



Dear patients, have you ever
**felt alone throughout your
care journey?**



Dear doctors, do you feel that
**you don't see the results of
your work?**



A minimalist line-art illustration of two people sitting on a green, rounded hill. The person on the left is a man with a sad expression, hunched over with his hands clasped. The person on the right is a woman, also with a sad expression, sitting cross-legged with her hands clasped. In the center of the hill, a large, dark green, rounded shape acts as a roadblock. The text "Roadblock due to the lack of Continuity of Care" is written in white on this roadblock.

Roadblock due to the
lack of Continuity of Care



GROUP 2B

Bhairavi Balasubramanian

David Bertl

Sofia Correia

Tuomas Laakkonen



Co-Innovate:

Fostering follow-up culture in Finnish healthcare.



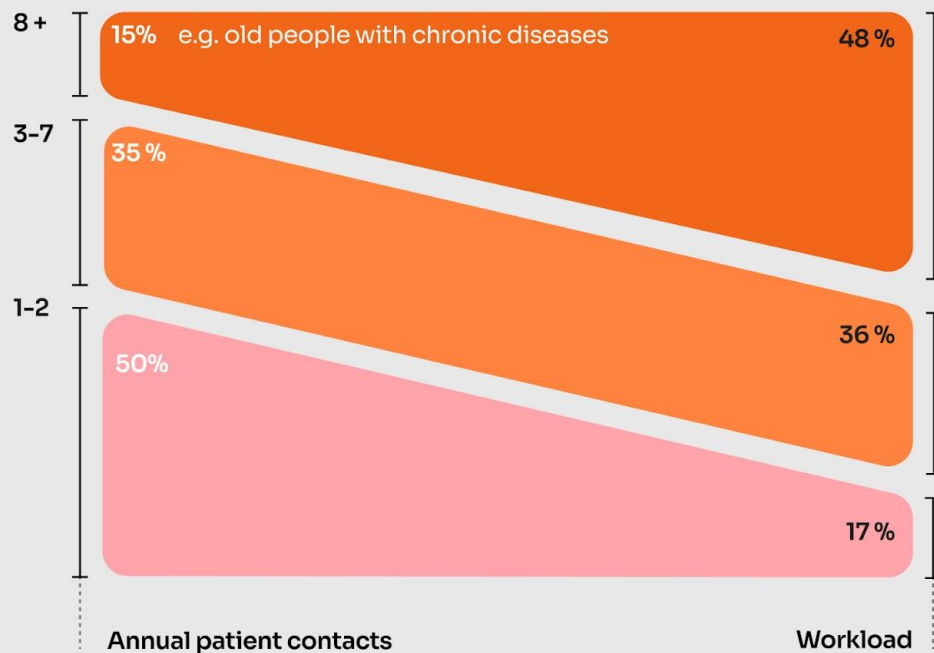
Relational
Continuity

Management
Continuity

Continuity of care

Why now ?

Informational
Continuity

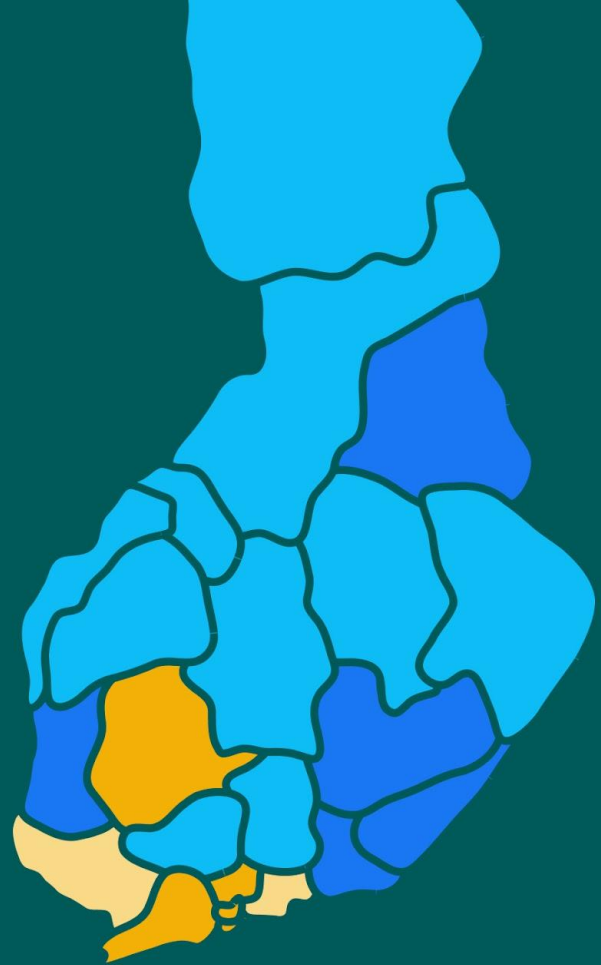
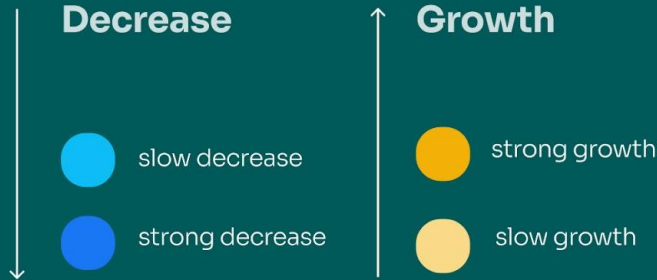


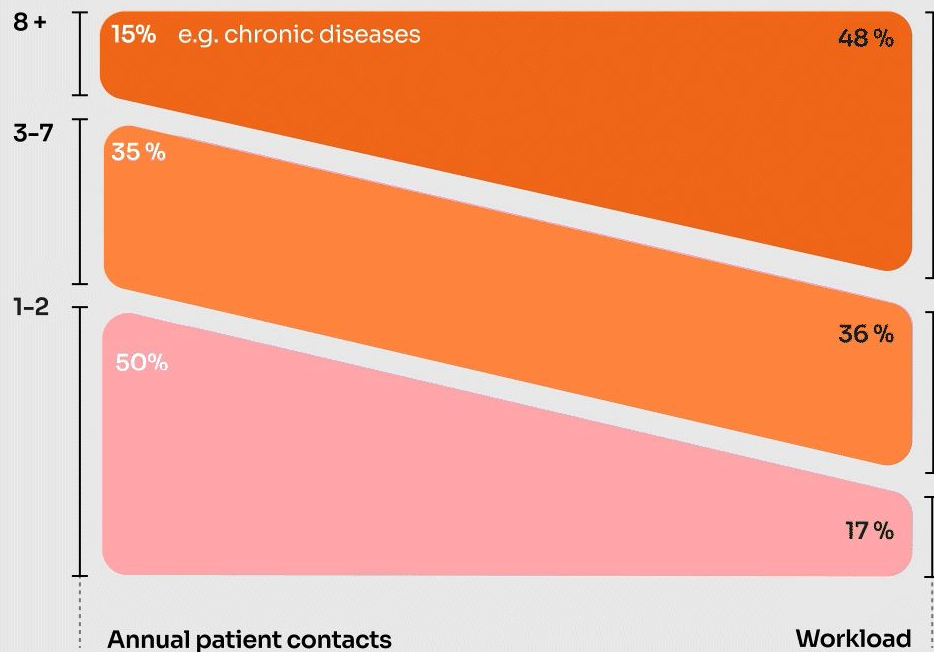
The top **15%** are responsible for **48%** of the workload.

Nummela healthcare centre. Länsi-Uudenmaan hyvinvointialue / Västra Nylands välfärdsområde.

Finland is among the world's fastest ageing populations.

State of Health in the EU; Finland; Country Health Profile 2021





**This subgroup
will create an
unmanageable
workload for the
medical staff.**

Nummela healthcare centre. Länsi-Uudenmaan
hyvinvointialue / Västra Nylands välfärdsområde, 2024



Unnecessary appointments create a lot of costs.

Nummela healthcare centre. Länsi-Uudenmaan hyvinvointialue / Västra Nylands välfärdsområde, 2024



What does Continuity of Care mean for a General Practitioner?

Who did we interview?

**Kela, head of
research**

**Private General
Practitioner at
Mehiläinen**

**Chief
Administrative
Medical Officer
at Lansi Uusimaa**

**Private General
Practitioner at
Terveystalo**

**Public GP at
Lapland health
centre**

**Director of policy
department of the
medical
association**

Continuity of care was the one thing that mattered to me because it is important not only for the patient but also for the physician [...] **It's always acute diseases and never long-term relationships. I don't want to work like this.**

Occupational physician at Terveystalo





**We will not achieve Continuity of
care if doctors and medical staff
are not satisfied.**



Excessive administrative tasks

- Documenting prescriptions
- Missing EHR patient information
- Kela statements
- Kanta delays
- Referral letters



Lack of time and flexibility

- Extra hours
- Fixed & dictated work schedules
- Personal commitments
- Lack of autonomy
- Lack of time spent with patients



Working Conditions



Unmet working skills

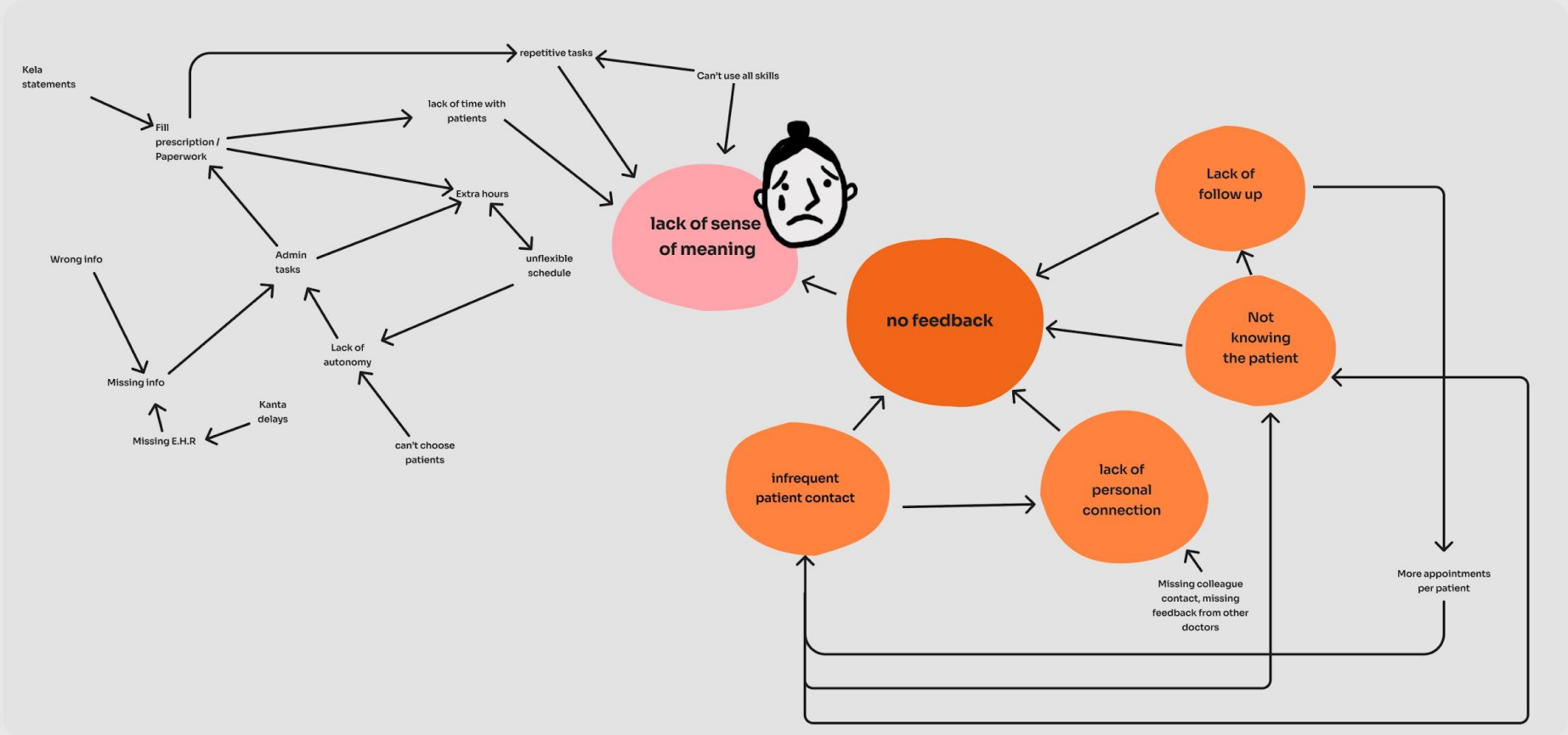
- Can't use all their skills & knowledge
- Repetitive tasks
- Appointment cases
- lack of complex cases
- lack of choice in selecting patients



Lack of sense of meaning

- not enough time to spend with patients
- no personal connection to patients
- lack of follow up
- lack of feedback about results of work

Mapping the correlations





How can we change this ?



Follow up culture

**Flattening the Roadblock towards
Continuity of Care** by implementing
follow up culture



What

Follow up :

Maintaining communication and check-ins with patients after their initial treatment.

Why

Fosters
communication
& trust

Acts as a
preventive
method

Improves
patients'
outcomes

What are the ingredients for follow up culture?

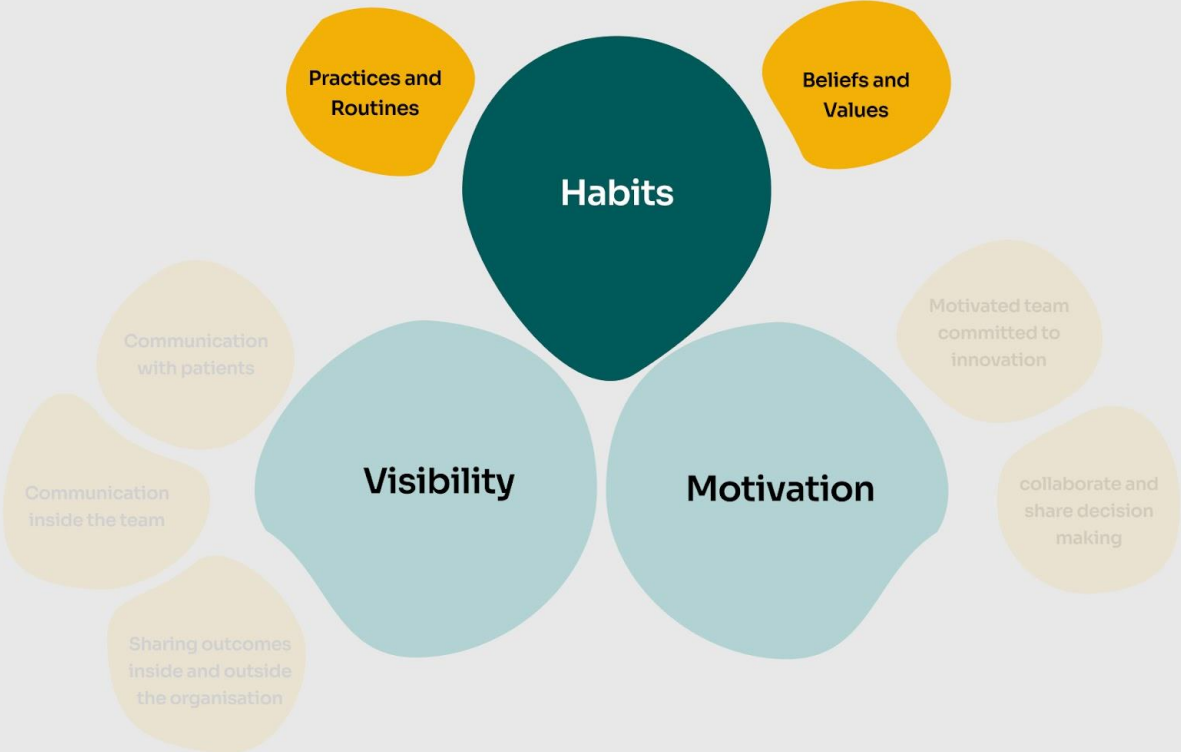
What are the Ingredients for follow up culture?



What are the Ingredients for follow up culture?



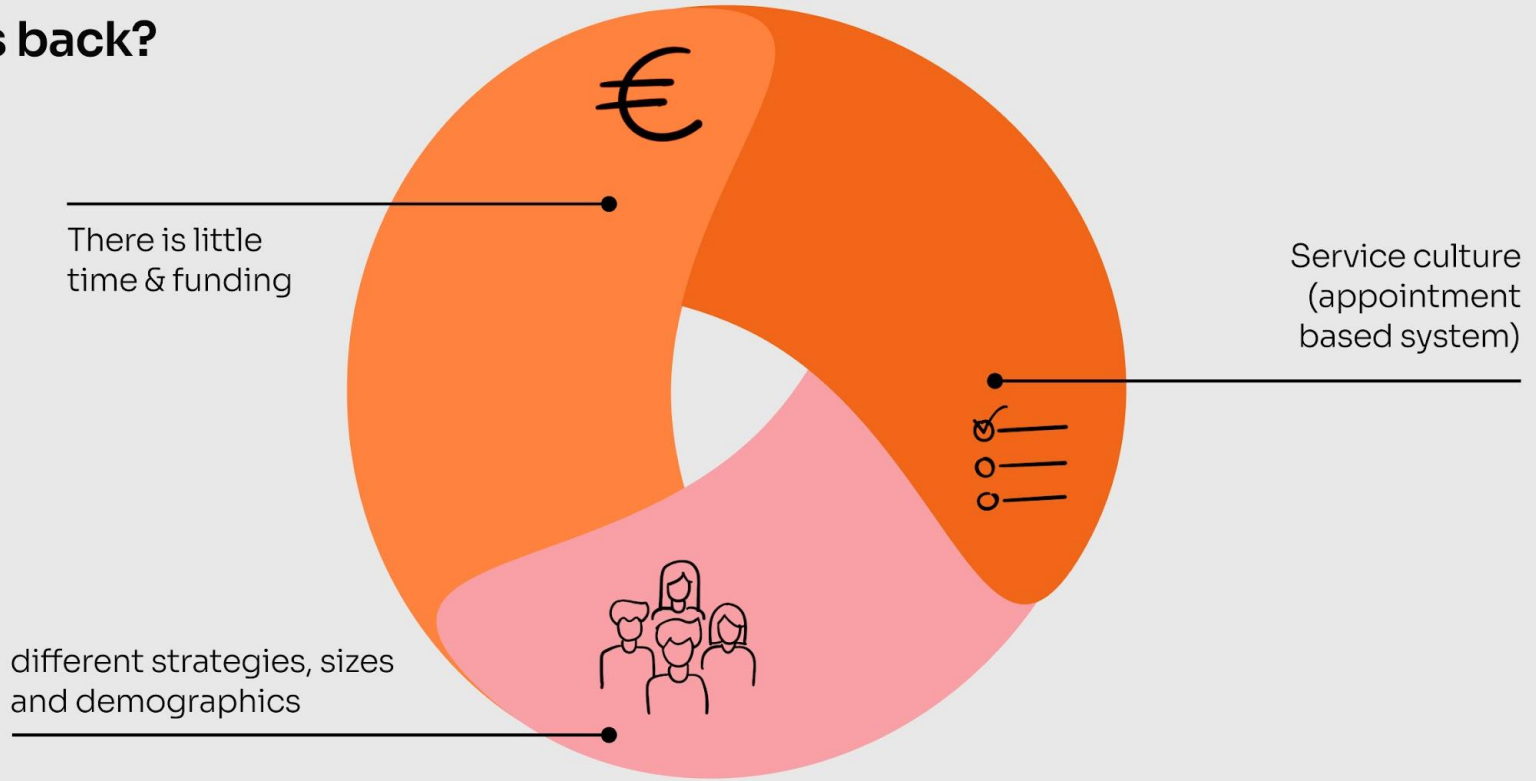
What are the Ingredients for follow up culture?



What Habits compose
Follow up culture in Finland?

How can we establish these habits
across healthcare centres?

What **problems** are holding us back?





“Teams improve and excel by tracking progress over time and comparing their performance to that of peers inside and outside their organisation.”

Michael E. Porter , The Strategy That Will Fix Health Care, Harvard Business Review, 2013

The Kela Co-Innovation Programme





Primary care system



Innovation Hub

Public blog & reports

1.

Call for Innovation

2.

Innovation Camp

3.

Implementation Phase

4.

Adoption Phase

Selection
for camp

Selection
for pilots



Creative Councils , UK
Building new innovation capacity



Primary care system



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A Brief to encourage Innovation

1.

Call for Innovation



Let's open the Programme Brief

1. Call for Innovation



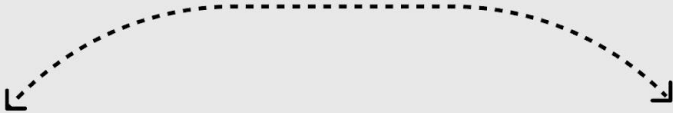
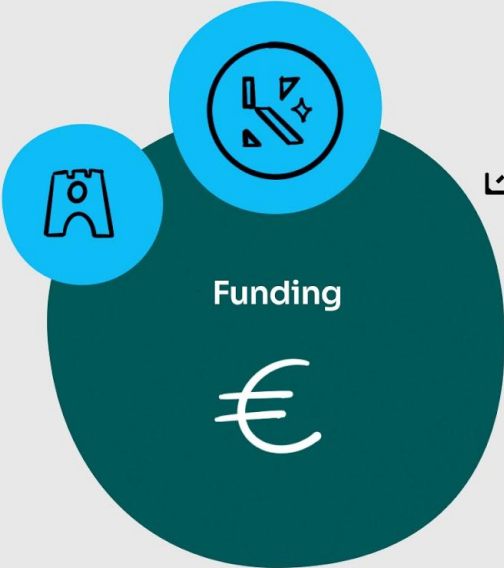
1. What do we innovate for?

2. Where does follow up culture start?

3. Assessment areas that track value created for patients & doctors

4. Kela Funding

Why would healthcare centres participate?



Kela receives proposals

1.

Call for Innovation





Primary care system



Innovation Hubs & Pilot

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Public blog & reports

Selection
for camp

Selection
for pilots

How are the Healthcare centres selected to enter the Innovation Hub?

Characteristics



Different geographic locations



Different demographics

Proposal



Innovation Potential /Motivation



Proposal Viability

Congratulations! Your healthcenter has been chosen to participate in the Innovation Camp.







Co-learning

Refine Proposals

Coaching Sessions



Co-learning

Pitching ideas

Networking

Kela receives proposals

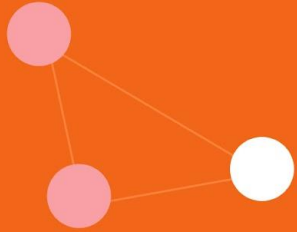
2.

Innovation Camp



How many Healthcare centres are selected for the implementation phase?

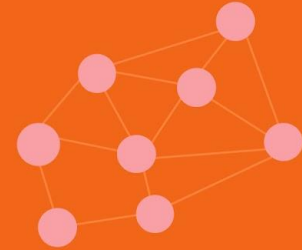
Selection



3 Minimum Viable Product comparable & different



5 Collaborative areas for healthcare



8 or more to create a multi layereded network & community



Primary care system



Innovation Hubs & Pilot

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Public blog & reports

Selection
for camp

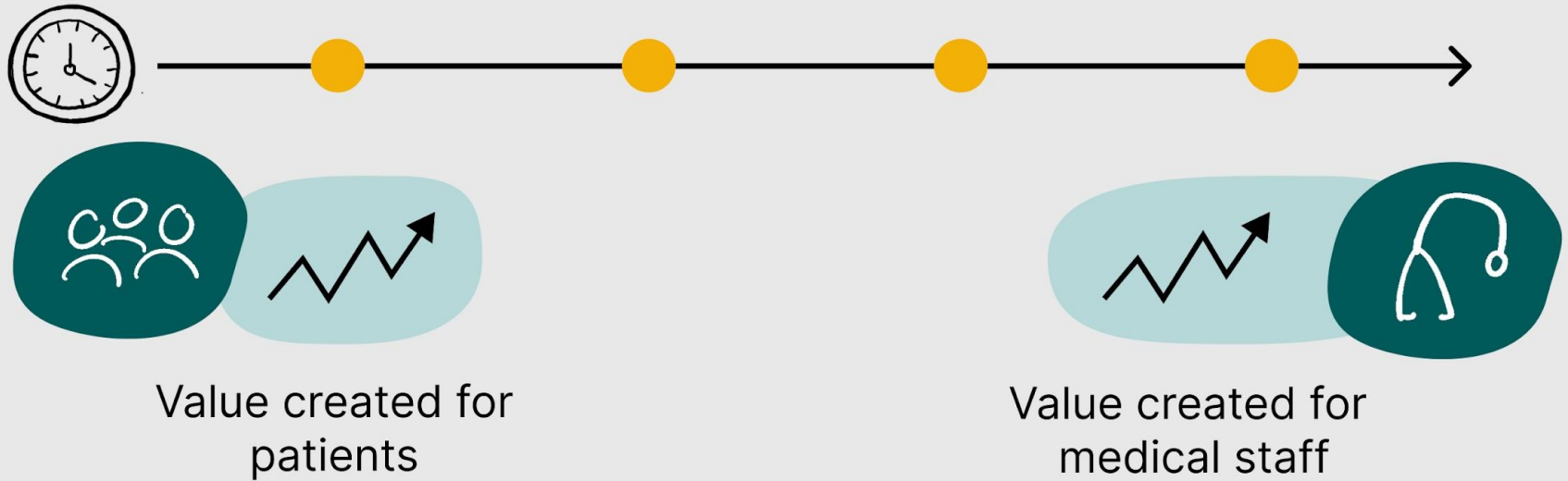
Selection
for pilots

**Teams come back to their
Healthcare centre with their
innovation plans to implement.**



Actions introduced into the workplace





Feedback Meeting within teams



(monthly)



Feedback meeting within Innovation Hub



(half year)





Primary care system



Innovation Hubs & Pilot

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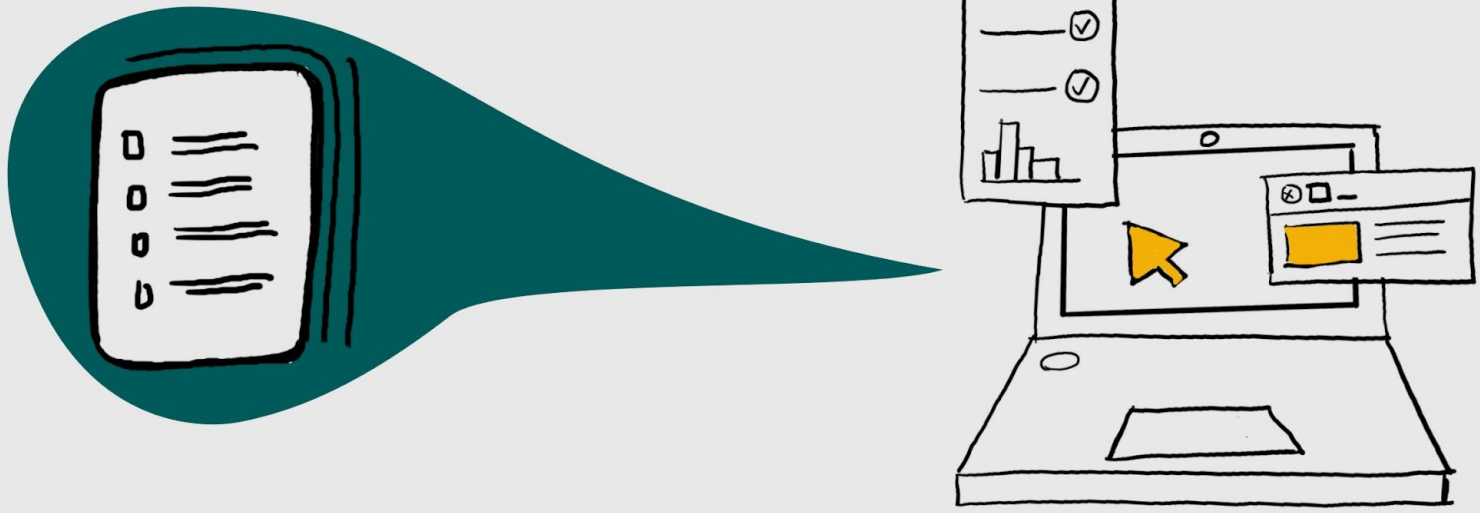
Adoption Phase

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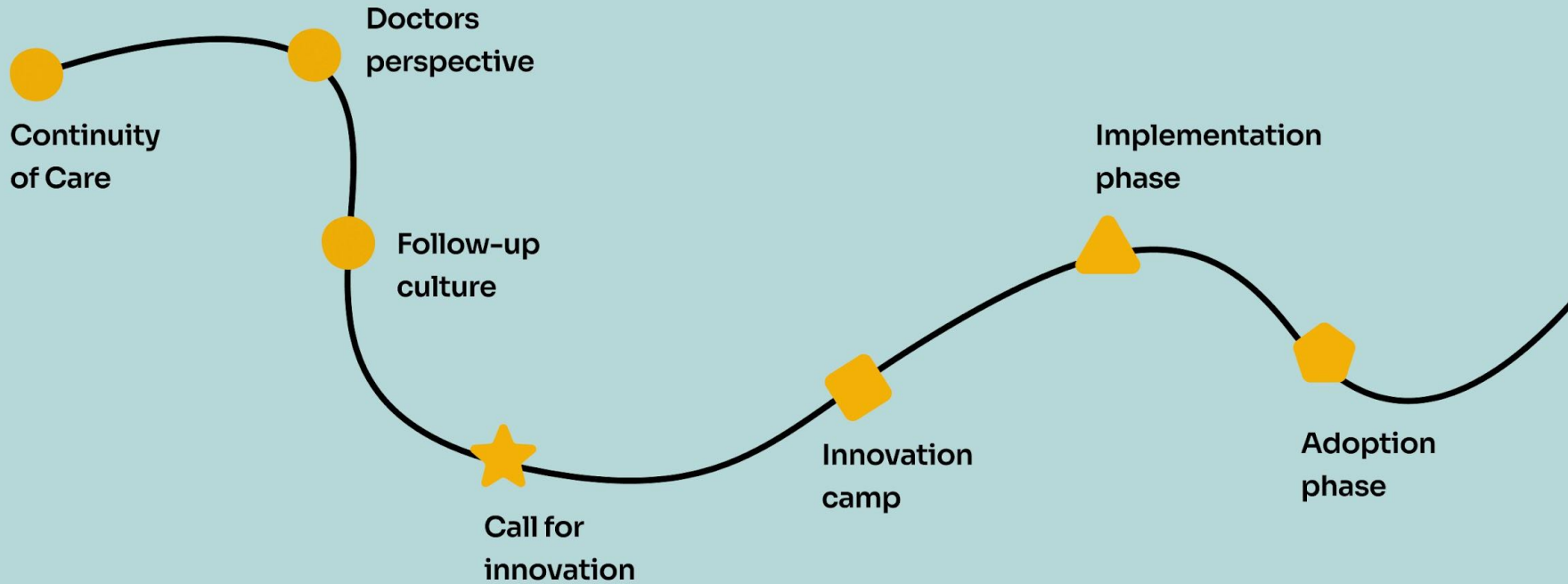
Reporting outcome of the implementation process





**A new standard on how to
integrate follow up culture in
Finnish public Healthcare centres.**

Summary



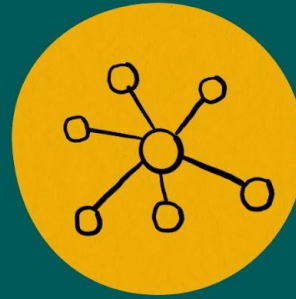
Strengths of the Programme



Encourages sharing
outcomes



Fosters positive
competition

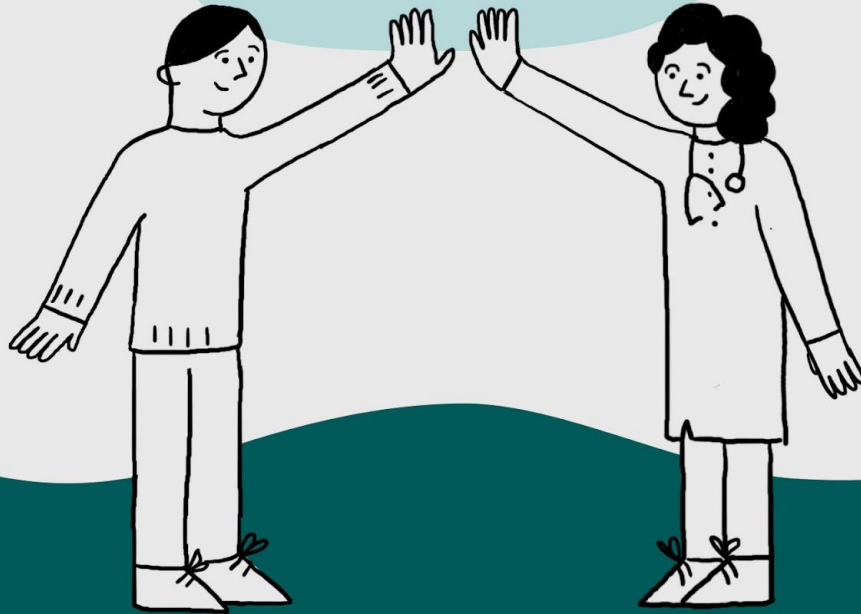


Creates
a network



Provides room to
generate innovative
solutions

Thank you



References

- Kiuru, V., & Ranta-Aho, H. (2024, April 16). Nummela healthcare centre. Länsi-Uudenmaan hyvinvointialue / Västra Nylands välfärdsområde. [PowerPoint slides].
- OECD/European Observatory on Health Systems and Policies. (2021). Finland: Country Health Profile 2021. State of Health in the EU. OECD Publishing, Paris/European Observatory on Health Systems and Policies, Brussels. ISBN 9789264439757.
- Porter, M., Lee, T. (2013) ; The Strategy That Will Fix Health Care, Harvard Business Review, <https://hbr.org/2013/10/the-strategy-that-will-fix-health-care>
- Boyer B., Cook J. & Steinberg M. ; Legible practices, Six stories about the craft of stewardship. (2013), Sitra

Quote from Interviews

- Interview of an occupational physician at Terveystalo.

All the graphics and illustration in this presentation are made by team members.