Operational Environment Is Changing
- How about the Information Systems?

The social and health care sector is undergoing organisational changes. The number of public health centres, for instance, has decreased from 229 to 172 in three years. This trend expedited by the Paras project seems to be continuing still. The change does not only pertain to numbers, but new organisations with novel duties have been created as well. Municipalities have merged, and social and health care districts, federations of municipalities, public utilities, host municipality models and various purchase agreement models for providing primary care, specialised care and social care services have been formed.

The winds of change are not only felt in the physical structures, but in legislation, implementation and steering as well. The original implementation schedule for the eArchive and ePrescription services proved to be too strict for the operational units and information systems. The three-year continuation period in the transition provision was justified and perhaps sufficient as well.

The disclosure procedure for patient information has been simplified. The patient's consent regarding the disclosure of the information is valid for the time being, covering the service providers with whom the patient is in a treatment relationship. The recent Data Administration Act aims to steer data administration in public bodies by providing field-specific joint services and support services for electronic services and administration. This goal is to be attained by ensuring that the information systems are compatible and using a joint enterprise architecture.

New organisations have been formed to ensure that these changes are implemented successfully. The KunTo project office has been established at the Association of Finnish Local and Regional Authorities to support the implementation of the KanTa services. The new unit established at the National Institute for Health and Welfare will be responsible for the operation of the data administration of the social and health care sector on the national level.

However, the intended effects of the organisational changes and the legislation on the production of health care services cannot be achieved, unless the information systems can offer better support for them than before. The development rate of the information systems would seem to be slowing down. Organisational reforms seem to be drawing the health care service providers' attention away from the development needs in their information systems, with the result that the system providers have only delivered the updates required by the changes in the regulations.

The swift stabilisation of the external operational environment would be vital for the development of the information systems. Unless that is achieved, the productivity of the health care services will not improve, either.

Ilkka Winblad
Editor-in-Chief