

Health and Social Services System in Finland

Finnish-Estonian health services seminar 19.9.2024

Tiina Hetemaa

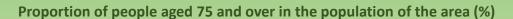
18.9.2024

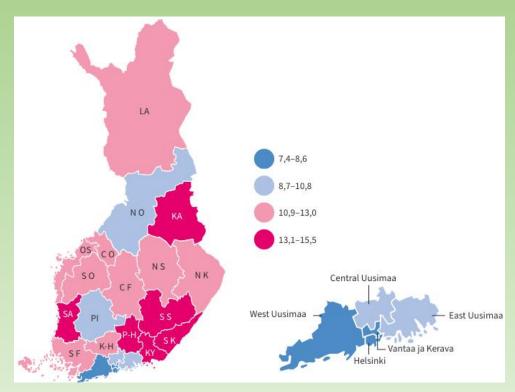
Finnish Institute for Health and Welfare

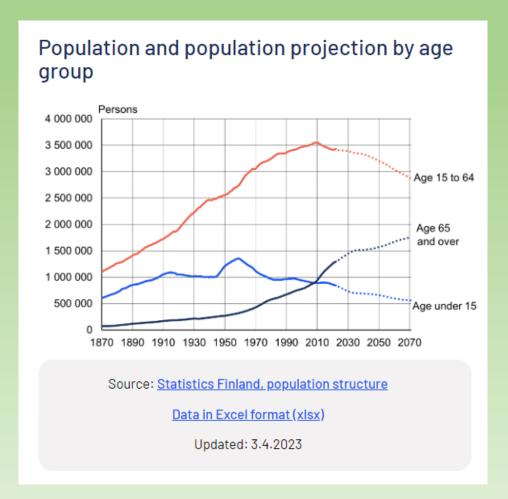
Population is ageing and the need for services is growing

The proportion of over-65-year-olds has grown second fastest of all the EU countries over the last ten years \rightarrow Service provision is challenged by the ageing of the population

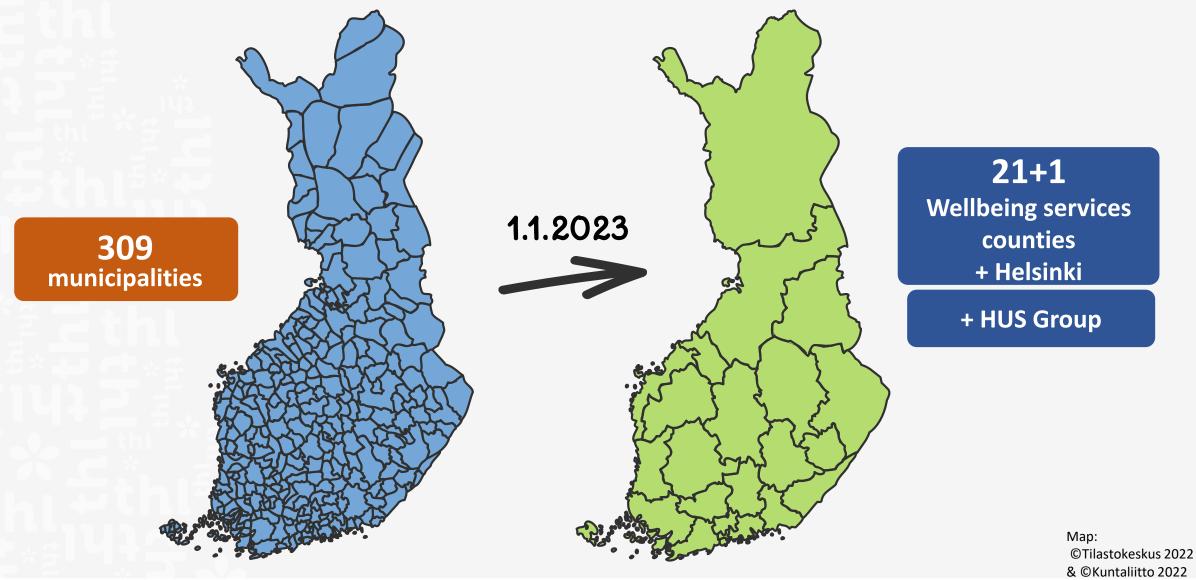
There are large regional differences in the morbidity and age structure of the population







Organisation of health and social services in Finland



Uusimaa region differs from the rest of Finland

 The HUS Group, the joint authority for Helsinki and Uusimaa, is responsible for organising specialised healthcare



18.9.2024 Tijna Hetemaa

Complementary services







Health and well-being promotion













Health and Social Services System in Finland

thi

MUNICIPALITY







WELLBEING SERVICES COUNTY



Basic services in social services and health care





Specialist services in social services and health care

Responsibilities for organising health and social services

Coordination

Ministry of Social Affairs and Health

Permits and supervision

Regional State Administrative Agencies, Valvira

Research and development

Agencies and institutions in the administrative branch of the Ministry of Social Affairs and Health



Public health and social services
Wellbeing services counties



Promoting health and welfare in cooperation with municipalities



Source: Ministry of Social Affairs and Health (2024)

National
Objectives for
the Organisation
of Healthcare
and Social
Welfare



Equality

Cost-effectiveness



- Clear service system, service network and service guidance increase the availability
- increase the availability, continuity and coordination of basic services
- sustainable and the growth of costs will be slowed down in relation to the increase in service needs

The activities are economically

There are well-functioning cooperation structures that emphasise prevention in place between wellbeing services counties, municipalities and other actors.

for ensuring the adequacy, availability and permanence of social welfare and health care personnel

Preconditions have been created

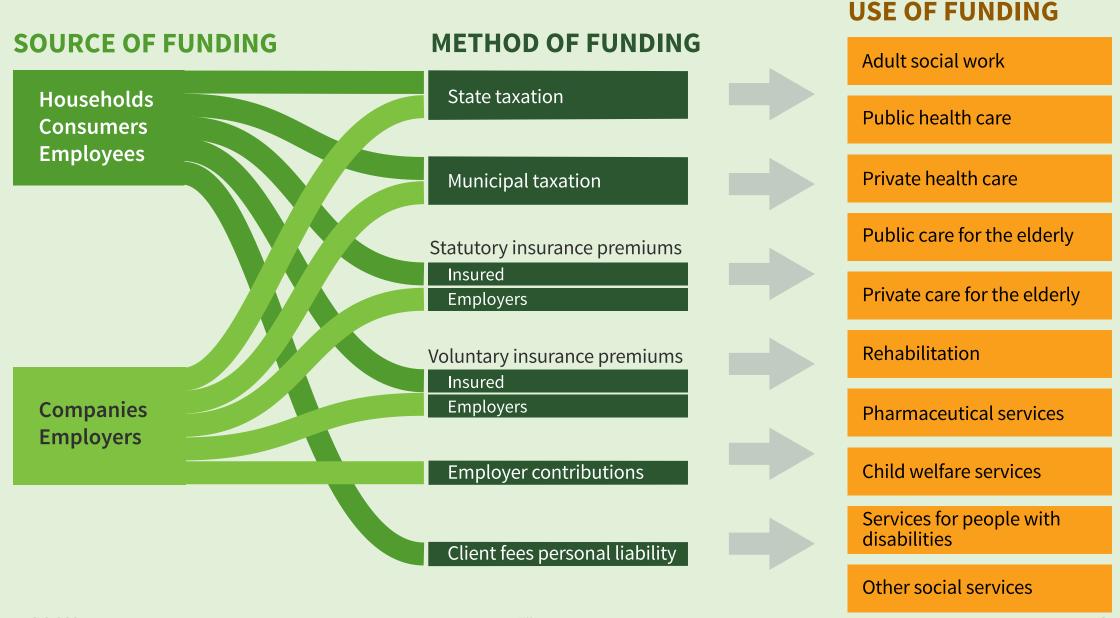
- Effectiveness is emphasised in the steering and management of activities
- A flexible and crisis-resilient service system safeguards the health, well-being and adequate income of the population throughout the country



Information

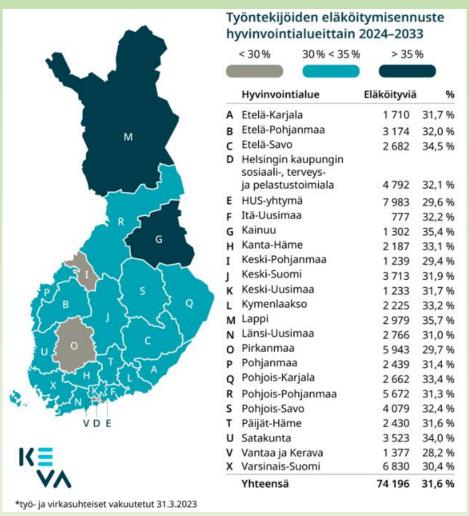
- Research and development activities related to the service system and primary health care and social welfare services will be strengthened
- Information management and digitalisation planned nationally and by cooperation area support the attainment of objectives and resident-oriented renewal of operations

Financing of health and social services



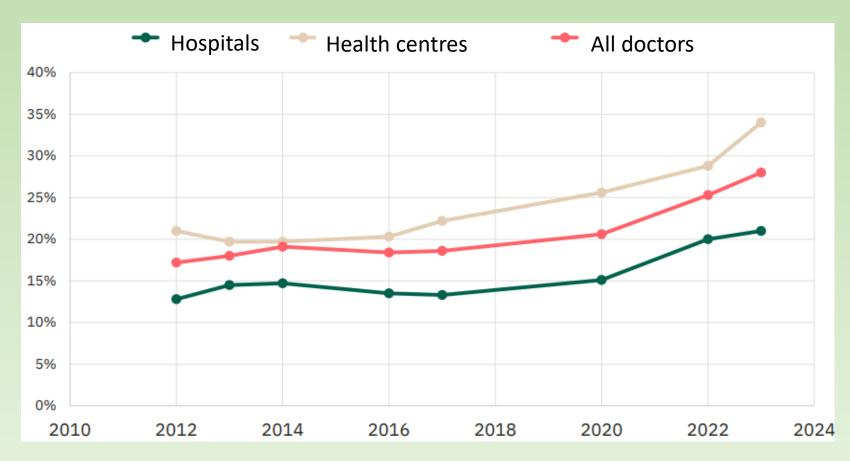
Staff shortages have reduced the availability of services

Estimate of employees of wellbeing services counties retiring 2024-2033*



- Deepening staff shortages challenge the timely availability of services
- According to forecasts in the next five years, about one fifth of the healthcare and social welfare personnel in more than half of the wellbeing services counties will be retiring.

Part-time work is more common nowadays



The prevalence of parttime work has been in growth, as in the labor force in general.

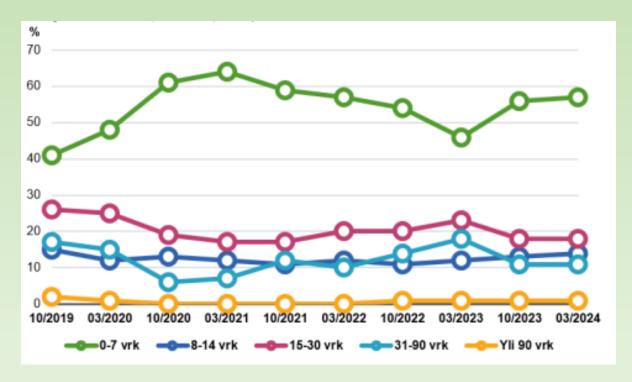
But part-time work is increased quantitatively the most in social and health care.

Every fourth doctor in wellbeing services counties works part-time.

Lääkäriliiton työmarkkinatutkimukset 2012–2022 ja Lääkäri 2023 -tutkimus.

Access to health care

Waiting time for elective outpatient medical visit to physician in primary health care, %



The number of people waiting 91 to 180 days for treatment in specialized health care



Prior authorisation provided in Finland for treatment in EU countries

Year	Resolutions	Granted	Denied		Amount paid by wellbeing services counties for treatment covered by the prior authorisation €
2023	304	170	120	14	556,306
2022	145	81	62	2	1,020,977
2021	152	93	55	4	197,646

- The cost of a single treatment can vary between €100 and €100,000.
- Prior authorisation have mainly been granted for treatment of cancer, musculoskeletal disoders and eye diseases.
- Most for treatment in Estonia
- Reimbursement is paid at the most to the amount that corresponding treatment would have cost in Finland in the customer's wellbeing services county.

Medical costs incurred in EU countries and their reimbursments to customers

	Number of resolutions	Costs € (paid by customers)	Reimbursements € (paid by Kela)			
In 2023 (new reimbursement model)						
Seeking treatment independently	1,426	522,100	264,300			
Treatment provided in 2022 and reimbursed in 2023						
Seeking treatment independently	2,924	321,500	62,300			
In 2023						
Necessary treatment	5,959	6,261,600	3,808,200			

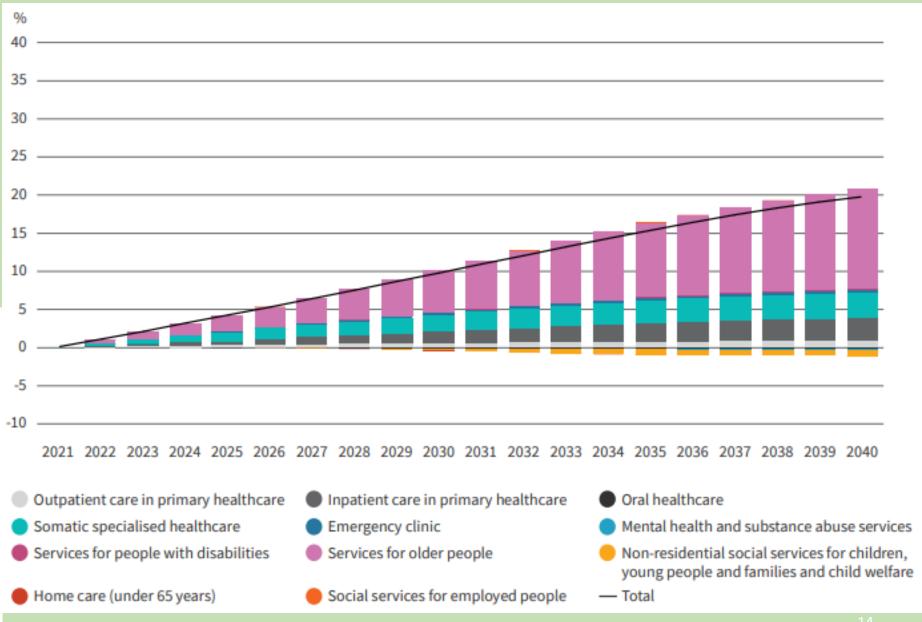
Top 5 countries

In 2023					
Country	Costs € (paid by customers)	Reimbursements € (paid by Kela to customers)			
Estonia	645,200	257,200			
Spain	92,800	35,000			
Sweden	26,000	5,800			
Latvia	8,600	4,300			
Bulgaria	5,000	3,800			



Healthcare and social welfare cost predictions 2021-2040

Development of the healthcare and social welfare costs as a result of demographic change if the operation remains similar to the current state.



Basic services in social services and health care

Child welfare services

Health guidance and checkups as well as social welfare advice and guidance

Social services for families with children

Family law services

Screenings

Maternity and child health clinic service

Medical rehabilitation

Outpatient care



Oral health care

Student welfare services

Mental health and substance abuse services

Social services for workingage people

> Services for older persons

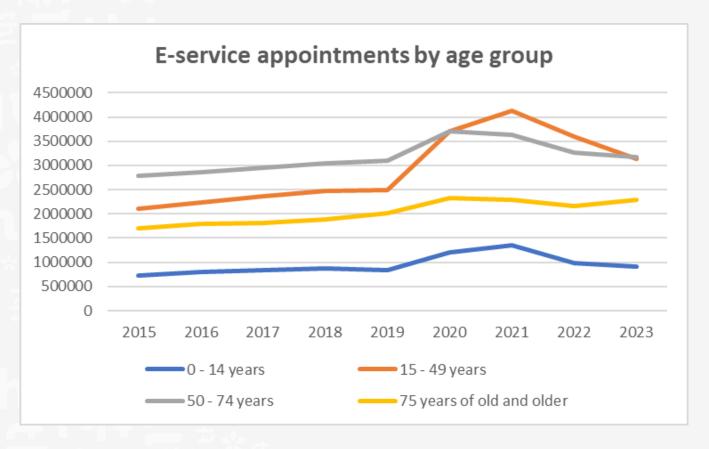
Services for people with disabilities

> Laboratory and imaging services

Social welfare

Healthcare

Digital services



- 9.5 million contacts in 2023 to public primary health care
- 25 % of outpatient appointments in primary health care were E-service appointments 2023

Kanta.fi

To access their own health data

Chat

Anonymus chat

Chatbot

i.e. Covid-19

Omaolo.fi

Service assessments, Health check, Health coaching programmes

Terveyskyla.fi

Health Village offers information and support for everyone, care for patients and tools for professionals. 33 virtual hubs built around different themes.

EU4Health Programme and European Health Data Space

THL is involved in several projects

- JAPreventNCD: Cancer and other NCDs prevention action on health determinants
- 2. MaCoDeExe: Maintenance and Continuous Development of Existing Services under MyHealth@EU infrastructure in Finland
- 3. Xt-EHR: Extended EHR@EU Data Space for Primary Use
- 4. JACARDI: Joint Action on CARdiovascular diseases and Diabetes
- 5. EU-JAMRAI 2: Joint Action Antimicrobial Resistance and Healthcare-Associated Infections 2
- 6. JARDIN: Joint Action on integration of ERNs into national healthcare systems
- 7. EU-WISH: EU Wastewater Integrated Surveillance for Public Health
- 8. FinHits: Strengthening Finnish Health Data ICT for Secondary use
- 9. JA-GHI European Joint Action to maximise the impact of the EU global health strategy



In wellbeing services counties

challenges are related especially to services for children, young people and families as well as to services for older people

there is need to strengthen the integration of the services

rebalancing programmes has prepared and carried out since accumulated deficit

solutions are sought by developing operating practices and electronic services as well as by reforming service networks

planning, decision-making and implementation of reforms takes time; wellbeing service counties are quite in the beginning of the road

Tiina Hetemaa