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## Wellbeing Service Innovations – a Collaborative Case Study in Finland

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**Abstract:**

This paper describes a wellbeing service innovation process conducted in collaboration of the service providers and residents of a region in Finland, facilitated by the students and staff of Laurea University of Applied Sciences (UAS). The paper focuses on the development process of six service concepts, out of which two were also piloted. The process combined the perspectives of collaboration and co-creation to utilize the full potential of all the actors in the area to offer the residents services that fit their needs and preferences, combining differing interests in the innovation process. The process utilized the students of the UAS in facilitating the innovation process conducted over several semesters. As a result, this paper presents a case example of the UAS having a distinctive role in the innovation process as a coordinator and a provider of piloting experience for the service providers in the public, private and the third sector.

**Keywords:** Collaboration; co-creation; service design; health promotion.

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## 1 Introduction

This paper describes a case conducted for wellbeing service innovations in collaboration of the service providers and residents of a region in Finland, facilitated by the students and staff of Laurea University of Applied Sciences (UAS). The case combines the ideas of the triple-helix model of the university, industry and the government working together (Etzkowitz 2007) with the ideas of co-creation (Sanders & Stappers 2008). The case seeks answers to the problems the health care sector has when demanded to focus more on health promotion while still taking care of the present day, acute illnesses with scarce resources (Woolf et al. 2008).

The case was conducted as part of a project funded by the European Regional Development Fund called Pumppu in 2011 to 2014. In the project, the focus was on enhancing citizen centric service design and production to enhance empowerment, at the same time enhancing collaboration and seamlessness of care. One key theme in the subproject of Laurea University of Applied Sciences was to highlight the importance of being proactive both through focusing on health promotion as well as through anticipating future needs and preferences through methods such as visionary concept design (see e.g. Meristö et al. 2011 and Meristö et al. 2012 for a description of method).

In health promotion, the living environment is important in shaping healthy habits (WHO 2009). Therefore, the health care professionals cannot work in isolation but collaboration is needed (Woolf et al. 2011). In Finland, collaborative efforts have been implemented e.g. in the city of Hämeenlinna with the concept of minipiloting with small budgets for local actors forming partnerships in service production (Sillanpää et al. 2011). The minipilots also highlight the importance of the service user in the design process. The best motivation for lifestyle changes is achieved through participative design where the needs and desires of the residents are taken as the starting point. The health service providers also have their own interests in service development. Methods such as parallel tracking combine bottom up and top down goals and targets (Laverack and Labonte, 2000).

The integration of study modules into research, development and innovation activities in universities of applied sciences (UAS) is a win-win situation where the students gain access to real R&D&I projects, and the organizations involved get help in their R&D&I problems (Ahonen et al. 2014). For example, the Care Innovation Arena concept provides a triple-helix based forum for collaboration for the UAS and local actors (Santonen & Saarela 2013). The triple-helix approach has also been utilized in combination with the sustainability concept in the construction industry (Meristö and Laitinen 2013). In this case study, this current understanding is put into practice in this specific regional context, with the goal being to find ways of enabling innovations in a collaborative, co-creative manner utilizing student input.

## 2 Research design

The case study described in this paper was conducted by Laurea University of Applied Sciences in close collaboration with one local health and social service provider that operates in two municipalities in the region. Both parties had a shared vision of strengthening the role of health promotion in health care in the region. The shared vision

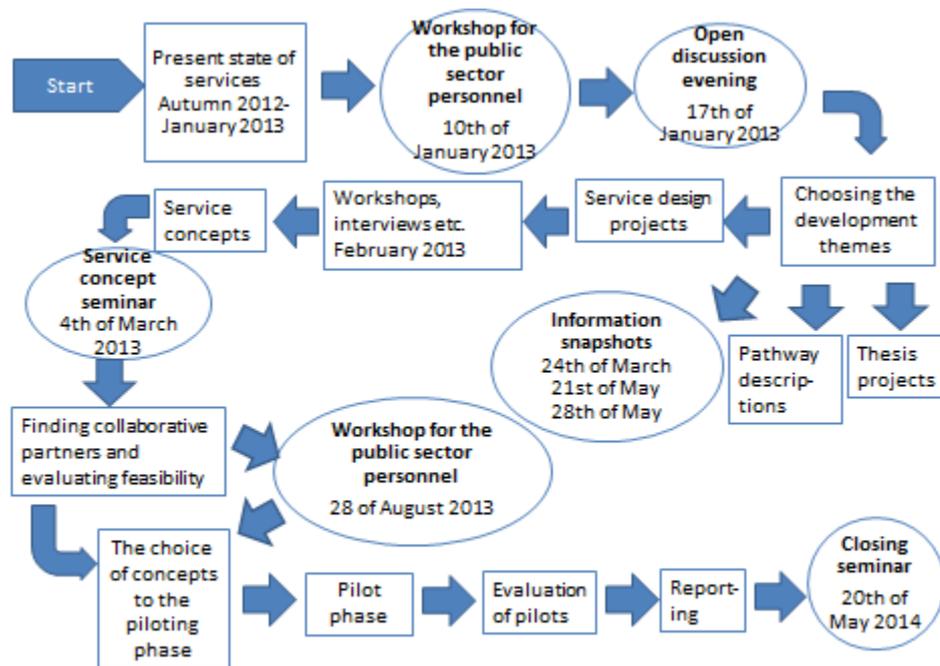
was considered a good starting point for collaboration. However, we also acknowledged the need to take into consideration the ideas, needs, hopes and worries of other actors and the residents in the region, too. Therefore, close attention was placed in the service development process in order to incorporate different views and viewpoint together.

The goals of the case work were hence twofold. We were at the same time interested in developing new services for health promotion as well as developing the service development process itself. The main research question was how to combine the perspectives of collaboration and co-creation to utilize the full potential of all the actors in the area to offer the residents services that fit their needs and preferences. We wished to make use of existing services but make them better by orchestrating collaboration and combining existing solutions with new ideas. We wanted to engage different actors in the service design process and hence ensure their participation in the implementation of the new service concepts.

The second research question was how to combine differing interests of all the actors in the innovation process to reach a win-win situation where all participants benefit. We wanted to organize the project in a process where all parties could participate in different stages, giving input both at the level where ideas were generated as well as when solutions were formulated and tested. We wanted to hear both the voices of the service providers as well as the local residents in the process.

And finally, the third research question was how to utilize the student potential in facilitating the innovation process conducted over several semesters. We had earlier experience of student projects, but we wanted to emphasize continuity in the process; although students change, the big picture stays the same. We also wanted to combine the knowhow of student groups from different fields.

To combine differing interests, parallel tracking was utilized and both top-down and bottom-up goals defined. The service design process was designed so that to engage both the service providers as well as the residents. There were both joined as well as separate activities. The general timeline of the case is described in Figure 1.



**Figure 1** The general timeline of the case study.

The present state of health promotion services was analyzed in the winter of 2012-13 through interviewing the staff of the public health service provider (n=19). An in-house workshop was then organized, with 27 participants, to define the top-down goals in the case study. After the interviews and the workshop, the most prominent development themes were presented to the whole staff through a web survey, providing also the non-participants an opportunity to comment and make their opinion heard, resulting in 10 responses. The service provider professionals had the opportunity to choose 1-2 development themes by themselves. In addition, they were asked to send their greetings to the open discussion evening, with 72 participants, that was held for the residents and service providers in the area to define the bottom-up goals. To support the process, 13 local seniors with problems with heart health and 23 local entrepreneurs in the wellbeing field were also interviewed. As a result, the most prominent development tasks were chosen.

The second step of the process commenced in February 2013. Based on these differing inputs, the most central development themes were identified. The themes were divided into different tracks: the service design track and the thesis project track with e.g. literature reviews and a track for information snapshot events. Besides working as an input to the service design process, the information gathered of the present state of the services was also formulated into a graphical presentation as the wellbeing pathways of the residents in the area. Here we will focus on the service design track.

The service design projects were organized as a collaboration course with nursing and business students with distinct pedagogical objectives. The student teams arranged service design workshops with service user and service provider participants. Although

the lecturers guided the students, the students were encouraged to be creative and experiment with ideas and choose their methods independently.

The methods that the students used included group interviews, user surveys, rotating theme discussions as a learning café, mind mapping, the empathy method and storytelling. By working together in the workshops, differing views could be integrated, new collaborative efforts could be designed, and the voices of the citizens could be heard.

There were three themes with two subthemes in the service design process. Aid for self care was designed both for the middle aged residents in the form of a Self Care Station in the health center and for school pupils as a mobile Self Care Station at school. Existing group activities were re-designed to attract new users for life style counseling evenings and for parental training sessions for families having a baby. And finally, collaborative service production was designed for seniors to enhance social wellbeing and for school pupils for easy access activities in the semi-rural areas.

As a result, six service concepts were designed. The concepts were presented in the area in an open seminar, with 59 participants, to find partners for the piloting phase. Feedback and further development ideas of the concepts were also collected from the participants. Also a second in-house workshop was arranged for the public sector service provider, both to evaluate the feasibility of the service concepts as well as to discuss and further develop the present-state service paths that had been visualized by one student group.

In the third phase, in autumn 2013 and spring 2014, two of the service concepts were piloted as student led mini pilots with local partners and then evaluated for their potential for further development. The concepts were the easy access activities for school pupils and the Self Care Stations for health centers. Feedback was gathered from both the pilots with 18 and 21 respondents respectively. The theme for collaborative services for the seniors was further developed and another concept created and piloted in another municipality. The Self Care Station pilot gained interest in other municipalities and was piloted in another municipality, too.

### **3 Results**

In the first phase, we reached an understanding of the present state and development needs of health promotion services and collaboration in the area from different viewpoints in order to enhance wellbeing in the region.

The service provider representatives had a plentitude of ideas how to develop the health promotion services in the region through new group sessions and events; by enhancing collaboration both within as well as outside the organization; and by enhancing the seamlessness of care in transition phases. They also had many themes of which they wished more information to be able to better help their clients. Especially ways to enhance motivation for lifestyle changes were longed for. Of all the ideas the development of the Self Care Station and group activities for lifestyle counseling were chosen as the top-down themes. The workshop participants also send as their greetings to the discussion evening the question, what the general public thought would be a good way to get people involved and participating in the events that are organized.

In the discussion evening, the main concern in the region was for the wellbeing of the seniors and the children and the youth. A plentitude of activities was already on offer but collaboration was lacking. The need to find ways to reach the ones, who don't attend, e. g. for difficulties in mobility in the semi-rural areas, was also put forward. A clear desire for enhancing wellbeing proactively, through offering sports services and social interaction was present in the discussions. Therefore, designing activities for the youth and the seniors were seen as central bottom-up themes. Although no instant remedies for enhancing motivation for participation was present in the event, the need for low threshold, easy access alternatives was identified.

The interviews to the seniors, by Hantunen and Silta-aho (2013), highlighted the importance of public services, yet pointing to the need to collaborate, too. The interviewees wished for more expert level services for their condition but at the same time services of the local association for peer support. More information was needed especially right after getting diagnosed. Also more rehabilitative services were wished for.

The interviews to the entrepreneurs focused on the ways of collaborating with other actors. According to the interviews, the entrepreneurs saw collaboration as important to guarantee the seamlessness of care. Most collaboration existed with the public sector through shared clients. Although collaboration existed also between entrepreneurs, some considered the competition aspect as a hindrance for collaboration.

Based on the needs of the differing actor groups, the final decision of the development themes and the division of the themes into thesis works, service design projects and information snapshot events were made by the staff of Laurea UAS. The collaboration theme seemed an evident viewpoint in the projects, as it was a theme that was clearly present throughout the actor groups. As there was interest in developing services for different age groups, especially the children and the seniors, the concrete development themes for the service design projects were chosen so as to have different age groups as the target population. In the end, three themes were chosen under which two subthemes for each, with six themes altogether, as described in the previous chapter.

The potential of each possible theme was also evaluated in accordance to the different pedagogical objectives of the student groups. Also the tight time table of the courses during the spring needed to be acknowledged; the user groups needed to be easily accessible for the students. In the end, the student projects managed to take into consideration the differing perspectives and provide answers to questions posed by the different actor groups participating in the process.

In the second phase, six service concepts for the chosen themes were created in the participative workshops organized by the students of Laurea UAS. The workshops engaged both service providers as well as local residents. The Self Care Station was designed for the health center with a plan for the necessary equipment and supervision. The Self Care Station included measurement equipment for monitoring the blood pressure, weight and height, information leaflets and risk tests and an events calendar in a quiet corner at the health center. For the school pupils, support for self care was designed as an exhibition or and exercise track to be designed with the pupils, for the pupils. This way, the youth would be engaged in the design process giving them opportunities to participate and be active.

The group activities included a calendar and activity suggestions for reaching families in the existing lifestyle counseling evenings. For the families, lifestyle counseling would need to be designed as an activating event with activities such as cooking and sports, in

addition to providing information. Also different locations and collaborating partners might be considered in order to reach the families better. For the families having a baby, the new concept included new sessions and suggestions for collaboration between the maternity health clinic and the local church that already had activities for new mothers. The goal was to offer families more peer support and support for mental wellbeing.

The new concept for supporting the social wellbeing of the seniors suggested collaboration with the home care unit and the local educator of practical nurses. The practical nurses could visit the seniors as part of their studies getting familiar with the everyday life of the seniors, at the same time providing the seniors with opportunities for social interaction. After the course, the students might continue visiting the senior as volunteers through the local association providing seniors with volunteer “friends”.

The new concept for easy access services for school pupils was based on coordinating the collaboration of local associations in organizing a set of events for the whole family. In this concept, the uniting theme was the school that would be easy to access for all and provide a good environment to organize events. Through collaboration with local associations, the events might have different themes and at the same time provide the children with ideas for new hobbies.

The concepts were evaluated and further developed in an open seminar in the region in March 2013. For instance, there was demand for a Self Care Station to be situated outside the health center, to a place where people move about every day. However, this was not possible to implement in this project. The concept for support for self care for the school pupils gained good feedback of its participative nature. As a new partner, the public youth services were suggested. For the lifestyle counseling for families –concept, suggestions for partners were also made, with e.g. actors in the sports field. Combining the event with existing events was seen as bringing synergy effects for both. For families having a baby, providing information of all the activities available was seen as a key issue. With e.g. shared web pages different actors could advertise their activities in one location. The concept for supporting social wellbeing of the seniors gained recognition for targeting the seniors in rural areas who cannot participate in activities organized outside but are bound inside. Again, new collaborating partners with local senior organizations were suggested. The same was true of the easy access services for school pupils; collaboration was seen as a key issue. As collaboration was a central theme of the discussion evening in the beginning of the case, it was the thing that gained most appraisal and comments also in the seminar.

In the third phase, two of the concepts were piloted by other student teams: The Self Care Station in two health centers by two new student teams and the activities for the school pupils as an events day at one school by one student team.

One of the main concerns in the project was to find ways of organizing consecutive student projects so that the next student groups could base their work on the results of the earlier groups. This way timelines longer than a specific study module could be designed in the project. Besides the seminar, the first student teams presented the results of their assignments on a concept description form. In the form, the students described their research problem, the participants in the process, the methods used, their main findings as well as the concept developed based on the results. The concept description included e.g. the service process description, a description of necessary partners and equipment, knowhow and other resources as well as an evaluation of customer need and the business potential of the concept.

The student teams piloting the Self Care Stations had the results of the previous team at their disposal but still had some liberty in deciding how to proceed with the piloting. There was also one thesis work available with benchmarking information from other regions. The concept included suggestions of the materials but the piloting teams also produced new materials to the Stations. These materials were also made available online for others to use.

The easy access activities were piloted in the same school where the concept was created as there was enthusiasm in the matter. The students provided the school with help in arranging a pilot events day with collaborating partners. There were 18 persons of 8 participating partners that participated in the events day. The families participating in the event were not calculated.

Feedback for the pilots was gathered through survey forms with closed and open questions. There were 21 responses for the Self Care Stations and 18 for the events day. The feedback from both pilots was positive. The Self Care Station was considered a good addition to the existing health center services. Two thirds of the respondents had gone to the Station more than once. The location and signposts were rated good. The most used service was measuring the blood pressure. Most users estimated that the Station worked well, and they got answers to the questions that they had when coming to the Station.

The feedback for the events day was positive in relation to the general success of the day, its content and facilities. Yet, in relation to the atmosphere of the day and information concerning the day there was still room for improvement. In the open answers, positive comments were made of specific activities and the day in general. However, notice was made that more participants might have been reached through advertising more. The event was organized in low budget so resources for advertising were minimal. However, a separate advertising team might have been appointed to take care of informing the families and advertising the event innovatively, with low budget solutions.

The process gained a lot of media interest. Through collaboration with the students, new kinds of ideas emerged for the service providers. However, effort is still needed in ensuring the commitment of all the parties in the process to proceed from concepts to piloting. Also specific plans for the concepts after piloting need to be considered in detail. In our project, materials developed were gathered into a virtual backpack available for all interested parties. From this service design process, the virtual backpack included materials made for the Self Care Stations.

## **4 Conclusion**

The case work offers an example of combining the triple helix framework and the co-creation framework to form a collaborative innovation setting with the public, private and third sector service providers, the UAS (researchers and students) and the residents of the area. It is also a case example of combining top-down and bottom-up goals in the health promotion practice and utilizing student potential in a chain of consecutive study modules over several semesters.

This case study provides the innovation community with an example of collaboration for innovation that gives a distinctive role for the UAS in the innovation process as a

coordinator and a provider of piloting experience for the service providers in the public, private and the third sector. This makes participating in an innovation process easy even for those organizations where resources are limited. At the same time forming new partnerships with other service providers becomes easier, too. The process also gives the residents an opportunity to have an influence in service development. As a result, the services offered will better meet the needs and desires of the residents. Also students gain with practical skills, contacts and experiences for their future working life in the region or elsewhere.

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