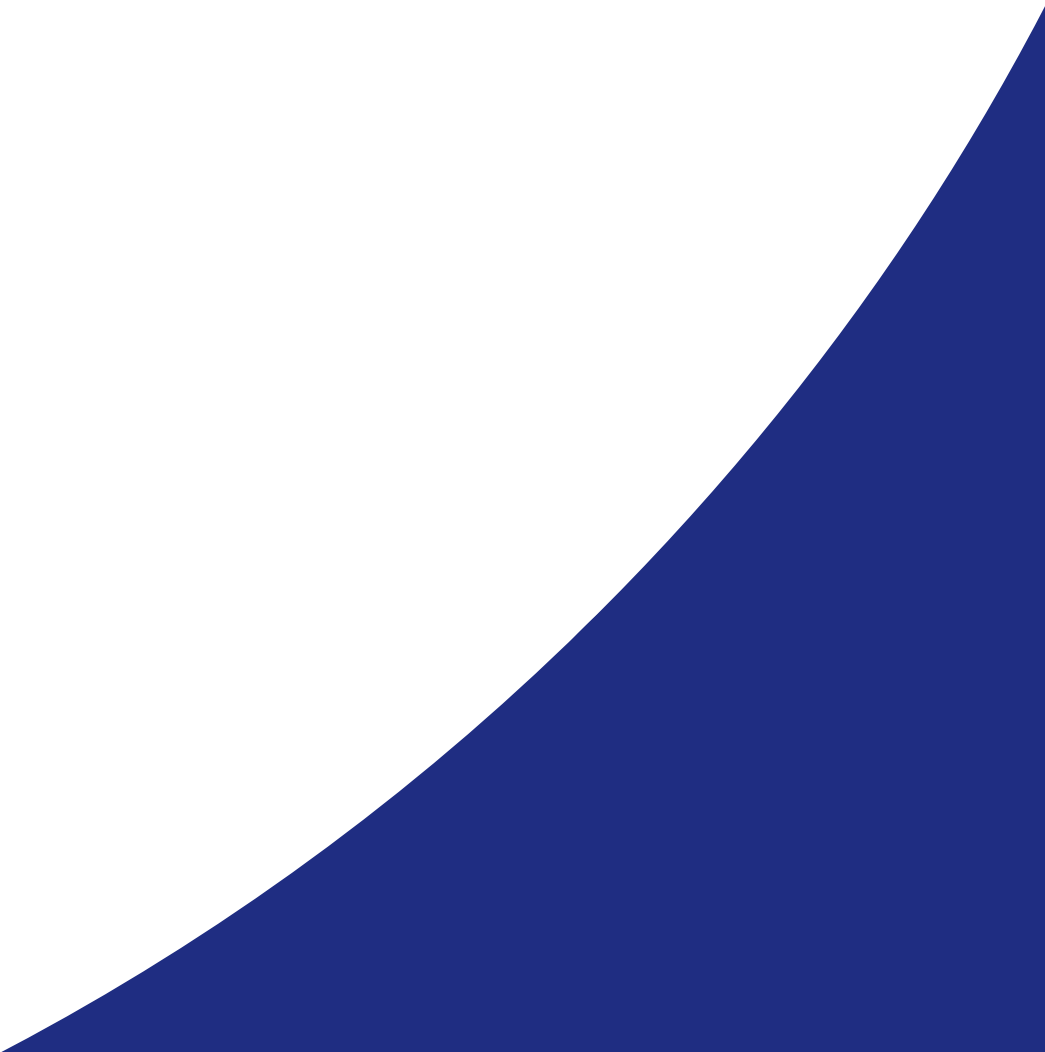


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BY THE COUNCIL OF THE TARTU UNIVERSITY
HOSPITAL FOUNDATION

DEVELOPMENT PLAN 2022–2026





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1. INTRODUCTION

Tartu University Hospital Foundation is the only university hospital in Estonia. Healthcare services are provided to all people in Estonia, the largest selection of medical specialties is represented. Unique to Estonia, it includes services from prenatal counselling, obstetrics and neonatal intensive care to full treatment and counselling of elderly patients. We are distinguished by the provision of healthcare services in the widest sense possible, from prevention of diseases and primary healthcare services to specific highly technological sub-specialties. We are the only service provider in Estonia for several specialties, we are a reference center for various rare diseases in the European network. Patients are highly satisfied with the Hospital's healthcare services. In cooperation with the University of Tartu and Tartu Health Care College, the Hospital provides undergraduate and postgraduate education for doctors, nurses and other healthcare specialties, as well as further training. The Hospital works in close cooperation with research and development institutions and companies domestically as well as abroad. The Hospital employs over one hundred doctors of medical sciences. Feedback from medical students has revealed that the Hospital is the most attractive employer in the healthcare sector in Estonia. The Hospital is one of few healthcare institutions in Estonia that has implemented an environmental management and auditing system of the European Union.





2. VISION, MISSION AND CORE VALUES OF THE HOSPITAL

VISION

Tartu University Hospital is a recognized university hospital in Europe, first choice for patients and partners in Estonia.

MISSION – „SCIENCE FOR THE PATIENT“

The Hospital's mission is to offer people-centered and science-based healthcare services as a center of excellence in academic medicine. The core competencies of the hospital are:

- ▶ humane, patient-centered approach and treatment;
- ▶ high-quality and forward-looking research and development activities;
- ▶ education based on the best clinical practice.

CORE VALUES

The core values of the Hospital are **compassion, innovation, competence and trust** (“*Compassio, Innovatio, Scientia, Fides*” in Latin). We follow these principles as follows.

Compassion – *Compassio*

Compassion serves as the basis of our values. Compassion towards patients and their loved ones, colleagues and partners, students and medical residents. We treat all humans with respect, dignity and courtesy, we offer the best patient experience. We are honest and ethical. We honor and value the specific nature and contribution of our patients as well as colleagues. We base our activities on the interest of the patient and protect their dignity while their health condition prevents them to defend for themselves. We respect our patients' right for privacy and confidentiality.

Innovation – *Innovatio*

Innovation serves as an important prerequisite for the development of the Hospital and its staff. The innovative nature of Hospital specialists has played a historically significant role in the development of Estonian healthcare. We develop new diagnostic and treatment methods, support implementation of new technological solutions for the benefit of our patients.



J-L KORPUSED →

Competence – *Scientia*

Our greatest value is our competent and committed staff who share a thirst for knowledge. We encourage colleagues to advance in all areas. The patients trust our competent doctors, nurses and other specialists. We constantly learn new things and develop our skills. We give our best to foster the Estonian healthcare system through our knowledge. We value long-term collective experience, but are also open to develop and test the newest scientific and innovative solutions.

Trust – *Fides*

We achieve the best results thanks to the cooperation of all specialties and employees, by involving patients and their loved ones in every way possible. It requires trust for the patient to follow the treatment recommendations provided. The patient has to feel that the best possible treatment decisions are being made and that they are included in the decision process; the reason for the interferences, its benefits and risks have been thoroughly described and justified. We are personally and collectively responsible for our work results. We are environmentally sound and carry out responsible management.



3. CHANGES IN THE OPERATING ENVIRONMENT: CHALLENGES AND DEVELOPMENT TRENDS

The population served by the Tartu University Hospital is bound to significantly change in the next decade. These developments require active adaptation, while managing the processes in the best possible way for the patients.

1. INCREASE IN THE NUMBER OF OLDER PEOPLE

Due to the decreasing population, the number of older people will increase in Estonia and especially in Southern Estonia. This will lead to:

- ▶ an increase in oncology patients. The number of patients requiring treatment for cardiovascular diseases, neurological and musculoskeletal disorders and eye diseases will grow as well;
- ▶ there will be more and more multimorbid patients suffering from various simultaneous illnesses;
- ▶ the length of treatment and care of patients will increase;
- ▶ the number of residents, especially those under the age of 18, will decrease in the current catchment area of the hospital.

2. THE EXPECTATIONS AND DEMANDS OF PATIENTS AND LOVED ONES WILL INCREASE

Expectations for the healthcare system will increase in welfare societies, while historical skills to recognize temporary health afflictions will decrease.

- ▶ Self-help capacity will decrease and the demand for medical aid will increase;
- ▶ the expectations of the patients are bound to increase due to technological development and success stories;
- ▶ the gap between the alleged possibilities of new technologies and the existing resources and financial resources will increase.

To combat this challenge, it is necessary to actively:

- ▶ invest in evidence-based awareness-raising for patients;
- ▶ cooperate with the primary level to distribute evidence-based information;
- ▶ support smart decision-making in the management and funding of the healthcare system;
- ▶ ensure availability of evidence-based information and be the first choice for patients in regard to seeking information.



3. CHANGES IN THE ESTONIAN HEALTHCARE SYSTEM

The development of technology, demographical changes and the concentration of the workforce in Tallinn and Tartu guide healthcare institutions to find people-centered and realistic solutions in their cooperation.

Centrally managed allocation of work and cooperation will ensure that this challenge is combated successfully:

- ▶ organization of outpatient specialist care, incl. transport of patients between Tartu and other hubs;
- ▶ concentration of the active care of patients in Tartu and expansion of follow-up treatment opportunities in other healthcare facilities;
- ▶ unified management of specialist appointments and development of e-consultations.

4. DEVELOPMENT TRENDS IN SCIENCE AND EDUCATION

The development of science and education will be affected by the following trends in the upcoming years:

- ▶ rapidly developing virtual study technologies based on models, replicas and e-solutions;
- ▶ the requirements of medical curricula will increase;
- ▶ the role of academic clinical trials in the development of medicine will increase;
- ▶ the demand for the training of doctors and especially nurses will increase.

To combat this challenge, it is necessary to:

- ▶ constantly train doctor lecturers in the field of study technologies and information literacy;
- ▶ participate in as many and as large-scale international research and development projects as possible;
- ▶ motivate additional research and development by Hospital staff;
- ▶ use scientific infrastructure to ensure competent support for healthcare workers engaged in research and innovation;
- ▶ willingness to train more students and ensure the appropriate infrastructure as required.





4. EXPECTATIONS OF STAKEHOLDERS FOR THE HOSPITAL

The expectations of stakeholders have been formulated based on discussions at various seminars. The discussions took place, inter alia, at the Estonian Patients Council, corresponding, at seminars of clinical fields, between field leaders and management and during meetings with Southern Estonian family physicians. The expectations of founders have been formulated based on conversations held with the rector of the University of Tartu, the mayor of Tartu and the chancellor of the Ministry of Social Affairs. The expectations of students were discussed with the Estonian Medical Students' Association.

1. WHAT DO THE PATIENTS EXPECT FROM US?

The patients expect the healthcare system to provide a smooth and seamless treatment process from diagnosis to post-treatment consultation. The patient's primary expectation is to get well. The objective is not only the treatment of diseases, but the overall wellness of a person, including health. The patients' primary expectations for us are, first and foremost:

- ▶ caring, understanding, inclusion and a sense of security. Intelligible communication, great treatment and thorough and comprehensible explanation thereof. Dialogue with the physician to discuss treatment options, possible benefits and the risks involved for the patient to make an informed decision / provide informed consent. The patient needs to be sure that they will receive the best possible treatment at the hospital;
- ▶ time for every patient; a feeling that the patient is welcome at the hospital;
- ▶ smooth treatment process, sensible and polite communication. Diagnosis and treatment as quick as possible;
- ▶ holistic approach, access to assistance near one's home. The patient expects all of their treatment-related problems, including health-related, social as well as psychological issues, to be addressed at the hospital and throughout the treatment process;
- ▶ more efficient, but also more protected cross-use of data between various (healthcare) service providers;
- ▶ collective nature of healthcare workers and hospitals;
- ▶ high-level readiness for emergency situations, security for the community.
- ▶ good hospital conditions.

2. WHAT DO THE EMPLOYEES EXPECT FROM US?

The employees expect:

- ▶ clear goals from the employer. People want to be a part of something, to see and feel their role in it. The Hospital has a clear vision, values and principles that are always followed. They wish to be proud of their establishment: "I work at the best hospital in Estonia";
- ▶ good work environment where the employee has the chance to personally impact work processes;

- ▶ safe work environment that prevents burnout, creates a sense of security in regard to the future, reasonable allocation of work time and duties and great pay;
- ▶ clear and transparent career model that supports employees, diverse development opportunities.

3. WHAT DO STUDENTS AND MEDICAL RESIDENTS EXPECT FROM US?

This stakeholder group expects the hospital to have:

- ▶ enthusiastic, competent lecturers who are capable of development, motivated and possess great teaching skills;
- ▶ great infrastructure for learning, sufficient patients for practical study, possibility for hands-on work;
- ▶ students and medical residents are anticipated partners and lecturers/supervisors have time for them;
- ▶ students and medical residents are aware of research, development and cooperation projects and their opportunities to participate therein;
- ▶ students and medical residents are provided respectful, fair and equal treatment, recognition and pay for their work.
- ▶ good support system, training and constant supervision for assistant nurses and assistant doctors;
- ▶ supervision of interns is of high quality and consistent across all departments;
- ▶ medical residents are provided the necessary tools and the logistics of job posts is systematically managed at the hospital to ensure that there is no over- or under-use of medical residents in any department.

4. WHAT DO FAMILY PHYSICIANS EXPECT FROM US?

Family physicians expect the following from the Hospital:

- ▶ presence of a Head of Outpatient Care who ensures smooth organization of outpatient work and communication and information exchange with family physicians;
- ▶ collegueship and collective nature;
- ▶ smooth and great treatment journey for the patients, IT solutions to support it, quick data exchange between specialists and family physicians;
- ▶ discussion and feedback concerning cases, clear instructions from the Hospital regarding various patient treatment journeys;
- ▶ the greater capacity of the general medicine department at the hospital, availability of outpatient day care and outpatient appointments in subsidiary hospitals;
- ▶ provision of certain primary services by the hospital (physical therapy, midwifery, home nursing).

5. WHAT DO SUBSIDIARY HOSPITALS AND PARTNER HOSPITALS EXPECT FROM US?

Due to demographic circumstances, it is necessary to ensure a flow of patients of a certain field to subsidiary hospitals in order to ensure their viability, however, the presence of knowledge and skills for the treatment of such patients is vital as well. Subsidiary and partner hospitals expect the following from the Hospital:

- ▶ assistance in the treatment of local people;
- ▶ clarity in regard to which patients are treated on-site and which are to be transferred to the Hospital;
- ▶ clarity in regard to the role of the Hospital and local hospitals in the treatment of patients in their service area.



6. WHAT DO THE FOUNDERS EXPECT FROM US: THE STATE, THE UNIVERSITY OF TARTU AND THE CITY OF TARTU?

The state expects the Hospital to define its role in the (development) landscape of Estonian healthcare, take responsibility for treatment in Southern, Eastern and North-Eastern Estonia and to ensure treatment quality in local hospitals as well. The state expects the Hospital to ensure high-quality and sustainable medical education in Estonia in cooperation with the University of Tartu and, in view of regional policy, that Tartu will maintain its position as the center of medical education in the Republic of Estonia.

The city of Tartu expects the Hospital to provide healthcare services in the region as a general as well as a regional hospital, incl. ensure consistency of social services in cooperation with the city government, take note and guide resolution of the social problems of patients. The city expects the Hospital to maintain and strengthen its position in the provision of healthcare services, incl. as an international center. This will increase the number of patients treated here, the number of jobs in the city of Tartu and development of study and research work in the field of healthcare. As the Hospital is one of the most important local employers, the city expects the Hospital to contribute to the execution of regional politics.

The University of Tartu expects the Hospital to fulfil its role as a modern learning facility in the field of medical science, possess the relevant modern infrastructure and sufficient diverse treatment activities; as well as jointly coordinated contribution to research and development activities.



7. WHAT DO INNOVATION PARTNERS EXPECT FROM US?

Innovation partners expect access to clinical data to test and develop new innovative diagnostic and treatment methods for improving the welfare of patients. Trials at a university hospital, an academic medical center, are an important prerequisite for the proper registration of new treatment and diagnostic methods before their implementation in the healthcare sector.

In terms of further development, it is necessary to determine the ways in which the Hospital can act as an attractive innovation partner for various parties.



TARTU ÜLIKOOLI KLIINIKUM

5. THE HOSPITAL'S WANTED POSITION FOR 2026

The Hospital is an open organization – open for patients, new ideas, students, medical residents, research works from across the world. The patient will always receive the best evidence-based treatment from us. All patients in Estonia are welcomed and able to come here, because we have experience and credible knowledge.

THE HOSPITAL IS



▶ A healthcare leader in Estonia



▶ The most patient-friendly hospital in Estonia



▶ First choice for patients and partners



▶ Attractive employer



▶ The most collegial hospital in Estonia



▶ The highest valued teaching hospital



▶ Influential research, development and innovation center



▶ Highly valued partner in the cooperation networks of European university hospitals



▶ Green hospital



6. THREE STRATEGIES TO ACHIEVE THE WANTED POSITION

In order to attain the wanted position, we will implement three close-knit action plans:
– university hospital, patient and employee strategy.

6.1. UNIVERSITY HOSPITAL AS AN ATTRACTIVE CENTER OF EXCELLENCE

OBJECTIVE: increasing the impact of the Hospital as a university hospital, establishment of an attractive and inspiring treatment and learning environment that guides the development of medical science and practice in Estonia. Development of a Hospital study and research culture that is based on our values.

ACTIVITIES:

1. TREATMENT ACTIVITIES CORRESPONDING TO A UNIVERSITY HOSPITAL

Based on the development plan of the hospital network, we see an increase in our market share in the special medical care agreement of the Health Insurance Fund. Availability of remote services is an important prerequisite for ensuring and increasing treatment capacity. We can see that in five years, we will be offering certain healthcare services to patients located outside Estonia as well.

We offer our unique competence in healthcare services across Estonia. We will expand outpatient clinic in Tallinn in specialties that local network hospitals fail to provide or the provision of which is insufficient to satisfy the patients' needs.

In cases where the need for services is greater than the Health Insurance Fund's financial capacity or if a service falls outside the list of funded services, we offer such charged services in Tartu and beyond.

We are working to ensure that the need of Southern, Central, Eastern and North-Eastern Estonian patients for higher level medical care is covered by the Hospital. To this end, we cooperate with all local hospitals. We will expand provision of remote services, agree upon comprehensive patient journeys in the fields of cardiology, oncology, etc.

In synergy with the fields of clinical genetics, laboratory medicine, pathology and clinical fields, we will develop a **pioneering Personal Medicine Competence Center in Estonia.** Our most important partners include the Estonian Gene Bank and other subdivisions of the University of Tartu.

A collective consensus is necessary to determine the roles of the Hospital and subsidiary hospitals in the organization of healthcare in our service area. In addition to hospitals, we will also involve local governments in the process of agreeing upon future orientations. We will also have to agree on the best cooperation model with partner hospitals in Ida-Viru county, Jõgeva county, Järva county and Viljandi county.

2. HIGH-LEVEL RESEARCH, DEVELOPMENT AND INNOVATION ACTIVITY

We will increase the involvement of the Hospital in international cooperation networks. Among other things, we will achieve this by taking advantage of the involvement of the University of Tartu in various partnership programs.

We will work towards increasing the Hospital's funding as a university hospital in co-operation with universities in order to increase the funding of research and development work and the volume of cooperation agreements with companies engaged in the pharmaceutical industry and medical technology. We will promote innovation, support the creation of spin-off companies, research-intensive entrepreneurship. We will create opportunities for applied research, incl. the testing of AI and its application in clinical medicine.

We will empower clinical research **by including significantly more patients in research studies** (the goal is at least 60% of the Hospital's patients). We will continue to develop the Clinical Trial Center, incl. biobanking, in order to figure out the best model to conduct clinical research in Estonia.

We will develop health sciences (incl. nursing) and implement research results in practice.

We will allocate a part of the Hospital's financial outturn to finance scientific development and innovation activities. We will put together a research development strategy in cooperation with the Institute of Clinical Medicine of UT.

3. HIGHLY VALUED STUDY ENVIRONMENT

Students. We will ensure that the students have the necessary access to patients for their studies. We will pay special attention to the development of the teaching skills of our doctor lecturers and the quality of student supervision. We consider our work in teaching as important as our work in treatment. We give recognition to committed lecturers. We will continue to develop the simulation center in cooperation with the field of medical science of the University of Tartu.

Medical residents. We will develop a base program for residents to be completed by all residents who are undergoing their residency at the Hospital. The aim of the base program is to set the standard of the hospital higher than the minimum set by the university and, therefore, become the most qualified residency base in Estonia. We will hire a residency coordinator whose task will be to provide a departmental rotation plan across fields, ensure registration to the trainings of the base program (as well as the logistics concerning instructional training of doctor lecturers), logistics of residents and the resolution of other possible issues. We will



ensure the necessary tools for medical residents. We will develop a mentorship program in the hospital, the aim of which is to provide a field-specific mentor for each new medical resident by 2026. Our aim is to motivate residents to spend their residency to become an evidence-based and science-appreciating specialist doctor by supporting the development and persistence of great collegial relations. We teach medical residents self-care and to avoid burnout, thus helping the hospital's residency programs to produce strong specialist doctors who are fully prepared to commence with independent specialist practice.

Development of lifelong learning. We offer a treatment environment and competence to conduct further training at the Hospital. We will develop a training program for all levels of healthcare workers in the hospital's career model, which will be regularly updated to support lifelong learning of healthcare workers and smooth transmission of field-specific knowledge to colleagues.

We will work in cooperation with the University of Tartu to ensure **special funding for the Hospital** as a university hospital.

We will give the main building of the Maarjamõisa manor to be used by the Estonian Medical Students' Association under a mutually suitable agreement.

4. ACADEMIC SUCCESSION

Ensuring highly competent succession in clinical, study and research work is the key issue for the development of the university hospital. **We will work together with the University of Tartu to motivate young people to choose an academic career path in clinical specialties.** We will launch a knowledge transfer doctorate program in cooperation with the university.

We will introduce **scholarships for training in the area of research and treatment in clinical specialties.** We will support the research training of students and residents. We will work together in implementing interdisciplinary research projects.

We will support the participation of employees in **microdegree programs to acquire additional competences.**

5. ATTRACTIVE TREATMENT AND RESEARCH ENVIRONMENT

We will ensure the development of electronic medical history (eMH) with a focus on the treatment process. We will pay special attention to the development of digital capabilities necessary for outpatient care, incl. remote services. We are working towards Estonian hospitals adopting a collectively developed patient information system. We are improving



the capacity of eMH to support research and development activity. We are increasing the Hospital's analytical aptness.

We will prepare a functional development plan, launch planning and design work on the F Corpus at L. Puusepa 8.

6. GREEN HOSPITAL

We will focus on **efficient use of resources**, reduction and sorting of waste. To this end, we will raise awareness in the organization, make decisions on technical solutions based on environmental protection and implement a certified environmental management process. The environmental objectives and activities are visible and available to the community as well as all other stakeholders via environmental reports, creating an opportunity to speak up and gather ideas. We will prepare an annual environmental action plan.

RESULT: the reputation of the Hospital as a university hospital is high, our staff include important health policy makers in Estonia. The Hospital is the most popular base institution among new residents and the most preferred employer among graduates. The Hospital has a modern working environment, a hotbed for digital solutions that are important from a healthcare point of view. We set a great example in implementing an environmentally green approach. The Hospital is actively involved in European research, development and innovation cooperation.

6.2. THE MOST PATIENT-FRIENDLY HOSPITAL

OBJECTIVE: improve a people-centered approach, inclusion of patients and their loved ones in the making of treatment decisions. Ensure that all patients receive equal care that is as science-based as possible.

ACTIVITIES:

1. INCLUSIVE TREATMENT THAT IS BASED ON PATIENT-SPECIFIC NEEDS

We constantly assess and analyze the patient experience. We ask for direct feedback from the patient and take it into account, we will adopt a patient recommendation index. We will conduct a qualitative study on service experience. We analyze and adapt treatment processes and activities based on the results achieved.

We are leaders of patient safety in Estonia in cooperation with the University of Tartu and the Tartu Health Care College, we include patients and their loved ones in the development of patient safety culture.

We will create a genetics and personal medicine clinic, which will, inter alia, pay special attention to assessing the individual genetic risks of patients, counselling of patients and implementing the opportunities of precision medicine in common diseases (cardiovascular diseases, malignant tumors) as well as in rare diseases.

We will **develop remote service models**, especially for more common diseases and services (psychiatric outpatient consultations, laboratory services, etc.) in order to improve service availability and continued use of the services for patients and thus make the entire treatment journey smoother.

2. THE MOST COMPETENT TREATMENT TEAMS

We maintain and develop necessary competences, facilitate cooperation between treatment teams and promote a communication culture based on our core values. We develop modern diagnostics and treatment methods to benefit the patients.

Our treatment activity is scientifically justified, fully analyzed and complies with international standards. We assess treatment quality through field-specific quality indicators, develop the capability for scientific analysis of treatment results and calculation of quality indicators; we collect patient reviews on health outcomes, we are included in international comparisons on treatment quality and hospital rankings.

We work to ensure that every clinic has at least one (sub)field of national priority, which we will present and develop on a national scale. We will create relevant competence centers. We cooperate with international centers. We will create opportunities for practical studies in internationally acknowledged hospitals. In the development of nursing and mid-wifery services, we follow the best evidence-based practices that meet people's needs and expectations. Employment of special nurses help facilitate resolution of the patients' health issues and support persons on their treatment journey.

3. SMOOTH JOURNEY FROM DIAGNOSIS TO RECOVERY

We will improve nationwide cooperation with family physicians to ensure integrated and continuous treatment for patients. We will hire an outpatient work coordinator at the hospital, develop digital solutions to support outpatient work.

We will develop a clear **operational strategy for cooperation with subsidiary and partner hospitals**. We will focus more on assessing and analyzing the level of satisfaction of our partners.

We will employ nurse-coordinators at private clinics to ensure a comprehensive and smooth treatment journey.

We will improve availability of hospital beds. We will analyze the use and logistics of beds. Based on this, we will develop an optimal solution for the use of the bed fund.

We will improve health behavior in cooperation with patients, contribute to prevention and promote health.

4. PATIENT-FRIENDLY ENVIRONMENT AND COMMUNICATION

We will continue our investments to **shape a treatment environment that meets patient expectations.**

We believe it is important that the **patient is timely and constantly informed of their treatment process.** We will adopt digital solutions directed to improve the coping and life quality of the patient, varying depending on the patient's reception capacity. We will modernize the client service unit.

The materials intended for patients are evidence-based, up-to-date, informative and easy to use. We use various communication channels, incl. social media platforms and information lines.

RESULT: the Hospital is a highly valued healthcare institution among patients and their loved ones; a place where all patients in Estonia would like to be treated. The Hospital is renowned and acknowledged, a leader in the development of treatment quality. Cooperation with family physicians and other partners is great, mobility of patients during their treatment journey has improved and is smooth. Patient satisfaction and the recommendation index are high. Patients and their loved ones trust the healthcare information provided by the Hospital.

6.3. MOTIVATED EMPLOYEE AS THE BIGGEST ASSET

OBJECTIVE: a motivated employee who adheres to the core values of the Hospital. To support the sense of community among Hospital employees, value the status of being a Hospital employee, creation of new knowledge and adding to experience. Improve cooperation, satisfaction and motivation among employees. The employees have clear and understandable benefits offered by the Hospital as the employer for motivation in addition to salary.

ACTIVITIES:

1. SUPPORTING EMPLOYEE DEVELOPMENT

The Hospital provides a diverse working environment where treatment, learning, research and development are intimately linked. **This creates an environment that is oriented towards employee development.** We support the development of clinical competencies of employees, research and development activity, balancing working and lifelong learning, incl. degree study, we provide paid time for doctoral studies.

We participate in further trainings based on the objectives of the Hospital to teach colleagues and learn relevant methods ourselves. We provide employees a modern learning environment. We offer opportunities to advance one's teaching and supervisory skills. We ensure employees access to the newest specialized medical information for consistent independent learning.

We will develop and implement career models that motivate employees to maintain a stable working relationship. We value the energy of the young and the experience of older employees.

We agree upon the work objectives of employees and provide feedback on the completion thereof to employees during regular performance reviews, creating a united and complimentary atmosphere.

2. SHAPING THE EMPLOYEE WORKLOAD

The workload of people working in healthcare is excessive for two reasons: due to the high demand of the labor market and, secondly, due to the readiness of employees to satisfy that demand. **We consider work-life balance important.**

We are seeking opportunities for systematic normalization of workloads – **we support flexible and efficient work arrangements.** To this end, we rearrange works or work processes and their timetables. We will abandon activities that we can replace by software solutions and external service providers.



We will map out the need for personnel, analyze bottlenecks, forcefully notify the state thereof. We will popularize healthcare vocations among students. We will provide students and medical interns a positive internship experience and hire them as specialists after graduation.

We will continue to measure and analyze employee satisfaction and focus on improving the aspects that most affect it.

3. PROMOTION OF LEADERSHIP CULTURE

The Hospital is an organization that unites many specialists, where the leaders are great specialists of their field. **Therefore, managing a subdivision sets high expectations for leadership as well as professional competencies.**

We will modernize and unify leadership principles. We will direct heads of all levels to act as leaders and take responsibility. We will ensure leaders access to necessary data and information and support them through problem resolutions.

We will improve communication, value openness and employ equal treatment. In order to work as an open organization, we hold competitions for the selection of new heads. We will create a culture and readiness in the organization to return to one's dignified specialist work after the completion of fixed term leadership duties.

We will determine necessary leadership base competencies and create a training program for the development of leadership skills on the basis thereof. We share best leadership practices.

We will implement an evaluation of the work results of leaders on a regular and unified basis.

4. UPDATING THE EMPLOYEE BENEFITS PACKAGE

We pay attention to the provision of simple, yet important benefits from an employee's point of view: supporting onboarding program for new employees and heads, provision of modern working conditions in terms of tools as well as rooms, organization of collective events, promotion of regular healthy activities, incl. compensation of sports costs, compensation for glasses, discount offers from partners to Hospital employees. We gather proposals from employees and consult with employee representation organizations during compilation and supplementation of the benefits list. Upon updating the benefits package, we assess the budgetary burden of the measures and choose the most optimal solution.

RESULT: the Hospital cares about its employees and the employees feel that. The employees are proud of the institution as well as their occupation, their work satisfaction level is high. Hospital employees support and value the good reputation of the institution and sense their contribution in fulfilling the Hospital's mission. Employee satisfaction and the recommendation index are high.



7. COMMUNICATION OF THE HOSPITAL WITH STAKEHOLDERS

A communication strategy of the Tartu University Hospital will be prepared after the completion of the development plan 2022–2026. The objective of the strategy is to support and facilitate the performance of the strategic objectives of the Hospital's development plan through systematic communication activity.

The planning of communication activities will take place through the mapping of the strengths and development opportunities of internal, external and patient communication activities. The development of the communication strategy will take into account the interests and needs of the Hospital as well as its internal and external stakeholders and the primary messages, their distribution channels and methods will be planned on the basis thereof.

The planning of activities will consider the expectations of the stakeholders gathered during the preparation of the development plan, the strengths and specific nature of the Tartu University Hospital on the healthcare landscape. If necessary, further feedback will be collected to gain an overview of the Hospital's position on the healthcare landscape and to shape additional communication activities to facilitate achieving the desired position.

The Hospital's communication, i.e. communication with stakeholders, is open and mutual, constant and takes into account the feedback received from stakeholders. The success of planned communication activities is based on all employees, especially those in leading positions.

ANNEX 1. KEY INDICATORS OF THE HOSPITAL

	Key indicator	What does it show?	What indicates a good result?	Calculation method
Treatment				
1.	Proportions of patients who have received elective operations in day surgery out of all planned operations	Efficiency of treatment, rational use of the bed fund	Rising trend, up to 70%	<p>Formula = $(X - \text{number of patients who have been operated on in day surgery} / N - \text{number of patients who have been operated on during inpatient care} + \text{day care}) * 100\%$.</p> <p>Formula Z (%) = $(X/N) * 100$</p> <p>Target group: all patients who have had planned operations, who will undergo an operation.</p>
2.	Efficiency of the use of operating rooms	Organization of surgical work, sensible use of resources	>80%	(Actual stay of patients in the operating room / total operation time allocated for each operating room (planned operating time of the operating room)) *100. The indicator is calculated for the big operating block (OR1) at Puusepa 8, G Corpus.
3.	Proportion of hospitalized patients who spent more than 360 minutes in the emergency department	Clinical indicator of emergency medicine. A large number indicates that some specialties have insufficient beds for treatment	The national indicator sets the objective at <20%. That is a very low bar. A good result would be <10%.	(Number of hospitalized patients who spent >360 minutes at the ER / number of hospitalized patients) *100
4.	Proportion of outpatient appointments held outside of Tartu (incl. Tallinn) of all appointments	Indicates the scope of the catchment area of our treatment	We wish to see an expanding treatment area, i.e. increasing proportion	Number of doctor's appointments held outside of Tartu (Tallinn, Ida-Viru county, Võru, Põlva, etc.) / number of doctor's appointments, regardless of the location of the service) *100.
5.	Incidence rate of bloodstream infections during hospitalization (number of episodes per 1,000 bed days)	Enables to monitor patient safety and correctness of treatment. Hospital infections are significant complications arising from hospitalization. The higher the indicator, the worse the situation.	The international standard is < 0,9 episodes per 1,000 bed days	(Number of bloodstream infection episodes during hospitalization registered per year / number of bed days) *1,000

Patsiendikogemus				
6.	Patient satisfaction with outpatient healthcare services	Patient satisfaction	>70% is a good result, >80% is a very good result	(Number of respondents who are very satisfied with outpatient services / number of respondents who answered the general satisfaction question in the survey) *100
7.	Patient satisfaction with inpatient healthcare services	Patient satisfaction	>70% is a good result, >80% is a very good result	(Number of respondents who are very satisfied with inpatient services / number of respondents who answered the general satisfaction question in the survey) *100
8.	Patient recommendation index	Simple and proven method to measure client satisfaction, measures the proportion of loyal patients.	A score of >0 is considered good and >50 exceptional. A detailed analysis is necessary across specialties.	<p>The question "Would you recommend the Hospital to a loved one or acquaintance who needs to be treated?" will be answered on a scale of 0 to 10. Calculation of the recommendation index: responses with a value of 9 and 10 are referred to as recommenders.</p> <p>Responses with values from 0 to 6 are considered unsatisfied and they are considered as less likely to create value. Responses 7 and 8 are marked passive and their behavior falls between recommenders and the unsatisfied. Index = proportion of recommenders (%) - proportion of the dissatisfied (%). The passives are included in the total count of respondents and therefore lessen the proportion of recommenders and the dissatisfied and skew the NPS value towards 0.</p>
9.	Patient fall rate at the hospital	A widely and internationally used quality indicator for the work of nursing and care personnel	<0,5%	(Registered inpatient fall rate / number of patients annually cured during inpatient care)*100
10.	Proportion of first time outpatient appointments, preceded by an e-consultation	An e-consultation helps the patient feel that they have quickly accessed competent counselling. Specialist doctors can decide on the basis of the data on the referral note to call to an appointment only the patients who need it.	25...75%. It varies across specialties. It cannot be 100%, it must be possible to get an appointment without an e-consultation.	(Number of e-consultations (with a take over treatment indicator) per year in specialties where it is provided / number of first time doctor appointments in specialties where e-consultations are provided)*100.

Our employees				
11.	Employee satisfaction	General employee satisfaction. It is important to note changes over time	>80%, stable or rising trend. The proportion of respondents >50% of all employees.	(Number of patients who are happy with their work, who answered definitely agree or rather agree / number of employees who took the survey)*100.
12.	Employee recommendation index	Identity of the organization, employee loyalty to the organization, value of the Hospital as an employer	A score of >0 is considered good and >50 exceptional.	The question "Would you recommend the Hospital to a loved one or acquaintance as a place of employment?" will be answered on a scale of 0 to 10. Calculation of the recommendation index: responses with a value of 9 and 10 are referred to as recommenders. Responses with values from 0 to 6 are considered unsatisfied and they are considered as less likely to create value. Responses 7 and 8 are marked passive and their behavior falls between recommenders and the unsatisfied. Index = proportion of recommenders (%) - proportion of the dissatisfied (%). The passives are included in the total count of respondents and therefore lessen the proportion of recommenders and the dissatisfied and skew the NPS value towards 0.
13.	Participation of doctors in continuous medical education (academic hours per person per year)	Maintaining and developing employee competence	60 academic hours per employee per year	(Number of academic hours spent in further training by doctors / total number of doctors (physical persons))*100
14.	Participation of nursing staff in continuous medical education (academic hours per person per year)	Maintaining and developing employee competence	60 academic hours per employee per year	(Number of academic hours spent in further training by nursing staff / total number of nursing staff (physical persons)) *100.
15.	Proportion of doctors under the age of 40 among all doctors	Consistency, constant renewal of succession	≥25% of employees. The proportion of this age group should be at least equal to the proportion of employees who are over the age of 60	(Number of doctors (excl. medical residents) aged <40 / number of all doctors (excl. medical residents) in physical persons)*100

16.	Number of nursing staff under the age of 40 among all nursing staff	Consistency, constant renewal of succession	≥33% of employees. The proportion of this age group should be at least equal to the proportion of employees who are over the age of 60	(Number of nursing staff aged <40 / total number of nursing staff (physical persons)) *100.
Research and study				
17.	Number of high-quality research publications	Indicates active research work and the capacity of employees to publish research results on an international level	No less than 200 research publications per year. Effectiveness analysis that shows persistence / increase in effectiveness	Number of publications published in ETIS 1.1, 1.2, 2.1 and 3.1, 01.01...31.12
18.	Proportion of doctors who work under the University of Tartu on the basis of an employment contract or authorization agreement out of all doctors	Indicates cohesion and scope of cooperation between the Hospital and the University of Tartu	≥25%, not a downward trend over time.	(Number of doctors working at the University of Tartu under an employment contract / number of doctor lecturers at the Hospital)*100, as of 31.12
19.	Proportion of doctors with a doctorate degree	Indicates the proportion of highly educated doctors with research competency at the hospital	30% of doctors at a university hospital should have a research degree. By year 2030, all senior doctor lecturers should hold a doctorate degree	(Number of doctors with a doctorate degree / total number of doctors)*100, as of 31.12
20.	Number of nursing staff who hold a master's degree	Indicates the proportion of highly educated nursing staff with special competence	Rising trend, no international comparison	(Number of nursing staff with a master's degree / total number of nursing staff)*100, as of 31.12

Financial activity				
21.	Market share of the Hospital's specialist medical care of the volume of specialist medical care of the Estonian Health Insurance Fund	It reflects the size of the Hospital's service area which, in turn, is important for the full functioning of the university hospital	The higher, the better. A good result would be a trend that does not decrease over time.	[Actual financial volume for performing the specialist medical care contract (annex to the contract, incl. period fees and special cases) of the Hospital's treatment funding contract with the overtime coefficient / volume of the actual costs of specialist medical care services (incl. period fees and special cases) funded by the Estonian Health Insurance Fund (as of the end of the year)]*100, as of 31.12
22.	Benefit-cost ratio	Financial sustainability of the organization	The benefits must cover the costs, i.e. 1.0...1.1	Total benefits / total costs, as of 31.12
23.	Investment volume (proportion of turnover)	Sustainability of the organization, timely renewal of apparatus	Amortizing apparatus has been timely renewed, investments have also been made to new technologies and buildings	Total investments (buildings, apparatus, etc.) / total turnover of the Hospital) * 100, as of 31.12
Environment				
24.	Energy consumption per bed day	Efficient and eco-conscious management	Not a growing trend	Total annual energy consumption of the Hospital / number of bed days per year
25.	Energy consumption per outpatient appointment	Efficient and eco-conscious management	Not a growing trend	Total annual energy consumption of the Hospital / number of outpatient appointments per year
26.	Proportion of sorted waste collected	Eco-conscious and sustainable waste management	Rising trend up to 100%	Total volume of sorted waste collected (packaging, old paper, biodegradable waste) / total volume of domestic waste)

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