



Better health - A shared challenge for hospitals  
and primary health care

## FOCUS ON PATIENT

HOPE-AGORA  
Turku, Finland  
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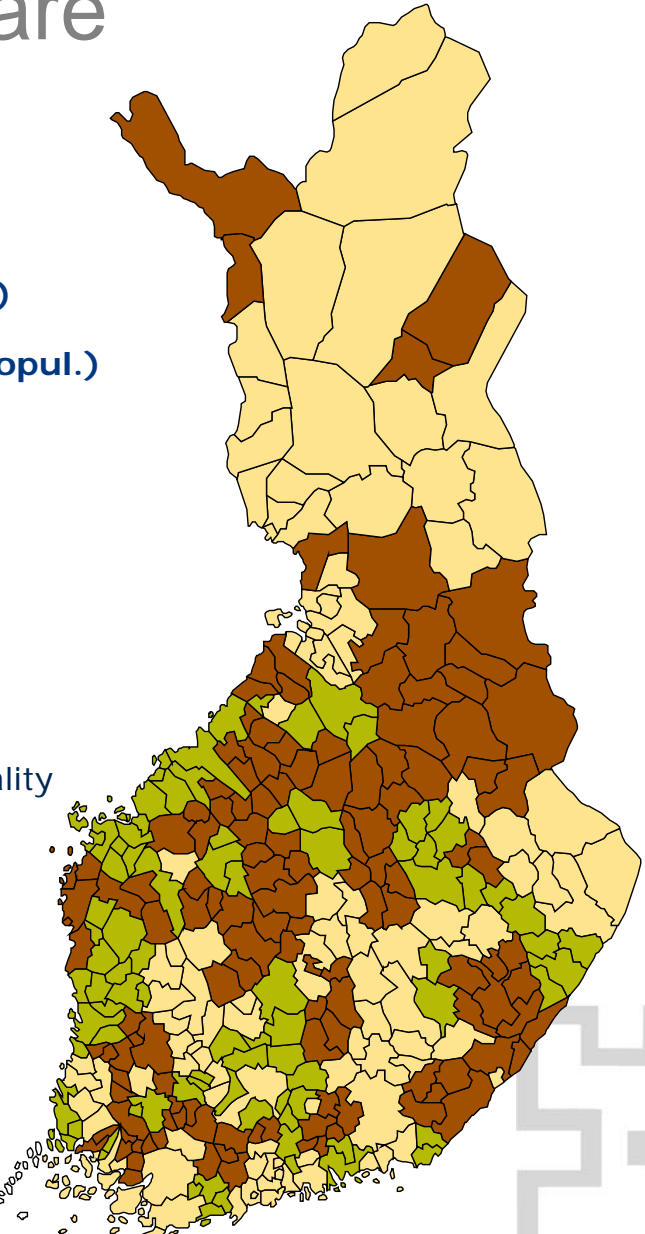
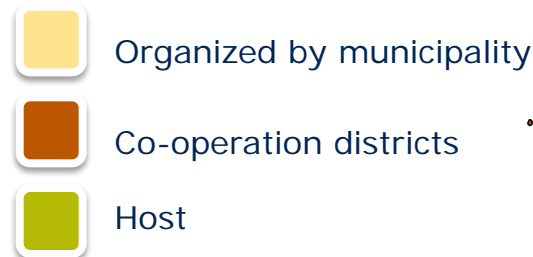
- Organization of the health care in Finland
- Patient insurance
- Patient rights
- New health care act
- Effectiveness as a quality measure





# Primary health care

<b>Municipalities (continent)</b>	<b>326</b>
<b>Self-organized</b>	<b>106 (64 % of the popul.)</b>
<b>Co-operation</b>	<b>66 / 220 (36 % of the popul.)</b>
<b>Health care centers</b>	<b>172</b>
Population	
< 20 000 inhabitants	97
> 20 000 inhabitants	75



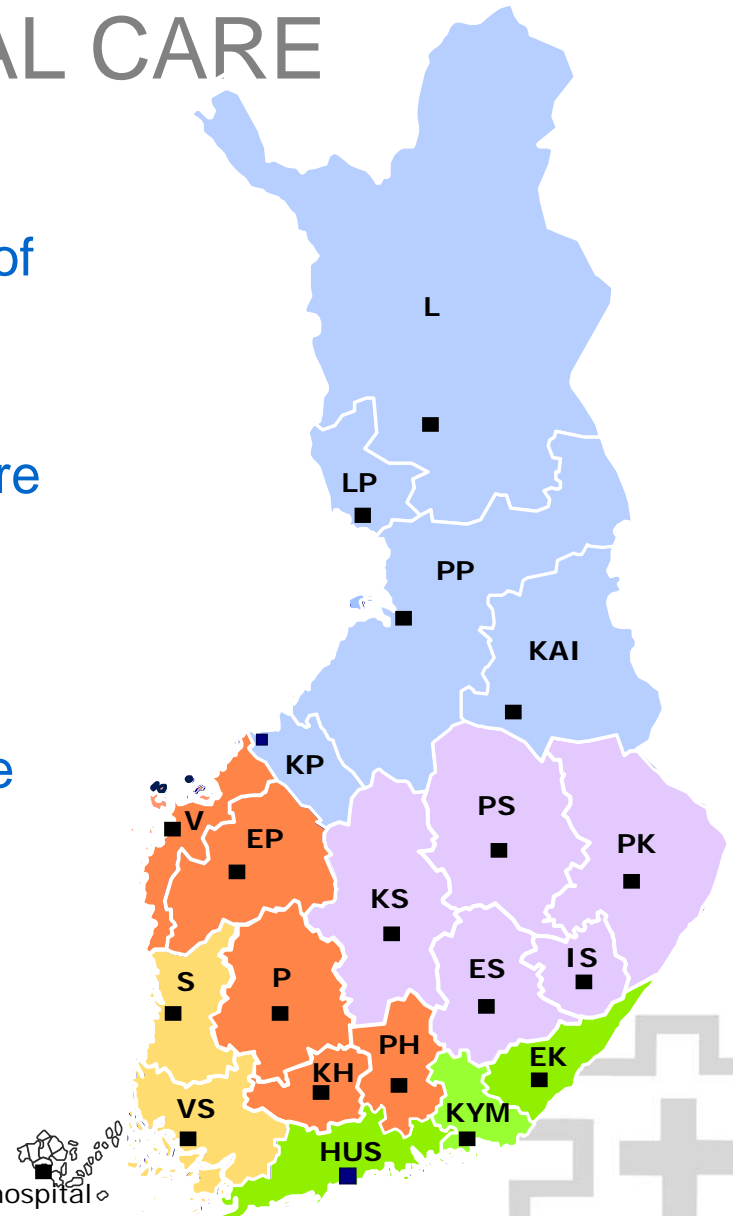


# SPECIALISED MEDICAL CARE

- 20 **hospital districts** for the organisation of specialised (secondary) medical care
- 5 university hospital districts for tertiary care
- The Ministry of Social Affairs and Health
  - general planning, direction and supervision of specialised medical care
- **Almost 200 administrative structures in public health care!**

Aino-Liisa Oukka

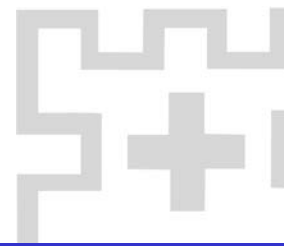
■ Central hospital ◊





# PATIENT INSURANCE

- The Act on Patient Insurance since 1986
- All professions in health care or medical care must take
- No-blame policy
- compensates for harm caused to patients through accident or neglect and
- covers harm caused by treatment, infection, accident, equipment, facilities or installations, or administering drugs.





# PATIENT RIGHTS

- The Act on the Status and Rights of Patients since 1992

## Details the Constitution

- Patients are entitled to timely and good quality attention and treatment.
- Patients are entitled to be treated with dignity, their privacy respected, and their **individual** and **language** requirements and **culture** taken into account.
- Treatment is provided on the basis of mutual consent.
- This applies to **child patients**, too.
- Patients are guaranteed transparency of information concerning their health, patient records and waiting periods for treatment.





# PATIENT RIGHTS

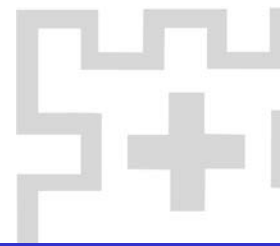
- **Access to treatment and availability of services**
  - Urgent treatment without delay
  - Non-emergency treatment guaranteed statutory timeframes since 2006; updated 2011
  - Phone contact and assistance is available immediately during working hours.
  - Non-emergency health care examinations by a physician or nurse in health centres within 3 days.
  - Hospital examinations within 3 months and specialist treatment within 6 months.





# PATIENT RIGHTS

- **Confidentiality**
  - Patient records are confidential and may not be passed to a third party, even for technical purposes.
  - Patients must be informed about the intended use of information and data about them, where else information and data about them is sought, where information is kept and who and under what circumstances it may be passed on.
  - Clients and patients are entitled to access the information and data about them, and to ensure that mistakes and deficient information are amended.
- >90% of public health organizations have e-patient records





# PATIENT RIGHTS

- **Complaints**

- If patient is dissatisfied with the decisions, services, assistance, treatment or behaviour toward them, they may seek a change of decision, file an objection concerning a particular service or treatment procedure to the responsible authority, or complain to the supervising authority.
- Complaints and objections are handled by municipal social service ombudsmen or health care ombudsmen and by the social and health departments of the State Provincial Offices.





# The New Health Care Act 2011

- Freedom of choice
  - patient can choose the health care center and the hospital which he/she wants to be treated
- Health Promotion
  - all health care providers must have plans for health promotion
  - hospitals must support the primary care in planning and providing health promotion and disease prevention





# The New Health Care Act 2011

- Quality and patient safety
  - all health care providers must have plans for quality control and patient safety
- Public primary care providers and hospitals must publish their plans and results
- Integration of primary and secondary health care
  - continuity of treatment paths





# Key components of a well functioning healthcare system

- World Health Organization, May 2010
- Key elements of quality:  
safety, effectiveness, integration, continuity,  
and people-centeredness
- **Effective care cross primary and secondary  
care improves patient safety!**





# Better health - A shared challenge for hospitals and primary health care

## How do we succeed?





# TOGETHER AND CONSIDIOUS OF DIRECTION



**KIITOS!**

