

# Structure of the future integrated social and health care

Vesa Jormanainen Head of Unit Operational Management THL 12th April 2017

#### HEALTH, SOCIAL SERVICES AND REGIONAL GOVERNMENT REFORM

3.5.2017

## Current Situation: Organising Social and Health Services in Mainland Finland

#### **Health services**

- Municipalities (local authorities, 295 in mainland Finland) are responsible for arranging health services
- Hospital districts (20 in total) are responsible for specialised medical care. A municipality has to be part of a hospital district to arrange specialised medical care.
- **5 specific catchment areas** are responsible for arranging highly-specialised medical care

#### **Social services**

- **Municipalities** (local authorities) are responsible for arranging social services
- Municipalities are members in joint municipal authorities of **special welfare districts** (15+1 in total) that arrange services for people with developmental disabilities.

## Current Situation: Freedom of Choice in Finland

- In health services freedom of choice is different between public and private services
- Possibility to choose public health center and place for specialised medical care
- Reimbursements for private services (Kela; The Social Insurance Institution)
- Customers can have emergency care anywhere
- Non-ungent care abroad
- Occupational health care

- In social services customers can participate and affect on planning of their services
- Customer vouchers in services for elderly and disabled, and in child and family services
- Tax deduction for certain social services (house work and home care)

### New Functions of the Counties as of 1 January 2019



# Freedom of choice is part of the health and social services reform

Health and social services reform in basics:

- Building up 18 new counties
- Transferring responsibility of health and social services from municipalities to counties
- More freedom of choice for customers



# Freedom of choice is part of the health and social services reform

The objective of the reform is to ensure equal and modern health and social services at reasonable costs. As part of the reform, freedom of choice will be improved for clients of health and social services.

The objective is to give clients faster access to care and improve their opportunities to influence the services they use in different life situations.



## New Freedom of Choice System in Basics

- From the beginning of 2019 customers can choose their health and social services centre and a unit for oral health services from a whole country area
- Services centres need to provider certain service package defined in the act on the freedom of choice, mainly primary level health services and social guidance
- From the beginning of 2021 service provides need to provide more services, for example social work and mental health services
- What will change:
  - Customers can chooce between public and private providers
  - Customers fees are at the same level



## Clients can choose more individually than today

Service provides can be county-owned companies, private enterprises or organisations. The service provider must be registered, fulfil the requirements set by the county and have an agreement with the county.

The health and social services centre and the unit for oral health services are responsible for all services assigned to them. They can grant a customer primary vouchers for buying a particular service from other providers.



Customers will get support for their choices online, through a telephone helpline or from service counsellors. If they don't want to choose them self, the county will direct them to suitable services.

## County's own service provision

- County also need to provide services which are not offered by the health and social services centre, for example social services, 24-hour services and specialised medical care.
- The client can choose a public sector service unit amongst all public units in the country.
- The public care facility for specialised medical care will be chosen together with the referring GP



## Extended voucher and personal budget

- When necessary, the county company grants an extended voucher for carrying out the client care plan.
- The county decides on the services and the client chooses a service provider amongst the registered service providers around the country.
- The county is responsible for the costs and the client pays the client fee, which is the same for all providers.
- With the help of personal budget, elderly clients and persons with disabilities, for example, can influence the content of their support and choose their service provider.
- The client can decide, within the limits of his/her care plan, for which services the money is used and who is the service provider. The services can include, for example, a personal assistant or transport services.

## Choices in different life situations

Counties have the overall responsibility for the services. Health and social services centres and units for oral health services have the corresponding responsibility for providing the services within the scope of wide freedom of choice.





## Digitalisation

Digitalisation will enable the provision of services in completely new ways and more effective processes.

Electronic services will also encourage residents to independently maintain their functional capacity and health.

Basic principle of ICT solutions: client information can be used across the boundaries of organisations and regions.

Government policy: strong national steering

Counties' joint ICT service centre and joint procurements

Each county must ensure that clientrelated information is transferred efficiently between different providers.

## Time frame for the regional government reform



## The reform will be implemented gradually





## Thank you!

## regionalreform.fi

MINISTRY OF SOCIAL AFFAIRS AND HEALTH • MINISTRY OF FINANCE

HEALTH, SOCIAL SERVICES AND REGIONAL GOVERNMENT REFORM

16 3.5.2017