

# **Project idea form - small projects**

Version 2.1

Registration no. (filled in by MA/JS only)	

## **Project Idea Form**

Date of submission 02/06/2025

## 1. Project idea identification

Project idea name	Improving accessibility of person centred counselling for diagnostic examinations	
Short name of the project	APEX	
Previous calls	yes ○ no <b>●</b>	
Seed money support	yes ○ no ●	

## 2. Programme priority

1	Innovativa	caciation
Ι.	Innovative	societies

## 3. Programme objective

1.2. Responsive p	ublic services
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## 4. Potential lead applicant

Name of the organisation (original)	Metropolia Ammattikorkeakoulu
Name of the organisation (English)	Metropolia University of Applied Sciences
Website	https://www.metropolia.fi/en
Country	FI





Type of Partner	Higher education and research institution
Contact person 1	
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Higher education and research institution

Which organisation(s) in the planned partnership take part in a project within the Interreg Baltic Sea Region Programme for the first time? Please list the respective partners.

Metropolia University of Applied Sciences Kauno Kollegia Tartu Applied Sciences University

#### 5.1 Specific challenge to be adressed

In the current economic state of Baltic region states and overall in Europe, it seems that the amount of healthcare resources can't be increased. On the contrary there are pressures to cut them off. In many municipalities this has been tackled by changing many services online which is a cost-effective way of offering them. This applies especially to counselling services which are easiest to turn digital. However, there are client groups that either are not able to use the digital services or do not prefer to use them or in addition to digital services would like to have individualised counselling given person to person provided by healthcare professionals. These target groups comprise elderly and intellectually disabled persons, persons with serious health problems and with other vulnerable conditions, socially marginalized groups, immigrants with weak language proficiency, but also persons from all age groups and health statuses who simply rather communicate with real persons instead of technology. The challenge is especially emphasised in remote regions and regions with fewer health care resources.

Customers using diagnostic services want to receive information about the risks and benefits of imaging and laboratory examinations, about their contents and meaning of preparatory procedures before the examinations in a language they really can understand. The lack of easy to understand





counselling services related to diagnostic examinations may lead to situations that diagnostic examinations can't be performed in an optimal manner or at all or they are delayed if necessary preparation procedures have not been done or they have been done in a wrong way. Also, in case preparation procedures of diagnostic examinations have not been followed, the tests can give wrong results which in turn may lead to false diagnoses, false prescriptions or may give false information to the clinician about the follow up of clients clinical condition. In order to avoid this, easy to access person centered easy to access counselling services for diagnostic services are needed. Higher education institutions educating diagnostic health care professionals can serve here as a resource and provide these services for all members of the society in a less bureaucratic manner in collaboration with public healthcare providers. These person to person services work even if online services for some reason do not work or there are disturbances in online services e.g. because of cyberincidents.

#### 5.2 Focus of the call

The intended project aims to improve accessibility of person centred plain language counselling services for diagnostic examinations.

Objectives are to

Do a needs assessment of the person centred plain language counselling services for diagnostic examinations.

Construct a service model comprising

- 1. Phone services having real person responding clients questions,
- 2. Onsite and synchronous person to persons online sessions
- 3.A website and human based chat service providing easy to understand information about the continents and preparation for diagnostic examinations

To create grounds for consolidating the service model as a routine collaborative action model..

- 1. Informing about the service model via HEI's and healthcare institutions websites
- 2. Organizing national and international seminars about the service model for healthcare service providers and citizens

The services are constructed in national languages of the Baltic Sea region in project participating countries in collaboration with public healthcare providers and higher education institutions educating diagnostic health care professionals. This makes their provision possible in a cost-effective manner since healthcare students may provide them in the frames of their clinical placements under the supervision of healthcare teachers and professionals. Phone services are accessible also to citizens of small places, rural areas regardless of clients socioeconomic status in any communities within the Baltic Sea region.

#### 6. Transnational relevance

The Baltic Sea region countries have many similar features related to their healthcare challenges: compared to other European countries they are relatively sparsely populated, they have a growing number of elderly population, their healthcare systems and health care financing systems are pretty similar. Also, IT infrastructure in these countries is well developed and therefore many counselling services have been transferred online only. Therefore in terms of need for person centred counselling services for diagnostic examinations these countries are in a similar situation and it is cost-effective to





develop the service concept together. In addition to collaborating while creating new solutions, better innovations tend to emerge in international and interprofessional collaboration than just looking at phenomena from one viewpoint.

The partnership will be formed based on principles: similar needs in regards of patient guidance education, best competences of the fields complementing other partners competence areas, educating at Bachelor level both biomedical laboratory scientists and radiographers and having good connections to the surrounding communities and healthcare organizations, good reputation as reliable, productive and teamplayer organisations and actors organisations that have resources and facilities to participate and run the project in a given timetable and expected self funding share. In addition, partners need to be located around the Baltic Sea.

#### 7. Specific aims to be adressed

#### Building trust that could lead to further cooperation initiatives

As mentioned at the earlier parts of this document, diagnostic professionals inside Baltic Sea Region have not a common forum to discuss and operate with the challenges these countries share. So far the collaboration they have had has been bilateral between different higher education institutions. This project would be an opportunity to widen this collaboration from bilateral and profession specific contacts to multiprofessional and multilateral cooperation involving healthcare organisations to it. This can yield to larger practice work and project collaboration amongst Baltic sea region countries which is needed during these unstable times in healthcare.

Initiating and keeping networks that are important for the BSR

This project initiative is as such a new network of the participating organisations. However, Metropolia and Tartu Applied Health Sciences University have run together already several successful European and Nordic projects, one of them being accredited by Estonian science academy during fall 2024. This particular network can be a starting point for a wider healthcare related network on the diagnostic field and widen to other healthcare fields. There does not exist any systematic networks in the diagnostic field in the Baltic Sea Region meaning that as such it is an innovative opening. After this project the network created in this project can consider inviting also other Baltic Sea Region countries to this network and implement the service model created in this project to other countries of the region.

#### Bringing the Programme closer to the citizens

As the actions produced by this project are very tangible and easy to understand for the citizens, it is easy to explain to the inhabitants of the Baltic Sea Region the benefits of the Interreg Baltic Sea Region programme. Local citizens co-create project outputs and citizen/patient organizations from project participating countries join the project as associate partners. Also, explaining to them the collaborative aspects of this project gives them an idea of the benefits of collaborating between Baltic Sea Region countries instead of every country trying to solve the same challenges on its own. The project also organises seminars related to the project where citizens are introduced to the project and a scene where they can co-creatively participate in planning and assessing the services produced in this project. In these seminars also general awareness about the Interreg Baltic Sea Region programme is





#### delivered and promoted.

Allowing a swift response to unpredictable and urgent challenges

Developing person to person counseling services for diagnostic services aside from web-based services only, guarantees that these services will be available also in case of cyberincidents. Nowadays attacks on public service providers' web pages are not uncommon. Guidance given via phone services or onsite on set locations still work on such cases and thereby ensure that healthcare clients are able to get counselling in any circumstances.

#### 8. Target groups

In the project planning and execution stage, the ones constructing the person centred counseling model for diagnostic services are healthcare organizations and higher education institutions involved in the project including their staff members and students. In addition, active involvement of patient organizations and health care clients with different profiles mentioned below in the co-creation process of the services is vital in order to make them client centred.

The target groups using diagnostic counselling service model comprise elderly and intellectually disabled persons, persons with serious health problems and with other vulnerable conditions, socially marginalized groups and immigrants with weak language proficiency. In addition users of the service will be client groups that either are not able to use the digital services or do not prefer to use them, or in addition to digital services would also like to have individualised counselling given person to person provided by healthcare professionals. The users of the service come from all the age groups and with health statuses. The challenge is especially emphasised in remote regions and regions with fewer health care resources.

	Please use the drop-down list to define up to five target groups that you will involve through your project's activities.	Please define a field of responsibility or an economic sector of the selected target group	Specify the countries and regions that the representatives of this target group come from.
1.	Hospital and medical centre	Biomedical laboratory and medical imaging services	Finland: municipality area, Kymeenlaakso. Estonia: Tartumaa. Lithuania: Kaunas area
2.	NGO	Senior citizen's associations, patient organizations	Finland: municipality area, Kymeenlaakso. Estonia: Tartumaa. Lithuania: Kaunas area





3.	Higher education and research institution	HEI's educating biomedical laboratory scientists and radiographers	Finland: municipality area, Kymeenlaakso. Estonia: Tartumaa. Lithuania: Kaunas area
4.	Interest group	diagnostic professional's organizations	Finland: municipality area, Kymeenlaakso. Estonia: Tartumaa. Lithuania: Kaunas area

#### 9. Contribution to the EU Strategy for the Baltic Sea Region

Please indicate if your project idea has the potential to contribute to the implementation of the Action
Plan of the EU Strategy for the Baltic Sea Region
(https://eusbsr.eu/implementation/).

yes 
no

Please select which policy area(s) of the FLISRSR your project idea contributes to most

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PA Health	
PA Education	
PA Innovation	
The MA/JS may share your project idea form with the respective policy area coordinator(s) of the EUSBSR. You can find contacts of PACs at the EUSBSR website ( <a href="https://eusbsr.eu/contact-us/">https://eusbsr.eu/contact-us/</a> ).	
If you disagree, please tick here.	

#### 10. Partnership

### C=confirmed, N=negotiations ongoing

Metropolia UAS in Finland (C) represents the North-East corner of the Baltic Sea countries. The population of Eastern Helsinki where Metropolia UAS locates represents in high amounts of citizens belonging to the target group of this project. Metropolia has Hymy Village concept which serves the local population and building diagnostic examination counseling service model inside of this ecosystem fits well to meet the needs of the local population, wider society needs and higher education institutions' policy. Metropolia has strong experience and credits in managing successfully international projects, committed management, staff and students to realize the project. In addition it has close connections to local healthcare service providers and community actors.

Kauno Kolegia Lithuania (C) will be included in the project located at the center of the Baltic Sea region





including Bachelor level programmes concerned in this project as well as management, staff and students willing to commit to this project. Lithuania share the challenges related to lack of easy to understand diagnostic examination counselling described in the earlier sections of this document that this project aims to overcome. Kauno Kolegia has strong connections to the surrounding community and local healthcare providers and local professional societies which makes implementing project outcomes fluent and realistic. They also have structures to implement the project process and outcome.

Tartu Applied Health Sciences University at the center of Estonia (N) educates nearly 1400 students and has 138 employees. There are 4 study departments: Nursing and Midwifery Department, Radiography and Biomedical Laboratory Science Department, Physiotherapy and Environmental Health Department and Vocational Education Department. It has excellent connections to local community and local healthcare providers, especially Tartu University Hospital and many of the institution's staff members work part time also in this or other nearby hospital thereby having close contacts to their clients.

Associate partners: The Hospital of Lithuanian University of Health Sciences Kauno klinikos (C), HUCS Diagnostics (N) The patient organization "Gyvastis" (C), Tartu University Hospital (N), Eastern Helsinki seniors (C)

#### 11. Workplan

The project main output will be a person centred plain language counselling service model for diagnostic examinations. The work package divided into five main activities (A) each of them producing one to three deliverables (D) and altogether three main outputs as described below.

Clients of biomedical laboratory and radiography services from the target groups mentioned earlier in this document, diagnostic service provider staff and management members, higher education institutions' staff and students are involved in the co-creation process of the services.

Preparation stage: Drafting financial and consortium agreements and agreements between higher education institutions and healthcare service providers, ethical board permits in the countries it is necessary and other necessary permits for the service

WP: Constructing the counselling service model for diagnostic examinations

Activity 1: Performing needs assessment of the service model for diagnostic examinations D1: An inquiry to local citizens about the need of counseling services for diagnostic examinations Output: Information about the needs of local citizens regarding the need of counseling services for diagnostic examinations

Activity 2: Constructing phone services for diagnostic examinations.

D 2.1. Laboratory examination counselling phone services

D 2.2 Radiography examination counselling phone services





Activity 3: Constructing diagnostic examination counselling website and chat service

D 3.3 Laboratory examination counselling website and chat service

D 3.4 Radiography examination counselling website and chat service

Activity 4: Organizing diagnostic examination related onsite and synchronous online sessions

D 4.5 Laboratory examination related onsite and synchronous online sessions

D 4.6 Radiography examination examination related onsite and synchronous online sessions

Output related to activities 2-4: Health care clients have better access to counseling services for diagnostic examinations

Activity 5: Creating grounds for consolidating piloting the service model for diagnostic examinations. D 5.1 Information about service model for diagnostic examinations on project participating higher education institution's and diagnostic examinations offering healthcare organization's websites and other media

D 5.2 National and international seminars about the service model for healthcare service providers and citizens

D 5.3 Publications about project outputs

Output related to activity 5: Healthcare service providers and patients and citizens became aware of the service model for diagnostic examinations created in the project.

#### 12. Planned budget

Total budget (including preparatory costs)	EUR 428,000.00
Norwegian budget (planned expenditure of partners from Norway)	EUR XXX
ERDF budget (planned expenditure of partners from the EU)	EUR 428,000.00

#### 13. Project consultation

Please indicate if you wish to have a consultation (online meeting) with the MA/JS to discuss your project idea



#### 14. Questions to the MA/JS

Questions related to the	Any suggestions to improve our idea to better fit the program objectives
content of the planned	
project	





Questions related to budgeting and expenditure

Can associate partner's costs e.g. of participating in project related seminars be compensated from project flat rate? Can the budget still be changed a bit after submitting this idea paper?

Any other questions

(max. 1.000 characters incl. spaces)

#### 15. Additional information

(max. 1.000 characters incl. spaces)

#### Your account in BAMOS+

Please remember that to officially submit your application you need to access our electronic data exchange system BAMOS+. More information about the process of applying for your account in BAMOS+ you will find here:

https://interreg-baltic.eu/gateway/bamos-account

