Integration of Social and Healthcare services in a Local setting

Exacutive summary

The Challange

How to provide social and healthcare services that people actually need in an integrated manner

How to create the necessary organisation, management and financial model as well as the necessary structures in order to ensure rapid service development that is based on actual user needs.

Social and Health services are not integrated in todays Estonia. That leads to two inefficient systems bouncing people between themselves.

The client does not know what services they need, who provides them, who pays for them and how .. and do they really need to?

To insure a good result the client must have personal relationships or the service provider must go outside of normal operation, or just luck. Preferably all three.
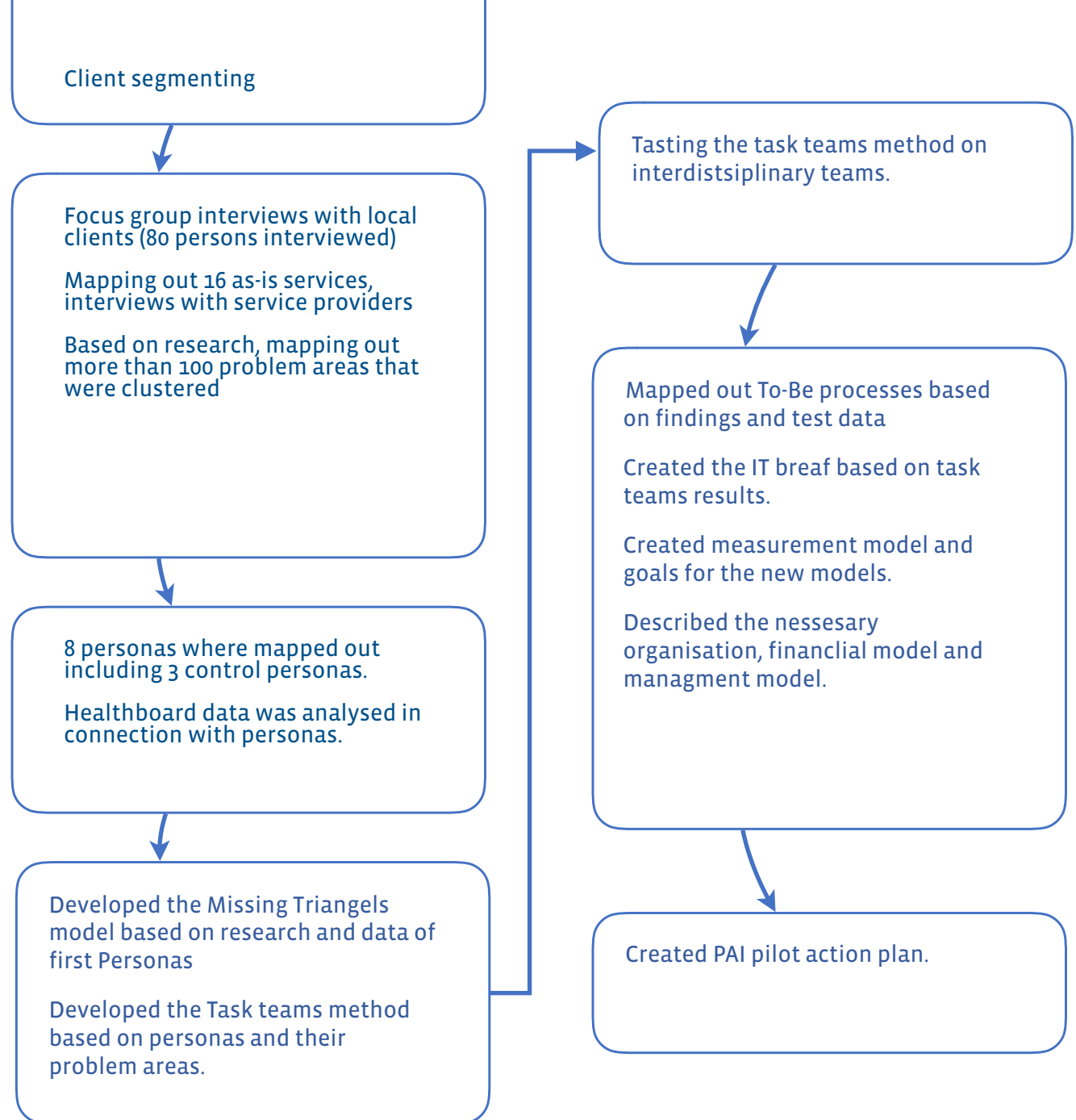
If a person does not have the necessary connections, it is very likely that the experience in bad at best and detrimental to ones long term health. That reduces the years spent healthy and happy and has an adverse effect on service providers budgets.

Projekti kulg

From September 2016 to December 2017 we went through a service design process with the goal to clarify the as-is situation and propose a new, better model and methodical approach for the necessary changes in the organisation, management, financial and IT systems etc.

The result is a basis for PAI pilot project as well as other development projects within Viljandi Hospital.

Heavily involving service provider and clients, we developed a new model how to analyse client's services and to identify problems within (Missing Triangles model) and how to create custom services and teams to provide them (Task teams model).
In addition a vision of the new organisation and service model was created, that will be the basis for the pilot.

Client segmenting

Focus group interviews with local clients (80 persons interviewed)

Mapping out 16 as-is services, interviews with service providers

Based on research, mapping out more than 100 problem areas that were clustered

8 personas where mapped out including 3 control personas.

Healthboard data was analysed in connection with personas.

Developed the Missing Triangels model based on research and data of first Personas

Developed the Task teams method based on personas and their problem areas.

Tasting the task teams method on interdistsiplinary teams.

Mapped out To-Be processes based on findings and test data

Created the IT breaf based on task teams results.

Created measurement model and goals for the new models.

Described the nessesary organisation, financlial model and managment model.

Created PAI pilot action plan.

Missing Triangels Model

In order to analyse client needs, we map out all the services the client is using and should be using. Next we analyse service as a relationship triangle, that helps us identify missing relationships to determine how these entities can work together to provide a better service.

So that Marta wouldn't be left without help just because everyone is doing what is mandated but not actually nessesary.
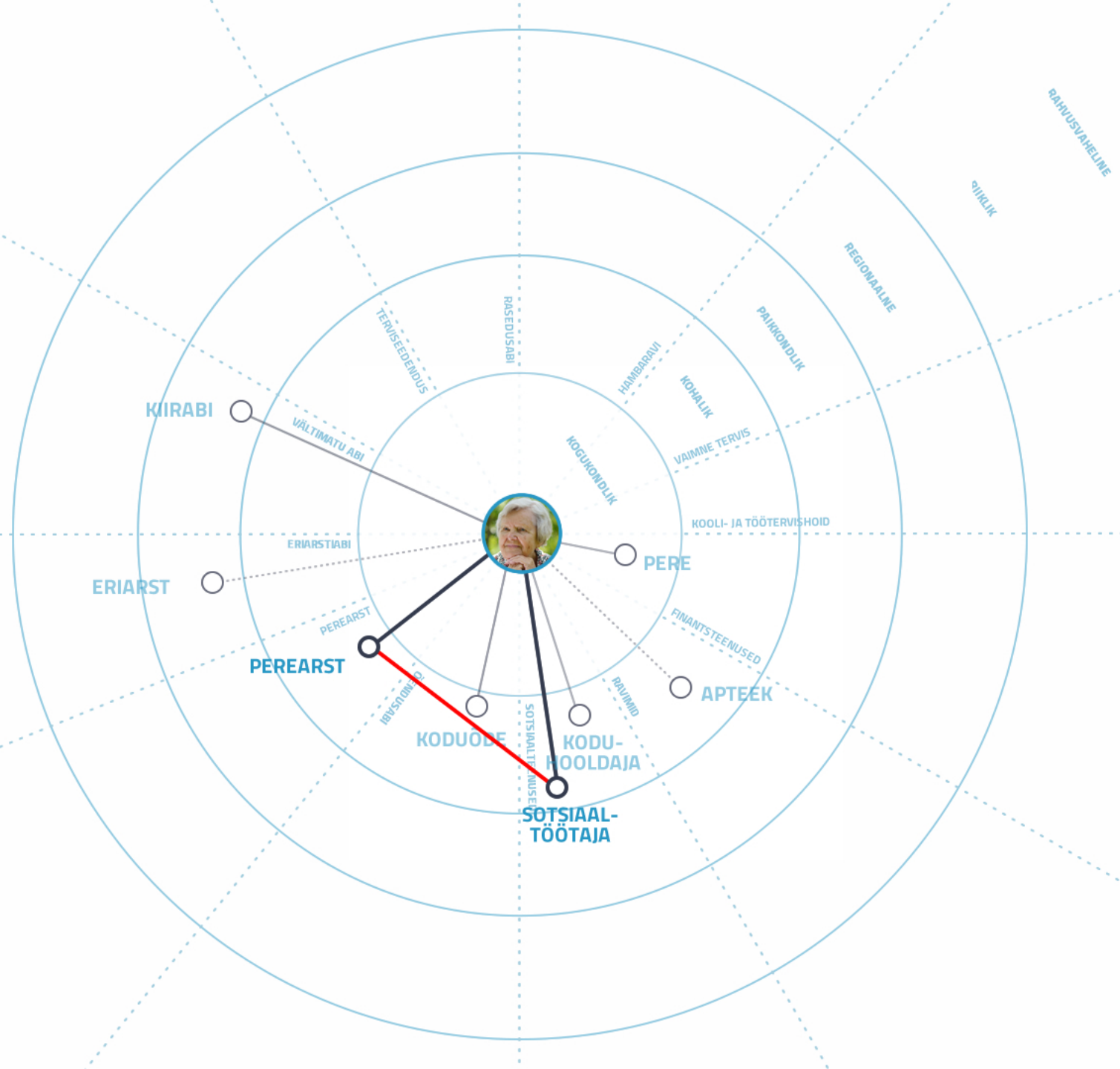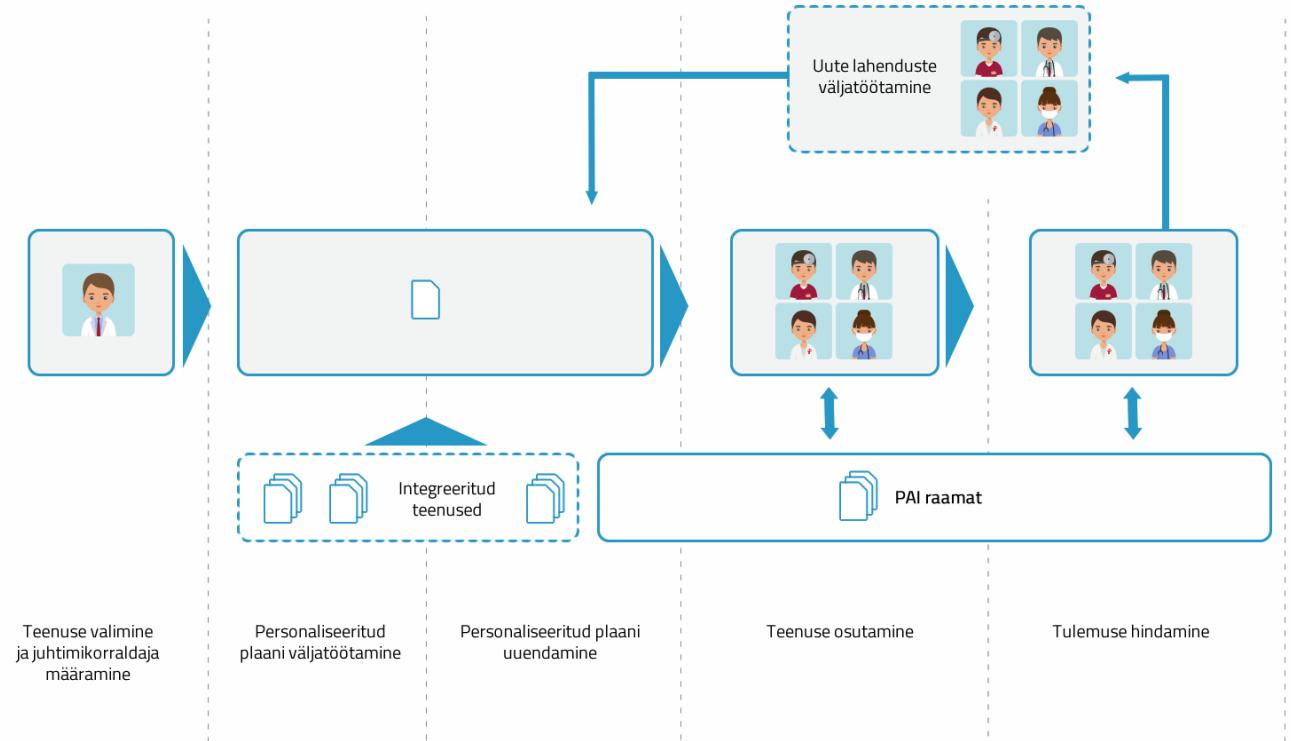
Task Teams method

In order to develop services based on actual user needs, the service providers must cluster into task teams to discuss needs and challenges, find best solutions and test their solutions in real life, then integrate best performing solutions into the normal workflow of the hospital.
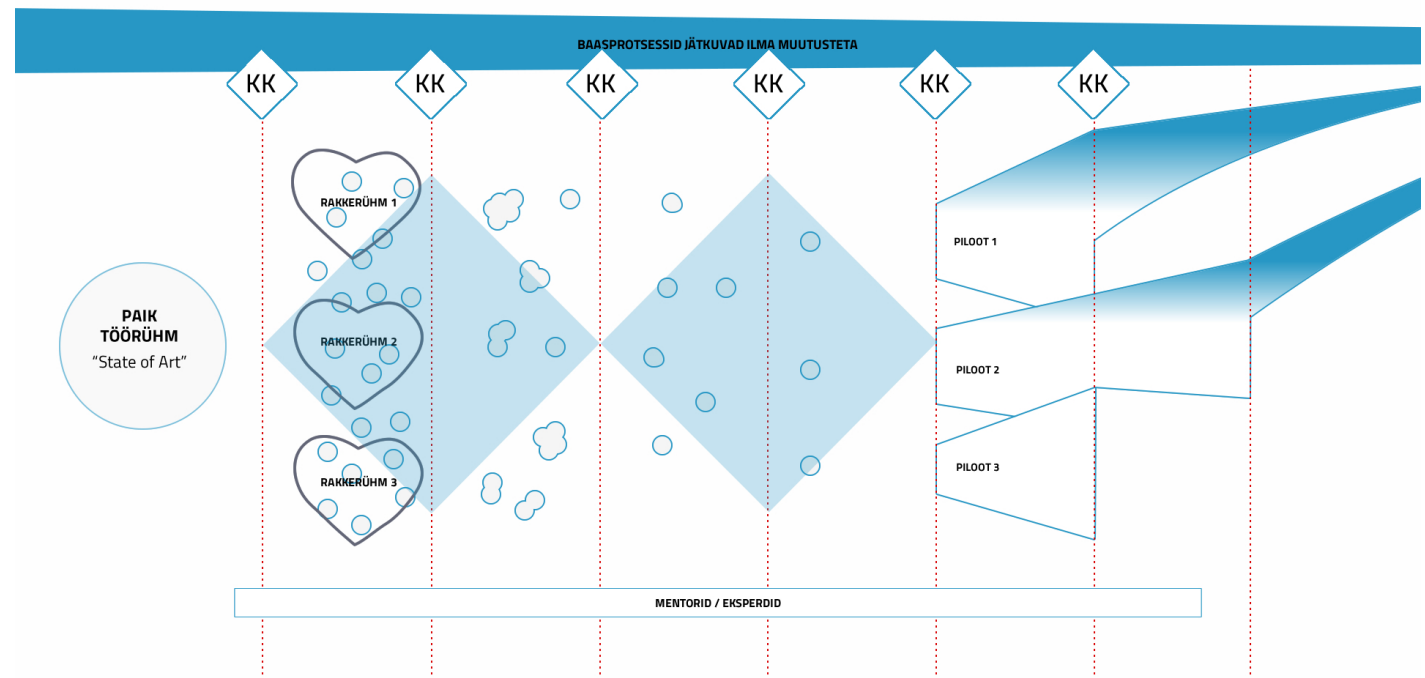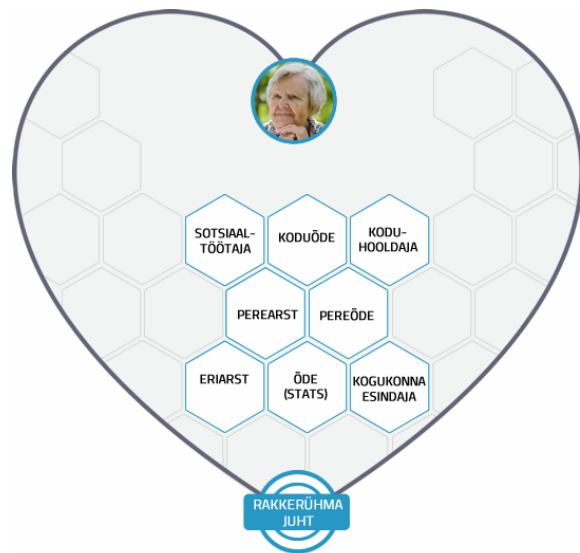
New service model

The new service model enables the hospital to develop services based on real client needs and using services already available and creating new ones. the PAI book helps understand and communicate what services are being provided, how they perform and what changes are needed.

Uute lahenduste väljatöötamine

Integreeritud teenused

PAI raamat

Teenuse valimine ja juhtimikorraldaja määramine

Personaliseeritud plaani väljatöötamine

Personaliseeritud plaani uuendamine

Teenuse osutamine

Tulemuse hindamine

Project impact and design

The models created help very different service providers understand and describe client needs in a shared language as well as providing a platform for cooperation between different state and local service providers and private sector actors - a common understanding of user needs and a way to answer those needs. At the same time the organisational, financial and managerial systems support that platform. The client gets what she needs without unnecessary hassle. The state gets to provide right services to right people in the right way.

It's not complicated if there is a room and some tools to work together and to understand together. The goal of this project was to gather the necessary know how and create the necessary environment where such a room can be built.

Client feedback

„Viljandi Hospital delved into service design while planning the integration of social- and healthcare services.

It was a new and eye-opening experience for many of our people. Simple, Friendly and professional guidance and well chosen methods gave us an opportunity to have a fresh perspective on our every-day activities and find new opportunities to create a truly customer-centric approach.

A number of methods used in this design process have found their way into everyday use within our development teams. Personas, for example, help understand our activities from the patients perspective.

Ülo, a persona designed with Velvet has evolved into an almost mythical character who pops up in presentations and is talked about in radio interviews.

Today, the result of this process is already being piloted in real life and we have preliminary funding agreement with Haigekassa (National Health Insurance). We hope to be able to work together again in the near Future."

Krista Valdvee,
SA Viljandi Hospital,
Head of Cooperation Initiatives