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The Finnish Association of Health and Economics

When, why and how was the Finnish Association of Health and Economics founded?

The Finnish Association of Hospital Economics (which became The Finnish Association of Health and Economics in 2010) was founded on the 9th of September 1928 in Helsinki, Finland. Jointly set up by the directors of administration and directors of finance in Finnish hospitals, the purpose was to develop the activity and enhance the interests of these hospital officials groups.

From the beginning the aim was to form networks and connect with colleagues working in the same sector and to arrange specialised education. In 1933 the first publications by the association were launched. There was a halt in the activity of the Association during WW2, but 1947 - 1955 was a time of rapid enlargement in terms of activity. At this time the membership base also grew with the association opening up to include other hospital officials working in different fields. From the start, the Association was in close contact with the similar associations in the other Nordic countries. This connection was very close until the beginning of the 1990s and also with Denmark after 2000. Cooperation with the German Association of Hospital Managers began in the late 70s.

Before the period of severe economic recession in Finland at the beginning of the 1990s, the number of members in our association was at its largest with about 1,500 professionals from different fields of the health sector. Now the Finnish association has around 1,100 members.

How long has the association been a member of the EAHM?

The Finnish Association joined EAHM in the 1970s, shortly after the EAHM was founded. Before that, the Finnish association was a member of the IHF, but the membership was withdrawn after joining EAHM. The Association arranged EAHM Congress in Tampere, Finland, in 1996.

What is the role of your association and what are its main activities?

We are the link between people interested in health, health economy and health education and those who are working in hospitals, health centres or other sectors of healthcare system. We publish our own magazine "Health and Economy" six issues per year. We are proud of our magazine, of its content and outlook.

Once per year the association arranges a twoday Health and Economy Seminar in one of the major cities in Finland. The programme consists of a great variety of interesting and up-to-date topics on the health and social sector. The event also includes separate smaller sessions for health professionals working in different sectors, for example in maintenance, nutrition, logistics or the IT sector.

There is also an annual one day health policy seminar in Helsinki. The seminar programme always includes prestigious speakers and a panel with representatives from Ministry of Social Affairs and Health or other top professionals from both the private and public sector.

Are there any particular important achievements or developments within the last few years that you would like to share with your European colleagues?

In recent years our members have been very active in the planned large reform of the Finnish social and healthcare system. Many of our members are in very prominent positions within the Finnish healthcare system. There has been for example a lot of discussion about the sufficient population basis, which would form a new social and health service area, the role of hospital districts and the relationship between primary and secondary healthcare and also social services. A current contentious issue has been the question of how to arrange the health service system for the elderly. The relative amount of Finnish senior citizens within our whole population is growing fastest in the whole Europe.

Do you offer training programmes for hospital managers? Is there an accreditation system for hospital managers in Finland?

The Finnish Association of Hospital Managers has been an associate member of The Finnish Association of Health and Economics from the beginning of this year. The hospital managers arrange, of course, different courses and sessions on their own, but in the future it is possible that we will connect some training for hospital managers inside our Health and Economy seminars, which I previously mentioned. There is no systematic or certified accreditation system for hospital managers in Finland. The hospital managers in our hospitals have different backgrounds and education, but all of them are highly qualified and trained managers.

The EAHM is currently concerned about the implementation of the European Directive on Cross Border Care. Is your association, and Finland in general focusing on this too? Is patient mobility an important issue?

There has already been some cross border patient mobility before this Directive. In Finland, we have also discussed internal mobility, because so far the possibility for the patient to select his/her location for hospital services has been very limited outside the patient's own hospital district (there are 20 of them in Finland at this moment in time). At this time, it is quite complicated to estimate, what the actual effect of this EU Directive on cross border incoming or outgoing patients in Finland. The restrictive factor

in some sense is our language, which may inhibit this traffic. On the other hand, our own level in medicine is very high and well known throughout the world already in certain fields, with one example being orthopaedics and traumatology among athletes. Also, the Finnish population, particularly the younger generation, is nowadays used to travelling and staying abroad and has excellent language skills, so the threshold for using medical services in other EU countries is constantly increasing.

Finally, what does the future hold for the association?

The future of the Finnish Association of Health and Economics is very clear. Health and social services and the economic factors linked to them are one of the main and constant topics of discussion in our society. Our association can bring knowledge and expertise in these issues, and we can play a very important role in the future of health and economics, if we chose to take it. We also believe it very important to be in contact with our sister organisations in the EU because, basically, we all have similar kinds of problems in our healthcare systems and there is still a lot to be learnt from each other.

Interviewee:

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