

## **Barriers to cross-border prehospital care between care providers in northern Norway, Sweden and Finland**

In September 2015 the Chief Executives of Helse Nord RHF in Norway, Lapland hospital district, Länsi-Pohjan hospital district and Oulu University hospital district in Finland, Norrbotten County Council and Västerbotten County Council in Sweden decided to establish a joint structure for long-term strategic cross-border cooperation. The northernmost parts of Norway, Sweden and Finland need to develop and strengthen their cooperation for better, safer and faster treatment and care in border areas.

Specifically one agreement form the basis for cross-border care, the Nordic Public Health Preparedness Agreement (2002), signed by the governments of Denmark, Finland, Iceland, Norway and Sweden. Based on the agreement a joint project on pre-hospital emergency care in border areas were carried out in 2012-2014. In 2015, the Chief Executives signed a joint Agreement on pre-hospital emergency care. The agreement included Procedures for Pre-hospital Emergency care, Procedures for Emergency Call Response Centers and Administrative routines. The aim was to provide safer and faster assistance and care in case of emergency illness, accidents and serious or extraordinary events. Healthcare providers in border areas and in sparsely populated regions are depending on assistance from the nearest ambulance regardless of nationality.

When finalizing the agreement and procedures several barriers to cooperation were identified partly because of different national structures and legislation. For health care providers in the northernmost parts of Norway, Sweden and Finland it is of crucial importance to remove these barriers. From a patient's angle and for medical staff working on the other side of the border measures needs to be taken urgently.

In order to overcome any administrative and legal barriers there is a need for authorities in each Nordic country to look into national legislation and provision. Following issues needs to be reviewed:

- Emergency services crossing borders should be subject to the same conditions and be put in the same position as local emergency service.
- Medical staff in emergency services should be allowed to temporarily perform health and medical services during cross-border missions. This work will be carried out under the responsibility of the health care provider in their home country and according to their procedures.
- Medical staff should have the requisite insurance cover for work in the adjacent Nordic country.
- Each country should ensure that national patient health and medical insurance covers medical care and treatment provided by medical professionals from another adjacent Nordic country.
- Each country should ensure that patient complaints on care and treatment carried out by health care staff from another adjacent Nordic country are taken care of by public authorities in their home country.