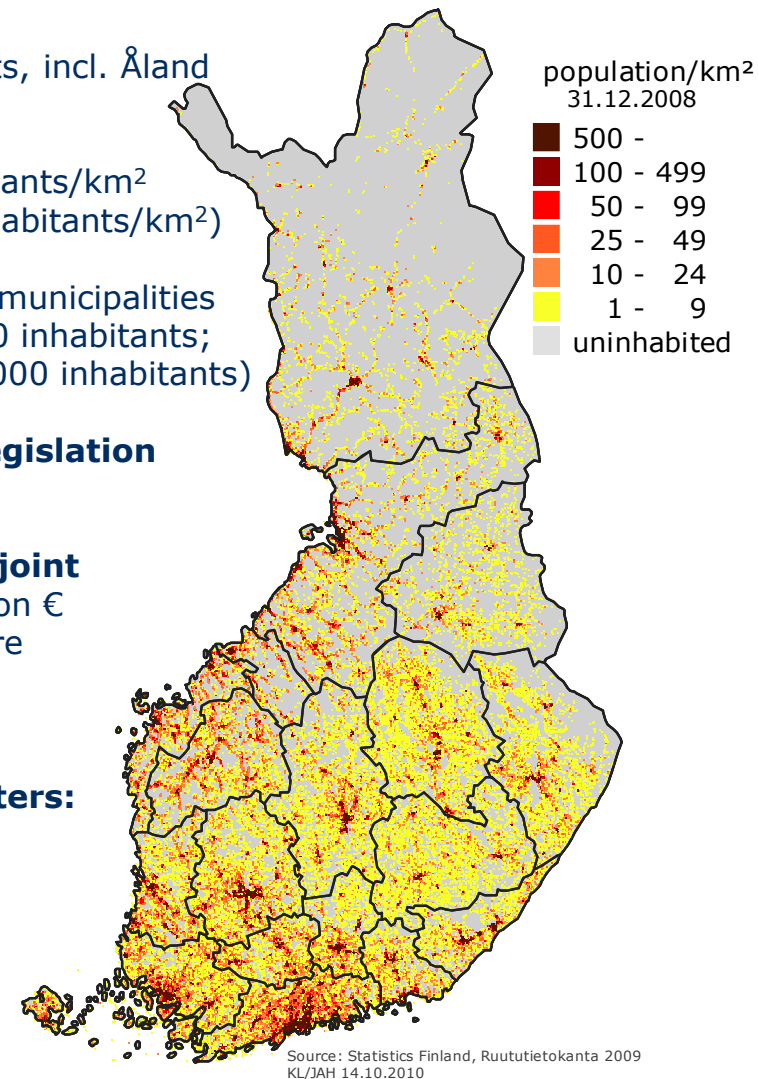
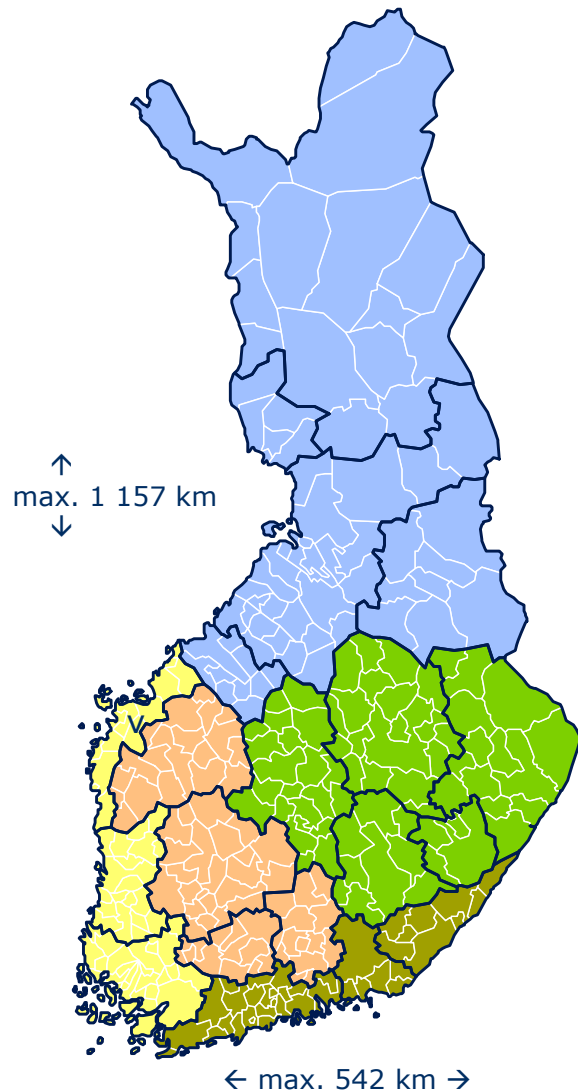
Number of municipalities: 317 municipalities
 (~40 municipalities having < 2000 inhabitants;
 ~ 65 municipalities having > 20 000 inhabitants)

**Number of tasks assigned in legislation
 for municipalities:** > 535

**Total expenditure of local and joint
 municipal authorities:** 46,4 billion €
 (out of which social and health care
 expenses 46 %)

Number of health centers: 152
Outpatient visits to health centers:
 39,3 million per year

**Coverage of Electronic Patient
 Information Systems
 in health centers:** 100 %



Examples of differences between municipalities

	SMALLEST	MEDIUM	LARGEST	WHOLE COUNTRY
POPULATION (31.12.2013)				5 451 270
	Sottunga (Åland Islands) 100	5 829	Helsinki 612 664	Average 17 035
AREA (1.1.2014), km2				303 891
	Kauniainen 5,9	540	Inari 15 053	Average 950
POPULATION DENSITY (1.1.2014), resident/area km2				
	Savukoski 0,2	10,8	Helsinki 2 866	17,9
AGE STRUCTURE (31.12.2013), %				
0-6 years	Sottunga (Åland Islands) 0	7	Liminka 17	7,2
7-14 years	Sottunga (Åland Islands) 0	8,5	Liminka 18	8,9
15-64 years	Luhanka 49,1	59,9	Helsinki 70,1	60,1
65-74 years	Liminka 4,8	12,7	Hailuoto 20,6	12,7
75-84 years	Liminka 2,6	7,8	Luhanka 14,8	7,9
85+ years	Kempele 0,8	3,1	Sottunga (Åland Islands) 11	3,2
DEMOGRAPHIC DEPENDENCY RATIO 2013 (under 15 year-olds + over 64 v./15-64 v.)				
	Helsinki 42,6	67	Luhanka 103,5	55,8
FOREIGN-LANGUAGE POPULATION (31.12.2013), %				
	Reisjärvi 0,2	1,7	Vantaa 13,2	5,3
ECONOMIC STRUCTURE 2011, %				
Agriculture and forestry	Helsinki 0,2	9,5	Lestijärvi 37,1	3,5
Secondary production (manufacturing + construction)	Kökar (Åland Islands) 3	25,1	Pyhäntä 43,8	22,1
Services	Pyhäntä 41,7	63,3	Helsinki 92	74,4
JOB SELF-SUFFICIENCY 2011, %				
	Lemland (Åland Islands) 30,8	86,55	Maarianhamina (Åland Islands) 177,8	100
ECONOMIC DEPENDENCY RATIO 2012, %				
	Jomala (Åland Islands) 92	125	Kivijärvi 234	132
Persons with educational qualification 2012, % of 15-year olds and over				
	Luhanka 49,1	62,7	Kauniainen 80,2	68,5
Persons with tertiary degree 2012, % of 15-year olds and over				
	Kivijärvi 10,1	19,8	Kauniainen 56,8	28,7

Source: Statistics Finland, Land Survey of Finland

The Finnish health care system today



Health care system in Finland

- Finland offers universal coverage of a comprehensive range of health services
- Health services are mainly funded through taxation
 - Health services rely on public provision of care
- Municipalities play a key role both in the financing and in the provision of care
- Hospital services are centralized within 20 districts (5 university hospital districts) which are formally under the control of the municipalities
- All regular residents in Finland are entitled to sickness insurance benefits (paid by KELA, the Social Insurance Institution of Finland)
 - » Covers daily sickness benefit and rehabilitation allowance
 - » Reimburses small amount of private medical and dental fees, laboratory and treatment costs, pharmaceutical expenses, travel expenses related to treatment

HEALTH CARE SYSTEM IN FINLAND

SPECIALIZED HEALTH CARE

20 INTERCOMMUNAL
HOSPITAL DISTRICTS

CENTRAL HOSPITALS

(5 of them are University Hospitals)

LOCAL GENERAL
HOSPITAL

AMBULANCE
SERVICE

PRIMARY HEALTH CARE

MATERNITY, CHILD AND SCHOOL
HEALTH CARE, DENTAL CARE

PRIVATE HEALTH CARE

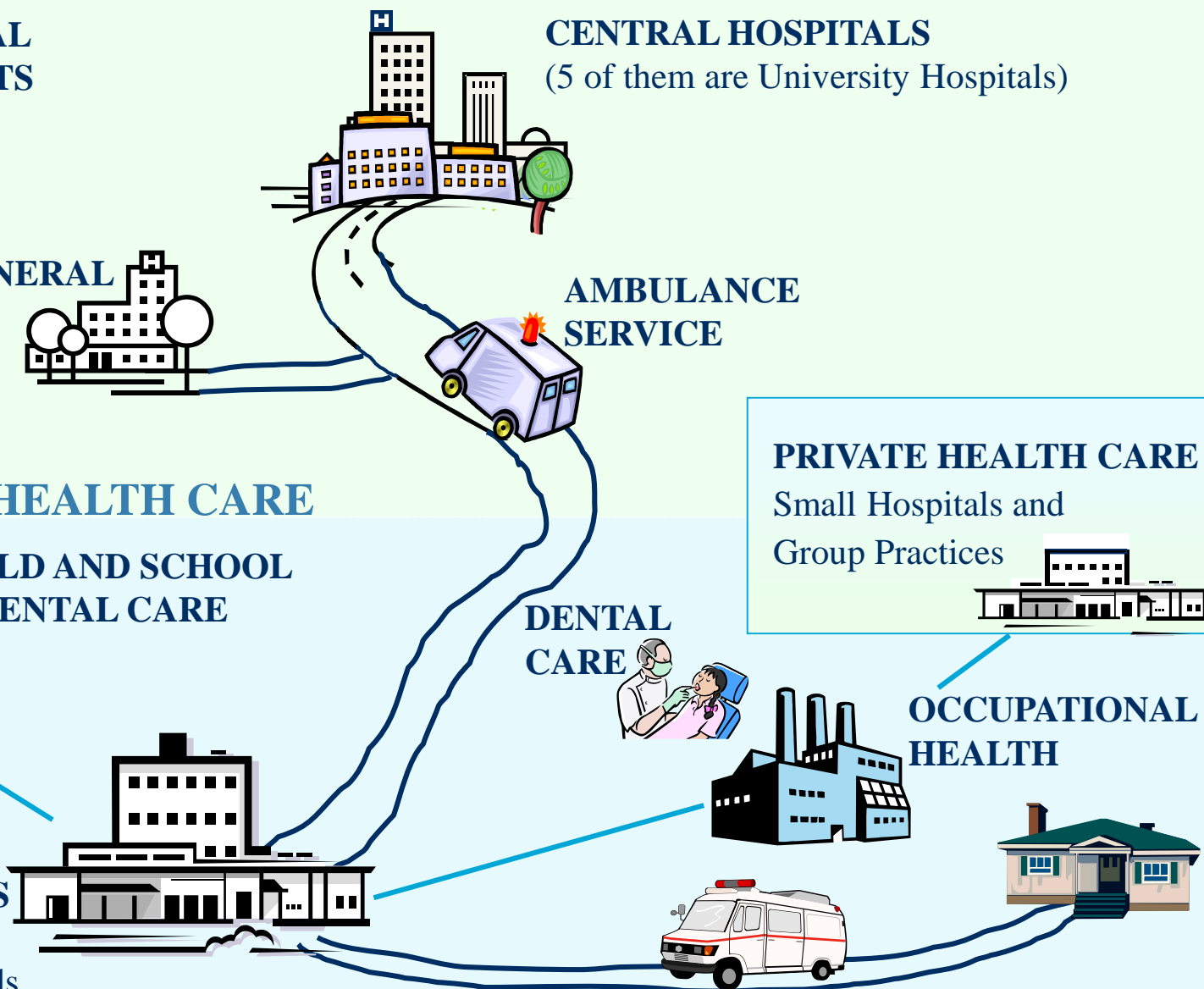
Small Hospitals and
Group Practices

DENTAL
CARE

OCCUPATIONAL
HEALTH

HEALTH CENTRES

Municipal or
Joint Municipal Boards



Hospital Districts

- 20 hospital districts
- each municipality must be a member of a hospital district and the municipalities own the hospitals
- the decision-making body is the federation council (central council), which consists of the member municipalities' councillors
- purpose is to provide specialized care services
- the patients go to the hospital with a referral
- the municipalities pay the patients' costs after treatment, patients pay client fees
- responsible for the research, development and training functions with the health centers

Local authorities provide services for all their residents

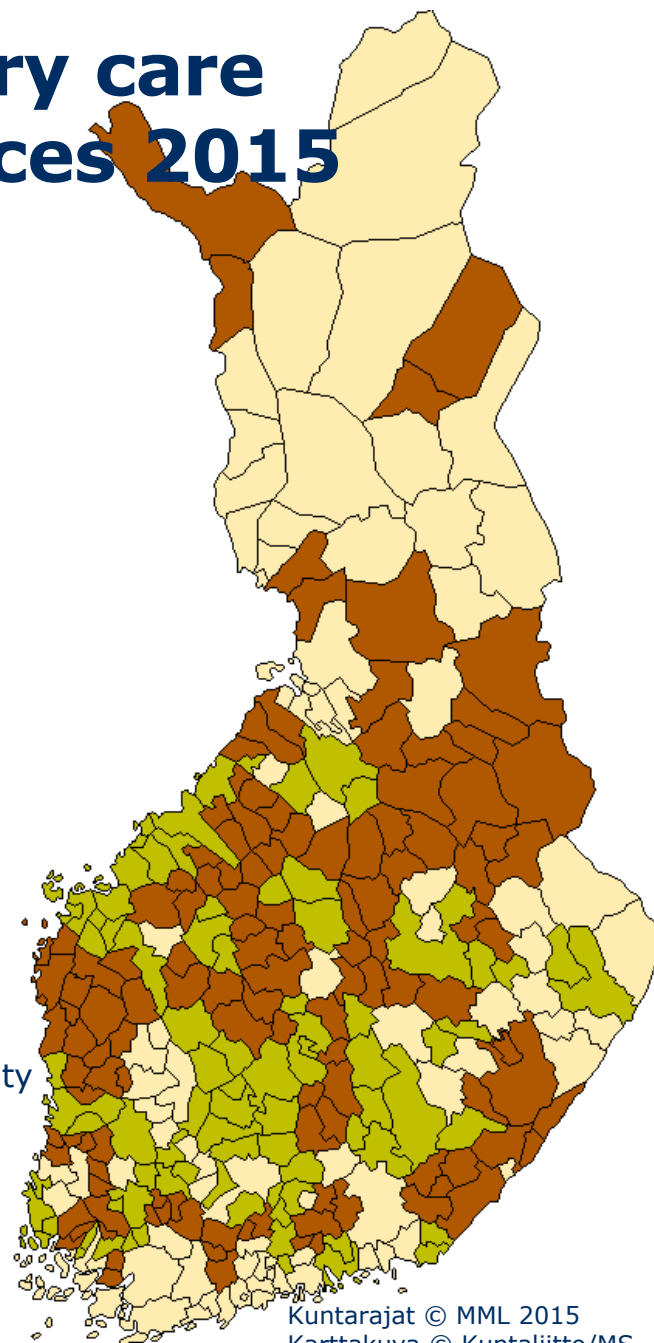
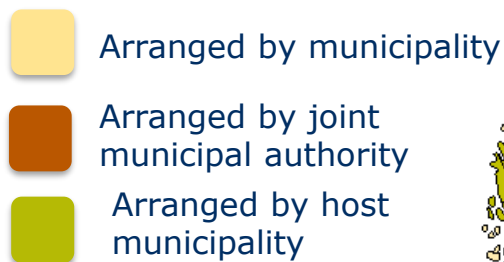
Social welfare and health care services:

- 39.3 million outpatient visits to health centres
- 5.7 million care days in health centres
- 8.1 million outpatient visits in specialised health care
- 4.7 million care days in specialised health care
- 209 000 children in municipal day care
- 17 400 child welfare clients placed outside the home
- 81 500 children in child welfare open care
- 36 000 older people in municipal sheltered housing
- 64 000 older people receiving regular home care
- 128 000 service recipients under the Services and Assistance for the Disabled Act
- 39 500 recipients of informal care support
- 239 200 households receiving social assistance.

Source: The National Institute for Health and Welfare, Statistical Yearbook on Social Welfare and Health Care 2012; the information dates from 2011

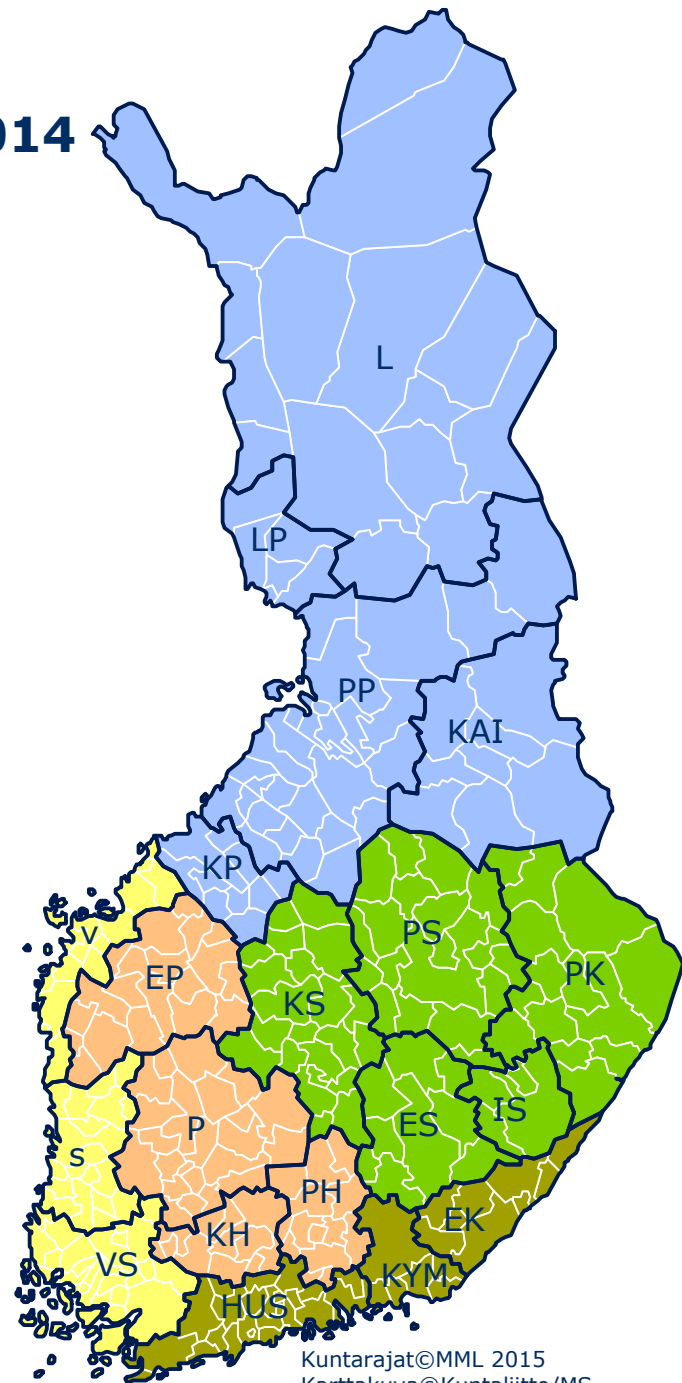
Organisation of primary care and social welfare services 2015

Municipalities total , mainland Finland	301
Municipality arranges the services	89 municipalities, 56% of the population
Local gov't co-management areas, total	63, 212 municipalities, 44% of the population
Health centres, total	152
Maintained by municipalities	89
Maintained by joint municipal authorities	31 (128 municipalities)
Maintained by host municipalities	32 (84 municipalities)
Health centres	
Fewer than 20 000 residents	76
Over 20 000 residents	76



Special Catchment Areas (5) and Hospital Districts (20) in 2015, population 31.12.2014

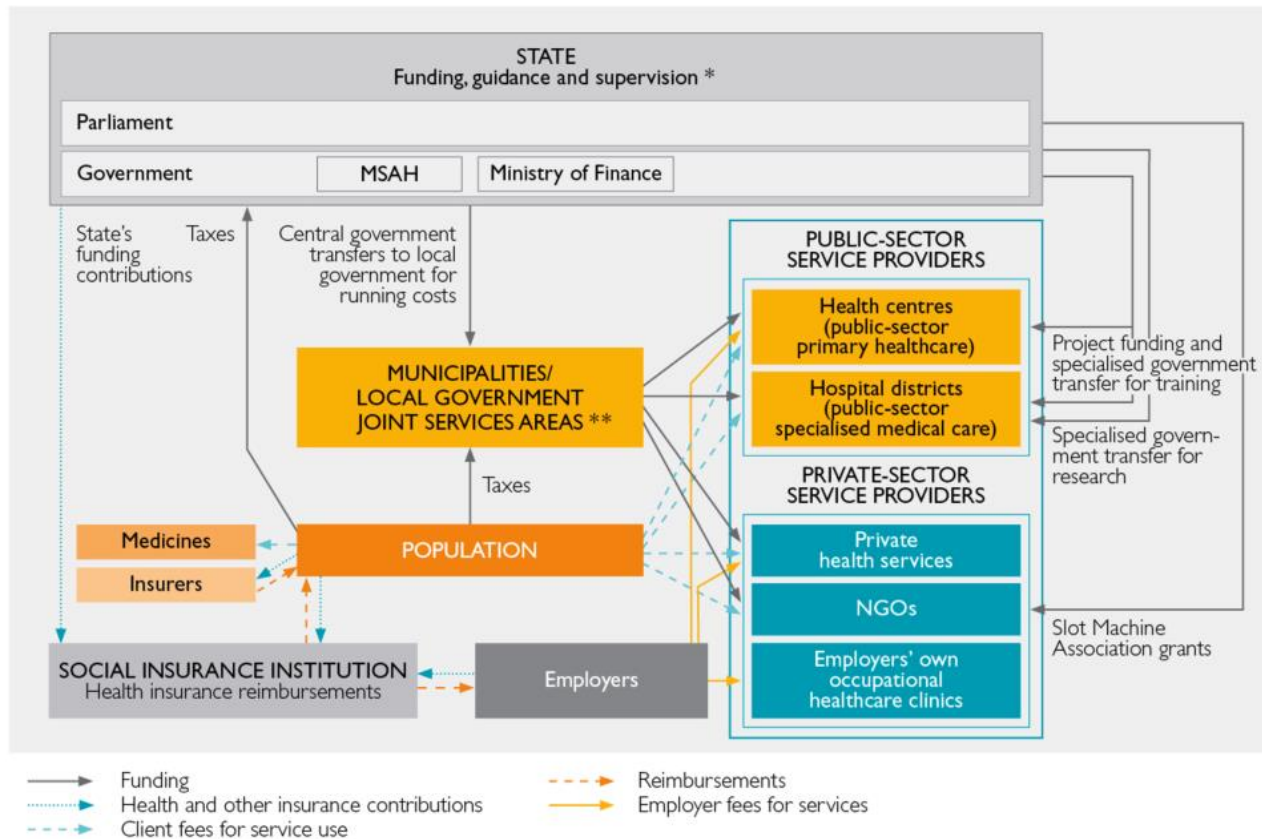
<p>■ HYKS erva Helsinki ja Uusimaa Etelä-Karjala Kymenlaakso</p>	<p>1 904 062 inhabitants, 39 municipalities 1 599 390 inhabitants, 24 municipalities 131 764 inhabitants, 9 municipalities 172 908 inhabitants, 6 municipalities</p>
<p>■ KYS erva Pohjois-Savo Etelä-Savo Itä-Savo Keski-Suomi Pohjois-Karjala</p>	<p>816 405 as. 67 kuntaa 248 407 inhabitants, 19 municipalities 103 873 inhabitants, 9 municipalities 44 051 inhabitants, 4 municipalities 251 178 inhabitants, 21 municipalities 168 896 inhabitants, 14 municipalities</p>
<p>■ OYS erva Pohjois-Pohjanmaa Kainuu Keski-Pohjanmaa Lapin Länsi-Pohja</p>	<p>741 897 as. 68 kuntaa 405 635 inhabitants, 29 municipalities 76 119 inhabitants, 8 municipalities 78 395 inhabitants, 10 municipalities 118 145 inhabitants, 15 municipalities 63 603 inhabitants, 6 municipalities</p>
<p>■ TAYS erva Pirkanmaa Etelä-Pohjanmaa Kanta-Häme Päijät-Häme</p>	<p>1 110 996 as. 67 kuntaa 524 447 inhabitants, 23 municipalities 198 242 inhabitants, 19 municipalities 175 350 inhabitants, 11 municipalities 212 957 inhabitants, 14 municipalities</p>
<p>■ TYKS erva Varsinais-Suomi Satakunta Vaasa</p>	<p>869 477 as. 60 kuntaa 475 842 inhabitants, 28 municipalities 223 983 inhabitants, 19 municipalities 169 652 inhabitants, 13 municipalities</p>
<p>Mainland Finland</p>	<p>5 442 837 inhabitants, 301 municipalities</p>
<p>Åland</p>	<p>28 916 inhabitants, 16 municipalities</p>
<p>TOTAL</p>	<p>5 471 753 inhabitants, 317 municipalities</p>



Expenditure on Health and Funding of Health Care

- The total health expenditure was 18.5 billion euros (2013)
 - » Specialized health care 6.8 billion €
 - » Primary health care 3.8 billion €
 - » Consumption of pharmaceuticals and other medical nondurables in outpatient care 2.4 billion €
- Financing (2013)
 - » Costs for health care 8.6 % of the Gross National Product
 - » Public financing 75.6 %
 - 24.3 % State (tax)
 - 37.7 % Municipalities (tax)
 - 13.6 % Social Insurance Institution of Finland (KELA)
 - » Private financing 24.4 %
 - 18.2 % households
 - 6.2 % other contributions (private insurance, accident insurance, employers)

Organisation, funding, provision and supervision of health services in Finland



*The Regional State Administrative Agencies, National Supervisory Authority for Welfare and Health (Valvira) and The Finnish Medicines Agency (Fimea) supervise healthcare. The following expert institutes are in charge of information guidance: the National Institute for Health and Welfare (THL), the Finnish Institute of Occupational Health (TTL) and STUK - Radiation and Nuclear Safety Authority, Finland.

** Municipalities are responsible for organising the health services required by the population. Primary healthcare should be arranged in municipalities, or local government joint services areas, with at least around 20,000 inhabitants. In fulfilling its responsibility for organising specialised medical care, each municipality must belong to a hospital district.

Developments in Health Centers

- Rising role of nurses
 - » Responsible for the care process (coordination of services for chronic patients)
- Services for chronic patients developed
 - » Coordinated, planned care, self management
- Segmentation of clients
 - » Patients with chronic conditions vs. short episodes
- Several ways to keep the patients out of doctor's appointments
 - » E-Health (own lab results, communication...)
 - » Group practice, groups for dietary or lifestyle changes
 - » Virtual consultation
- Many different models of work organization
 - » Process development

Social and health care reform in Finland



Social Welfare and Health Care Reform

- There is wide political agreement on the necessity of the reform
- We need to guarantee the population's constitutional rights to social protection and access to healthcare
- The overall economic development and particularly the situation of the municipalities are facts that can't be ignored
- After reform, **18 counties are responsible for organising integrated social and health care services** instead of municipalities



Reform package for healthcare, social welfare and regional government

The reform will even out differences in health and wellbeing, and curb cost increases

Healthcare and social welfare services will be transformed into customer-oriented entities

Basic services will be strengthened



The sustainability gap will be reduced by EUR

3
billion

The projected 2.4% annual real growth in healthcare and social welfare expenditure must be curtailed to 0.9% over the 2019 to 2029 period

GOVERNMENT REFORM PACKAGES

The Finnish model for organising health and social services and county government in the future: Healthy people, fluent services and strong economy

Information, digitalisation and skillful personnel make the reform possible

The usage of information -
Integration of information

Workforce transfers
employees maintain their
current terms of employment
Incorporation has transition
period

Taxpayer
cost-
effectiveness,
effectiveness

Citizen
Functional democracy and
participation

Democracy in the
Counties: county
council

**Public, private and third sector
providers**

New County
Responsibility to organise duties
Financing responsibility
Responsibility on integrated services and
functioning service chains

The Act on
Financing of the
Counties -
Criteria for the
service needs
and cost
containment

Multisectoral
counties with
distinct distribution
of work
Municipalities as
local vital societies

User
- possibility to choose
- possibility to
influence

Economic growth
Regeneration

Measurements
supporting and
required by renewal
- Entrepreneurship

Effective
organising,
producing and
management

Multiple producers
model -
Same principals for
public, private and third
sector provision

Promoting health and
well-being in all
policies

Promoting
health and
well-being in
municipalities
and counties



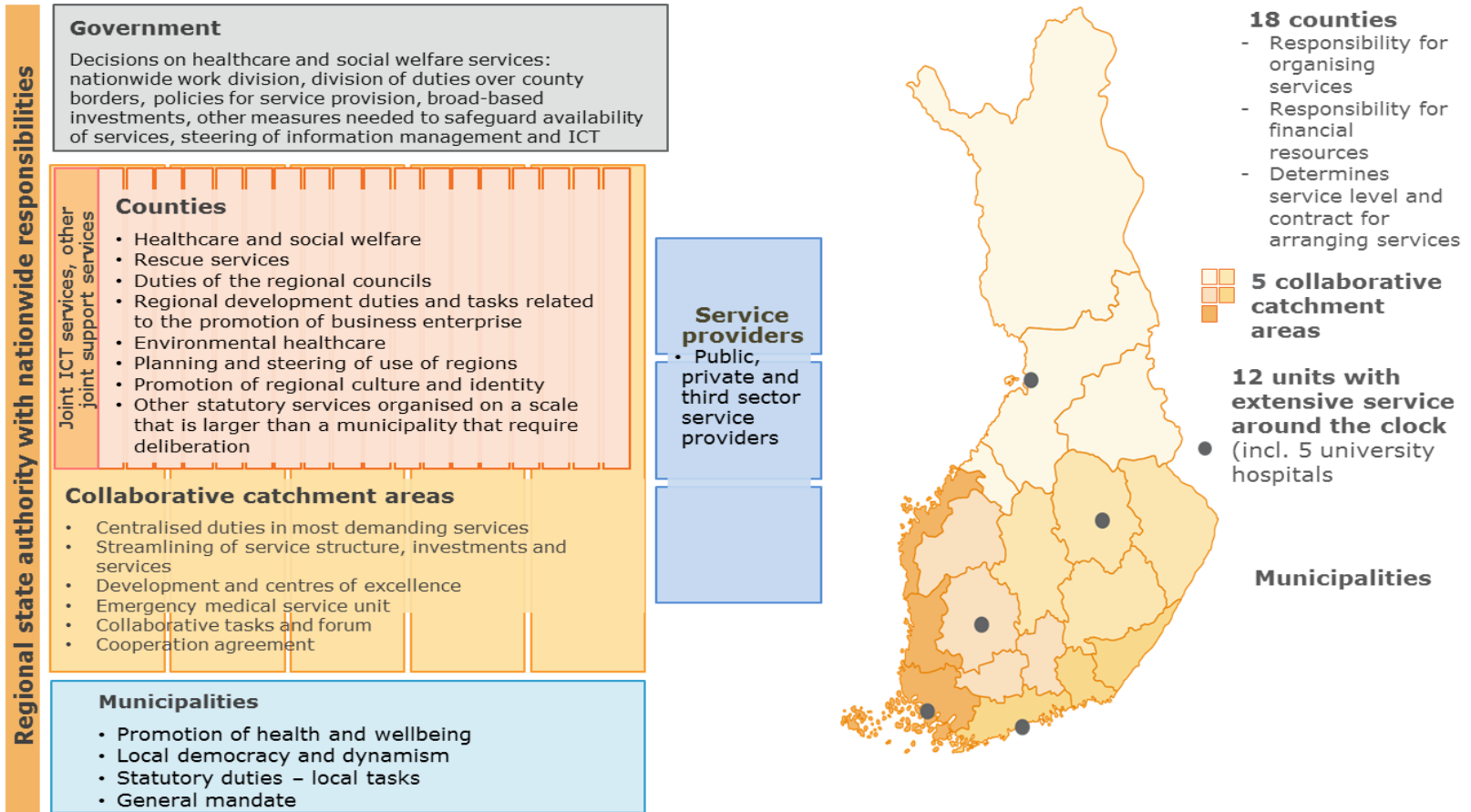
Strengthening the self-
determination and
responsibility of
customer

Alignment for
preparation of the
legislation for
wider freedom of
choice

Health and social services and county government reform legislation creates possibilities

- Responsibility to organise health and social services transfers from municipalities to 18 counties
- Multisectoral county that has elected council and possibility for citizens to participate
- The Act on organising the health and social services, the Counties Act, The Act on Implementation, The Act on Financing of the Counties, Acts on Central Government Transfers etc.

New functions of the counties as of 1 January 2019



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