

Medical rehabilitation

As a result of Finland's demographic development the supply of labour will shrink in the coming decades while the number of pensioners will grow. This will cause pressure on the financial basis of social welfare and health care, among other things. Different measures have been taken in order to raise the level of employment and keep people in the working life longer. Rehabilitation is one tool that can be used to extend people's careers as well as help older citizens to cope with everyday chores on their own. The Ministry of Social Affairs and Health is responsible for steering and coordinating rehabilitation. In addition to education its strategy mentions rehabilitation and maintaining work capacity as preferred themes to unemployment security and early retirement.

The amount of money that is spent on rehabilitation is hard to estimate. This is due to gaps in statistical practices and also to the fact that the line between medical care and rehabilitation is difficult to define. The 2002 rehabilitation report estimated the costs of rehabilitation at 1.2 billion euros in 2000, with the state covering about 40 per cent. More recent estimates of the total costs of rehabilitation are not available. Detailed information exists on the financing provided by the Social Insurance Institution, however. In 2007 the Social Insurance Institution spent over 200 million euros on medical rehabilitation for persons with severe disabilities and discretionary rehabilitation.

Rehabilitation can be divided into different categories. The audit focused on medical rehabilitation and that part of mental health rehabilitation that is included in medical rehabilitation. Local authorities are responsible for arranging medical rehabilitation. It is financed with local taxes as well as central government transfers to local government for social welfare and health care. Medical rehabilitation is implemented in primary health care and specialised medical care. The service system for medical rehabilitation is thus two-tiered and financing is provided through multiple channels.

The main question in the audit was whether the steering and organisation of medical rehabilitation ensures access to rehabilitation services. More detailed questions concerned the rehabilitation service system, multi-channel financing and steering. These were examined by evaluating the functioning of the care chain, the national steering of rehabilitation and customer cooperation. The Social Insurance Institution's activities in the field of medical rehabilitation were described insofar as this was necessary to deal with the subject.

The audit found that cooperation between specialised medical care and primary health care does not always work as well as it should in rehabilitation. This may have resulted in breaks in the care chain, and attention should be paid to developing cooperation. Improving cooperation between municipal health care and the Social Insurance Institution is likewise important.

The audit findings indicated that there is room for improvement at the level of rehabilitation plans, which are important in rehabilitation. The position of a rehabilitation plan in the rehabilitation process is key and its proper preparation and implementation should be carefully monitored.

The audit drew attention to caregivers' expertise. The training of caregivers and particularly the basic and advanced training of medical doctors should place more emphasis on rehabilitation matters.

The audit also found that the mental health rehabilitation that is included in medical rehabilitation is subject to the same problems as other medical rehabilitation but in harsher form.

The National Audit Office considers that the activities of the Ministry of Social Affairs and Health, which is responsible for rehabilitation matters, are presently too passive. This also applies to the Advisory Board for Rehabilitation, which serves as a national cooperation body for organisers of rehabilitation. The ministry and the advisory board should take a more active role in steering rehabilitation and coordinating activities.