
Notices of patient injury and resolved cases 1 January – 30 June 2019



Safeguarding patients and nursing staff

We handle the compensation procedures for patient injuries that occur in Finland on a centralised basis. We safeguard the rights of patients and the medical staff and produce useful information in support of the evolving insurance system and patient safety work.

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Any quotations must be accompanied by an indication of the source.

Preface

Finnish health care and medical care have, in general, been estimated as being safe. Health care is a highly regulated activity, and health care operations are directed, overseen and developed by different authorities in accordance with their respective statutory responsibilities and division of duties. The patient's status and rights have also been secured by means of legislative provisions. Everyone has the right to sufficient, proper and high-quality treatment.

According to the [statistics](#) published by the National Institute for Health and Welfare (THL), nearly nine million health care procedures are carried out annually. More than 40 visits are made to primary health care clinics, and around two million patients are treated by specialised medical care. Despite the high quality of our health care system, it is clear that the patient's expectations are not always met at every appointment visit and that the treatment does not always result in the desired outcome. Correct diagnosis is not always immediately reached, and an error, accident or near miss situation may occur in connection with a treatment procedure.

All health care procedures always involve risks, and everyone can make mistakes – even the most competent of health care professionals. When a mistake occurs, the essential thing is to determine the reasons for what happened. Equally essential is that the events are discussed openly and without blame. This means people are confident in reporting mistakes. They can be learned from, and similar incidents can be avoided in the future. Promoting open and deliberative atmosphere and a culture of learning from mistakes in health care workplaces is an effective way to improve patient safety.

The Patient Insurance Centre (PVK) handles all the notices of patient injury concerning medical treatment and health care given in Finland. Consequently, based on the injury data accumulated over the last few decades, PVK has comprehensive information concerning the kinds of adverse events in health care that result in filing a notice of patient injury and the kinds of compensable patient injuries that occur in health care. Cases of patient injury should also be systematically addressed in health care to learn lessons from them. To this end, PVK provides hospital districts with detailed information about the injuries that occurred in their area in support of quality and patient safety work in health care. PVK's extensive injury data is also at the researchers' disposal for scientific purposes and purposes that promote patient safety.

This interim report summarises statistics of current interest on the injury development trends during the current year. The report now also includes, for the first time, statistics on compensated patient injuries that occurred during 2014–2016 in connection with surgical procedures as compared to the numbers of procedures recorded by THL. We hope that this information will help to better recognise development targets related to surgical procedures.

Our objective is to provide useful information in support of patient safety work. We will continue our efforts to develop statistics and reporting, and we are happy to receive any development ideas you may have relating to them.

Helsinki, August 2019

Minna Plit-Turunen
Unit Director

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Guideline for reading the figures in the report

Reported patient injuries

- One notice of injury may pertain to several places of treatment. For insurance-technical reasons, these are registered as separate notices of injury by places of treatment. One notice of injury pertains to an average of 1.3 places of treatment.
- It is sometimes only noticed in connection with the processing of the case of injury that the matter warrants more detailed investigation than what was reported. For this reason, the number of reported cases may increase when the processing proceeds, and new cases can be registered for the previous injury years as well. For example, when this interim report was compiled, the number of notices of injury registered for 2018 was 8,646, whereas in the 2018 annual report, the number was 8,522.

Resolved cases and compensable patient injuries

- A claim for compensation can be filed within three years of the date when the injured party concerned learned of the injury. Consequently, a case resolved in 2019 may have occurred several years earlier. In 2019, the majority of the decided cases were reported in 2018 and only less than one-third during the current year.
- If the case of injuries reported by the patient pertains to two different places of treatment in only one of which a patient injury is deemed to have occurred, the case will be recorded in statistics both as a rejected and as a compensable case.

Annual report and interim report

- We will publish an annual report on the previous year's statistics in March, and in summer, statistics of current interest on the injury development trends during the current year.
- Injury statistics are based on the cases reported, registered and resolved during the period under review. Because the statistics are supplemented during the claims handling process, minor deviation may occur in the statistical figures as compared to those of the previous annual reports.

1 Briefly concerning the first half of 2019

By the end of June, a notice of injury was filed by 3,822 different individuals. Based on the notices, 4,959 different cases were registered. During the first six months of the year, a total of 4,822 decisions on the compensability of the reported injury were issued to a total of 3,810 different individuals. Of these, 1,106 cases (23 %) were deemed as compensable patient injuries. A favourable decision was issued in respect of at least one place of treatment to a total of 27.3% of the claimants, i.e. to 1,039 different claimants. A total of EUR 20,2 million was paid out in compensation, including the management expenses of claims handling operations.

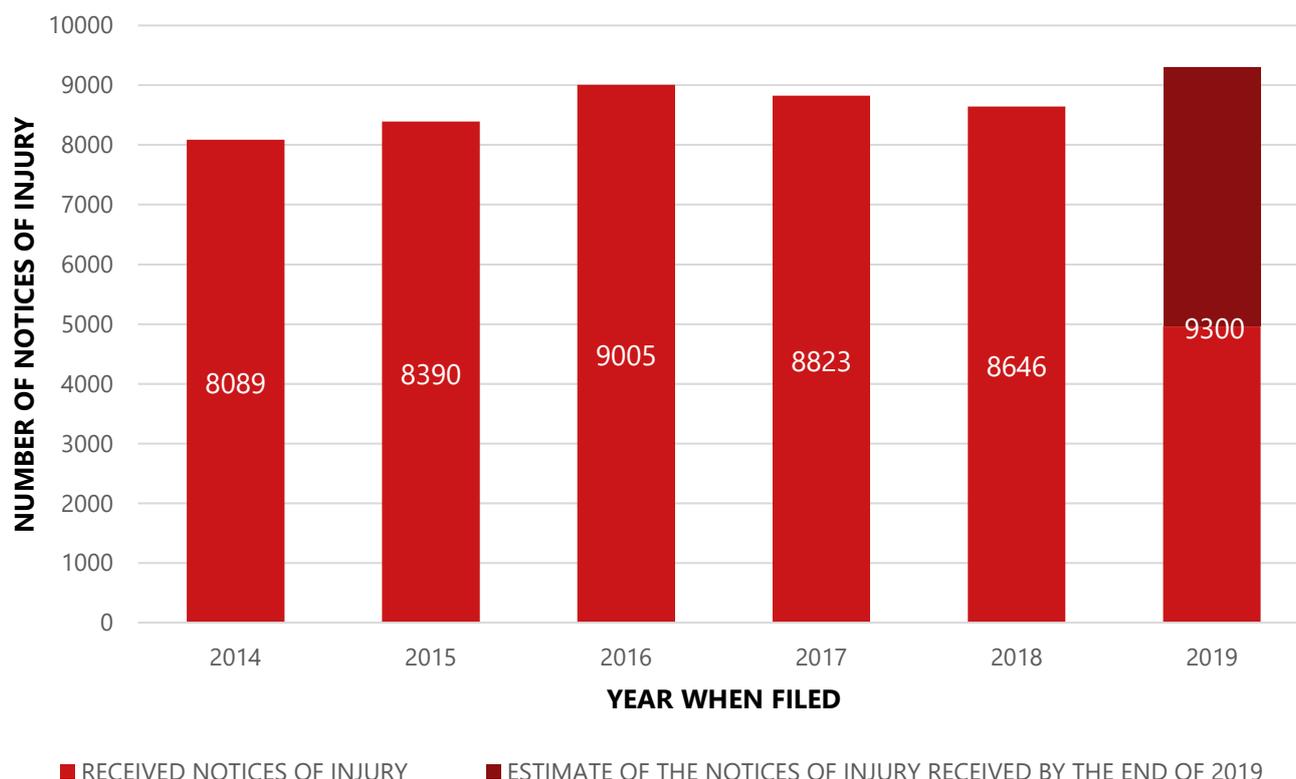
2 Reported patient injuries

The number of notices of injury increased from the beginning of the current decade until 2016 by more than 20%. During 2017 and 2018, the rising trend ended when the number of notices of injury received was slightly less than in the record year 2016. In 2018, a total of 8,646 notices of injury were filed.

During the current year, the number of notices of injury received was again slightly less than before. By the end of June, 4,959 new notices of injury were received, which is 680 less than during the corresponding period in 2018 (4,279). However, the changes in the amounts of notices are moderate. The annual amount of notices is affected by factors such as public debate on health care services and their safety as well as individual cases of malpractice and patient injury receiving media attention that increase the claimants' awareness of the cases of injury and the patient insurance system. With the constant increase in the number of procedures carried out in health care and in the number of treatment contacts, the absolute number of adverse incidents and cases of injury may increase as well. On the other hand, the various measures taken in health care to improve quality and patient safety reduce the amount of adverse incidents and cases of injury and the number of notices of injury.

When examining the statistics, it should be borne in mind that, as a rule, a notice of injury must be filed within three years of the date when the patient first knew of the injury. For this reason, the notices received do not always pertain to the treatment given during the same year, and the changes occurring in health care are only gradually reflected in the statistics.

NOTICES OF PATIENT INJURY RECEIVED IN 2014–2019



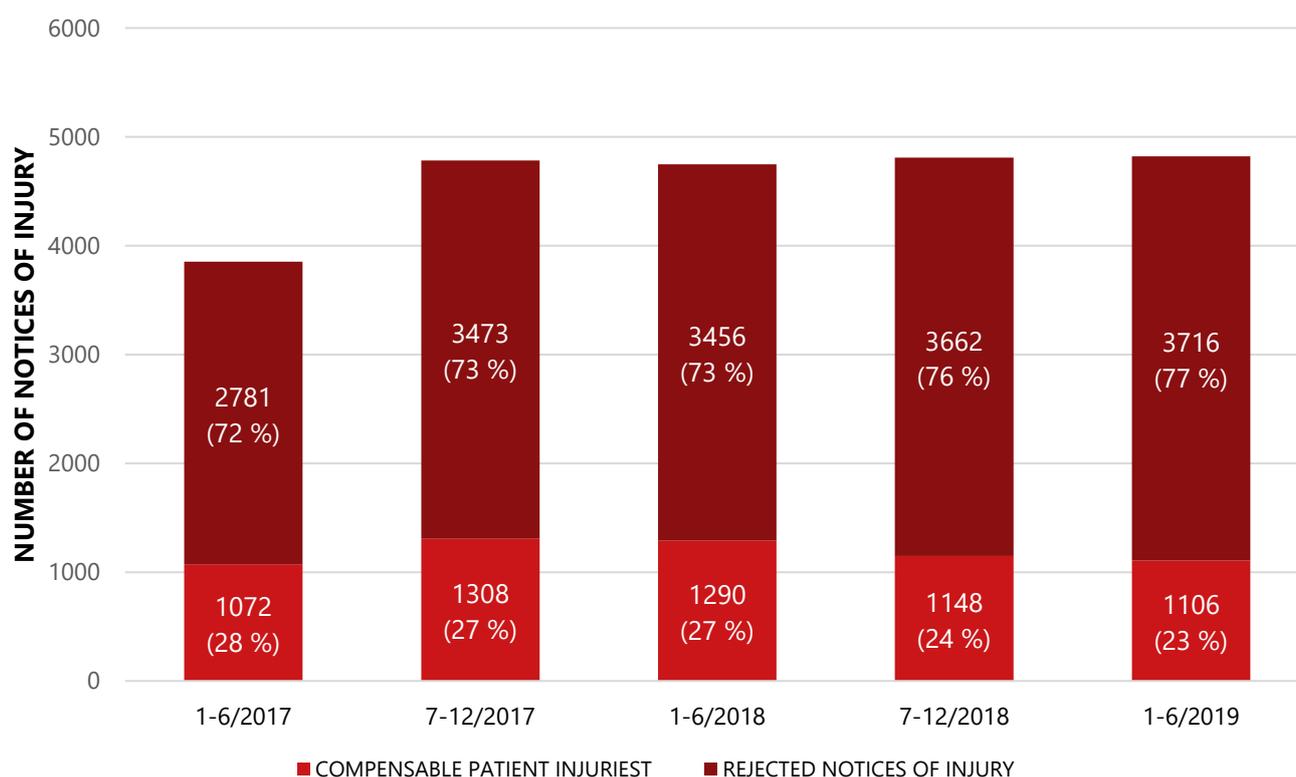
3 Resolved cases and compensable patient injuries

During the period of 1 January – 30 June 2019, a total of 4,822 reported cases were resolved, which is nearly the same amount as the number of new notices of injury received. Of the resolved cases, 1,106 or 23% were deemed compensable. Furthermore, in 1.2% of the cases, the compensation criteria were deemed to have been met, but the loss incurred was so negligible that no compensation was payable.

Of the compensable injuries, the overwhelming majority (93% during the period under review) are classified as treatment injuries. In these cases, the compensation criterion is that an experienced health care professional would have acted differently in the situation concerned and thereby avoided the injury. The second most frequent are infection injuries (4% during the period under review).

In negative decisions, the grounds more frequently invoked were that the adverse effect could not have been avoided by opting for a different course of action or that the infection was such that the patient was deemed capable of enduring it as a risk related to a medically justified treatment.

NOTICES OF PATIENT INJURY RESOLVED IN 2017–2019



NOTICES OF PATIENT INJURY RESOLVED IN 2017–2019

CLAIMS DECISION	YEAR OF DECISION			
	2017	2018	1-6/2018	1-6/2019
COMPENSABLE PATIENT INJURIES				
- TREATMENT INJURIES	2168	2248	1195	1029
- EQUIPMENT-RELATED INJURIES	13	16	6	12
- INFECTION INJURIES	155	132	69	44
- ACCIDENT INJURIES	24	28	13	10
- INJURIES DUE TO INCORRECT SUPPLY OF PHARMACEUTICALS	5	6	4	1
- UNREASONABLE INJURIES	15	8	3	10
* TOTAL	2,380	2,438	1,290	1,106
NEGLIGIBLE PATIENT INJURIES	89	117	59	59
NO PATIENT INJURY				
- NOT AVOIDABLE OR TOLERABLE	2319	2615	1275	1262
- OTHER GROUND FOR REJECTION	3846	4386	2122	2395
* TOTAL	6,165	7,001	3,397	3,657
* TOTAL	8,634	9,556	4,746	4,822
RESOLVED NOTICES OF INJURY				
- COMPENSABLE PATIENT INJURIES	27.6 %	25.5 %	27.2 %	22.9 %
- NEGLIGIBLE PATIENT INJURIES	1.0 %	1.2 %	1.2 %	1.2 %
- NO PATIENT INJURY	71.4 %	73.3 %	71.6 %	75.8 %
* TOTAL	100.0 %	100.0 %	100.0 %	100.0 %
COMPENSABLE PATIENT INJURIES				
- TREATMENT INJURIES	91.1 %	92.2 %	92.6 %	93.0 %
- INFECTION INJURIES	6.5 %	5.4 %	5.3 %	4.0 %
- ACCIDENT INJURIES	1.0 %	1.1 %	1.0 %	0.9 %
- OTHER INJURIES	1.4 %	1.2 %	1.0 %	2.1 %
* TOTAL	100.0 %	100.0 %	100.0 %	100.0 %
NO PATIENT INJURY				
- NOT AVOIDABLE OR TOLERABLE	37.6 %	37.4 %	37.5 %	34.5 %
- OTHER GROUND FOR REJECTION	62.4 %	62.6 %	62.5 %	65.5 %
*TOTAL	100.0 %	100.0 %	100.0 %	100.0 %

4 The most common surgical procedures in the compensable patient injuries that occurred in 2014–2016 as compared to the procedures carried out

PROCEDURE	PATIENT INJURIES	PROCEDURES (THL)	PATIENT INJURY/PROCEDURE (THL)
1. NFB PRIMARY PROSTHETIC REPLACEMENT OF HIP JOINT	261	37,116	0.70 %
2. ABC DECOMPRESSION OF SPINAL CORD AND NERVE ROOTS FOR DEGENERATIVE CONDITIONS OF SPINE	149	27,162	0.55 %
3. NGB PRIMARY PROSTHETIC REPLACEMENT OF KNEE JOINT	146	33,057	0.44 %
4. NHG EXCISION, RECONSTRUCTION AND FUSION OF JOINTS OF ANKLE AND FOOT	116	18,650	0.62 %
5. NAG EXCISION, RECONSTRUCTION AND FUSION OF JOINTS OF SPINE	109	12,797	0.85 %
6. EBB RECONSTRUCTIVE SURGICAL OPERATIONS ON TEETH	76	-	~*)
7. LCD TOTAL EXCISION OF UTERUS	72	14,530	0.50 %
8. EBA EXTRACTION AND PARTIAL EXCISION OF TOOTH	68	-	~*)
9. NGE OPERATIONS ON CAPSULES AND LIGAMENTS OF KNEE JOINT	61	12,380	0.49 %
10. CJE EXTRACAPSULAR CATARACT OPERATIONS USING PHAKOEMULSIFICATION TECHNIQUE	56	132,066	0.04 %
PROPORTION OF 10 MOST COMMON PROCEDURES	36 %		
11. NCJ FRACTURE SURGERY OF ELBOW AND FOREARM	54	11,936	0.45 %
12. NHJ FRACTURE SURGERY OF ANKLE AND FOOT	54	13,852	0.39 %
13. JKA OPERATIONS ON GALLBLADDER	53	27,049	0.20 %
14. JFB PARTIAL EXCISION OF INTESTINE	52	14,505	0.36 %
15. ACC OPERATIONS FOR IMPAIRED FUNCTION OF PERIPHERAL NERVES	51	36,119	0.14 %
16. LAF EXCISION OF OVARY AND FALLOPIAN TUBE	49	13,271	0.37 %
17. NHK OPERATIONS ON BONE OF ANKLE AND FOOT	48	10,879	0.44 %
18. NBJ FRACTURE SURGERY OF SHOULDER AND UPPER ARM	42	7,930	0.53 %
19. NFJ FRACTURE SURGERY OF FEMUR	41	14,580	0.28 %
20. JAB REPAIR OF INGUINAL HERNIA	38	35,071	0.11 %
PROPORTION OF 20 MOST COMMON PROCEDURES	52 %		
21. NGJ FRACTURE SURGERY OF KNEE AND LOWER LEG	38	7,898	0.48 %
22. BAA THYROID GLAND	36	7,586	0.47 %
23. UJF ENTEROSCOPY AND COLOSCOPY	35	-	~*)
24. NDJ FRACTURE SURGERY OF WRIST AND HAND	31	10,423	0.30 %
25. JAD REPAIR OF INCISIONAL HERNIA	29	-	~*)
26. NHL OPERATIONS ON MUSCLES AND TENDONS OF ANKLE AND FOOT	29	9,486	0.31 %
27. NFC SECONDARY PROSTHETIC REPLACEMENT OF HIP JOINT	28	5,783	0.48 %
28. JEA APPENDECTOMY	27	23,374	0.12 %
29. NDE OPERATIONS ON CAPSULES AND LIGAMENTS OF JOINTS OF WRIST AND HAND	26	-	~*)
30. JAH OPENING OF PERITONEAL CAVITY	25	15,823	0.16 %
PROPORTION OF 30 MOST COMMON PROCEDURES	61 %		

*) Details of private health care providers are missing from the numbers of procedures entirely or in part, so the numbers of patient injuries as compared to the procedures carried out cannot be reported.

From the patient safety point of view, instead of the absolute number of compensated patient injuries, it is more relevant to view how many compensable patient injuries occurred as compared to the numbers of procedures carried out. In this interim report, we publish, for the first time, statistics proportionate to the numbers of procedures carried out on how often a compensable patient injury occurred in connection with each respective procedure. The amounts of procedures have been collected from the nationwide Care Registers for Social Welfare and Health Care (HILMO) maintained by the National Institute for Health and Welfare (THL). When reading the statistics, it must be borne in mind that no notice of patient injury will probably ever be filed on all incidents that could meet the criteria of a compensable patient injury. For example, the degree of severity of the injury sustained or the way how the injury affects the functional capacity of the injured party may affect how actively injuries related to different procedures are reported.

The years under review have been so chosen as to make the data as valid as possible: that a notice of injury would already have been filed of the injuries that occurred during the year under review and that the case would already have been decided. However, it is possible that cases of patient injury that occurred during the years under review will be reported and decided even later, in which case the statistics may still change. 30 surgical procedures involving the highest number of patient injuries were included in the review. Comparison with the number of procedures could not be carried out in with regard to all procedures, because some of the data provided by THL does not include comprehensive data on procedures performed in private health care services. It is possible that some rare procedures in which a compensable patient injury occurs relatively more frequently is excluded from the review, even though the number of injuries is low.

Year after year, hip and knee joint replacement surgeries and decompression of the spinal cord and nerve roots have remained on top of the statistics on surgical procedures that have been most frequently compensated as patient injuries. Since a large number of such procedures is carried out on an annual basis, the number of compensable patient injuries is also higher than in connection with certain rarer surgical procedures. Despite the numbers, the risk for the occurrence of a compensable patient injury in connection with these procedures is relatively small and at the same level as with other most common groups of procedures: in the range of less than one per cent.

5 Compensations payable under patient insurance

The compensations payable under patient insurance are determined according to the provisions of the Patient Injuries Act (585/1986) and the Tort Liability Act (412/1974). When the compensations are assessed, due consideration is also given to the decision practice of the Patient Injuries Board and, where applicable, the guidelines and norms issued by the Traffic Accident Board.

The single largest compensation type, accounting for more than one third of compensations paid during the first half of the year, was compensation for the loss of income. The second third, accounting for slightly less than one third of all compensations paid, consisted of the compensations paid for immaterial loss and damage, i.e. compensation for temporary incapacity, cosmetic impairment and permanent incapacity. The final third, accounting for slightly less than one third of all compensations paid, consists of medical treatment and other costs. During the period of 1 January – 30 June 2019, a total of approximately EUR 20.2 million was paid out in compensation for patient injuries occurring in different years, including the management expenses of claims handling operations.

COMPENSATIONS PAID OUT OF THE PATIENT INSURANCE IN 2019 BY COMPENSATION TYPE

