

Conclusions and recommendations of the National Audit Office

Steering and monitoring of patient and client safety

The national steering of patient and client safety aims to ensure that health and social services are safe and effective. The steering of patient and client safety is also linked with the supervision of services, where the focus in recent years has increasingly been on proactive supervision and the service providers' self-monitoring.

The audit examined how the Ministry of Social Affairs and Health and its subordinate administration have, on the one hand, developed, steered and supported the promotion of patient and client safety and, on the other hand, paved the way for monitoring and assessing patient and client safety.

The steering of patient and client safety should be clarified and harmonized

The laws and regulations governing patient and client safety do not form a clear entity. In addition to laws and regulations, there are various guidelines by which patient and client safety has been steered. When the health and social care legislation is reformed to promote the coordination of primary and specialized health and social services, it should also be harmonized in terms of patient and client safety and self-monitoring. Harmonized legislation would also contribute to the implementation of consistent information steering.

From the perspective of health and social service organizers and providers, the steering and guidelines related to patient and client safety form an extensive entity that is difficult to interpret. The substantive laws of healthcare and social welfare provide for patient and client safety and the quality of services in slightly different ways and wordings. Over the years, the number of acts, regulations, guidelines and recommendations steering the activities has grown to a great extent.

As a rule, the organizations providing and organizing services fulfil their statutory planning obligations, but due to inadequate or unclear steering, there are differences in the way in which the monitoring of patient and client safety is carried out and reported. It is not particularly clear to the professionals responsible for patient and client safety what procedures should be used to plan and monitor the activities. Nor is it always known what plans should be made at what level and whether these can be combined. The steering should be harmonized by developing legislation and unifying the guidelines related to planning and monitoring.

Clear management enables continuous development of patient and client safety

Based on the audit, the Ministry of Social Affairs and Health and its subordinate administration have failed in steering patient and client safety in a long-term and consistent manner. There have been interruptions and slowness in the steering. At the same time, many of the key national targets set for patient and client safety have not been met. Strategic steering should be systematic, and the implementation of national targets should be ensured through systematic monitoring.

Different authorities have overlapping responsibilities for patient and client safety, and there have been changes and interruptions in the steering of activities. Shortcomings and unclarity in the steering have been reflected in the service organizers' and providers' ability to carry out long-term patient and client safety work. The steering and coordination of central government should be developed to promote consistency. The self-directed quality and safety assurance and development by the service organizers and providers and the steering of the self-monitoring by the authorities should form an entity that is consistent and efficient in view of resource use. The national responsibility for the management and development of patient and client safety should be more clearly assigned to one competent authority.

If implemented, the proposal by Prime Minister Marin's Government on the establishment of wellbeing services counties and the reform of the organization of health and social services and rescue services (HE 2041/2020 vp) will have a decisive impact on the structures, operating models and tasks related to quality and safety assurance in healthcare and social welfare. The role of the wellbeing services counties under preparation in the development and supervision of the quality and appropriateness of services should also be considered in the development of the authorities' responsibilities for the supervision, self-monitoring and quality assurance of services.

Systematic monitoring of patient and client safety enables data utilization

National patient and client safety strategies underline the importance of monitoring. According to the objectives set, statistics and registers should provide indicator data reflecting the quality and safety of services. The data should be public, and it should be utilized actively.

Based on the audit, national data on patient and client safety is fragmented and incomplete. Key indicators have not been defined, and there is no uniform national picture of incidents, deviations and risks. Patient and client safety is currently not monitored by uniform procedures and reliable indicators. At present, there is not enough data available on the safety of services to be used in developing activities, comparing organizations or disseminating good practices.

On the other hand, there is a lot happening at the moment in the development of information related to the quality of health and social services as well as patient

and client safety. The development of national information must be continued. The Ministry of Social Affairs and Health plays a key role in managing the entirety of safety and quality information and also in combining the work done in separate development projects with larger national development projects.

The development of patient and client safety is proceeding in the right direction

Although the audit shows that there is room for improvement in the operating conditions, steering and monitoring of patient and client safety, the overall picture of the work done in healthcare and social welfare organizations is positive. In specialized medical care, in particular, efforts have been made to ensure the functioning of processes and the safety of care, and there has been improvement. In primary healthcare and social welfare, there have not been as clear improvements, but these activities, too, have been developed to take safety issues into account. Self-monitoring does not guarantee flawless operations or eliminate shortcomings, but it requires units to focus on patient and client safety. In Finland, it is a statutory obligation to ensure the safety of treatment and care. As regards patient and client safety, it is also positive that there are active developers and actors in the field.

Recommendations of the National Audit Office

The Ministry of Social Affairs and Health should

1. allocate the national responsibility for the management and development of patient and client safety more clearly to a competent authority,
2. develop legislation to ensure a clearer foundation for patient and client safety work and for self-monitoring,
3. steer safety and quality data development projects in such a way that the long-sought key metrics for describing the quality and safety of operations are defined nationally and set as monitoring indicators for the operations,
4. ensure that when the quality and safety functions of the wellbeing services counties are developed, the functions are steered towards coherent and proven operating models.