Finnish health care ICT – at global top after all

In Finland the implementation of information technology has been criticized for failing to achieve its goals and decreasing on the information society development ranking list. Delays in the pilots of the national health care archive and e-prescribing have further strengthened this criticism. In this context it is, however, beneficial to read the most recent report of ITIF: ‘Explaining international IT application leadership: Health IT’ (http://www.itif.org/files/2009-leadership-healthit.pdf). It is an overview based on international reports through the beginning of 2009.

The report nominates three global leaders of health ICT: Denmark, Finland, and Sweden. The main criteria for the selection are comprehensive usage of a versatile electronic health record (EHR), developed executive programs, and portals for health related information. The report shows e.g. the coverage of EHR among primary health care physicians in Sweden to be 100%, in Finland 99%, and in Denmark 95%. As far as hospitals are concerned, Finland is alone at the top at 100%, followed by Sweden and Denmark with 88% and 35%, respectively. The other top ICT countries, Japan, USA, Canada, UK, South Korea, belong to the category of 3 – 10% for hospitals.

The report, otherwise, interprets writing a prescription by a computer as electronic (lucky us!), and thereafter shows the countries that transmit e-prescriptions electronically to pharmacies. Concerning the first mentioned procedure, we achieve the overrated coverage of 100%, but for the second one a factual 0%. Electronic transmission of e-prescriptions is regarded as a barometer of the degree of integration. It improves, no doubt, medication security, but represents only a small piece of the big health care entity.

It has been reported in the domestic media that information management is not enough for promoting the implementation of ICT. The ITIF report emphasizes the role of strong nation-level leadership in implementation of health care ICT – and mentions it as an explanation for the success story of Finland! The strength of leadership somewhere, e.g. in Finland, is a qualitative concept which can be used when comparing leadership in other countries. It is true that our health care service production takes place in, from an international perspective, small and independent units. However, due to facts such as our state subsidy system, national social security system and the obligation of municipalities to belong to a hospital district, all those include strong administrative nation-level elements.

We can ask whether we would have made better time if we would have proceeded by straightforward orders instead of information management. The implementation of the national electronic archive by 3/2011 is mandatory for health care by law, in other words very much by a strong administrative order. It very obviously can’t be complied to the extent that has been originally proposed. So many stakeholders and organizations and associated collaboration rules are concerned that building up a functioning entity takes time. Administrative orders serve, no doubt, as accelerators, but their execution can’t be realized before the operational environment is mature.

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