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**The state of cooperation between municipi-
palities and wellbeing services counties –
Report on the tour of municipalities and
counties in 2023**



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1 Introduction

The wellbeing services county reform has been described as one of the most significant administrative reforms in Finnish history. The responsibility for organising healthcare, social welfare and rescue services was transferred from municipalities and joint municipal authorities to 21 wellbeing services counties on 1 January 2023. An exception is the City of Helsinki which will continue to be responsible for organising health, social and rescue services. The HUS Group, in other words the Hospital District of Helsinki and Uusimaa, will be responsible for organising specialised healthcare duties in its own area as separately laid down by law.

The goals of the wellbeing services county reform were defined as follows:

- to safeguard equal and high-quality health, social and rescue services for all people living in the wellbeing services county
- to improve the availability and accessibility of services
- to reduce inequalities in health and wellbeing
- to ensure the availability of skilled labour
- to respond to the challenges of ageing population and declining birth rate
- to curb the growth of costs

(Source: www.soteuudistus.fi)

The decision to implement the wellbeing services county reform was made in June 2021, when Parliament adopted the relevant acts. After this, preparation proceeded rapidly: shortly after the acts were adopted, interim preparatory bodies were set up in the counties to take the preparation process forward until the start of the county council's first term office. The first county elections were held in January 2022 and the county councils' first term of office started on 1 March 2022.

Preparations for the reform have progressed at different speeds in the counties. In some counties, preparations for the reform were started even before Parliament had approved the legislation for the health and social services reform (June 2021), in the form of preliminary preparation of the counties. In some counties, no significant preparations had been carried out before the

legislation was adopted. The progress of the preparation in the counties has also been influenced by the county's previous cooperation and preparations and by previous structures for the organisation of health and social services.

The wellbeing services county reform has placed a strong emphasis on the development of people-centred service packages. The goal of the reform is to make primary and specialised services work better together. Another goal is to make healthcare, social welfare and rescue services more seamless. The reform also emphasises the strengthening of health and wellbeing promotion work, which has the aim of reducing the need for more demanding healthcare and social welfare services.

The ability of municipalities and wellbeing services counties to have an impact on promoting health and wellbeing is crucial for the achievement of the reform's goals, including curbing growing costs. The success of cooperation between municipalities and wellbeing services counties also in other interface tasks is important from the perspective of the goals of the wellbeing services county reform. Effective cooperation between municipalities and wellbeing services counties also has important implications for the implementation of municipalities' service and vitality building functions. Municipalities and wellbeing services counties are important partners for each other, and successful cooperation is essential for the smooth running of services for residents.

From a legal perspective, the municipality and the wellbeing services county are equal players, with their own roles defined in legislation. According to the law, the tasks and powers of the wellbeing services counties and the municipalities are mostly separate and mutually exclusive. However, municipalities and wellbeing services counties have a shared and common responsibility to promote the health and wellbeing of their residents. In addition, municipalities and wellbeing services counties provide a wide range of services, and the successful delivery of these services requires smooth cooperation between these two self-governing actors. Important areas of cooperation can be found at the interfaces between education and healthcare and social welfare services, such as student welfare, youth services, culture and sports. Effective cooperation is also needed in fields such as security and preparedness, employment, migration and integration.

This publication examines the state of cooperation between municipalities and wellbeing services counties in the spring of 2023, during the months following the transfer of service provision responsibility. The publication has been produced by the Association of Finnish Local and Regional Authorities and Hyvinvointialueyhtiö Hyvil Oy in a joint project to support the transformation of the interfaces between municipalities and wellbeing services counties. The project

is funded by the Ministry of Social Affairs and Health in addition to the Association of Finnish Local and Regional Authorities and Hyvinvointialueyhtiö Hyvil.

The publication is based on a tour of municipalities and counties carried out in spring 2023, which included meetings with different actors, surveys and a review of materials related to cooperation. The publication examines the state of cooperation between municipalities, wellbeing services counties and, to some extent, regional councils, and makes recommendations on how to develop the cooperation.

2 Starting points for cooperation

Cooperation and networks are now a key feature of public sector development work. This is the result of society becoming a network, the multiplication of interrelationships and of increasingly complex problems. It is now harder than ever to develop matters or solve problems within a single organisation. Cooperation, successful interaction and partnerships have key significance.

The reform of wellbeing services counties created a new cooperation relationship: cooperation between municipalities and wellbeing services counties. In addition to the cooperation between the two levels of administration, it also involves important cooperation with NGOs, the private sector and other public sector actors. The wellbeing services county reform has created a new field of actors, and cooperation and the roles of these actors are taking shape.

When we refer to cooperation between municipalities and wellbeing services counties, as well as with other actors, we often talk about interfaces. In this publication, interface means the functional connection between two or more organisations. The interfaces between municipalities and wellbeing services counties refer to duties and functions that the municipality or wellbeing services county is responsible for organising and where the resident-oriented implementation of these duties and functions requires cooperation between the municipality and the wellbeing services county. (See (Koponen et al., 2016, 12.) Ensuring the functioning of various interfaces work is an important part of the cooperation.

It is important to build cooperation on the basis of a shared situational picture, which is formed from the health, wellbeing and security situation and experiences of population groups, service needs, costs, existing services and future prospects. The development is municipality- and county-oriented, i.e. operations are developed based on the specific characteristics and needs of the municipalities and counties.

In order for cooperation to be successful, a shared sense of purpose and objectives, commonly agreed procedures and rules, and effective communication are all needed, among other things. Key matters from the perspectives of joint development and flow of information, are forums that enable interaction between elected officials, local government officials, experts and employees. It is also important to identify and describe the roles, division of work and responsibilities of the actors involved. A shared sense of purpose and a culture of action are essential here.

The strategic cooperation between municipalities and wellbeing services counties is guided by legislation. However, the legislation leaves flexibility to agree on the ways and structures of cooperation, taking into account the special characteristics of each county. The negotiation obligations of municipalities and wellbeing services counties are defined in section 14 of the Act on Wellbeing Services Counties (611/2021) and sections 6 and 7 of the Act on Organising Healthcare and Social Welfare Services (612/2021). In addition, cooperation obligations for municipalities and wellbeing services counties are laid down in a number of separate acts.

In order for cooperation between municipalities and wellbeing services counties to be successful there must be agreement on overall cooperation structures and management of cooperation, as well as on interface-specific cooperation. Statutory consultation and other cooperation obligations are part of this, but a significant part of the cooperation is built through the methods and ways of working chosen by the counties and municipalities themselves. Cooperation is supported in many counties by a strategic cooperation agreement, which can be seen as a framework for long-term cooperation between municipalities and wellbeing services counties.

The cooperation and interfaces between municipalities and wellbeing services counties have been prepared in multifaceted ways before the service provision responsibility was transferred and after the wellbeing services counties' operations were launched. Operations that are based on the needs and specific features of the counties and municipalities can be considered important in terms of the reform. At worst, a framework that is too rigid or practices that are too uniform will limit the scope for genuine reform. It is important to support cooperation between municipalities and counties at the national level, so that they are able find the most appropriate policies and structures for the situation in each county. (Cf. Haveri & Airaksinen 2011, 54.)

This publication describes the state of cooperation and makes recommendations for developing this cooperation. The publication highlights issues related to and impacting cooperation and aims to increase understanding and

awareness among the different actors of the state of the way cooperation has progressed. The aim is not to establish a single, 'best practice' model of cooperation or to compare the situation of the way in which different counties' cooperation has progressed. Instead, by identifying and highlighting general observations related to the cooperation, the aim is to support the emergence of different cooperation structures and models. The publication also aims to provide a situation report of the early months of the historic reform, in terms of cooperation between municipalities and wellbeing services counties and, to some extent, between regional councils.

3 Implementation of the tour of municipalities and counties and analysis of data

The tour of municipalities and counties was carried out by meeting representatives of municipalities, wellbeing services counties and regional councils, conducting surveys and studying various materials related to cooperation, such as organisational models, cooperation modelling, cooperation agreements and negotiation models.

The tour of municipalities and counties included visits to the wellbeing services counties and the municipalities in the counties. In some of the meetings we met representatives of the wellbeing services counties and several municipalities at the same time. During the tour, we met with public officials and elected officials. We also met with representatives of the municipalities in networks of municipality types: the network of satellite municipalities, the network of small municipalities and the network of regional cities. We visited a total of 10 wellbeing services counties and met with representatives of 125 municipalities in various meetings during the tour. A small number of meetings were held remotely, via Teams.



Cooperation meetings were attended by 2–5 experts from the Association of Finnish Local and Regional Authorities and Hyvil. The key observations made during the cooperation meetings were written down. In addition, various materials related to cooperation in the county were reviewed before and after the cooperation meetings. The observations identified in the meetings and the materials were reviewed after the implementation phase of the tour of municipalities and counties. Key themes and issues contained in these were identified in the data. Different sub-themes and perspectives were identified to varying degrees under the themes. These are described in chapter 4.1 of the publication as observations related to cooperation.

As part of the tour, surveys on cooperation and interfaces were carried out on chief executives of municipalities and cities and senior elected officials, sectoral management, as well as chief executives of joint municipal authorities and representatives of regional councils. Responses to the surveys were received from 267 municipalities and 16 regions responded to the survey of regional councils. The tour also included meetings with representatives of two regional councils and discussions on the role of the regional council were held with representatives of the wellbeing services counties and municipalities.

The survey data were analysed using quantitative and qualitative methods. The multiple-choice questions were used to form breakdowns not only by all respondents, but also across different types of respondents (e.g. by dividing respondents into municipal decision-makers, municipal chief executives and sectoral management) by size of municipality and by county. For the open-ended responses, the analysis was carried out by examining the responses of municipal decision-makers, municipal chief executives and sectoral management as a whole.

The open-ended responses were analysed using content analysis. All responses were reviewed and recurring themes and views were identified. The results of the surveys are discussed in the publication in subchapter 4.2 for municipalities and in subchapter 4.3 for regional councils. The publication does not discuss all the results of the surveys, as they are published in separate survey reports. The key observations are reviewed in this publication. References to the survey reports can be found in the references at the end of this publication.

4 State of cooperation between municipalities and wellbeing services counties

4.1 Observations based on cooperation meetings and materials

The observations on the state of cooperation made from the cooperation meetings and materials are summarised in this subchapter under point 11. The observations have been categorised under four themes. The themes are cooperation as a whole, structures and organisational culture, cooperation between municipalities and municipal reform.

Cooperation as a whole

The roles of municipalities and wellbeing services counties are still unclear in some counties

Representatives of municipalities and wellbeing services counties do not necessarily have a shared understanding of the roles of the actors as part of the whole. The roles of the wellbeing services county and the municipalities in the new situation have not necessarily been discussed jointly between elected officials, senior management, sectoral management, experts and employees.

In addition to the general structures of cooperation and the cooperation as a whole, there is also a lack of clarity on roles and functions also at the interface level, for example in the fields of promoting health and wellbeing, employment and integration, and in preparedness.

Common issues and cooperation areas can be interpreted in different ways. An example of this are the issues related to the service network and service strategy work of the wellbeing services county, and the kind of role municipalities are identified to have in this. In municipalities, this matter can be identified as an important cooperation area, for example in terms of land use and properties

and the vitality of the municipality in general. In this context, cooperation already at the preparatory stage can be considered to be important by municipalities. In the wellbeing services counties, issues related to service strategy and service network are considered from the perspective of the organisation of health and social services and the role of municipalities in this area may be more narrowly identified, and the importance of cooperation in the preparatory phase may not necessarily be identified. On the other hand, matters related to the service network are identified as sensitive issues in some of the counties, and this may lead to a desire to keep the involvement of municipalities to a minimum in the preparatory phase.

Some municipalities feel that they are not on an equal footing with the wellbeing services county. The wellbeing services county is perceived to be 'dictating things'. Municipalities reiterated the wish for increased cooperation already at the preparatory phase. Commitment and trust, which are important for cooperation, are still being built in some counties.

An overall picture of cooperation is still missing in many counties and cooperation is not at a strategic level in most counties

Not all counties have a common picture of the situation of wellbeing services counties and municipalities as a basis for cooperation. The challenge here is the lack of up-to-date information and how to use this information in cooperation. In many counties, issues are being discussed and developed through different sub-areas, rather than starting with the overall picture and common goals. People in different roles may have different perceptions of the overall picture of operations.

Strategic cooperation agreements and the common goals included in these have been and are currently being actively drawn up. A strategic cooperation agreement is often drawn up by the wellbeing services county and commented on by the municipalities. The strategic cooperation agreements that have already been completed largely have the same structure, but with some differences. The agreements differ, among other things, in terms of their specifics. In some of the agreements, cooperation is agreed on at a very general level, while others contain concrete goals and indicators at the interface level.

Not enough attention has been paid yet to the management of cooperation in many counties. The management of cooperation has not necessarily been discussed or systematically planned. However, structures and methods of cooperation have been and are being created. It is likely that once the basics of cooperation are agreed, the management of cooperation will also be dealt with in joint discussions and preparations.

Interface work/practical work can be successful, even if cooperation at strategic level is in its early stages

In many counties, there is good cooperation between experts at a practical level, at different interfaces. An example of this are the networks for promoting health and wellbeing and the cooperation between health and wellbeing coordinators, as well as cooperation in services for families with children. Previous working relationships and familiar people make it easier to continue working together despite the change.

The functioning of individual interfaces varies between counties, and no single interface that works in all counties or one that does not work in any county can be identified. The situation varies widely by county.

Interface work requires resources and time, especially in the early stages

Interfaces do not become functional by themselves, and active efforts are required to develop them, not only in terms of general cooperation structures, but also at the level of the individual interfaces. Especially in the early stages of the reform, it is important to allocate sufficient resources to cooperation. It is also important to make sure that the right people are involved in the cooperation, and that they have a mandate to take things forward in their own organisation.

It is also important to review the progress of cooperation together. It is good to highlight shared achievements. This helps to build commitment and focus on cooperation.

Structures and organisational culture

Forming the structures of the wellbeing services counties received a lot of attention and took a long time in the reform.

From the perspective of organisational and cooperation structures, the wellbeing services counties are at different stages, depending, among other things, on whether there is a joint municipal authority for healthcare and social welfare in the background or how resources have been invested in preparatory work. History influences the way cooperation is built, and for example the operations of joint municipal authorities have provided good structures for cooperation in some counties. A good culture of cooperation may also have developed in the county, but on the other hand, unresolved issues from the past, for example in the context of joint municipal authority for healthcare and social welfare, may slow down and hinder current cooperation. Previous tensions related to

cooperation and personal relationships can persist, and it can take time for a culture of cooperation to develop and change.

A joint municipal authority foundation alone does not provide an explanation of the situation of cooperation. In addition, the organisational culture that formed in the preliminary preparation phase by the experts who prepared the reform and that has emerged as a result of various factors has a significant impact on the state of cooperation in the spring after the transfer of responsibility. The wellbeing services counties have been building structures in the past months and municipalities have been waiting for progress in terms of concrete cooperation and work with residents. Wellbeing services counties and municipalities may have different views on priorities.

Lack of interaction slows the progress of cooperation

Joint discussion and interaction between the different roles (elected officials, senior management, sectoral management, experts and employees) is the starting point for building cooperation. There is a need for effective forums for interaction between the different operators. These forums have been and are being launched in different counties.

It is important to develop cooperation structures through their content, ensuring that, for example, all forums, working groups and networks have a role to play in the overall cooperation structure. It is important to discuss the 'real issues', i.e. also sore points and challenges of cooperation in the early stages. In other words, the issues that the different operators would like to discuss. It is important to review and assess the roles, purpose and functioning of forums and also of the different networks from the very beginning of the cooperation.

Statutory consultations should be embedded in the cooperation structure, and a role should be identified for them, for example in annual plans and calendars for cooperation.

In many counties and interfaces, a lack of contact/responsible persons in the wellbeing services counties or lack of knowledge about who is responsible is slowing down the progress of cooperation. Knowing who is responsible for the different functions and how to contact them is the starting point for successful cooperation. It is important to pay particular attention to this in interface preparation and communication. It is important that this information is easily accessible to all those involved in cooperation.

There are many different experiences and views regarding the dual roles of elected officials

The dual roles of elected representatives (especially board members) is a matter of debate and there are many experiences of these dual roles. In some municipalities, mobility of information between the municipality and the wellbeing services county is considered an advantage of dual roles.

A challenge, on the other hand, is the issue of impartiality. Impartiality and the need for disqualification are likely to increase in the context of service network planning and the related processes. This sub-area of cooperation is likely to be highlighted in the coming months and years in the cooperation between municipalities and wellbeing services counties.

County models/municipality type groups built for wellbeing services counties containing lots of municipalities help to organise cooperation

Organising cooperation between wellbeing services counties and municipalities is challenging in terms of practices if the county has a large number of municipalities. In counties with lots of municipalities, county models or municipality type groups are one way of organising cooperation, and they have been introduced in some of the counties. The municipalities in the county are divided into, for example, 3–6 municipality groups, through which the wellbeing services areas organise and coordinate cooperation and organise, for example, consultations.

In the county models/municipality type models it is important to pay attention to their roles as part of the whole and strategic cooperation. In some counties, the county models are used for so-called practical work, and strategic cooperation is carried out in joint forums between the wellbeing services counties and all the municipalities. It is important that the counterparts from each organisation are mutually compatible, i.e. for example, senior management from both sides are involved in the strategy-level discussions and, for example, county meetings and networks may include coordinators or sectoral management.

Cooperation between municipalities

The situation of municipal cooperation also affects the building of cooperation between municipalities and wellbeing services counties

The effectiveness of cooperation between municipalities varies across the country. Tensions between municipalities may be the result of past events or, for example, of the preparation of cooperation areas in the context of the ongoing TE services reform 2024, which has been actively pursued in spring 2023.

The functioning of cooperation between municipalities and wellbeing services counties also varies within a county. In some municipalities in the county, cooperation may be closer and smoother than in others. The role of central urban municipalities in the cooperation has also been discussed. In this context, for example, there have been discussions on whether the central urban municipalities should have specific responsibilities, their own agreements, or closer meeting practices and other forms of cooperation with the wellbeing services counties. The role of central urban municipalities in the cooperation seems to vary by county and can also contribute to creating tensions in the cooperation some cases.

Overall, the smoothness of cooperation between municipalities also seems to affect the smoothness of cooperation between municipalities and the wellbeing services counties.

Regional councils have a diverse role in the counties

The role of the regional councils in the counties varies greatly from one county to another. In some counties, the regional council plays an active role in the cooperation with the municipalities and the wellbeing services county, and the regional council can, for example, act as a collector and facilitator of the views of the municipalities towards the wellbeing services county. Many regional councils convene meetings of chief executives, which have also been used for cooperation with wellbeing services counties.

The role of the regional council is influenced by previous development work and its role in the region, the regional council may have a history in areas such as promoting health and wellbeing and in integration. Many regional councils also have coordination projects underway to support municipalities in the context of the TE services reform 2024. The regional councils are involved to varying degrees in strategic cooperation agreements in the region. In some counties, the regional council may also play a role in the implementation of the regional council's term of office cooperation negotiations.

Municipal reform

Wellbeing services county reform is also a municipal reform

In the context of the wellbeing services county reform, the municipalities will also have to reform their activities, as their role and field of responsibilities have changed as a result of the reform. In addition, the reform of the TE services 2024, which is currently under preparation, will significantly change the way municipalities operate. It is important that municipalities' new role and field of responsibilities are given due consideration in strategic planning.

The role of the municipalities of the future is taking shape and many of the tasks are still partly unclear, especially in relation to interface services. An example of this is the role of the municipality in promoting health and wellbeing. The overall impact of the 2024 reform of TE services is also still unclear in many respects. It is important to discuss the changes in the role and responsibilities of the municipality and their implications at different levels and at different stages of the reform process.

From the point of view of the functioning of the cooperation between wellbeing services counties and municipalities, it is important that municipalities are also active builders of cooperation in the county. The role of management, and everyone else, is central to building a good culture of cooperation.

4.2 Surveys of municipal management

This subsection reviews the results of the surveys sent to municipal management (chairs of boards and municipal councils), chief executives of the municipality and sectoral management, executives of joint municipal authorities¹ and other providers of education and training. A more extensive report on the surveys has also been published and can be found in Finnish on the Association of Finnish Local and Regional Authorities' website, www.kuntaliitto.fi/yhdyspinnat.

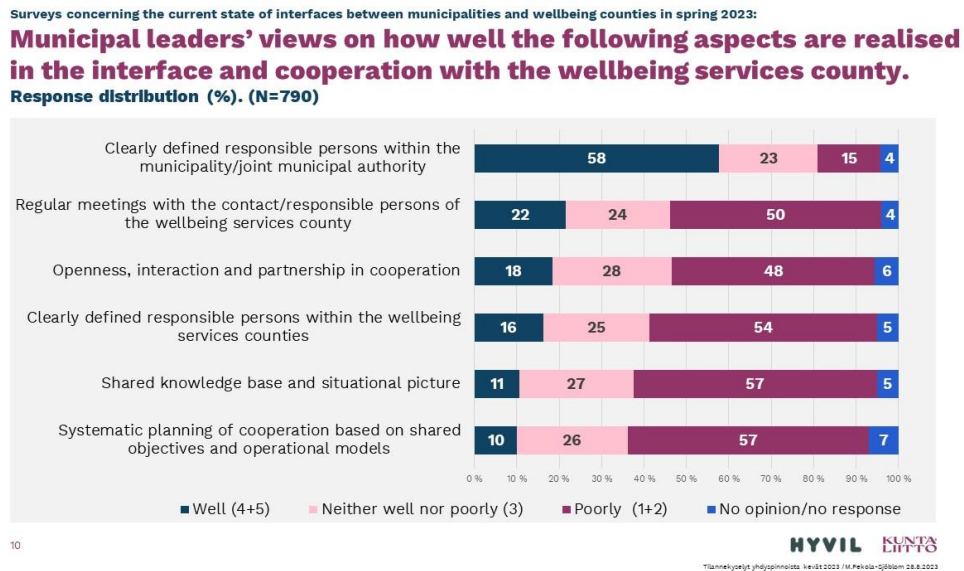
The survey was conducted in spring 2023 in two parts: Elected officials and chief executives managing the municipalities answered questions on interfaces as part of the wider Kuntapulssi (Municipal Pulse) survey conducted by the Association of Finnish Local and Regional Authorities. The themes of the Kuntapulssi survey 1/2023 were the preparatory phase of the TE services 2024 reform, the interface work between municipalities and wellbeing services counties, and the general situation of the municipalities. The views of the municipalities' sectoral management and executives of joint municipal authorities were surveyed separately, as the Pulssi-kysely of the Association of Finnish Local and Regional Authorities did not target these groups. The questions in the surveys were similar and the results are discussed here as a whole.

There were 790 respondents to the survey. There were 758 responses from municipalities and 32 responses from other municipal organisations. Responses from municipalities account for 96% and other responses for 4%. A total of 267 municipalities, or 91% of municipalities in Mainland Finland, responded. Responses were received from 150 senior elected officials, 156 chief executives,

¹ The questionnaire was sent to the heads of joint municipal authorities and other education and training providers, but not to the regional councils, as they had their own separate questionnaire.

64 representatives of other general management, 246 representatives of the education sector and 127 representatives of other sectors.

Figure 1. Views of representatives of municipalities and joint municipal authorities on cooperation with the wellbeing services county



As Figure 1 shows, there is still much room for improvement in the interface work between municipalities and wellbeing services counties. In particular, the systematic nature of cooperation based on common objectives and methods (57%) and a common knowledge base and situational awareness (57%) are still poorly implemented according to respondents.

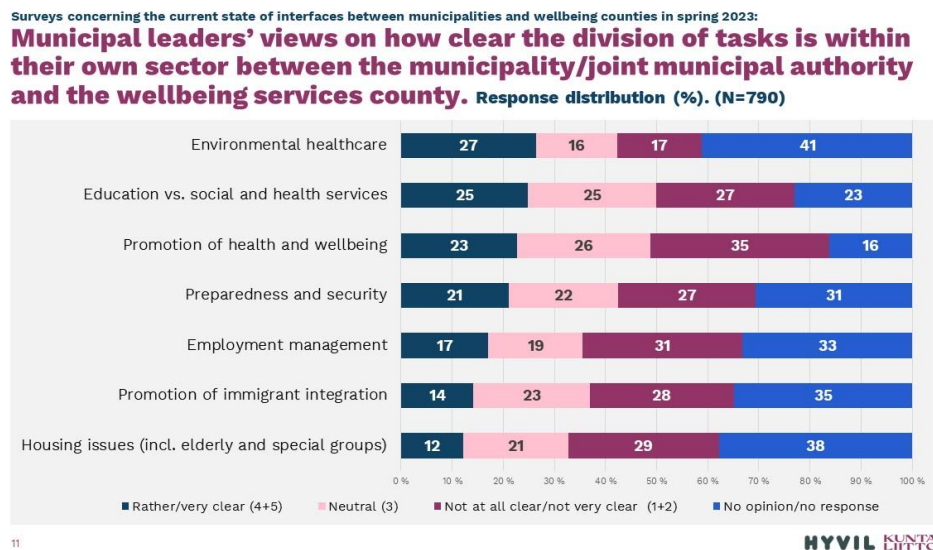
Also, clearly defined responsible persons for wellbeing services counties (54%) and transparency, interactivity and partnership in cooperation (48%) were still perceived as being poorly implemented. Regular meetings between municipalities and wellbeing services counties received slightly better ratings from respondents, but half of the respondents felt that this aspect was also poorly implemented. Municipal managers were more positive than other respondents about the implementation of regular meetings: 30% of the municipal managers who responded felt this was fairly or very well implemented.

Clearly defined responsible persons in the municipalities received the highest ratings on questions related to the content of cooperation, with 58% of respondents feeling that this was well implemented. According to the municipal surveys, the size of the municipality influences the respondent's assessment of

how cooperation has been implemented. The most positive experience of the implementation of cooperation was in municipalities with more than 50 001 inhabitants and in large cities. The most positive assessments of the implementation of cooperation were given by representatives of the municipalities of South Karelia and Kymenlaakso.

Although there is still much room for improvement in many sub-areas of cooperation, the open-ended responses to the questionnaires also highlighted things that are working well, successes and views on how cooperation can be improved.

Figure 2. Views of representatives of municipalities and joint municipal authorities on the clarity of the division of labour between the municipality/joint municipal authority and the wellbeing services county



As shown in Figure 2, the division of labour between the different interfaces between municipalities and wellbeing services counties is still often perceived as unclear. The clearest division of labour in this survey was found in environmental health care and in the interfaces between education and health and social services. The lowest ratings for clarity of division of labour were given to the interfaces of integration and housing.

The division of labour between promoting health and wellbeing was considered clear by 23% of respondents and unclear by 35% of respondents. The proportion of respondents who thought it was clear or fairly clear was the lowest for chief executives, with only 15% of chief executives thinking it was clear. The

division of labour in promoting health and wellbeing was perceived to be clearly clearer in municipalities with over 100,000 inhabitants and municipalities with 5,000–10,000 inhabitants.

The division of labour was perceived to be clearest at different interfaces in the municipalities of the South Karelia, Kainuu, Central Ostrobothnia, Central Uusimaa, Kymenlaakso and Vantaa-Kerava wellbeing services counties.

4.3 Survey of regional councils

This subsection reviews the results of the surveys sent to the regional councils. A separate report on the survey of regional councils has also been published and can be found in Finnish on the Association of Finnish Local and Regional Authorities' website, www.kuntaliitto.fi/yhdyspinnat.

The survey focused on regional cooperation between the regional council, municipalities and the wellbeing services county. The questionnaire was designed to find out what kind of cooperation the regional councils have with the municipalities and the wellbeing services county in the region, what kind of role the regional councils play in the cooperation between the actors in the region, and what kind of experiences the regional councils have had with this cooperation.

The questionnaire was sent to all regional councils. The questionnaire was sent to chief executives of the municipalities, directors of administration and directors of regional development. One response was requested from each council, and recipients of the survey were asked to select a suitable person to respond to the survey. The survey was carried out in June–August 2023 and 16 regional councils responded. Of the respondents, 8 were chief executives, 5 were directors of regional development (or equivalent) and the rest were other directors or experts.

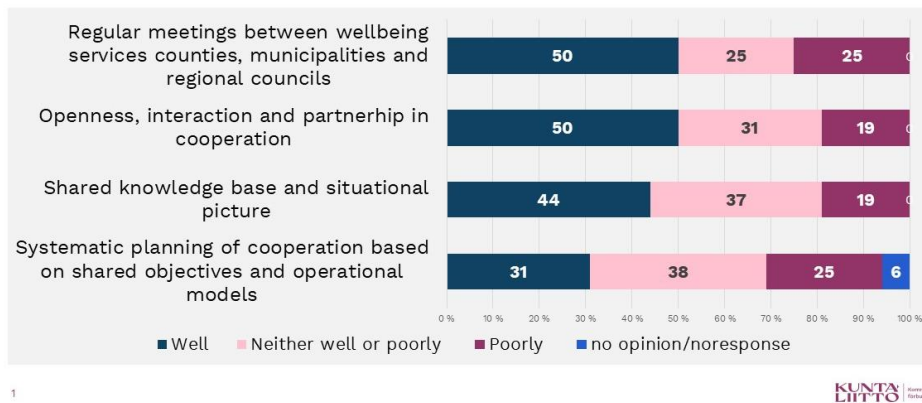
According to the survey, the role of the regional council in the cooperation with municipalities and wellbeing services counties varies widely by county. There are also significant differences between counties in the intensity and content of cooperation. The role of a regional council is, among other things, to provide information and a situation report of the county, to act as a developer and networker, and as a 'platform for cooperation between municipalities and the wellbeing services county'.

According to the survey, cooperation between municipalities works well or very well, and a large proportion of respondents also feel that cooperation with the wellbeing services county is functional. However, the survey found that there is

little cooperation between a regional council and wellbeing services county, as only 25% of respondents said there is a lot of cooperation. On the other hand, 31% of respondents say there is little or no cooperation.

As shown in Figure 3, half of the respondents (50%) feel that cooperation between municipalities, the wellbeing services county and the regional council is open, interactive and based on partnership. There is still much to be done for a large number of counties in terms of improving the systematic nature of cooperation and creating a common situational picture and knowledge base.

Figure 3. Cooperation between regional councils, municipalities and wellbeing services counties



The situation regarding strategic cooperation (joint strategic policies for the county and strategic cooperation agreement) is, according to the survey, varies considerably by county. Cooperation on strategic policies takes the form of compiling a joint strategy, creating a common situational picture, shared policies for regional development, joint discussions on regional development and the compilation of joint Government Programme objectives.

In some counties, the regional council acts as a supporter of cooperation between municipalities and the wellbeing services county, and this role is also strongly reflected in the preparation of the TE Services 2024 reform. According to the survey responses, cooperation is progressing and intensifying. Joint plans are in place and there are many sub-areas of cooperation that function well in many counties. As regards the effectiveness of cooperation, the issues raised included effective interaction and constructive discussions, regular meetings, openness and a shared sense of purpose, common strategic policies and successes in different themes of cooperation.

Respondents identified areas for improvement in cooperation particularly in terms of sharing a situational picture, building a common vision, clarifying interfaces, proactive cooperation, integrating strategies and preparing the network of services.

5 Conclusions and recommendations for cooperation

In this report, we have looked at the cooperation between municipalities and wellbeing services counties and also regional councils in the months following the wellbeing services county reform. A key observation to note is that cooperation is still in its early stages in many sub-areas. Cooperation is progressing at different speeds in the counties, and a variety of structures and methods for cooperation have been and are being formed. In many counties, cooperation is not yet at a strategic level, which is not surprising in such a major reform. The wellbeing services counties' first spring has been a busy one, and there may not have been time to develop municipal cooperation in all sub-areas of operations.

The implementation phase of reforms is known to be a particularly demanding and critical time, when the operations of a reforming or new organisation can easily be seen as introverted. Overall, the workload of the wellbeing services counties can be considered historically large and therefore we can expect the implementation phase to take much longer than, for example, the implementation phase of the municipal merger. (From three years to a municipal council term according to the 'Kuntaliitokset suurennuslasin alla' [Municipal mergers under the magnifying glass] study carried out by the Association of Finnish Local and Regional Authorities). Municipalities are likely to be concerned about ensuring the continuity of services transferred to the wellbeing services county and of services and functions located at the interface between municipalities and the wellbeing services county during this period of change.

General cooperation structures have been prepared in recent months in different ways in the counties, in cooperation between municipalities and wellbeing services counties. The cooperation also varies widely at the interface level. Different sub-areas of cooperation and interfaces are highlighted in the counties. In one area, for example, good progress has been made in cooperation on integration, while in another area, the area of preparedness, progress is more advanced. Overall, there is still a lot of work to be done in terms of cooperation and the division of labour is still unclear at many interfaces. A key theme for

cooperation in the coming years and months that is likely to be highlighted is issues related to the network of services, which have become increasingly prominent in recent months.

We did not meet representatives of all the wellbeing services counties or all the municipalities during the tour of municipalities and counties on which this report is based. However, we did meet a large number of representatives from different municipalities and from many wellbeing services counties on the tour. In addition, a large number of representatives from the municipalities were reached with the municipal surveys. This report is a compilation of the findings of these meetings and municipal surveys and has been prepared in cooperation between experts from Association of Finnish Local and Regional Authorities and Hyvil. The findings included in this report have been analysed together in an attempt to form a situational picture of the state of cooperation. These findings have also been used to update the recommendations for strategic management of cooperation between wellbeing services counties and municipalities.

The recommendations are as follows:

1. Agree on setting up a forum (advisory board or similar) covering the wellbeing services county and all municipalities in the county to guide the preparation of strategic management cooperation, and on the practical progress and responsibilities of the work.
2. Write down the responsible parties involved in the cooperation in the wellbeing services county and the municipalities, for the different subject areas/interfaces. Ensure that the wellbeing services county and municipalities have up-to-date information on these responsible persons.
3. Take sufficient time to build, share and utilise a common situational picture of the county's starting situation, its future outlook and the common goals derived from these.
4. Bring together the key goals and the related measures, indicators and responsible parties based on the shared situational picture.
5. Prepare a strategic cooperation agreement around the common goals for the county, to be approved by the wellbeing services county and all municipalities in the county.
6. Enable and support the implementation of interaction of people in different roles in the wellbeing services county, the municipalities and other organisations in the county (policy makers, senior local government officials, sectoral management, personnel) through clear structures and platforms that have been agreed together. The importance of informal interaction should also be identified.
7. Take into account other actors in the counties, such as NGOs, businesses and other stakeholders, whose opportunities for participation and influence should be ensured.
8. Work together to create a cooperation model that is suitable for your county!

6 References

Publications of the Association of Finnish Local and Regional Authorities and Hyvil:

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