Key findings from DIGIQU@LPUB hospital and health care sector: the Finnish case

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Some background data

- Structure of the health care system:
  - In the beginning of 2023 responsibilities for health and social care were transferred from 309 municipalities to the 22 welfare counties.
  - The social and health care sector employs about 400,000 persons, about 15% of all employees.
  - The majority of hospitals in Finland are public. University hospitals and central hospitals of the hospital districts are responsible for the most demanding medical operations.
- Possibilities for digital health care
  - The individual social security number for each Finn was introduced in 1962.
    - Data on sickness, utilisation of health care, vaccinations, medicines, etc. are gathered on individuals on the basis of the social security number.
  - Processing and analysing the data give possibilities for a digital health revolution.
  - The National Archive of Health Information (in use since 2014) provides for electronic prescriptions, a pharmaceutical database, clients' own pages and a patient data repository for the health care personnel.

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The case study

- Digitalisation opens up possibilities for tele-medicine.
  - The pandemic sky-rocketed the utilization of digital services
- There is strong belief that digitalisation is good for society in general (over 50% believe this), and that digitalisation also has a positive impact on the general level of employment (40% believe this).
- General questions on societal impacts produce more positive answers than general more specific questions on impacts of digitalisation on one's own job.
  - Only 24% think that their jobs now are better because of digitalization.
  - "We have to massively report various things into our systems. In particular, this need is important in intensive care. I sometimes have the feeling that I spent more time with the computer and the digital systems than in taking care of my patients."

- "Digitalisation has produced lots of good things in our work. For example, we can in advance see patients' histories, i.e., which kind of sicknesses they have had, which kind of medicine they are getting, etc. The problem is that we have a couple of digital systems, good in themselves, but the problem is that they do not properly communicate with each other. We have to commute between different systems, and it is time-consuming and frustrating. Additional problems are that digital systems between the health care and social services are not totally compatible with each other."

Not only employees

- The development of new digital platforms is not enough.
- Digitalisation and robotics make the work of employees in health care and public services easier, but at the same time, sufficient resources must be guaranteed to support employees' digitalised work.
- But neither is it sufficient that employees in the social and health sector master all ICT technologies used in their workplaces.
- Effective utilisation of digital services requires skills and knowledge also for clients.
- It is particularly important to note special needs among those in a vulnerable position (the elderly, immigrants, people with disabilities and other special groups), who may not have sufficient resources to acquire digital skills or equipment.
- In the future, it is important to invest in the availability and accessibility of services in such a way that citizens receive services equally.
- The main challenges for and opportunities of the trade unions are not linked to digitalisation.
  - The main sectoral challenges deal with the shortage of labour in the social and health care sector.