



# Regional State Administrative Agency for Lapland

**Current and future activities  
concerning health and social  
issues**



# Lapland

## Basic information:

- northernmost county of Finland and of the EU
- common border with Sweden, Norway and Russia
- total area about 100 000 km<sup>2</sup>
  - share of Finland's total area ~30%
- population about 182 000
  - share of Finland's population 3,3 %
  - about 4 000 Sami
  - age: 0-14 15 %, 15-64 63 %, 65- 22 %  
(Finland: 16 %, 64 %, 20 %)
- population density 2 inhabitants/km<sup>2</sup> (Finland 17)
- number of municipalities: 21
  - towns: Rovaniemi, Kemi, Tornio, Kemijärvi
- number of sub-regions: 6
  - Rovaniemi region, Kemi–Tornio region, the Valley of Tornio, Eastern Lapland, Fell Lapland, Northern Lapland



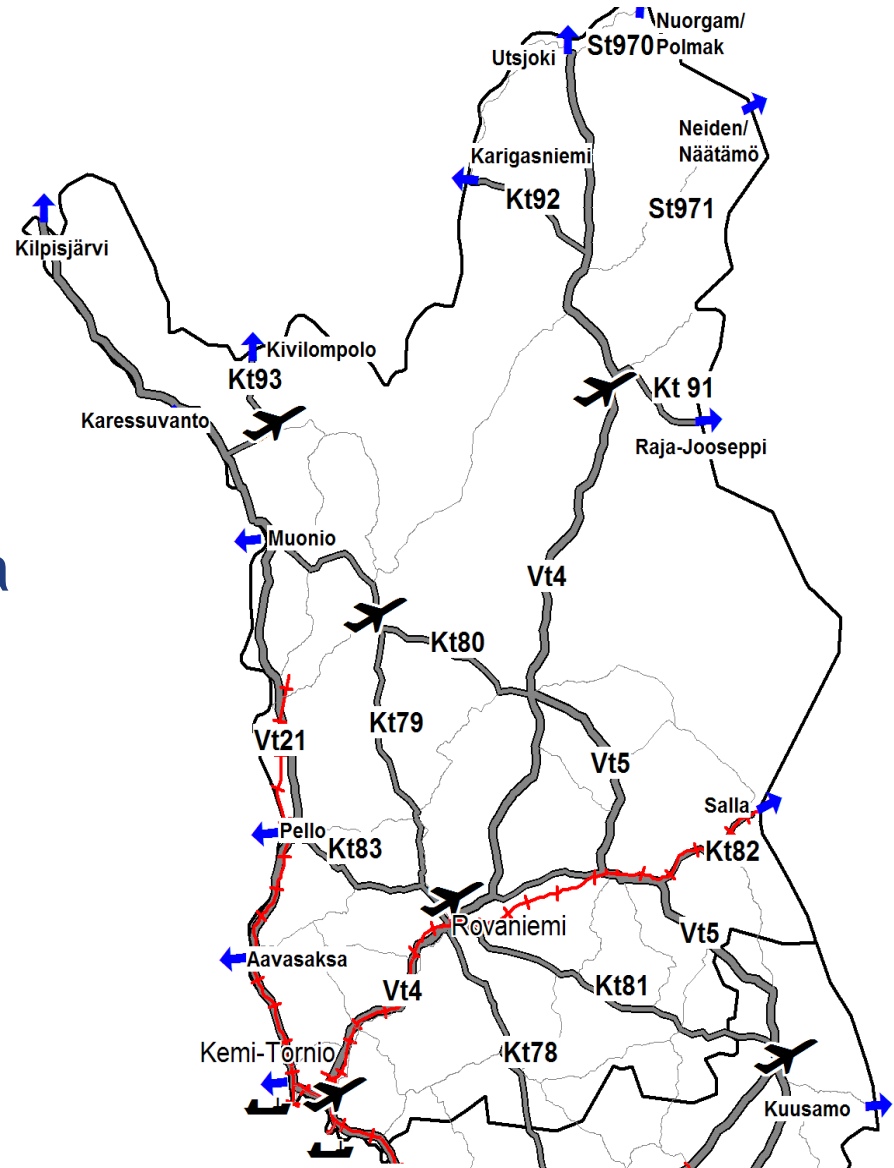


## Accessibility and logistics:

- six airports
- two sea harbours
- railways to Kolari and Salla
- 13 frontier crossing points (Sweden, Norway, Russia)

## Plans for the Arctic Railway

- three main options:  
western, northern, eastern





## The ministry's key projects

1. Services to be based on customer needs
2. Health and wellbeing will be fostered and inequalities reduced
3. Programme to address child and family services will be implemented
4. Home care for older people will be developed and informal care enhanced in all age groups
5. Career opportunities for people with partial work ability

**+ Social welfare and health care reform**



# Current situation in Lapland

## 1. Services to be based on customer needs

- Customer-oriented service chain across administrative boundaries and people's involvement
- People will have opportunities to make their own choices
- Emphasis on early support and preventive methods
- The use of electronic services enhanced
- The potential of health technology will be exploited

These topics are included in **Social welfare and health care reform in Lapland**

- Note! Sami-language services
- Client participation model (4 counties collaboration)



## 2. Health and wellbeing will be fostered and inequalities reduced

- To promote healthy lifestyles and to prevent non-communicable diseases
- To promote mental health and to prevent loneliness
- To secure healthy buildings by supporting timely and effective decision-making

**Reducing health inequalities and preventing exclusion are taken into account in all activities.**

One of the follow-up projects of the government action plan for gender inequality

Three projects

1. **Good practices** into permanent use
2. Finland of healthy **buildings**
3. Permanent structures and methods for cross-sectoral cooperation between ministries in order to promote wellbeing and health and to reduce inequalities (**HWiAP**)



# Good practices into permanent use:

- Focus on disseminating and implementing good practices systematically into a large geographical area
- Targeted on population groups whose wellbeing and health are poorer than average
- Customer participation and service design in order to reduce inequalities
- Government grants to support projects that disseminate and implement good practices within six thematic areas

## Thematic areas

1. Lifestyle counselling in social and health services and their service chains
2. Supporting the change of family nutrition and physical activity habits at maternity and child health clinics and in school health services
3. Promoting the physical health of people suffering from mental health and substance abuse problems
4. Promoting mental health skills in population and among professionals in different fields , including strengthening the suicide prevention skills social and health professionals
5. Shared kitchen
6. Promoting the physical activity of people in later life

## Topics in Lapland:

- Reducing tobacco abuse among people suffering from mental health problems and substance abuse problems (support for smoking cessation among people suffering from mental health problems and substance abuse problems)
- Improving sexual health among children, young people and families in Lapland - project just started
- Strengthening lifestyle counselling in social and health care services





### 3. Programme to address child and family services will be implemented

- Reorganising the child and family services systems
- The reform will be based on the diversity of family life and on the needs of children and families
- Services will be organised across administrative boundaries
- Parenthood and low threshold services will be enhanced
  
- County visit from MSAH has been on 13<sup>th</sup> June 2016
- Lapland's application for government grant is under work  
Family centre model, School as support for the wellbeing of children and young people **etc.**
- County reform programme on 2017-2018





## 4. Home care for older people will be developed and informal care enhanced in all age groups

- Reorganising the service system for older people
- More equal, better coordinated and cost-effective services for older people and informal carers
- Increasing home care and developing different kinds of housing
- Supporting informal carers
  
- Government grant has been applied
- Lapland's change agent will start on 1th October
- First gathering in Lapland on 17th October with MSAH
- Lapland's focus on developing
  - Regional centre for service guidance and allocation
  - New concept for home care
  - Combining housing and services



## 5. Career opportunities for people with partial work ability

- The employment opportunities of people with disabilities and people with partial work ability on the open labour market will be promoted
- The know-how of those active in service systems and workplaces will be enhanced with regard to the services, methods and benefits available
- The entrepreneurial prospects of people with disabilities will be improved
- Incentive traps relating to disability pension and earned income will be abolished

■ Work on progress 😊



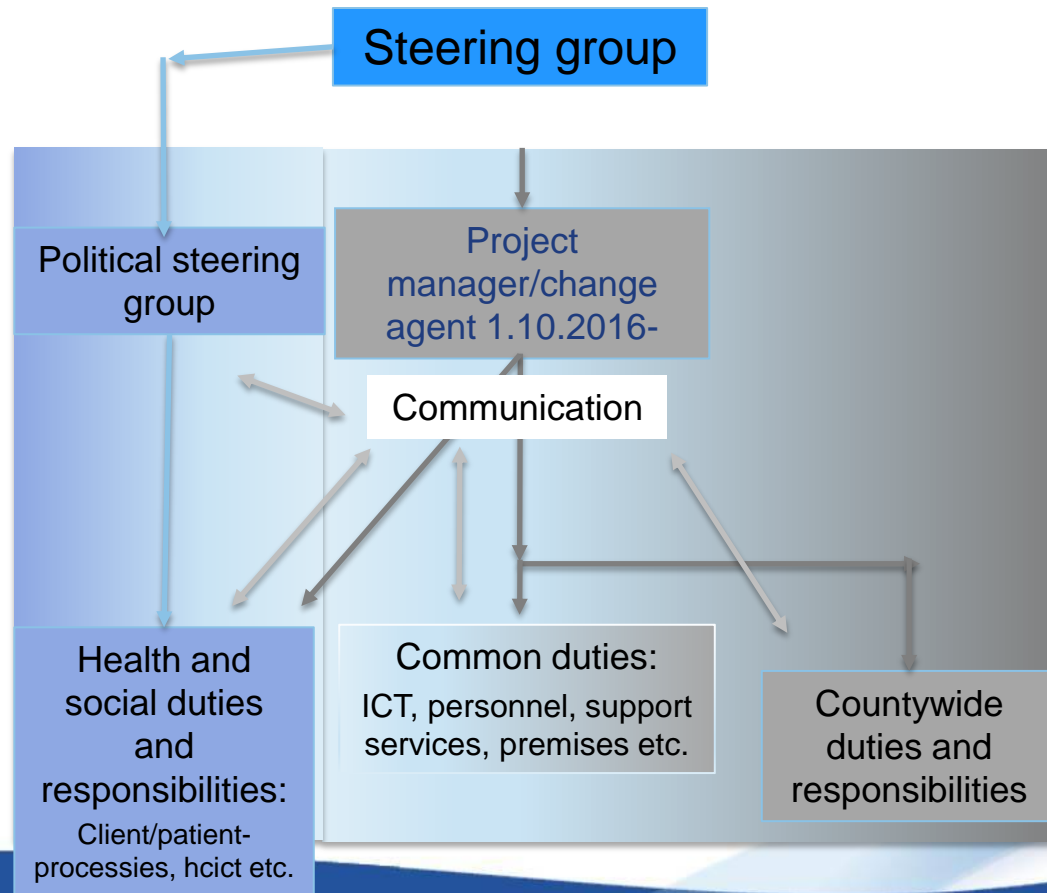
# Social welfare and health care reform

## 2019 - Solution for arranging the services

- 18 autonomous regions (counties) will be established. Counties will have responsibility for social and health care services - **1 in Lapland**
  - Also some other duties will be under the responsibility of the counties
- 5 co-operative areas based on existing specific catchment areas **Oulu university hospital area**
- Centralizing on specialized operations and emergency duties **5 areas – Oulu - North Finland**
- Counties will be managed by elected councils



# Health, social services and regional government reform preparatory process organization in Lapland





## Current situation in Lapland

- The **political steering group** of the social and health care reform in Lapland has its first meeting on the **12th of October 2016**.
- The group consists of 42 politicians chosen from the 21 communities
- This group has approximate eight months operating period before the temporary administration takes its place in July 2017.
- So far the newly chosen political steering group will give directions to the social and health care reform in Lapland.
- The group will very likely nominate several working committees in order to proceed in the process.



# Working committees had been working under following topics

**Child and family services**

**Adults psychosocial services**

**Elderly care**

**Handicapped services**

**Medical services**

**Dental care**

**Rehabilitation**

**Sami language services**

**Personnel**



# Timetable

- 5 - 10/2016 Circulation of the new bill for comments
- 11/2016 The bill will be presented to the Parliament
- 7/2017 Enactment of the new legislation
- 2018 Elections
- **1/2019 Responsibility for the organization of healthcare and social services will be transferred from joint municipal authorities and municipalities to the counties**





# Facts about Lapland

Number of municipalities: 21

- towns: Rovaniemi

Kemi

Tornio

Kemijärvi

6 sub-regions

2 hospital districts

Oulu university hospital area

Rovaniemi-Utsjoki 453 km  
Pello - Enontekiö 220 km  
Kemi-Ylitornio 90 km

