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General practitioner run local hospitals in Finland - The basic functions and the role in the hospital system

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Background & Aim: In Finland, practically all municipal health centers, that cover the whole country, have GP run hospital units of their own. Hospital units offer treatment for various acute and subacute reasons (e.g. pneumonia) and also treatment after in-patient care in specialized healthcare. However, the role of GP run local hospital units in the rapidly changing Finnish healthcare system is not clear. Research evidence of their tasks and activities beyond routine statistics is practically lacking.

The Aim of this study is to map the essential features of the services of these hospitals in order to contribute to the debate of their fate in the future when Finland is facing a fundamental health care reform from 2019 on.

Method: In this observational study the discharge data of the treatment periods lasting less than 31 days from 54 municipal health center hospitals in the catchment area of Kuopio University Hospital will be analyzed by recording copies of routine discharge statistics and asking supplementary structured questions for four months. The hospitals provide the data after the discharge for about 10000 hospitalization episodes. The data is collected using an internet based survey instrument.

The questions explore patient pathways to the hospital, diagnostic and treatment issues and rehabilitation measures.

The data collection has begun in December 2015 and it is proceeding.

Results: By now, the data of 227 periods of treatment show that 53% of the patients admitted came directly from home, while 36 % came directly after hospitalization in the specialized health care. The median of the duration of the treatment periods was 4 days. The most common main reason of the care was cardiovascular diseases, in 15 % of the treatment periods. We are hopeful that we can show the first results of the entire data set by the congress.

Conclusions: This study is essential in order to these hospitals can be positioned to the health care system but also when planning resources and capacity, improving quality of the care and education of the personnel.