The Definition of Informatics Competencies in Finnish Healthcare and Social Welfare Education

Finland is a world leader in the use of public electronic services. Continuous improvement to competencies is a prerequisite for the success of digitalisation in the service development sector. The increasing use of information technology in health and social care needs to be taken into account in the education of the health and social care sector work force. The mandate of the national SotePeda 24/7 project is to identify and define the informatics competencies required for multidisciplinary education of this sector in Finland. The project has adapted international recommendations for use in the national context. The national recommendation covers 12 areas of competency and related content. In addition to defining competencies, the project has produced a toolbox of materials for use by educators of these topics in universities that cover applied sciences and lifelong learning. The results of the project are expected to significantly improve the preparedness of graduating health and social care and related engineering and business sector students to make full use information technology, all of which benefits the national health and social welfare system.

General information

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Publication series

Impact loading history modulates hip fracture load and location: A finite element simulation study of the proximal femur in female athletes

Sideways falls impose high stress on the thin superolateral cortical bone of the femoral neck, the region regarded as a fracture-prone region of the hip. Exercise training is a natural mode of mechanical loading to make bone more robust. Exercise-induced adaptation of cortical bone along the femoral neck has been previously demonstrated. However, it is unknown whether this adaption modulates hip fracture behavior. The purpose of this study was to investigate the influence of specific exercise loading history on fall-induced hip fracture behavior by estimating fracture load and location with proximal femur finite element (FE) models created from magnetic resonance images (MRI) of 111 women with distinct exercise histories: 91 athletes (aged 24.7±6.1years, >8years competitive career) and 20 women as controls (aged 23.7±3.8years). The athletes were divided into five groups based on typical loading patterns of their sports: high-impact (H-I: 9 triple-jumpers and 10 high jumpers), odd-impact (O-I: 9 soccer and 10 squash players), high-magnitude (H-M: 17 power-lifters), repetitive-impact (R-I: 18 endurance runners), and repetitive non-impact (R-NI: 18 swimmers). Compared to the controls, the H-I, O-I, and R-I groups had significantly higher (11–26%, $p<0.05$) fracture loads. Also, the fracture location in the H-I and O-I groups was significantly more proximal (7–10%) compared to the controls. These results suggest that an exercise loading history of high impacts, impacts from unusual directions, or repetitive impacts increases the fracture load and may lower the risk of fall-induced hip fracture.

General information

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Examining service experiences: comparing methods to capture children's experiences

Purpose – Recent discussion on the service-dominant logic (SDL) and interest of studying service experiences in different contexts have been increased. However, this has brought up a new methodological challenge for contemporary research. Research methods used, need to capture experiences in the contexts of value co-creation while taking dimensions affecting to experience co-creation into account. This challenges researchers to adapt their methodology to be suitable for the context of studied phenomenon. This paper will provide a set of methodological snapshots applicable for SDL and service research in a context of healthcare services for children and their families.
Design/Methodology/approach – Study draws on selected literature from the fields of service research and healthcare services and tests new methods of capturing experiences in a special experience context of children's healthcare. We analyze and report a set empirical studies applying of qualitative and quantitative approaches for investigating experience in a special research field of children's healthcare experience. These methodological approaches include probing, structured and unstructured interviews and surveys. We review and compare the key characteristics of the methods and their respective benefits for service experience research.
Findings – Key findings shows that some research methods are more appropriate capturing children's experience data. Study also suggest that some methods are more appropriate for capturing data of co-creation in children's social contexts..
Research implications – The paper builds contribution by increasing understanding on how different research methods capture dimensions of service experience co-creation and help researchers interested in studying children's experiences to select an appropriate methodology for conducting their research.
Originality/value – Service experience research lacks paper that pieces together different methodology approaches capturing complex phenomenon of children's experiences.
Key words methodology, children's experiences, service experience, healthcare
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Health figures: an open source JavaScript library for health data visualization

Background
The way we look at data has a great impact on how we can understand it, particularly when the data is related to health and wellness. Due to the increased use of self-tracking devices and the ongoing shift towards preventive medicine, better understanding of our health data is an important part of improving the general welfare of the citizens. Electronic Health Records, self-tracking devices and mobile applications provide a rich variety of data but it often becomes difficult to understand. We implemented the hFigures library inspired on the hGraph visualization with additional improvements. The purpose of the library is to provide a visual representation of the evolution of health measurements in a complete and useful manner.

Results
We researched the usefulness and usability of the library by building an application for health data visualization in a health coaching program. We performed a user evaluation with Heuristic Evaluation, Controlled User Testing and Usability Questionnaires. In the Heuristics Evaluation the average response was 6.3 out of 7 points and the Cognitive Walkthrough done by usability experts indicated no design or mismatch errors. In the CSUQ usability test the system obtained an average score of 6.13 out of 7, and in the ASQ usability test the overall satisfaction score was 6.64 out of 7.

Conclusions
We developed hFigures, an open source library for visualizing a complete, accurate and normalized graphical representation of health data. The idea is based on the concept of the hGraph but it provides additional key features, including a comparison of multiple health measurements over time. We conducted a usability evaluation of the library as a key component of an application for health and wellness monitoring. The results indicate that the data visualization library was helpful in assisting users in understanding health data and its evolution over time

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Comparison of injury severity between moped and motorcycle crashes: A finnish two-year prospective hospital-based study

Background and Aims: The coverage of the official statistics is poor in motorcycle and moped accidents. The aim of this study was to analyze the severity of motorcycle and moped crashes, and to define the degree of under-reporting in official statistics. Material and Methods: All first attendances due to an acute motorcyclist or moped driver injury registered in the emergency department between June 2004 and May 2006 were analyzed. The severity of the injuries was classified using the Abbreviated Injury Scale score and the New Injury Severity Score. The hospital injury data were compared to the traffic accident statistics reported by the police and compiled and maintained by Statistics Finland. Results: A total of 49 motorcyclists and 61 moped drivers were involved in crashes, leading to a total of 94 and 109 injuries, respectively. There were slightly more vertebral and midfoot fractures among motorcyclists than among moped drivers (p = 0.038 and 0.016,

respectively). No significant differences were found between the severity (maximum Abbreviated Injury Scale and median New Injury Severity Scores) of the motorcycle and moped crashes. There was no in-hospital mortality. The degree of agreement (overlap) between the hospital dataset and the official statistics was 32%. The rate of under-reporting was 68%. Conclusions: According to the maximum Abbreviated Injury Scale and New Injury Severity Scores, the injury severity was equal for motorcycle and moped crashes. The degree of agreement between the hospital dataset and the official statistics was 32%.

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Bibliographical note

Implementation and User Testing of a System for Visualizing Continuous Health Data and Events

Efficient ways are needed to visualize the health status of a person and how the lifestyle, daily choices and health care actions are affecting it. Current systems lack a comprehensive interface for interaction and exploration of large and complex data and events affecting the data. Based on state-of-the-art data visualization techniques, we implemented and user tested a system that visualizes health data holistically over time. The system focuses on the dynamic changes by using a timeline of events affecting the overall health status. We conducted an extensive user testing process involving surveys, heuristics and observations in order to evaluate our system. The results show that our system has a high level of User Satisfaction while providing an adequate understanding, interaction and navigation of the data.

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