Terveystalo

Tunniste: OHJE
Versio: 1
Hyväksyjä: Petteri Lankinen, 6.2.2025 07:48
Tarkastajat: Riina-Riitta Helminen 4.2.2025 11:30
Laatija: Sarin, Sanna
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SELF-MONITORING PLAN

Suomen Terveystalo Oy

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Introduction

According to Section 27 of the Act on the Supervision of Social and Health Care (741/2023), the service provider must monitor the quality and appropriateness of its own activities and those of its subcontractors, as well as client and patient safety. The service provider must prepare a self-monitoring plan for each service unit to ensure the quality, appropriateness, and safety of daily operations, and to monitor the sufficiency of staff participating in client and patient work. The self-monitoring plan must cover all services provided by the service provider and on its behalf in the service unit. The self-monitoring plan must include a description of the incident reporting and learning procedure.

Implementation of Self-Monitoring in Terveystalo

This self-monitoring plan is implemented in all locations/operations of Suomen Terveystalo Oy, and it also covers the operations of Personnel Services (HEPA). In HEPA, the self-monitoring plans of the clients are also followed, as the reception activities take place in the clients' premises.

This self-monitoring plan does not describe the social welfare activities of Suomen Terveystalo Oy, nor the activities of Rela-Hierojat Oy, Terveystalo Julkiset Palvelut Oy, Terveystalo Kuntaturva Oy, or TT Ålands Tandläkarn, as they have their own self-monitoring plans.

In addition to this self-monitoring plan, locations where clinical microbiology on-site laboratory tests are conducted have a location-specific Microbiology Self-Monitoring Plan.

Healthcare service providers operating within Terveystalo (including sole traders and limited companies) are committed to following Terveystalo’s self-monitoring plan. Additionally, they must prepare their own self-monitoring plan. According to the agreement made with the service provider, they must adhere to generally accepted medical principles, the practices and processes applied in the medical center, and utilize the medical center's tools. Unless otherwise stipulated by mandatory legislation, the medical center (Terveystalo) and the service provider are each independently responsible for their own activities directly to patients, authorities, and other parties.

This self-monitoring plan refers to Terveystalo’s processes, work instructions, and other materials, which can be found on Terveystalo’s intranet.

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Information about the Service Provider and Locations

Service Provider Suomen Terveystalo Oy

Address: Jaakonkatu 3 A, 6th floor, 00100 Helsinki

Phone: 030 633 11

Fax: 030 633 1602

Business ID: 1093863-3

The responsible person for the healthcare service units of Suomen Terveystalo Oy (excluding occupational health, dental health, and public services units) is Chief Medical Officer Petteri Lankinen (MD, Docent, EMBA, Specialist in Orthopedics and Traumatology).

The responsible person for the private dental health services units of Suomen Terveystalo Oy is Chief Dentist Ritva Lindblad (Doctor of Dental Science, Dentist), address: Jaakonkatu 3 A, 6th floor, 00100 Helsinki.

The responsible person for the occupational health services units of Suomen Terveystalo Oy is Chief Medical Officer of Corporate and Public Health Silja Komulainen (Doctor of Medicine, Specialist in Occupational Health, Special Competence in Health Informatics, Leadership Studies 10 ECTS).

In Terveystalo's Personnel Services business, the responsible person for the service units is Chief Medical Officer of Personnel Services Jussi Sihvonen (Licentiate of Medicine), address: Jaakonkatu 3 A, 6th floor, 00100 Helsinki, excluding specialist medical services, whose Chief Medical Officer is Paula Reponen (Licentiate of Medicine, Specialist in General Medicine).

The address and contact information for the locations can be found on Terveystalo's website.

Email addresses are in the format firstname.lastname@terveystalo.com.

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Purpose, Strategy and Values

Terveystalo offers a wide range of primary healthcare, specialized medical care, dental health, and wellness services to corporate and private clients as well as the public sector.

Terveystalo's digital reception is available around the clock, 24/7, regardless of time and place. Health and wellness services are also provided by approximately 370 locations across Finland.

In 2023, Terveystalo had approximately 7.6 million customer visits, with 1.2 million individual customers.

Terveystalo’s purpose is to fight for a healthier life. In the next strategy period 2025–2029, we will focus on five strategic priorities:

- Engaged team
- Superior customer value through integrated care
- Profitable, organic growth
- Profit improvement
- Optimised business portfolio

Terveystalo's values:

- Human being at the center
- Steered by medical science
- Reforming healthcare

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Organization and Management of Self-Monitoring

Terveystalo's medical management is responsible for ensuring compliance with laws, the medical content of services, monitoring the effectiveness of treatment, and patient safety. Additionally, Terveystalo has a description of the organization managing commercial and operational activities, which is maintained up-to-date on the intranet. The Chief Medical Officer leads the Medical Forum (Läfo), which addresses significant medical issues requiring policy decisions. Läfo is comprised of members of the group's medical management.

The line organization responsible for the guidance and supervision of services supports the responsible persons of the service units.

At the operational level, the responsible persons of the service units are represented by the corresponding physicians and dentists. The health services managers, quality and patient safety officers, and all supervisors support the corresponding physicians and dentists in quality and patient safety work.

In the absence or disqualification of the corresponding physician, a substitute is agreed upon case by case by the health services manager.

This self-monitoring plan describes the measures and procedures by which the managers responsible for healthcare services, and the corresponding physicians/dentists, fulfill the statutory obligations.

Reviewing the self-monitoring plan is part of the staff's induction plan. Updates are reviewed at the operational level whenever significant changes are made. The self-monitoring plan serves as a tool for operational development, and its implementation is monitored as part of the annual internal audits.

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Description of Operations and Quality Management, as well as Risk Identification and Corrective Actions

Description of Operations

Terveystalo is one of the largest healthcare service companies in Finland. The company offers a wide range of health, occupational health, medical, dental health, wellness, and research services. Terveystalo's customers include private individuals, companies, organizations, insurance companies, and the public sector.

Responsible operations are a central value in Terveystalo's activities. We are committed to high quality and the continuous development of our operations. Above all, we aim to promote the health and well-being of our customers and staff. We also create positive impacts on the surrounding society and promote ethical practices throughout our value chain. Our goal is also to minimize our environmental impact in all our operations and products.

Terveystalo's centralized monitoring and reporting practices, which are largely based on electronic systems, provide visibility into the operations of the entire network and thus support the implementation of self-monitoring

Quality Management

Operational System

Terveystalo is committed to high quality and continuous improvement in its operations. The quality of Terveystalo's services is based on medical quality, operational quality, customer experience, and professional experience. The foundation of Terveystalo's quality system is patient safety and national legislation in the healthcare sector.

Terveystalo's common practices for ensuring service quality, safety, customer orientation, and effectiveness are defined and published in Terveystalo's Operations Manual. The Operations Manual describes Terveystalo's method of organizing its core operations in a consistent and high-quality manner. The aim of common practices and quality work is to support the realization of the organization's mission, vision, and strategy, to develop operations, and to continuously improve the quality and results of activities. The Operations Manual includes a process map, procedures, work instructions, patient instructions, and forms. The process map outlines the flow of Terveystalo's core processes, customer relationships, and outcomes.

Terveystalo holds the SFS-EN ISO 9001:2015 quality system certificate issued by Aurevia Oy. The certificate covers the group's management system, business lines, centralized group services, reception services, hospital services, occupational health services, imaging services, screening services, laboratory services, dental health services, customer service, healthcare staffing services, biobank operations, remote consultation services, wellness services, Fokus special units, and child protection services.

Terveystalo also holds the SFS-EN ISO 14001:2015 environmental management system certificate issued by Aur evia Oy. The certificate covers the group's management system, business lines, centralized group services, reception services, hospital services, occupational health services, imaging services, screening services, laboratory services, customer service, remote consultation services, wellness services, and Fokus special units.

The network of group quality managers and quality and patient safety officers guides staff at Terveystalo locations in accordance with the Operations Manual. Additionally, group service managers, the hygiene nurse, pharmacists, the patient safety manager, and the safety manager audit their respective areas of responsibility and create national guidelines. Terveystalo organizes several annual training sessions related to quality, patient safety, facility safety, and data protection. The functionality of Terveystalo's operational system at the group and location levels is evaluated through annual internal audits and quality visits, which include interactive analysis of process development needs. The Group ESG and Quality Steering Committee ensures the synergy of development measures in service operations and the realization of patient safety.

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Terveystalo provides both its salaried healthcare experts and independent practitioners (solopreneurssole traders) with up-to-date guidelines and electronic tools. Occupational health services are based on the Government Decree on the Principles of Good Occupational Health Practice 708/2013 and its amendment 1038 /2021. Each Terveystalo location providing occupational health services has described its operations in accordance with the Occupational Health Quality Manual.

Terveystalo systematically monitors and measures medical quality and effectiveness, operational efficiency and service availability, customer and professional satisfaction, and, as an industry leader, publishes key indicators on its website.

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Audits

The ISO 9001 quality management system and the ISO 14001 environmental management system include internal audits, management reviews, and external audits. The information obtained from these determines the compliance and effectiveness of the quality management system and the environmental management system.

Terveystalo places a strong emphasis on internal audits, which annually audit group operations and a comprehensive sample of our locations. The ESG and Quality Steering Committee defines the quality focus areas and audit criteria annually.

The results of internal audits and identified areas for improvement are reported at the location, regional, and group levels. Actions for addressing areas for improvement are defined and assigned as part of the management /quality management team activities (management review), and follow-up procedures are agreed upon. Audit reports and development actions are available to all Terveystalo employees through the continuous improvement electronic tool. Transparency promotes learning from each other.

Evaluation criteria used in audits:

- Applicable laws, regulations, authority requirements, permit conditions
- Applicable standards, e.g., ISO 9001:2015, ISO 14001:2015, ISO 13485:2016
- Organizational values, strategic priorities, procedures, principles
- Common organizational processes and guidelines
- Customer promises and contracts
- Documented goals, metrics, actions, resources, and follow-up

Internal auditors are trained auditors from group services.

An external accredited auditor (Aurevia Oy) annually evaluates the compliance of Terveystalo's operations with the criteria of the ISO 9001:2015 quality standard and the ISO 14001:2015 environmental standard on a sampling basis. Additionally, all imaging units undergo clinical audits in accordance with the Radiation Act.

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Quality Requirements for Suppliers and Subcontractors

Terveystalo's procurement is guided by a procurement policy. Procurements are made systematically, cost-effectively, and as uniformly and centrally as possible. Terveystalo's ethical guidelines are followed in procurement activities. Economic, tax, legal, social, and environmental considerations are taken into account in procurements and requests for quotations. Procurements must be based on overall economic efficiency and quality. The lifecycle impacts and costs of products and services, as well as energy efficiency aspects, are considered in procurements. Terveystalo requires that suppliers commit to complying with the applicable legislation, regulatory requirements, and quality standards specified in the contract.

Quality metrics and objectives set for Terveystalo's contract suppliers are monitored according to Terveystalo's SRM (Supplier Relationship Management) model. Additionally, supplier audits are conducted annually by agreement with strategic and critical suppliers to Terveystalo's operations. Suppliers are required to operate in accordance with Terveystalo's Supplier Code of Conduct.

Customer Satisfaction

The SFS-EN ISO 9001:2015 quality management system requires systematic monitoring of customer satisfaction and continuous improvement of customer-oriented operations. At Terveystalo, customer experience is monitored using the following methods:

- NPS (Net Promoter Score) collected in real-time via SMS feedback
- Expert-specific customer satisfaction
- Treatment effectiveness with the PEI (Patient Enablement Instrument), which measures the patient's sense of coping
- Collection and utilization of direct customer feedback
- WheelQ - Customer satisfaction surveys

The Net Promoter Score (NPS) measurement, collected in real-time via SMS feedback, is conducted by sending the customer a question via SMS the day after their visit. The customer is asked to rate, on a scale of 0-10, how likely they are to recommend Terveystalo to their friends or colleagues. Contact requests received through the SMS survey are handled in the electronic feedback system, similar to spontaneous feedback. Customers also have the option to opt out of receiving surveys.

Expert-specific customer satisfaction measurement provides more detailed and targeted information on customer satisfaction along the service pathway, alongside the general NPS. The feedback is primarily intended to support the professional's own development, as well as to serve as a coaching tool for supervisors. For Terveystalo professionals, customer satisfaction is measured with the question, "How satisfied were you with our expert's service?" (on a scale of 1-5).

Customers can spontaneously provide feedback on our operations through a customer feedback form, by letter, email, verbally, in person, at customer meetings, and via our website. Terveystalo's website includes digital feedback forms for both individual customers and representatives of corporate, organizational, and public sector customers. If a customer has requested a response and provided their contact information, they will always receive a response. Feedback can also be given anonymously.

The method for handling customer feedback is described in Terveystalo's operational system. Feedback is processed in a feedback system that guides and records the workflow of feedback handling, as well as compiles statistics and reports on the feedback and the actions initiated by the feedback. Agreed key figures and reports are monitored at all levels of the organization. Quality audits always assess the handling of customer feedback, the analysis of results, and the actions initiated based on those results, as well as the impact of those actions.

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Patient Safety

Patient safety is monitored and developed by the Medical Forum led by the Chief Medical Officer and the Patient Safety Working Group led by the Administrative Chief Medical Officer. Additionally, the ESG and Quality Steering Committee, led by the Quality Director, is responsible for data-driven management of issues related to the quality circle (medical, operational, customer experience, and professional experience quality) and monitoring key quality indicators, as well as guiding quality-related policies and development.

The Patient Safety Working Group focuses on patient safety issues, annually defining focal points and monitoring their implementation. Terveystalo also has a group-level incident monitoring working group led by the Patient Safety Manager. The purpose of this group is to monitor incidents in various operations (e.g., laboratory, imaging, hospital), make policy decisions for operational work instructions, develop the incident reporting system, and foster a patient safety culture. The group members also handle national-level deviations, defining actions to be implemented at the group level and rolled out to regions/locations. The incident monitoring group prepares quarterly examples of incidents and corrective actions for use by the regions.

The Patient Safety Manager monitors the patient safety situation, such as incident reports, and regularly reports to the Administrative Chief Medical Officer, the Patient Safety Working Group, the Medical Forum, and the quality and patient safety officers and responsible doctors.

A network of quality and patient safety officers operates at the regional and/or location level, as well as handlers of feedback and incidents. Their role is to address incident reports at the location/region level and ensure, together with location supervisors and other responsible persons, that root cause analyses are conducted and agreed corrective actions are implemented. Patient safety officers report to the quality management team and regularly report on patient safety issues and incidents and their actions according to the patient safety reporting model.

Every employee has both the right and the responsibility to file an incident report when they observe a situation. Reporting near-miss incidents is particularly encouraged, as these reports can effectively help improve operations without any patient harm having occurred. All employees at Terveystalo can easily file incident reports via the intranet and patient information systems. Events related to patient safety (both near-miss incidents and adverse events) are processed, reported, and prevented using a common incident reporting system.

The reporting obligation of the service provider and staff under Section 29 of the Supervision Act is implemented at Terveystalo through the aforementioned incident reporting system. If an incident cannot be corrected through location-level self-monitoring, the quality and patient safety officer of the location contacts the group-level responsible persons, who notify the service provider and/or supervisory authority in situations where self-monitoring measures have not been sufficient.

Root cause analysis is a core aspect of incident processing. It aims to identify and eliminate the root cause(s) of the event at both the location and group levels. The statistical and reporting process for incidents helps identify recurring problems and the need for guidelines. Corrective actions are communicated to staff through various networks and at location meetings and training sessions. Serious incidents involve the location's responsible persons, the group Patient Safety Manager, and the service manager of the function involved. Terveystalo has a documented model for handling serious incidents, which includes guidance on supporting staff involved in the incident.

Terveystalo's healthcare staff complete an online course on patient and customer safety every three years as part of ensuring patient safety. Patient safety officers at locations receive regular training through online courses, Teams training sessions, and the annual quality and patient safety day. A patient safety culture survey is conducted every two years for all staff, with results reviewed at both the group and regional levels. Development areas are identified from national to regional/functional levels, and the implementation of these actions is regularly monitored.

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For Personnel Services, the client notifies Terveystalo of any incident involving a Personnel Services employee that occurs on the client's premises. These reports are recorded in Terveystalo's incident system and processed according to the Personnel Services' described process.

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Risk Analysis and Preparedness for Hazardous Situations

Risk analysis and preparedness for hazardous situations are conducted at every level of the organization. The group's management identifies significant organizational risks and establishes procedures to mitigate them. Regional management ensures the management of organizational risks in their area, identifies local risks, and responds to them. The Group Preparedness Team guides and instructs the management of sudden and potentially escalating crisis situations and crisis communication.

Risk identification utilizes business metrics, environmental and stakeholder information, market statistics, impact data, customer feedback, registry information, authority inspection reports and inquiries, occupational safety risk assessments, incident data, audit results, and competitor information.

Organizational risk assessment is performed by the group's management. Risk owners in business areas and key group functions review risk management success and the implementation of proactive measures according to an annual cycle. At the beginning of the year, the existence of the previous year's risks, changes in risk levels, potential changes to proactive measures, and the emergence of new risks are assessed.

The magnitude of identified risks is evaluated based on their probability and the severity of their consequences on a scale of 1 (very low) to 5 (very high). The severity of the risk is assessed using an agreed-upon risk assessment criterion. The risk management plan is reviewed by business management teams, prioritizing operational and personnel risks from the perspective of business areas, and development plans are created for the prioritized risks.

Terveystalo locations ensure adherence to guidelines in their daily work, achievement of process goals and results, identification of risks threatening patient and occupational safety, and preventive measures. Implementation is monitored at the local management team, quality management team, regional organization, and group levels.

Terveystalo organizes annual risk management training sessions to ensure staff competency in risk management.

Each location has described procedures and responsibilities for emergency situations. Guidelines for handling emergencies are compiled on a dedicated intranet page. An emergency situation refers to a first aid situation involving an individual, both at the location and in its immediate vicinity. Additionally, an emergency situation refers to other exceptional circumstances at the location (e.g., fire). The first aid action plan describes the procedures for each location and its immediate vicinity, considering the size of the location, the number of staff, and other relevant factors.

The first aid action plan is reviewed annually at the location/function by the health services manager and the service manager, and the action model is practiced in the location's first aid and resuscitation training sessions. The health services manager or equivalent is responsible for ensuring that staff are first aid trained according to Terveystalo's internal first aid training guidelines for Terveystalo staff. Regular first aid training and practical resuscitation drills, including the use of defibrillators, are conducted.

Terveystalo's defibrillators are registered with the defi.fi service.

Terveystalo follows the Resuscitation Medications and Equipment work instructions approved by the Administrative Chief Medical Officer.

In emergencies that meet the criteria for a crisis, the group’s crisis communication and emergency situation guidelines are followed.

Each location has developed a security guideline for exceptional situations, detailed in the facilities section. Occupational safety risk assessments are conducted according to occupational health processes during workplace assessments.

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The following are identified as high-risk activities for patient safety:

1. Surgical procedures and interventions

- Surgical eligibility and consequences of misjudgment
  - Assessment of physical performance, identification of factors increasing surgical risk, improvement of surgical eligibility, and proper patient information. High-risk patients include at least ASA 4 or, in some cases, ASA 3 patients.
- Infections related to surgery
- Monitoring of overnight patients
- Post-surgery or post-procedure patient monitoring and discharge eligibility assessment

To aid in managing surgical risks, a perioperative anesthesia manual has been developed in addition to the surgical team checklist and resuscitation guidance. The usage rate of the surgical team checklist is monitored as part of the Quality Index at both the group and hospital unit.

2. Unacknowledged laboratory tests

3. Timely communication of laboratory test results that exceed or fall below alert thresholds to the patient

The timely communication of laboratory test results that exceed or fall below alert thresholds to the patient is ensured through local guidelines developed for the locations. These guidelines dictate how alert laboratory test results and abnormal ECG EKG findings in symptomatic patients are handled at the locations. For samples analyzed at the central laboratory, alert laboratory test results are first reported centrally to Terveystalo Kamppi's laboratory, from where the alert results are always forwarded to the requester, the requesting location, or a remote physician for evaluation and action.

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Continuous Improvement and Deviation Management

The development of Terveystalo's operations is based on the principle of continuous improvement, which should be a recurring activity. By embedding continuous improvement into our daily activities, we enhance the efficiency of our operations and the high quality of care, thereby improving our services, the effectiveness of care, and the customer service experience.

When a deviation is detected in operations, it is addressed with control and corrective actions. Deviations are analyzed, causes are identified, necessary actions are implemented, and the effectiveness of corrective actions is evaluated. Deviations, corrective actions, and their outcomes are documented. Deviations and corrective actions ensure the realization and improvement of quality.

Deviation inputs include, among others:

- Customer feedback & official inquiries
- Internal deviation reporting
- Incident reports, monitoring, and reporting
- Near-miss situations
- Adverse events
- Incident costs
- Infections related to care
- Internal audits, management reviews, and quality visits as part of the ISO 9001:2015 quality management system and ISO 14001:2015 environmental management system
- Imaging self-assessment procedures and internal clinical audits
- Laboratory quality control rounds
- Medication safety inspections in pharmaceutical care
- Hygiene surveys (Infection prevention self-assessment)
- External audits by Aurevia Oy as part of the ISO 9001:2015 quality management system and ISO 14001: 2015 environmental management system
- Inspections and audits by official bodies:
    - Fimea (for hospital unit pharmacies)
    - Stuk (for imaging units using ionizing radiation)
    - External clinical audits for imaging, Aurevia Oy (for imaging units)
    - Tukes (pressure equipment inspections for instrument maintenance, electrical equipment inspections)
    - Kela's direct reimbursement procedure audits

Terveystalo develops the efficiency and effectiveness monitoring of the patient care pathway from various perspectives. For example, Medical Quality Metrics and Dashboard, monitoring the efficiency and effectiveness of the orthopedic surgery care pathway using different systems, ensuring the traceability of joint replacements with THL's registry, and tools for monitoring the effectiveness of chronic disease management.

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Personnel

This section details the recruitment process, orientation, development discussions, and skills development related to personnel. Additionally, processes related to occupational safety and patient safety are described.

Terveystalo ensures the qualifications of healthcare personnel are verified with Valvira before the commencement of employment or professional practice and responds appropriately to feedback from supervisory authorities and customers regarding personnel activities and services.

For private practitioners (self-employed professionals) or companies, during the interview and contract signing, verification includes checking the degree certificate, professional rights from JulkiTerhikki, Soteri registration, as well as language proficiency and skills. These individuals are not employed by Terveystalo; therefore, they are independently responsible for, among other things, continuing education.

Number and Structure of Personnel

Suomen Terveystalo Oy employs 11,300 people, of which 53% are employees, 2% are temporary workers, and 45% are self-employed professionals.

Recruitment

Our recruitment process includes verifying the qualifications of the candidate from the healthcare professional register maintained by Valvira. Individuals working with children and people with disabilities, as defined by law, are required to present a criminal record extract before employment.

Our recruitment process also involves thoroughly reviewing the candidate’s skills, required permits for the position, and practical language proficiency in relation to the necessary skills and qualifications for the role. Additionally, we ensure the candidate's competence within the mandatory probationary period.

Orientation

The practical arrangements at the beginning of employment and the orientation of new employees are the responsibility of the supervisor or a person designated by them. In Terveystalo, physician orientation is supported by Physician Customer Relations Managers (LAVs), Connection Managers, and Resource Managers. For dentists, orientation is supported by Terveystalo’s Dental Health Service Managers (PAVs), Regional Directors, and Senior Dentists.

Orientation ensures that new employees receive the information they need about the company, their unit, and their role to succeed in their tasks. Terveystalo’s orientation guidelines and orientation materials for new practitioners are available on the intranet and in the online learning environment. There are orientation support materials and forms tailored to Terveystalo’s operations and the needs of different professional groups. Special attention is paid to the medication management plan and the orientation related to the use of devices and supplies.

The orientation of employed staff is documented in the personnel information system. Information on the success of the orientation and the integration of new employees is collected through a newcomer survey, which is sent to all new employees 60 days after the start of their employment. For physicians, information on the success of their integration into the job can be collected earlier by sending the newcomer survey through the Physician Customer Relations Manager, Connection Manager, or Resource Manager.

The staffing agency is responsible for the professional competence and training of any temporary workforce used at Terveystalo, as well as verifying professional qualifications with Valvira and checking criminal records if necessary. Terveystalo is responsible for orienting temporary workers to the task and workplace conditions, occupational safety measures, and, if necessary, arrangements related to occupational safety cooperation and communication, as well as occupational health services.

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Development

Discussions In the development discussions conducted by the supervisor, the goals for the upcoming year and the personal skills development needs are planned. Terveystalo provides both job description-based and role-based guidelines for identifying skill needs, which are supported by training. The purpose of Terveystalo's development discussions is to support strategic operations and goal setting, as well as to enable the development of staff skills in accordance with the goals. The aim is to have a practitioner discussion once a year with self-employed professionals, and this is the responsibility of a designated responsible person for each professional.

The supervisor is responsible for conducting the development discussion. Development discussions are recorded in the personnel system for employed staff, where the completion of the discussion can be verified. Human Resources and necessary experts annually review the support materials for development and practitioner discussions to ensure their relevance.

Training and Competence Development

Terveystalo provides comprehensive training for its staff: professional continuing education for various professional groups (e.g., Terveystalo's own Doctor Days for doctors, the Oral Medicine Academy for dentists and dental specialists, Nurse Days for nurses, medication and pharmaceutical care training, as well as first aid training for all staff at different locations), qualifying training, administrative training (e.g., IT and supervisory training), and training on Terveystalo's own services (e.g., imaging training days).

Terveystalo places great importance on ensuring sufficient continuing education for its staff. Additionally, Terveystalo offers career paths for its employees in medical and administrative expert roles, as well as supervisory positions.

Healthcare professionals working as independent practitioners (self-employed) under contract with Terveystalo are responsible for the level, maintenance, and implementation of their medical expertise and sufficient continuing education. In the case of healthcare professionals working under contract in the name of another company, that company is responsible for their professional competence and training. Terveystalo requires that healthcare professionals working at its locations possess sufficient competence levels corresponding to their professional titles.

Training monitoring is carried out using both the personnel information system and the electronic training platform. The supervisor ensures the completion of training during development discussions. We particularly monitor the implementation of statutory radiation protection training and the continuing education for occupational health services recommended by the Ministry of Social Affairs and Health (STM) as part of quality audits.

Terveystalo also serves as a trainer for doctors specializing in occupational health. To support on-site training, theoretical training (module training) is organized for doctors specializing in occupational health. Special training is provided for occupational health specialists who act as trainers for specializing doctors, and they are also encouraged to participate in pedagogical training offered by universities. Terveystalo has initiated the "From Knowledge to Skills" on-site training program for doctors.

Terveystalo staff are also regularly trained in first aid, compliance, threat situation management, and equality.

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Medication Authorization Practices, Competence Assurance

Nursing staff are required to have valid medication administration authorizations issued by Terveystalo according to Terveystalo's authorization practices. Competence assurance practices are defined in the group-level medication management plan, and authorizations must be renewed every 5 years. Detailed competence assurance practices are described in the Medication Management and Maintenance section.

The supervisor records the completion of authorizations in the HR system, which forms the actual authorization register on the personnel management report. It is the supervisor's responsibility to monitor the validity of medication authorizations using the report and to plan the renewal schedule with the employee within the authorization validity period.

Monitoring of Workplace Well-being

Factors limiting workplace well-being are monitored not only through daily management but also in the annual employee survey. This survey measures the satisfaction of staff and self-employed professionals with the conditions for success at work, such as workload and the appropriateness of work tools. Through these surveys, we also monitor employees' assessments of their own work fitness.

According to Terveystalo's success management model, supervisors are obligated to monitor employees' performance in their tasks and, upon noticing signs of changes in work ability, to discuss these openly with the employee as early as possible. Annual development discussions also include guidance on discussing the individual's workplace well-being. Terveystalo has practical guidelines for addressing substance abuse problems. Essential components of supervisor training include training on handling difficult situations and early intervention at Terveystalo. The success management model can be found on the intranet.

Work-related risk factors primarily include bloodborne accidents, the threat of violence, night work, ergonomics, and mental endurance. All occupational health services for the staff are provided internally. In cases of acute illness, staff can use any of Suomen Terveystalo Oy's locations under the occupational health agreement. Preventive and non-urgent medical care is managed by designated responsible occupational health doctors and nurses. Employee work ability is measured in various ways through health check-ups. Terveystalo supports well-being systematically in four areas: healthy work, well-being employees, functional work communities, and active leadership.

In addition to our occupational health services, our development in well-being is supported by our pension insurance partners.

Supervisors are responsible for their employees' work ability, so if a supervisor has a justified suspicion about an employee's work ability, they will send the employee for a health check-up to assess their work ability according to the guidelines.

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Patient Safety

At Terveystalo, every employee is responsible for patient safety and therefore has both the right and the obligation to report any factors affecting patient safety to their supervisor, as well as to file an incident report in the electronic system.

Occupational Safety and Health

The responsibility for occupational safety within the group is shared by the employer, supervisors, and employees themselves, in accordance with defined safety responsibilities. Occupational safety managers and employee-elected occupational safety representatives assist supervisors and employees with occupational safety and health matters and develop safety issues through occupational safety cooperation.

One of the most important measures for developing occupational safety within the group is the hazard assessment of job tasks, which is carried out annually by professional groups and locations according to an existing annual cycle. The implementation of group-wide occupational safety measures, based on hazard assessments, takes place in different business units and locations, taking local conditions into account. Occupational safety plays a significant role in the orientation of new employees.

Terveystalo has guidelines for managing various occupational safety and work ability risks: threat and violence situations, dealing with aggressive individuals, the Model for Responding to Criminal Threats, working alone, working in cold environments and managing cold-related risks, procedures for blood exposure situations, mental workload, harassment, and other inappropriate treatment, etc.

The occupational safety guidelines are followed throughout the group and can be found on the intranet. These guidelines also apply to self-employed professionals working at Terveystalo.

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Facilities

Registration decisions for locations, along with any attachments (e.g., pre-inspection reports) and other permit decisions (e.g., clinical microbiology permits and radiation safety permits), are stored on a shared network drive.

The licensing coordinator guides and advises health services managers and other responsible individuals on the registration of locations. The licensing coordinator operates under the supervision of the Administrative Chief Medical Officer.

Terveystalo primarily operates as a tenant in commercial and office buildings. Due to the nature of the operations, lease agreements are generally long-term.

Facilities and Their Maintenance

Terveystalo’s Facility Services are responsible for the appropriateness and structural safety of the premises. The property management system contains information on all leased locations. The normal maintenance responsibilities of the property generally lie with the property owner in rental locations. Terveystalo is responsible for the property technology that serves its medical devices. This property technology is managed and maintained by contracted partners.

The activities carried out in the facilities determine the level of protection required for access control, burglary protection, and fire protection. If the property owner has such systems in place, they are utilized. Every facility is protected with a burglary alarm system. Fire protection follows the regulations of the Finnish Building Code, with special emphasis on the fire protection of surgical departments.

Implementation and Supervision of Space Planning

Facility Services lead the structural design and implementation of spaces. Spatial solutions aim to promote the smoothness of work and transactions while considering the healthiness of the facilities, confidential handling of matters, spatial safety, and ecological and economic sustainability. The spaces are designed in collaboration with facility managers and users, following the design and implementation process.

Room specifications have been prepared for various functions to ensure consistent, functional, high-quality, and efficient facilities. These room specifications are always indicative and are adapted according to the building and environment. Necessary room specifications are provided to designers on a case-by-case basis.

Guideline work descriptions are prepared specifically for each project, covering building technology, HVAC systems, and gas systems. The work descriptions address requirements for the telecommunications network, ventilation, cooling, camera and sound systems, and more.

Safety Instructions

A safety instruction template has been developed for use in all business operations within the Terveystalo Group. This template outlines the risks related to facility safety, preventive measures, and procedures in case the risks materialize. A location-specific safety instruction is created for each location using the safety instruction template and the accompanying guidelines. Each location is responsible for the content and currency of its own safety instructions.

A safety officer is appointed for each location by the health services manager. The safety officer is responsible for drafting, updating, and implementing the safety instructions through safety walkthroughs at the location.

Each location reviews its safety instructions at least every two years and whenever there are changes to the facilities. Essential information from the general emergency plan of the property is transferred to the safety instructions, which are more detailed than the general emergency plan.

In addition to the safety instructions, surgical locations also prepare an evacuation safety report, which is submitted to the local rescue authorities.

The group uses an electronic chemical register, in which each location creates a location-specific chemical list. The chemical register contains up-to-date safety data sheets and safety instructions for all chemicals used at Terveystalo.

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Organization of Medication Storage Facilities, Access Control, and Burglary and Fire Protection

Terveystalo's 13 hospital locations have their own medication centers.

Medications are stored in lockable, sufficiently large, and appropriate facilities within the location, accessible only to those authorized to handle medications. The medications at the location are stored in a designated locked space, such as a separate lockable medication cabinet or medication room with access control.

The keys and access control for the medication cabinet or room are arranged to prevent unauthorized individuals from handling the medications. Special attention is given to medications that have a risk of misuse. Narcotics are kept in a separate compartment with secured locking and access control to prevent unauthorized access.

Alcohol refers to denatured ethanol, rectified spirits, and industrial/kitchen alcohol. The alcohol storage must be lockable to prevent unauthorized access. Alcohols are highly flammable chemicals. In office rooms and similar spaces, up to 25 liters of flammable liquids may be stored.

According to the location's safety instructions, the location must consider the detailed descriptions provided for gases and flammable liquids, among other things.

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Medical Devices: Healthcare Equipment, Supplies, and Software

This section provides a detailed description of the lifecycle management and safety of Terveystalo's medical devices. It outlines the procedures for the procurement, commissioning, maintenance, and disposal of medical devices. The section also covers the responsible persons and actions in exceptional situations.

Responsible Persons and Medical Device Monitoring System

Terveystalo uses a monitoring system in accordance with the obligations of professional users of medical devices to ensure the safety of the devices and their use (719/2021, Section 34). The monitoring system records the traceability information required for devices used, transferred, or otherwise managed by operating units, as well as devices implanted in patients. In the group services, the Technology Manager is responsible for the core processes and guidelines of device management and liaising with authorities. The Technology Manager reports on device safety related to patient safety to the group's Administrative Chief Medical Officer, who acts as the responsible person for professional users of medical devices as per Section 32 of the Medical Devices Act 719 /2021 at Terveystalo.

Healthcare devices are recorded in the device registry, which contains the monitoring information required by law and regulations. At the locations, the Technology Manager's counterparts are the device coordinators, who are responsible for device safety at their location in collaboration with the designated responsible users of the devices. Staff report incidents related to healthcare devices through Terveystalo's internal electronic system. The Technology Manager and Patient Safety Manager monitor reports through the system and assist with root cause analysis if necessary. Incidents are reported to Fimea as required by law and to the Radiation and Nuclear Safety Authority for devices using ionizing radiation. Each imaging unit and the use of radiation in dental health and operating rooms must obtain a safety license from the Radiation and Nuclear Safety Authority.

Regarding ionizing radiation and magnetic safety, hospital physicists appointed as radiation safety experts and medical physics experts act as contact persons for radiation safety at the sites and with the radiation safety authority. They manage safety licenses for devices using radiation, the safety assessment of radiation activities, and the management system, including any changes. Terveystalo's radiation use is described in the Radiation Safety Assessment and Management System guidelines. The safety assessment summarizes the overall radiation safety structures, operating procedures, and responsibilities related to radiation use at Terveystalo. The document describes radiation exposure in normal and exceptional exposure situations, classification of radiation activities, measures to optimize radiation protection, and prevent adverse events, as well as the radiation safety management system.

Procurement of Medical Devices The procurement of medical devices follows a designated process description

Medical device procurements are carried out according to the investment plan, taking into account issues of responsibility. Investment plans consider the lifecycle model of the equipment, device safety and criticality, and the compliance of medical devices and in vitro diagnostic medical devices.

Device procurements are centralized with experts from group services, who ensure that the medical devices meet the requirements of EU regulations (e.g., MDR 2017/45, IVDR 2017/746) and national legislation, including any transitional periods. The procured devices are required to meet performance criteria according to their intended use, patient and user safety requirements, and documentation requirements for device use and traceability in accordance with EU compliance requirements. Additionally, the procured devices must meet specific information security and data protection requirements defined by Terveystalo. Decentralized procurement of small devices is conducted through an electronic purchasing system using product catalogs approved by the aforementioned experts. The content of the catalog is reviewed and updated annually.

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Commissioning, Orientation, and Preliminary Licensing Procedures for Medical Devices

The commissioning of medical devices follows a designated process description. Prior to commissioning, licensing procedures for devices utilizing ionizing radiation, pressure equipment, and equipment related to clinical device research are ensured.

For healthcare devices utilizing ionizing radiation, a safety license as stipulated by the Radiation Act 859/2018, or an amendment to an existing safety license, is applied for. Each site-specific part of the management system names a radiation safety officer whose qualifications have been verified. Additionally, the site appoints responsible persons, a radiation safety expert, and a medical physics expert. The physicists in group services centrally manage the safety licenses for radiation-using devices, their amendments, and discontinuations, as well as the arrangement of expert services required by the Radiation Act. The Radiation and Nuclear Safety Authority approves the radiation use facilities and structural radiation protections in the safety license.

Healthcare pressure equipment is registered with the Finnish Safety and Chemicals Agency (Tukes) when taken into use, in accordance with the Pressure Equipment Act 1144/2016 and the Government Decree on Pressure Equipment Safety 1549/2016. For autoclaves with a chamber volume exceeding 200 barL, a supervisor is appointed who is responsible for ensuring the registered pressure equipment undergoes inspections and maintains its safety as specified in Chapter 10 of the Pressure Equipment Act. The supervisor is also responsible for registration and reporting changes regarding the owner, holder, location, and supervisor of the pressure equipment. The supervisor ensures that for autoclaves with a chamber volume exceeding 1000 barL, a placement plan is prepared and inspected by an approved inspection body before use. In case of disturbances or hazardous situations, the supervisor prevents the use of the pressure vessel until the safety issue is resolved.

Clinical device research at Terveystalo follows Good Clinical Practice (GCP) guidelines, considering the ethical principles of the Declaration of Helsinki. Clinical device research is reported, licensed, conducted, and reported in accordance with EU regulations MDR 2017/745 or IVDR 2017/746, and national legislation and guidelines. If the clinical research involves a medical device and a pharmaceutical component or the medical device is part of drug administration, the obligations of EU Regulation CTR 2014/536 are also considered. The responsible person for the clinical device research, in collaboration with the sponsor, ensures compliance with the reporting obligations to Fimea.

Before commissioning, device users are trained in its use. Device orientation is conducted using online training and physical usage training. A responsible user is designated for the healthcare device, who trains other employees on the safe use of the device. The responsible user also ensures the availability and currency of operating instructions and technical manuals, organizes the acceptance inspection, warranty period monitoring, and warranty review, informs other users about the impacts of any updates or changes to the device, and maintains the device's condition and safety. They also record monitoring information related to the device, such as maintenance and incident reports, in the device registry.

During the commissioning of a healthcare device, the acceptance inspection ensures that the device has been received according to the order, installed appropriately, and is fully functional and safe to use (e.g., electrical safety measurements performed). It is also verified that the seller has trained the users to have sufficient technical and operational knowledge for the safe use of the device. The condition of the device is monitored carefully throughout the warranty period.

During the commissioning phase, the responsible user records the device information as comprehensively as possible in the device registry (719/2021 Section 34). The device registry also includes devices owned by independent practitioners used in patient care or research. If a practitioner uses their own device, they agree to the same safety and performance verification requirements as those set for devices owned by Terveystalo. The practitioner is responsible for the monitoring, licensing, and reporting procedures for their own devices, but Terveystalo can provide support in these matters.

Maintenance of Healthcare Devices

Scheduled and corrective maintenance of healthcare devices follows designated process descriptions. Some scheduled and corrective maintenance is authorized and conducted by Terveystalo’s internal maintenance team to support the reliability of the equipment and minimize extended maintenance downtimes. Scheduled maintenance and operational inspections of healthcare devices are carried out according to regulatory requirements and manufacturer guidelines to ensure the devices' appropriateness, safety, operational condition, and ability to produce accurate diagnostic information during use (719/2021, Section 32, Clause 2). Guidelines have been established for the frequency and passing criteria of maintenance, and adherence to these guidelines is regularly monitored. Measurements are performed with traceably calibrated or otherwise appropriate equipment. Detailed reports are produced from the measurements, showing the measurement results and their passing criteria. These documents are retained for the entire lifespan of the device.

The appropriateness of the usage areas for healthcare devices is evaluated through periodic inspections according to internal guidelines. In addition to the evaluation, Terveystalo’s internal technology maintenance team participates in the execution of designated device maintenance and makes observations on the safety of medical facilities during their annual visits to each location, reporting any deficiencies. When planning new medical facilities, device placement considers regulatory requirements and recommendations, as well as occupational and patient safety aspects. Usage areas for devices using ionizing radiation are planned to provide sufficient structural protection. During the commissioning of devices, maintenance experts and physicists perform measurements as needed to verify structural protection. The Radiation and Nuclear Safety Authority conducts inspections of new usage areas for devices using ionizing radiation and, as applicable, for areas of strong use.

Terveystalo’s medical device maintenance team regularly participates in manufacturer maintenance training and general training sessions related to hospital technology. A radiation safety officer and an electrical safety officer are designated for maintenance operations. Personnel involved in the maintenance of radiation devices maintain radiation protection continuing education in accordance with the Radiation Act 2018/859 and the Ministry of Social Affairs and Health Decree on Ionizing Radiation 1044/2018. A quality assurance program as required by the Radiation Act has been developed for Terveystalo’s X-ray operations, and its content is described in the Safety Assessment.

The supervisor of pressure equipment is responsible for monitoring the use and condition of pressure equipment (autoclaves), making statutory notifications related to pressure vessels, and ensuring that all registered autoclaves undergo scheduled inspections in a timely manner (2016/1144, Section 70). In case of disturbances or hazardous situations, the supervisor prevents the use of the pressure vessel until the safety deficiency is corrected.

Exceptional Situations Involving Medical Devices

Exceptional situations involving healthcare devices or supplies include:

- Hazardous situations involving healthcare devices or supplies (self-detected and manufacturer-reported suspicions)
- Fires, water damage, and other accident situations
- Malfunction of healthcare devices

The actions and responsibilities in different types of exceptional situations are described in work instructions (e. g., communication, removal of the device or supply from use, reporting to authorities, recording in patient records).

Hazardous situations or accidents involving patients and staff are reported in the incident reporting system. In hazardous situations, the person who observed the incident reports it in the electronic system. Through the reporting system, the handling of the hazardous situation, root cause analysis, corrective and preventive actions, and notifications to authorities can be monitored and promoted by the responsible person for professional users as defined in law 719/2021. Members of the group’s incident management team participate in handling the incidents and, if necessary, request opinions from the responsible person or medical management regarding the safety of treatment methods or devices. Incident reports are always recorded in Terveystalo’s reporting system.

A report of the hazardous situation is made to Fimea in accordance with Section 33 of the Medical Devices Act 719/2021. Hazardous events related to software classified as medical devices are handled using consistent procedures, taking into account parallel reporting obligations under the Client Data Act. The procedures for the obligations of software covered by the Client Data Act 703/2023 are separately instructed. If the incident involves the use of radiation, a report is also made to the Radiation and Nuclear Safety Authority. Radiation use incidents that do not require immediate reporting to the authority are reported in a standardized manner to the Radiation and Nuclear Safety Authority annually.

If the hazardous situation poses a broader threat to the entire organization, the group’s technology and procurement teams ensure that:

- Hazardous situations and serious suspected hazardous situations are promptly communicated to Terveystalo locations
- Hazardous situations or suspicions are broadly communicated even when the severity or extent of the situation cannot be reliably assessed. Crisis communication and emergency management guidelines are followed in crisis situations.
- The device or supply provider is contacted, and necessary actions are agreed upon.
- Instructions for further actions are communicated to the locations in collaboration with the service line of the function (e.g., returns/credits of supplies).

In accident situations, the internal safety instructions of the location are followed.

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Decommissioning of Healthcare Devices

The decommissioning of healthcare devices follows a designated process description. Whenever possible, healthcare devices are recycled – either by selling, returning them to the manufacturer for recycling, or disposing of them in an environmentally friendly and data-secure manner according to Terveystalo’s waste management guidelines. Any notifications related to the decommissioning of devices to the Radiation and Nuclear Safety Authority and the Finnish Safety and Chemicals Agency are coordinated centrally. Information on radiation devices is retained in the device registry for at least five years after they are decommissioned.

In-House Devices

Terveystalo develops medical device software for internal use in accordance with Article 5 of the MDR 2017/45, while also adhering to the requirements of the certified ISO 13485:2016 quality management system. Declarations of conformity for Terveystalo's in-house software can be found on Terveystalo's website. Terveystalo does not manufacture or distribute in-house physical medical devices or supplies.

Distribution, Forwarding, and Implantable Devices

Terveystalo operates as a non-notifiable distributor for medical devices provided to patients. The range of medical devices provided to patients is limited, and their recall procedures are described in a separate guideline. For Class III implantable devices, an implant card is provided to the patient/customer (719/2021, Section 36). Terveystalo ensures that patients have access to information about the devices implanted in them. The requirements related to the implant card do not apply to sutures, staples, dental fillings, braces, dental crowns, screws, wedges, plates, wires, pins, clips, and connectors.

Terveystalo operates as a notifiable distributor for certain device classes. Notifiable distribution is described in a separate guideline.

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Medication Management and Pharmaceutical Care

Pharmaceutical Care Network

Medication safety is a crucial part of ensuring the safe and appropriate treatment of clients/patients, contributing to overall client and patient safety. At Terveystalo, the promotion and supervision of medication safety, as well as the coordination and standardization of national pharmaceutical care practices, fall under the responsibilities of the group's pharmaceutical care. The group's pharmaceutical care team includes a Chief Pharmacist and two pharmacists. The group's pharmaceutical care operates in line with the medical management and is tasked with planning, implementing, and leading development initiatives for medication safety and risk management in medication therapy. Specialty leaders act as medical experts supporting the group's pharmaceutical care.

The Chief Pharmacist's role includes organizing lawful, safe, effective, and appropriate national practices for medication management and pharmaceutical care, as well as overseeing medication safety as part of patient safety.

The role of the group service pharmacists includes drafting and implementing pharmaceutical care work instructions, and developing and coordinating pharmaceutical care processes. Their duties also include coordinating the pharmaceutical care network at Terveystalo, supporting operations, conducting staff training and orientation, establishing and maintaining the basic medication selection, and engaging in pharmaceutical care quality work such as internal audits and developing self-monitoring.

At Terveystalo's 13 hospital units with a medication center, the medication center nurse (pharmacist or Chief Pharmacist) is responsible for implementing pharmaceutical care and ensuring the availability of medications. The medication center nurse ensures that the procurement, storage, handling, delivery, and provision of medication information are conducted appropriately and promote medication safety. The medication center nurse also oversees the proper handling, storage, and record-keeping of narcotics. Pharmacists and Chief Pharmacists act as developers of medication therapy processes at their locations and ensure medication safety through ward visits and inspections. They also support other locations in the region with pharmaceutical expertise, for example, in drafting and updating medication management plans and addressing medication safety issues.

In hospital units with medication centers, designated and trained medication coordinators are assigned to each operation. The duties of medication coordinators include monitoring deviations, cleaning the medication cabinet, monitoring medication expiration dates, and ensuring proper storage temperatures and medication safety in the unit.

In each Terveystalo location without a medication center, a designated and trained pharmaceutical care contact person, such as an experienced nurse and their trained substitute, is responsible for pharmaceutical care.

At all Terveystalo locations that provide medication therapy, the management holds overall responsibility for the implementation and conditions of safe medication therapy. Each Terveystalo location has a designated responsible physician/dentist who is accountable for the overall medication therapy. Supervisors guide and oversee the implementation, planning, and quality of medication therapy according to the location's medication management plan. Every individual involved in or responsible for medication therapy is accountable for their actions and adherence to the practices outlined in the location's medication management plan.

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Medication Management Plan

The medication management plan helps improve the medication process at the location and enhances understanding of medication safety. Consistent practices increase medication safety. Preventable harms can be avoided by committing to follow consistent practices that support safe medication therapy as described in the medication management plan.

The primary goal of Terveystalo's group-level medication management plan is to support all locations providing medication therapy in ensuring the safety of the medication process. The development of Terveystalo's medication management plan takes into account the guidance from the Ministry of Social Affairs and Health's Safe Medication Therapy Guide (publication 2021:6). The group-level medication management plan is prepared and updated annually by the group's pharmaceutical care in collaboration with medication center nurses, specialty leaders, responsible physicians, and service managers, and is approved by Terveystalo's Administrative Chief Medical Officer. The group-level medication management plan provides the framework for implementing medication therapy at Terveystalo locations and serves as a guiding document defining the tasks and responsibilities related to medication therapy, medication safety, and location-specific medication management plans.

At Terveystalo, locations prepare a location- or department-level medication management plan using a separate medication management plan template. The location/department-specific medication management plan is based on the group-level medication management plan. The location-/department-specific medication management plan examines the medication therapy implemented at that location, practices, and related risks in more detail than the group-level medication management plan. The size, scope, and complexity of operations at the location determine the level at which the medication management plan is prepared. In the largest Terveystalo hospital locations, individual departments prepare department-specific medication management plans. The responsibility for organizing the preparation, implementation, and monitoring of the medication management plan lies with the location's management. The medication management plan is prepared at the location in a multidisciplinary manner, in collaboration with different professional groups. The location/department-specific medication management plan is approved by the location/department's responsible physician.

The aim is for the plan to serve as a practical quality improvement tool and a means to promote medication safety at the location. The supervisor is responsible for keeping the medication management plan up-to-date, updating it, and applying it in practice. All employees involved in medication therapy must familiarize themselves with the location- and department-specific medication management plan. Each employee is responsible for adhering to the practices described in the medication management plan.

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Ensuring Medication Safety

In all Terveystalo locations where medication therapy is implemented, the management bears overall responsibility for ensuring the safe execution of medication therapy and the necessary conditions for it. Each Terveystalo location has a designated responsible physician/dentist who is accountable for the overall medication therapy. The responsible physician acts as the medical supervisor for the unit's doctors in situations requiring local decisions. Supervisors are tasked with ensuring that the staff involved in medication therapy at the location have the necessary skills and that the conditions are suitable for safe medication therapy. Supervisors guide and monitor the implementation and quality of medication therapy according to the medication management plan and decide on the division of labor and collaboration among different staff groups in implementing medication therapy, making the best use of each professional group's expertise. Every individual involved in or responsible for medication therapy is accountable for their actions and adherence to the practices outlined in the location's medication management plan.

At Terveystalo locations, medication therapy is carried out by healthcare professionals trained in medication therapy, as defined in the location's medication management plan. Implementing medication therapy requires a valid written medication authorization issued by the responsible physician at Terveystalo. Ensuring medication competence is defined in Terveystalo's medication management plan by professional group and operation, based on the recommendations of the Ministry of Social Affairs and Health's Safe Medication Therapy Guide.

Medication authorizations consist of three parts:

- Theoretical studies
- Exams
- Practical demonstrations provided at the Terveystalo location.

Medication safety is ensured, and its implementation in units is regularly assessed through internal self-monitoring and medication safety inspections, which help develop models that promote and support medication safety. Medication safety is also ensured by internal audits and quality visits conducted by the group's pharmaceutical care and quality functions. Pharmaceutical care contacts perform a self-assessment of medication safety once a year. The pharmaceutical staff (pharmacist or Chief Pharmacist) in hospital units with medication centers conduct medication safety inspections in various hospital unit operations once a year. Pharmaceutical medication safety checks can also be carried out in other locations in the region as needed. Medication center safety is ensured through peer reviews conducted by the medication center nurse from another Terveystalo location. The group's pharmaceutical care is also involved in the medication center peer review.

Observations made during inspections are addressed, and corrective actions are implemented at the location.

The group-level medication management plan and the location-/department-specific medication management plans are updated at least annually and whenever there are significant changes in operations. The group-level medication management plan was last updated on June 26, 2024.

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Monitoring Medication Consumption

Terveystalo's basic medication selection includes regularly used medications at the location. The purpose of the basic medication selection is to standardize and guide the procurement and use of medications and to ensure effective and safe medication therapy in line with the unit's operational nature. When creating the location's medication inventory, the size of the location, the need for medication therapies, and Terveystalo's basic medication selection are taken into account.

Medications are ordered for the location by the pharmaceutical care contact person or the medication center nurse. Only medications ordered by the location's medication center nurse or pharmaceutical care contact person are used for patient care. The medication center nurse or pharmaceutical care contact person at the location regularly inspects the medications and ensures that there are no expired or otherwise unsuitable medications in stock. The procurement, consumption, and wastage of medications are regularly monitored by the medication center nurses, the group's pharmaceutical care, and the procurement department.

The consumption of narcotics and psychotropic medications is monitored using order and delivery quantities, as well as package-specific consumption tracking forms.

Deviations in the Implementation of Medication Therapy

Medication safety can be compromised at any stage of the medication therapy process. It is the responsibility of each individual employee to ensure adherence to the agreed-upon procedures. At Terveystalo, we foster an open and confidential culture where employees feel safe to report issues openly without fear of blame.

Filing an incident report is both a right and a duty for every Terveystalo employee. Actions to take in the event of a deviation in medication therapy are outlined in a specific work instruction. Identifying, recording, analyzing, and learning from incidents are essential parts of developing client and patient safety. The purpose of the incident reporting system used at Terveystalo is to facilitate the reporting of patient care-related incidents observed at locations and to learn from them. An incident includes both near-miss situations and adverse events.

The group's pharmaceutical care team and medication center nurses monitor and, when necessary, support the handling of incidents at the locations. The group's pharmaceutical care team also identifies the need for new guidelines and initiates actions if required.

Terveystalo locations report adverse reactions related to the use of medications and blood products to Fimea or the Blood Service. Information about the authority report is included in Terveystalo's internal incident report.

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Hygiene Practices

The Administrative Chief Medical Officer is administratively responsible for fulfilling the obligations of the Communicable Diseases Act (1227/2016). The group's hygiene nurse is responsible for daily infection control guidance, supported by an infection doctor and a designated and trained hygiene contact person for each location and dental clinic. Hygiene practices are audited according to ISO 9001:2015 and ISO 14001:2015 during quality audits. In addition, hygiene contact persons conduct an annual hygiene survey at their locations, and the information obtained is used to direct targeted infection control measures. They monitor the infection status and surface cleanliness sample results at their locations and inform and guide employees on hygiene practices. Hygiene contact persons act as a link to the hygiene nurse and participate in infection control training.

Infection Control Practices

There are written instructions for all infection control practices. Hand hygiene guidelines, including both written and visual instructions, are provided for staff and clients. Hand sanitizers are easily accessible in appropriate holders and dispensers for both clients and staff. Standard precautions, which form the foundation of healthcare work, are instructed for all activities. Besides hand hygiene, the instructions include the correct use of protective equipment and proper working methods, such as aseptic work order, disinfection of excretions, prevention of needlestick and sharps injuries, cough hygiene, and waste management.

The waste management guidelines comply with the current Waste Act. The handling of waste at locations, proper waste storage facilities and containers, transportation, and storage are organized and instructed in a way that prevents danger or harm at any stage of waste management.

The collection of healthcare-specific waste follows the Ministry of the Environment's 2023_11: Healthcare Waste Guide. Infectious and hazardous waste, as well as biological and dangerous waste, are handled safely at every stage until final disposal.

Locations have valid contracts and instructions for the use of waste facilities and the transportation, handling, and final disposal of waste with property managers and waste transport companies.

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Prevention of Healthcare-Associated Infections

Healthcare-associated infections are systematically prevented through guidelines and expert advice from the hygiene nurse and infection doctor. Terveystalo ensures and monitors that staff meet the suitability requirements according to the Communicable Diseases Act.

The occurrence of infectious diseases and highly resistant microbes is monitored and guided using positive laboratory findings from the central laboratory and on-site laboratory tests. The appropriate protection of patients, clients, and staff, as well as the placement of patients, is instructed. Positive findings as per the Communicable Diseases Act are reported to the infectious disease register in accordance with THL guidelines, and the proper use of antimicrobial agents is also centrally monitored.

Special attention is given to preventing the spread of highly resistant microbes.

Monitoring of Healthcare-Associated Infections

Continuous incidence monitoring is in place at locations performing surgeries and procedures. Infection monitoring assesses the effectiveness of prevention measures, directs control actions appropriately, and evaluates the impact of these measures. The electronic monitoring program provides real-time data on the infection status in surgical units and the occurrence of infections related to minor procedures in outpatient clinics. Deviations in infection incidence require further investigation and intervention. The hygiene nurse coordinates the necessary investigations.

Instrument Maintenance and Sterilization

Instrument maintenance provides clean, disinfected, sterile, and functional instruments for patient examination and treatment needs. The activities are guided by instructions, and the maintenance work is carried out by trained instrument technicians and trained professionals. The guidelines apply to all instrument maintenance activities in hospital services, outpatient clinics, and dental health locations. Instrument maintenance equipment is regularly tested according to guidelines developed with technology experts to ensure operational readiness. Equipment maintenance is performed regularly according to the device registry, and corrective maintenance is conducted immediately when needed. All results are documented.

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Cleaning and Laundry Services

Cleaning and laundry services are outsourced, with the service provider responsible for the instructions and quality control of their operations. The service providers' guidelines are reviewed to ensure they are consistent with Terveystalo's hygiene guidelines, and the agreed service descriptions for the activities are followed. Regular quality rounds are conducted with cleaning service providers, and pre-agreed surface hygiene samples are regularly taken to ensure and maintain service quality. Laundry service guidelines are based on the service providers' instructions for handling and sorting laundry. Locations follow the guidelines for handling laundry from routine precautions or isolated patients.

Food Services

Food services in wards and recovery rooms comply with the requirements of the Food Act regarding the transportation, serving, and storage of food. Instructions are provided for monitoring the expiration dates of stored food offered to patients and the correct serving and storage temperatures. Good hand hygiene is practiced in food handling. The temperature of hot patient food served in wards is monitored and recorded daily. The temperatures of patient food refrigerators and freezers are monitored and documented weekly.

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Patient Records and Personal Data Processing

This section describes the recording, handling, and confidentiality of patient data, as well as the related staff training and competence assurance.

At the core of Terveystalo's values is the respect for clients' privacy and the protection of personal data. This is implemented by processing personal data in accordance with applicable legislation and Terveystalo’s data protection policy. The data protection policy defines how Terveystalo ensures lawful and otherwise appropriate processing of personal data. The data protection policy is available through Terveystalo's intranet.

Recording and Handling of Patient Data

At Terveystalo, patient data and other personal data of clients are processed in accordance with data protection and patient legislation, for the purposes mentioned in Terveystalo's data protection statement. Key regulations include the EU General Data Protection Regulation (EU 2016/679, GDPR), the Data Protection Act (1050/2018), the Act on the Processing of Client Data in Social and Health Care Services (703/2023), and the Act on the Status and Rights of Patients (785/1992, Patient Act). Terveystalo's data protection statement is available on Terveystalo's website and at every Terveystalo location.

According to the Client Data Act, patient records must be created and maintained in healthcare. The law specifies who can create records and what information must be included. Healthcare professionals and other individuals involved in providing services must record the necessary and sufficient information in patient records to ensure the organization, planning, implementation, monitoring, and supervision of patient care. Entries must be accurate, clear, and understandable.

The Client Data Act provides more detailed regulations on the retention of patient records. Patient records and other materials generated during examinations and treatments are retained for at least the period defined in the Client Data Act. Terveystalo’s IT department is responsible for the backups of electronic patient records and the deletion routines after the retention period. A separate guideline has been prepared for handling and destroying paper patient records. Archive coordinators have been appointed at Terveystalo locations and have received the necessary training.

Patient data and other personal data of clients form a personal data register as defined in the GDPR. At Suomen Terveystalo Oy, patient record information is stored in Terveystalo's patient register, which is shared by Terveystalo and the various service providers operating there as independent practitioners or through separate companies. Healthcare professionals using the patient register have entered into a separate agreement for reception activities with Suomen Terveystalo. The responsible person for the patient register in the medical center network is the person in charge of the medical center network’s service unit, and for the occupational health register, it is the person responsible for the occupational health service unit. The person responsible for the dental health services unit oversees the dental health services patient register.

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Confidentiality

Terveystalo adheres to the confidentiality obligations concerning patient data. Employees or individuals performing tasks for Terveystalo are not allowed to disclose information contained in patient records to third parties without the patient's consent or a legal provision. Even individuals personally involved in patient care or related tasks are entitled to access patient data only to the extent required by their duties. The confidentiality obligation remains in effect even after the employment or task has ended. Every individual working at Terveystalo has signed a personal confidentiality agreement.

Access Rights and Usage Monitoring

Personal access rights are granted for the use of patient information systems. User access rights are assigned according to the user roles required by their job duties. The health services manager, supervisor, or another designated person (e.g., Physician Customer Relations Manager) approves the user account request. The Administrative Chief Medical Officer approves changes to role-specific access rights. The use of patient information systems is permitted only with personal user accounts. Access rights are removed when the employment or practitioner agreement ends or during prolonged absences.

Terveystalo aims to ensure the implementation of access rights management, lawful processing of patient data, and protection of patient privacy through appropriate usage monitoring. The use of patient information systems is monitored based on system logs either through Terveystalo's internal control or in response to patient inquiries. Investigations can also be initiated by the location management or based on reports from Terveystalo staff, which can also be made anonymously.

If usage monitoring reveals suspected misuse, it is investigated according to predefined procedures. If Terveystalo determines that the processing of patient data was unlawful, it will take further action as required by the situation.

Staff Orientation and Competence

Assurance Respecting data protection is defined as a duty for everyone working at Terveystalo. Each individual involved in handling patient data is required to ensure compliance with data protection requirements according to their duties, taking into account applicable legislation and Terveystalo’s guidelines.

Terveystalo has provided written instructions on the proper handling of patient data and the procedures to follow for individuals handling patient data. Employees at Terveystalo are committed to following these instructions by signing a confidentiality and user agreement. Supervisors are responsible for providing guidance to their subordinates on related questions as needed. Internal and external audits at Terveystalo assess how data protection guidelines are followed at the locations.

The confidentiality of the patient relationship requires special care in handling patient data. Key instructions and regulations related to the handling of patient data are compiled in Terveystalo’s Patient Data Protection Manual. The manual is accessible via Terveystalo's intranet and is approved by Terveystalo’s Chief Medical Officer.

Data protection is part of the orientation for employees at Terveystalo. It is the supervisor’s responsibility to ensure that orientation is completed and properly documented for their employees. Everyone working at Terveystalo must complete training on data protection and information security and regularly maintain their data protection competence. Supervisors are responsible for monitoring this. Regular training on data protection is provided to all employees at Terveystalo, and appropriate completion records are kept.

Terveystalo has defined two alternative models for the disclosure of patient data, and the choice between them is made by the responsible physician/dentist at the location. There is a specific orientation learning path on Terveystalo’s training platform for those involved in disclosing patient data recorded by others, which is mandatory for all such individuals. Additionally, separate training sessions with current content are held several times a year for those involved in disclosing patient data.

Everyone working at Terveystalo has the duty to report any deficiencies and issues related to data protection. If it involves a personal data breach as defined by law, notifications are made to the appropriate authorities according to a separate process.

Data Protection Officer

Suomen Terveystalo Oy has appointed a Data Protection Officer. The role of the Data Protection Officer is based on the EU General Data Protection Regulation (GDPR). The Data Protection Officer is an internal expert who assists the organization in complying with data protection regulations. The responsibilities of the Data Protection Officer also include receiving inquiries from data subjects and cooperating with supervisory authorities. Contact details for the Data Protection Officer: tietosuoja@terveystalo.com.

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Information

Security Data protection is inherently linked to information security, and ensuring data protection requires information security measures. Information security includes contractual, organizational, and technical measures to ensure data confidentiality and integrity, system availability, and the fulfillment of data subjects' rights. The purpose of information security is to protect data and information systems. Terveystalo's information security objectives, responsibilities, and implementation methods are defined in the information security policy. The key objectives of the information security policy are to protect personal data (e.g., customer and patient data) and material covered by industrial and intellectual property rights held by Terveystalo, ensure their proper handling, comply with obligations set out in laws, regulations, standards, authority orders, and contracts, identify threats to Terveystalo's operations, appropriately manage information risks, and ensure the reliability and cost-effectiveness of information processing.

Information security is an integral part of ensuring and developing all operations at Terveystalo.

- Every Terveystalo employee and anyone working on behalf of Terveystalo is responsible for information security within the scope of their duties. Everyone is not only obliged to follow the instructions they receive but also to help others adhere to secure working practices.
- The health services manager is responsible for ensuring that every employee or independent practitioner working at the location has the practical readiness to consider information security in their work and that any identified deficiencies are corrected.
- The CFO is responsible for leading and developing information security. The group's Chief Information Security Officer (CISO), appointed by the CFO, is responsible for daily information security management.
- The CISO's duties include promoting information security development projects, developing guidelines, advising and training, defining technical information security requirements, monitoring and reporting on the information security situation, and handling information security incidents in collaboration with the Data Protection Officer, general administration, and business areas. The CISO reports to a member of the group management team and has the authority and duty to conduct information security assessments and audits. The CISO is responsible for taking action to eliminate identified information security threats and incidents and, if necessary, notifying the authorities.
- Every Terveystalo employee is obliged to report any observed information security deficiencies and problems to the information security organization. The information security policy is developed based on these observations, with the CISO responsible for the development.
- Terveystalo ensures that only information systems complying with the essential requirements of the Client Data Act are used, corresponding to the service provider's operations, and listed in Valvira's information system register. The IT department controls and permits only the installation of Terveystalo's official software on its workstations and other devices. Production managers are responsible for the up-to-dateness of the systems in their areas. The information security and legal/data protection teams monitor compliance requirements.
- Terveystalo ensures the appropriate use of information systems compliant with the Client Data Act, trains staff in their use, and continuously ensures competence in their use. Product and service managers monitor and maintain system usage instructions, and supervisors, with HR support, are responsible for maintaining professional competence and providing necessary orientation and training.
- By complying with data protection laws and regulations (e.g., Data Protection Impact Assessments and following "privacy and security by design" principles in service production and development), Terveystalo ensures that individual needs and self-determination rights of clients and patients are respected when using technology in service provision.
- Terveystalo complies with the Client Data Act, Section 90, by notifying relevant authorities of deviations from essential information system requirements and information security disruptions affecting networks, following the incident management process and compliance monitoring by the information security and legal/data protection teams.

Terveystalo has developed a separate information security plan related to information systems (THL Regulation 3 /2021). The information security plan was approved on June 14, 2023. The health services manager and supervisors, supported by group functions (e.g., legal/data protection, IT, and information security functions), are

responsible for its compliance. The information security plan includes explanations of how the requirements related to the handling of social care client data and patient data and information systems are ensured, covering the following areas:

- General information security practices
- Procedures for error and problem situations, as well as continuity management
- Staff training and the maintenance and development of competence
- Information system usage instructions and compliance with these instructions
- Basic information, descriptions, and compliance with essential requirements of information systems
- Installation, maintenance, and updating of information systems
- Access rights management and authentication practices
- Access control and usage monitoring practices for client and patient information systems
- Physical security as part of the information systems' operational environment security
- Management of workstations, mobile devices, and support services for the operational environment
- Secure use of platform and network services in terms of data protection and preparedness
- Information security practices for connecting to and using Kanta services.

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Patient Ombudsman

Wellbeing services counties must arrange for the services of patient ombudsmen and social ombudsmen also in social and health care services provided and produced by private entities (Act on Patient Ombudsmen and Social Ombudsmen 739/2023, Section 2).

For the guidance of patients, information about the patient ombudsman service is provided on Terveystalo's website and in customer areas at locations. For staff guidance, information is available on the intranet and communicated through various channels in connection with the legal amendment.

The duties of the patient ombudsman are to:

1. Advise patients on matters related to the application of the Act on the Status and Rights of Patients (785 /1992), hereinafter referred to as the Patient Act;
2. Advise and, if necessary, assist the patient or the patient's legal representative, relative, or other close person in making a complaint as referred to in Section 10 of the Patient Act;
3. Advise on how to initiate a complaint, request for rectification, appeal, claim for damages, patient injury or pharmaceutical injury claim, or other matter related to the patient's legal protection in health care with the competent authority;
4. Inform patients about their rights;
5. Gather information from patient contacts and monitor the development of patients' rights and status; and
6. In addition to the duties specified in items 1-5, otherwise promote and implement patients' rights.

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Patient Status and Rights, and Handling of Official Inquiries

Enhancing Participation and Ensuring Access to Information

At Terveystalo, patients can view their own information via the Terveystalo app/web service using online banking credentials or a mobile certificate. The app displays, among other things, visits to doctors or nurses, diagnosis codes, vaccination and allergy information, and some laboratory test results. Reference values for laboratory test results are shown for quantitative tests. The app is not intended to reduce the doctor's responsibility for treatment but to strengthen the patient's ability to participate in their own care. The app has been developed and continues to be developed. Currently, in addition to the previous functionalities, the app allows patients to make appointments, manage consent and prohibitions in the patient information system, and receive reminders for follow-up appointments, for example.

The patient information system structurally includes a section for the care plan, which each professional updates during patient contact. The plan is visible to the patient through the app or by logging into the website. Each caregiver is responsible for implementing and updating the plan they have created.

Suomen Terveystalo Oy does not have activities that would require restricting a patient's right to self-determination.

Patients and their relatives can provide feedback to Terveystalo through Terveystalo's website. Quality and patient safety officers at the locations ensure that feedback is processed according to the procedure, and patients are directed to contact the wellbeing services county’s patient ombudsman if necessary.

Patients and/or their relatives are advised to contact their wellbeing services county’s patient ombudsman if there is suspicion of a medical error or any other issue related to the patient's rights that could not be resolved satisfactorily at the location.

Terveystalo's website also features a secure and electronic "Patient Incident Report" form. This is intended to capture incidents that the staff may not notice or report. Patients have a different perspective and may notice things that healthcare professionals do not. The reports are handled at the locations under the guidance of the quality and patient safety officer and, if necessary, by the group’s incident management team.

Handling of Complaints

A patient can submit a complaint under the Patient Act using a secure form available on Terveystalo's website, which is then directed to the responsible physician of the chosen location for processing. Complaints can also be sent to Terveystalo by mail or in person at a Terveystalo location.

Complaints are handled at the location by the responsible physician/dentist and the involved parties. The goal of the process is to ensure that any situation potentially endangering patient safety, data protection, or patient rights does not recur, and that the patient receives a written explanation with reasons for the incident. Guidelines, orientation materials, and response templates have been prepared for responsible physicians to ensure that complaints are handled in accordance with the law and that the responses meet the requirements set by the authorities.

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Handling of Complaints and Other Supervision Matters

Requests for clarification from authorities related to complaints and supervision matters are recorded in the feedback management system (restricted access).

Complaints

Responses to a full-scale complaint inquiry are provided as follows:

- At the location, responses are given by the involved parties and the responsible physician/dentist or other service manager.
- The responses are submitted to the service unit's responsible person, who provides their own response.
- The responses are then sent to Valvira or the Regional State Administrative Agency.

The issue raised in the complaint is reviewed at the location level under the guidance of the responsible physician. The aim is to ensure that similar incidents do not recur if deficiencies in operations are identified through the complaint. If necessary, the responsible person of the service unit comments on the actions to be taken.

Supervision Matters

Supervision matters related to a professional are reviewed at the location level by the responsible physician /dentist and the health services manager.

Supervision matters related to the location can include supervision visits (announced or unannounced) or written procedure-based supervision. These are also handled at the location level by the aforementioned individuals and, depending on the case, by other supervisors as well.

Information about supervision matters is communicated to the responsible person of the service unit when necessary.

Suspected Patient Injuries

If a patient injury is suspected at the location, staff should direct the patient or their relatives to contact the patient ombudsman of the patient's own wellbeing services county. Staff must also record the adverse event by filing an incident report in the electronic system. Measures defined on a case-by-case basis aim to eliminate the root cause of the problem. The incident is reviewed at the location under the guidance of the responsible physician/dentist. Additionally, it is assessed whether there is a need to refine operational guidelines or processes at the group level. The patient ombudsman of the wellbeing services county provides guidance, advice, and, if necessary, assistance to the patient and/or relatives in making a patient injury report, complaint, and/or appeal.

The Patient Insurance Centre sends requests for clarification concerning Terveystalo and Personnel Services to Terveystalo through a separately agreed secure procedure, and the quality and patient safety officers at the locations record the requests in the system for handling official inquiries. The Patient Insurance Centre also sends all decisions or summaries of decisions related to Terveystalo's operations to the service manager of Terveystalo's patient safety team. This ensures that Terveystalo's medical management is comprehensively informed of patient injuries occurring throughout the group. Requests for clarification and decisions are handled at the location by the responsible physician/dentist, and it is assessed how similar incidents can be prevented in the future. Actions are recorded in the feedback management system, and their implementation is monitored by the aforementioned responsible roles. The need for nationwide measures is assessed at the group level.

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Monitoring of Self-Monitoring, Responsible Persons, and Documents

This document forms the framework of Terveystalo's self-monitoring plan. The self-monitoring plan is complemented by the operations manual, process map, work instructions, and job descriptions, which are referenced in this document.

The self-monitoring plan is published on Terveystalo's website and internal intranet.

The self-monitoring plan is reviewed at the group, regional, and location levels. Management is responsible for ensuring that the entire staff is familiar with the content of the self-monitoring plan and knows how to act as required. Quality audits ensure that each location can operate in accordance with the self-monitoring plan. Deviations identified during audits and by other means presented in the self-monitoring plan are resolved as quickly as possible, and corrective actions are implemented as planned.

Monitoring of the self-monitoring plan (Supervision Act, Section 27) is conducted by the group's Patient Safety Working Group, which meets four times a year. Each function (e.g., reception services, hospital services, dental health) provides its own report on the monitoring of the self-monitoring plan according to the annual schedule, and proposes changes to the self-monitoring plan based on the monitoring. Changes are also made in real-time as needed. Additionally, the service manager of the patient safety team reviews all changes made since the previous working group meeting and reminds participants of upcoming monitoring. Any changes made based on the monitoring are described below.

Changes to the self-monitoring plan are communicated to the staff through the responsible physicians, quality and patient safety officers, and health services managers.

Changes to the Self-Monitoring Plan:

Updated Information:

- Updated Responsible Persons for the Occupational Health and Healthcare Service Units of Suomen Terveystalo Oy:
    - The responsible person for the occupational health service units of Suomen Terveystalo Oy is Chief Physician of Corporate and Public Health Silja Komulainen (Doctor of Medicine, Specialist in Occupational Health, Special Competence in Health Informatics, Leadership Studies 10 ECTS).
    - The responsible person for the healthcare service units of Suomen Terveystalo Oy (excluding occupational health, dental health, and public services units) is Chief Medical Officer Petteri Lankinen (MD, Docent, EMBA, Specialist in Orthopedics and Traumatology).
- The role of chairing the Medical Forum has been assigned to Chief Medical Officer Petteri Lankinen.
- The approver of the Patient Data Protection Manual has been changed to Petteri Lankinen.