STRATEGY: Mission statement

• National Authority for Medicolegal Affairs
  – promotes quality of service, and
  – protects the legal rights of citizens within the social and health sectors
Finland

Total area:

- 338,000 square kilometres, of which 10% is water and 69% forest;
- 187,888 lakes, 5,100 rapids and 179,584 islands;
- Europe’s largest archipelago, including the semi-autonomous province of Åland

Population:

- 5.3 million, 15.7 inhabitants per square kilometre
- 71% live in towns or urban areas, 29% in rural areas
- Principal cities: Helsinki (564,000), Espoo (235,000), Tampere (206,000), Vantaa (189,000), Turku (175,000) and Oulu (130,000)
- About 1.25 million people live in the Helsinki metropolitan area
- Finland has a Sami (Lapp) population of 8,700.

Languages:

Finland has two official languages: Finnish and Swedish.

Finnish, a Finno-Ugric language, is spoken by 91.5% and Swedish by 5.5% of the population. Sami (Lappish) is the mother tongue of about 1,700 people.

Religion: 82.4% Lutheran and about 1.1% Orthodox
Employees

• Current number of employees (29.5.2008): 82
  – Executive team: 8
  – Lawyers
    • Senior Lawyers: 2
    • Lawyers: 14
  – Medical Officers
    • Senior Medical Officers: 12
    • Senior Dental Officer: 1
  – Senior inspectors: 10
    • Majority with nursing background
  – IT Personnel: 7
  – Office Personnel: 28
State Provincial Offices

• Health care supervision is also carried out by the State Provincial Offices (5), and the autonomous region of Åland

• Personnel of SPO Social and Health Departments:
  – Western Finland: Healthcare 27, Social Welfare 20, Environmental Issues 21, Alcohol Supervision 26
  – Province of Oulu: Healthcare 9, Social Welfare 5, Environmental Issues 6, Alcohol Supervision 4
  – Lapland: Healthcare 7, Social Welfare 3, Environmental Issues 5, Alcohol Supervision 3
Educational Programmes

• In-house education based on knowledge assessment results

• Currently, the planning of wider educational programme on healthcare and social sector supervisory work together with the State Provincial Offices is going on
Principal Tasks of National Authority for Medicolegal Affairs

- Licensing and registration of health care professionals
- Supervision of health care professionals
- Supervision of healthcare organisations (both public and private)
- Guidance of State Provincial Offices’ Social and Health Departments
- Matters of forensic psychiatry
- Permissions relating to abortions, sterilizations and castrations
- Permissions concerning removal and use of human organs and tissues for medical use
- Permissions to organisations performing human artificial reproduction
- Registration of sperm and egg donors
- Technical verifying of the health care professionals within the context of electronic health records
Other players at the Finnish health and social sector supervision

- Environmental hygiene supervision, chemicals, genetic engineering, alcoholic beverage whole and retail sales: National Product Control Agency for Welfare and Health
- Food safety, plant production, animal diseases: Finnish Food Safety Authority (under Ministry of Agriculture and Forestry)
- Public health issues and research, infectious disease, vaccinations: National Public Health Institute
- Research and data management, Development of healthcare and social sector: National Research and Development Centre for Welfare and Health
- Pharmaceuticals, hemovigilance, and medical devices: National Agency for Medicines
- Radiation control: Radiation and Nuclear Safety Authority
- Economic compensation for patient injury: Patient Insurance Centre
2.6.2008 EPSO, Bergen, Norway

Reorganisations in the field of the Ministry of Social Affairs and Health, 2009

• National Authority for Medicolegal Affairs and National Product Control Agency for Welfare and Health will be merged

• National Public Health Institute and National Research and Development Centre for Welfare and Health will be merged
Legislative basis

• Act on the Status and Rights of Patients (785/1992)
  – The right to good health care and medical care and related treatment of patients
  – Access to treatment
  – The plan concerning examinations, treatment or medical rehabilitation
  – Patients' right to be informed
  – Patients' right to self-determination
  – The status of minor patients
Legislative basis 2

• Primary Health Care Act (66/1972), Act on Specialized Medical Care (1062/1989), Act on Private Health Care (152/1990)
  - If defects endangering patient safety or other drawbacks are observed in the organisation or provision of primary health care or if an operation is otherwise contrary to this Act, the National Authority for Medicolegal Affairs or the relevant State Provincial Office can issue an order to remedy the defects or to eliminate the drawbacks. When issuing the order they shall determine the period of time within which the necessary measures must be undertaken. If patient safety so requires, the operation can be ordered to be sustained immediately or the use of the unit, a part thereof or a device can be forbidden immediately.
2.6.2008 EPSO, Bergen, Norway

Legislation 3

• Act on Health Care Professionals (559/1994)
  – the National Authority for Medicolegal Affairs
    a) may issue specific regulations and instructions for
       professional activity;
    b) impose restrictions on the right to practise professional
       activity as a licensed professional for a fixed period or
       until further notice;
    c) withdraw the right to practise the profession of a
       licensed professional for a fixed time or until further
       notice; or
    d) prohibit a professional with a protected title to use the
       occupational title of a health care professional as
       prescribed by Decree for a fixed period or until further
       notice; or
    e) cancel the right of a professional to practise his or her
       profession.
Main methods in health care supervision

• Licensing and restricting
• Investigations of
  – complaints by patients or relatives
  – notifications by co-workers in health care organisations, and pharmacies
  – statements required by other authorities (police, law-courts)
  – Issues based on statistical data of health care organisations (access times to treatment)
• Inspections of organisations, or professionals’ offices
• Guidance and education of professionals and organisations
• Incentives for legislation changes
Current trends in supervision in Finland

• Political interest to augment supervision
  – Cases of high publicity in 2007 (insulin murders)
• Interest in preventive action rather than post-hoc measures
• Need for concentrated efforts on a limited number of issues at a certain time

• In the health sector, interest in quality improvement and patient safety