

# Evaluation of Health and Social Services after the Health and Social Services Reform in Finland

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# Content of the Presentation

- Introduction to the Health and Social Services Reform in Finland
  
- 1) Evaluation data as an argument for decision-making
  
- 2) Evaluation as a part of steering of the health care and social welfare system
  
- 3) Availability of evaluation data and the secondary use of data on health care and social welfare



# Population Structure of Finland

|            | Finland                 | France        |
|------------|-------------------------|---------------|
| Population | 5,5 millions            | 66.99 million |
| Area       | 338 449 km <sup>2</sup> | 643,801       |

| Age     | Year | 1900 | 1950 | 1990 | 2000 | 2010 | 2017 |
|---------|------|------|------|------|------|------|------|
| 0–14 %  |      | 35,0 | 30,0 | 19,3 | 18,1 | 16,5 | 16,2 |
| 15–64 % |      | 59,6 | 63,3 | 67,2 | 66,9 | 66,0 | 62,5 |
| 65 > %  |      | 5,4  | 6,7  | 13,5 | 15,0 | 17,5 | 21,4 |



# Introduction

## The Health and Social Services Reform in Finland

# What is the Core of the ongoing Reform?

- New administrative level - 18 counties - between central government and municipalities
- Counties will take over Health and Social Services and some other duties from municipalities
- Services will be financed by central government instead of independent municipalities
- Introduction of the Freedom of Choice
  - ⇒ Central gov. spending limits increase by 1/5 (12 billion euros)
  - ⇒ Option to choose between public, private or third-sector service providers; currently public service



# What are the Objectives of the Reform?

- To ensure equal and adequate social welfare and health care services to the population,
- to narrow down the differences in people's wellbeing,
- to limit costs of the health and social care system.



# What are the Direct Outcomes?

- Due to the Freedom of Choice, services will be provided extensively by private firms and corporations
  - ⇒ Operation logic based on markets and business
- Due to the Freedom of Choice, improved access to services
  - ⇒ Increase in service demand
- Due to central government finance, Health and Social Services finance will be under central government control and spending limits
  - ⇒ Possibility to limit Health and Social spending



# What are Possible Challenges?

- Is it possible to provide equal and adequate social and welfare services; and
  - simultaneously to restrain costs increase?
- Politically sensitive, re-allocation of power in society.
- Uncertainty regarding the merger of 190 municipal organizations to 18 counties
  - with simultaneous implementation of the freedom of choice
  - private service providers





# The Health and Social Services Reform in Finland

The aims of the reform are to ensure equal and adequate social welfare and health care services for the population, to narrow down the differences in people's wellbeing and to restrain costs of the health and social care system.

The reform will transfer the organization and integration of health and social services from 190 municipal organizations to 18 counties.

The freedom of choice will improve access to services as clients may choose freely between public, private or third-sector service providers.

The legislation is at the moment in the process in Parliament.



# Financing of the Reform

- The financing of the reform is a part of the public finance plan of Finland.
  - The reform is expected to save EUR 3 billion by 2029. The limit for the annual growth of costs will be 0,9 % as the growth rate is now 2,4 %.
- This will be done by
  - strengthening central government steering of health care and social welfare,
  - simplifying the existing multi-channelled financial resourcing,
  - improving management and modernizing services using information technology.
- The central government will finance the public health and social services through the counties to the service providers.
- The Ministry of Finance will annually negotiate financing with each county. For negotiations, the Ministry of Social Affairs and Health will evaluate sufficiency of financing for organizing equal availability of health care and social welfare services in each county.



1.) Evaluation data for  
argumentation and  
decision-making

# What is the role of Ex ante Evaluation for Political Argumentation?

- Even though, the reform is political, arguments are supported by pseudo-scientific arguments – the political debate is based on fragmented details.
- ⇒ Evaluations are used as authoritative sources
- ⇒ In practice, the reform is highly complex;
- ⇒ Increased need for contextual awareness for evaluators.



# What is the Information Basis for the Reform?

- The preparation and basic information of the reform are derived from the current system of health care and social welfare.
- The targets of the new systems and estimates and calculates of prospective costs of the systems are based on the retrospective data.

# What is the Basis of the Evaluation Data for decision-making?

- International experiences and scientific information have been studied and applied to the Finnish context.
- New national indicators to be used for the evaluation of health and welfare adapted to the reform are developed.



2.) Evaluation as a part of steering of the health care and social welfare system

# Role of Evaluation for Steering of the HCSW System

- The importance of the high quality evaluation data as part of the health and social care management system is well recognized in the reform.
- It should allow us to implement a state-of-the-art information based management system of such a reform.

**HCSW = Health care and social welfare**





# What are the Different Steering Roles?

- Research, Stat. and Evaluation Authority
  - evaluation on counties' ability to organize services
- The Ministry of Social Affairs and Health
  - evaluates sufficiency of counties' finance to organize services; taking into account equal availability of services
- The Ministry of Finance
  - Decides the finance for counties; possible exceptional measures



# Evaluation of counties' ability to organize social and health services

## The Ministry of Finance

- will **decide special actions** for evaluation of a county based on indicators and analysis of the financial statements or the initiation of the Ministry of Social Affairs and Health.
- will be responsible for steering and develop national information politics and data administration.

## The Ministry of Social Affairs and Health

- will **steer counties** according to the aims of national health care and social welfare
- will **evaluate sufficiency of counties' financing for organizing equal availability of health care and social welfare services.**
- will be responsible for implementation and evaluation of information politics and data administration of healthcare and social welfare.

## National Institute for Health and Welfare

- will define **the minimum level of the content for data** on health and welfare of the population and the quality, costs and effectiveness of health and social services.
- will produce **the expert evaluation** on counties' ability to organize services based on
  - information received from counties,
  - follow-up information on populations' health and welfare,
  - quantitative and qualitative evaluation data based on national indicators.

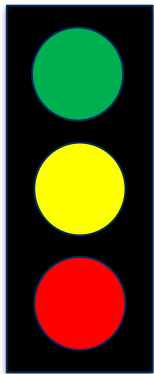
# Evaluation of Counties' Ability to Organize Social and Health Services

## Performance ability:

- Availability
- Equality
- Quality
- Cost-effectiveness
- Customer orientation



**18 counties**  
Organizers of  
health care and  
social welfare  
services



## Qualitative evaluation:

- Good
- Moderate
- Tolerable
- Poor



## Classification of services:

- Basic health care services
- Social welfare services
- Special health care services

# Information Management Services Required by the Freedom of Choice

Database on choices  
of service providers  
made by clients



Database on all  
service providers of  
health care and  
social welfare in  
Finland conducted by  
the Population  
Register Centre



Database on society  
responsibilities of  
service providers

Database on services  
received by clients and  
reimbursements paid to  
service providers in each  
county



Database on services  
and contracted service  
providers organized by  
counties



Mainly conducted by the  
Social Insurance  
Institution of Finland

3.) Availability of evaluation data and the secondary use of data on health care and social welfare

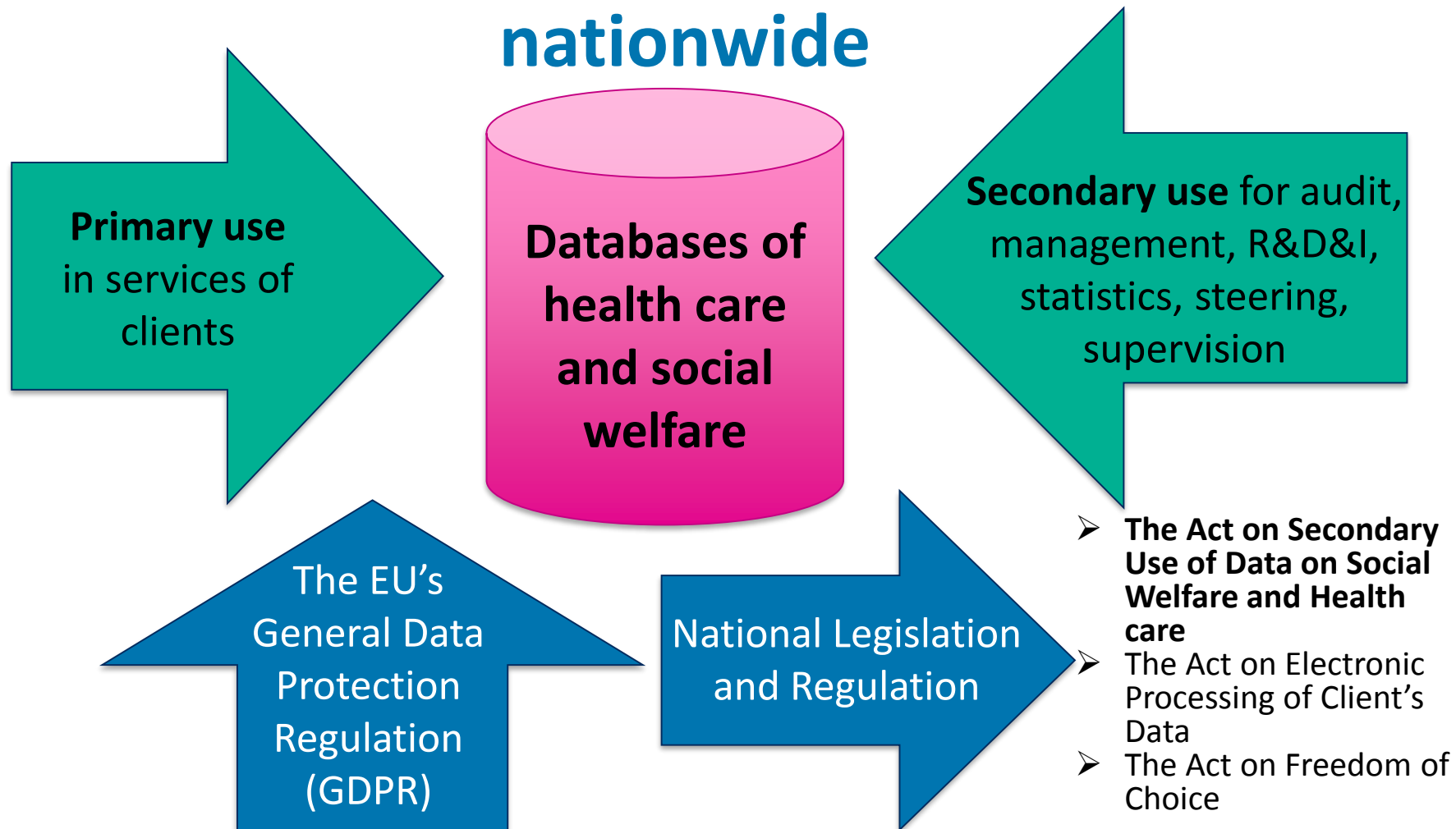
# How has the availability of data been ensured?

- New authority (Authorizing Body) that
  - issues a permission for the secondary use of data on health care and social welfare
  - Collects and consolidates, and if necessary, anonymizes data from different servants
- ⇒ One centralized official registrar that is responsible for data protection and safety according to GDPR<sub>1</sub>
- ⇒ Easy to use broad data for evaluation



1) EU General Data Protection Regulation

# All necessary data will be available nationwide



The processing of personal health data for historical, statistical or scientific purposes shall be allowed only with the consent of the data subject or if the processing serves an exceptionally high public interest, cannot be performed otherwise and is legally authorized (Di Iorio CT *et al. J Med Ethics*, 2014).

# Basic Quality Criteria for Data

Preconditions for data production and the content of basic information to be used for national evaluation, follow-up and steering of health care and social welfare:

- Data is extensive, actual, relevant and comparable.
- Data is gathered from both public and private service providers.
- Data is reliable, registered correctly and based on comprehensive national classification of services.
- Data is easy to use and enables effective utilization for different purposes.

National responsible organizations of the data production on health care and social welfare:

- Ministry of Social Affairs and Health
- National Institute for Health and Welfare
- Social Insurance Institution of Finland
- Population Register Centre



# Thank you!

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# Thank you!

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