

## 2 DRAWING UP A SELF-REGULATION PLAN

**According to section 27 of the Act on the Supervision of Healthcare and Social Welfare (741/2023), a self-regulation plan must be drawn up in all healthcare and social welfare service units to ensure the quality, appropriateness and safety of daily operations and the sufficiency of personnel participating in client and patient work**

**Person or persons responsible for the planning of in-house control**

**Who participates in the preparation of the self-regulation plan and how is the involvement of personnel in the preparation of the plan ensured?**

Team manager: Karoliina Nummi, tel. 041 731 2118 [karoliina.nummi@onnion.fi](mailto:karoliina.nummi@onnion.fi)

Service Manager Elina Soini, tel. 041 731 0795 [elina.soini@onnion.fi](mailto:elina.soini@onnion.fi) ,

Quality and Resource Manager Hannele Naumanen tel. 041 7301017, [hannele.naumanen@onnion.fi](mailto:hannele.naumanen@onnion.fi)

The personnel participates in the planning and implementation of self-regulation by reviewing self-monitoring and audit results annually in teams and in connection with updating the self-regulation plan. New employees are familiarised with the self-regulation plan and self-monitoring practices during the employee orientation process. The self-regulation plan and related materials are available to all employees at the unit.

**Who is responsible for the planning and monitoring of in-house control (name and contact information)**

Service Manager Elina Soini, tel. 041 731 0795 [elina.soini@onnion.fi](mailto:elina.soini@onnion.fi)

**How does the unit monitor and ensure that the self-regulation plan is up to date, how often is it updated? How can we ensure that updates to the self-regulation plan are published without delay and that changes to the plan are communicated to the personnel?**

The self-regulation plan is updated regularly in January of each operating year and, if necessary, if there have been changes in operations or responsible persons. The updated self-regulation plan is published on Onni's website and printed in the unit immediately after the updates have been made. This is the responsibility of the person responsible for planning and monitoring self-monitoring (service manager).

The Quality and Resource Manager is responsible for informing the personnel of the service unit and service point of any changes made to the self-monitoring plan. This is done in regular team meetings and unit visits. The team supervisor also discusses the self-monitoring sections in team meetings.

The implementation of self-monitoring is also monitored by the quality group with regard to quarterly reported observations, deviations and feedback, and the necessary changes/development measures are defined. The monitoring of the quality group is



compiled into a summary of observations, deviations and feedback, as well as any changes made based on them, if necessary. Em. The compilation is published on the Group's website [www.onnion.fi](http://www.onnion.fi) quarterly.

## **Publicity of the self-regulation plan**

### **Where can I see the unit's self-regulation plan?**

On the wall of the unit's office, address Palosaarentie 31, 65200 Vaasa and on Onni's website, address <https://www.onnion.fi/yritys/laatu>

## **3 MISSION, VALUES AND OPERATING PRINCIPLES**

### **Mission statement**

The business idea is to provide professional, high-quality home care services for the elderly and clients of disability services, informal care clients, which also include families with children.

The service is provided as an on-site service at the customer's home in the wellbeing services county of Ostrobothnia as an outsourced service, with a service voucher and for self-paying customers.

The aim of home care is to support and promote the comprehensive health, well-being and rehabilitation of clients and to maintain mental and social functional capacity for coping as independently as possible at home and outside the home. Treatment and monitoring of illnesses are an important part of the client's treatment as a whole

As a rule, clients are elderly people living alone at home, people with disabilities and informal care clients whose functional capacity has either temporarily or permanently decreased to such an extent that they need outside help to live at home. Family caregivers can take time off from informal care as allocated to them.

Our operations support the client's independent living at home and enable them to live at home despite their illness or disability and enable family caregivers to cope. We support the customer's participation in society, maintaining social connections and hobbies regardless of the limitations caused by the disability or illness.

We respect the right of our customers, informal care and families with children to independent living. Our services enable municipalities to provide high-quality and cost-effective services in accordance with the Social Welfare, Elderly and Disability Services Act.

### **Values and operating principles**

#### **What are the values and operating principles that guide our operations?**

Without trust, our work would be impossible. Trust keeps everyday life smooth, our customers happy and our work community close-knit. We build trust every day through our own actions. The feeling that the service provided to our home care customers is of a



high standard is based on reliability. The fact that our client, who needs professional care, help and support, is able to live in their own home and participate outside the home is based on reliability. Reliability creates a safe undertone in the operating culture of our entire company, which is visible to our customers as more flexible everyday life and better service. We do what we promise. We will do our best. We take care. Every day of the year. Our way of working is described by three words: Reliable-friendly-Flexible. In addition, our operating principles are customer orientation and customer safety.

Quality is a key success factor for Onni, which ensures that our customers' expectations are met and that they comply with the requirements set by our customers, legislation and authorities. We are committed to providing service correctly, timely, safely, responsibly and in accordance with our values and ethical principles. The three quality principles of our quality policy, which we adhere to for every service, are: we work for our patients and customers, every employee is responsible for quality, quality is measured every day through the success of customer work. Our quality work is continuous and systematic development, which is led by the quality team in our company. Quality work is also implemented in the regions through a quality network.

The quality of Onni home care services is monitored in everyday operations and ensured through good and timely recruitment, good and documented induction of employees, good and proactive supervisor work, and open and friendly interaction between service recipients and employees. Supervisors also participate in operational work, so they are close to everyday activities and see potential quality deficits.

The customer's opinion and wishes are genuinely heard at Onni Home Care and we act accordingly. Each home care client has a designated own/responsible nurse who ensures that the client's care and service plans and RAI assessments are up-to-date and carries out visits to the client's premises more often than other personnel. The customer is actively asked for feedback on the quality of the service. We also keep in touch with customers' families, while taking into account the customer's data protection and autonomy. The development takes into account customer satisfaction, development targets raised in the survey, feedback and complaints received, and issues raised in deviations.

#### 4 IMPLEMENTATION OF SELF-MONITORING

##### **RISK MANAGEMENT**

##### **Identifying risks and shortcomings and correcting them**

There are also risk factors associated with home care activities. There may be deficiencies in the conditions of customers' homes related to, for example: temperature, ventilation and lighting. Lifting aids may be inadequate, which makes it challenging to achieve good ergonomics. Detergents and cleaning products intended for home use can cause allergic reactions in home care workers. Working alone at the customer's premises, moving with customers, transitions from one customer to another, challenging customer situations, responsibilities related to tasks and various unexpected situations in customer work can feel burdensome for employees.

Onni has prepared for the above. risks by encouraging home care workers to give continuous feedback on the fluency of their own work and observed shortcomings in operations. The home nurse can give immediate feedback, for example, through the Falcony system or by calling their supervisor. Less urgent feedback can be brought up by the home nurse in regular team meetings. The team supervisor addresses the grievances raised by home nurses and ensures that the employee's work is safe.

Risk assessment is a statutory, everyday activity and a continuous process. The risk assessment covers, for example, the working environment, accident hazards, chemical and biological hazards, mental strain, physical strain and fire safety. Assessment of the magnitude of risks consists of the likelihood of adverse events and the severity of the consequences caused. In risk management, quality and customer safety are improved by identifying in advance the critical work phases where the fulfilment of the requirements and goals set for operations is at risk. Risk management also includes systematic action to eliminate or minimise shortcomings and identified risks, as well as recording, analysing, reporting and implementing follow-up actions of actual adverse events. The service provider is responsible for ensuring that risk management is targeted at all areas of self-monitoring.

Onni has an organisation-level preparedness and continuity management plan, which is updated annually by the quality group. The preparedness and continuity management plan describes the Group's general principles for maintaining preparedness and continuity management. The plan is reviewed and updated as necessary to ensure that it is up-to-date and meets the Group's needs.

Onni's preparedness and continuity management are maintained by extending their assessment to all daily operations, instructions and operations, and the principles of management are therefore described in several different plans and guidelines that complement this plan. A prerequisite for preparedness and continuity management is knowledge of the operating environment, anticipation, regular maintenance of operating models and instructions, compliance with them and comprehensive, systematic risk assessment. The objective of preparedness and continuity management planning is to support the organisation's strategic goals and core processes in case of disruptions and to ensure business continuity. Preparedness and the prerequisites for continuity management are assessed using both internal and external methods.

Risk assessment is part of the occupational safety and health action plan.

#### **List of instructions for the implementation of risk management/self-control:**

- Employee orientation to work and tasks
- Assessment of physical and mental risk factors at work carried out in cooperation with employee representatives.
- Maintenance and compliance with occupational safety and health guidelines by regional supervisors and occupational safety and health organisations.
- Risk management methods: checking the employee's criminal record, occupational safety and health risk assessment for 1 year and their measures to the units, environmental risk mapping once a year, Various guidelines; such as contingency plans, GDPR guidelines.

## Risk identification

### Notification obligation

**Have the procedures for implementing the personnel's reporting obligation been included in the self-monitoring plan? Is there a statement in the Code of Conduct that no adverse retaliation may be taken against the notifier?**

Risk perception is part of everyday life, and every Onni employee has a duty to report. Service managers, team managers and the quality and resource manager interact closely with the staff. Detected risks or quality deviations can be brought up in meetings, by phone or by email, for example. An electronic quality deviation report is prepared on quality deviations. The deviation report is regularly reviewed in personnel meetings and with cooperation partners (customer, relative, client).

By law, employees are obliged to bring to the employer's attention any shortcomings and hazards observed at work. The staff can report any observations orally, in writing or send feedback via the electronic system.

The notifier shall not be subject to adverse retaliation.

**How do the personnel highlight any perceived risks, shortcomings and quality deviations in customer safety?**

The employee must report risks and dangerous situations to his/her supervisor via the electronic Falcony quality system. The report can also be made by phone, face-to-face or email, in which case the supervisor will continue to process the situation and, if necessary, submit a deviation report to the Falcony quality system. The person submitting the report shall not be subject to adverse retaliation as a result of the report.

Section 29 of the Supervision Act obliges the personnel of a private service provider to notify the person in charge of the service unit without delay if they notice or become aware of a defect or an obvious threat of maladministration in the implementation of the client's social welfare services. The person who has received the notification must report the matter in accordance with Onni's own internal process or directly to the wellbeing services county. The person in charge of Onni's service unit is responsible for ensuring that the personnel are aware of the reporting obligations.

The person who received the report must initiate measures to eliminate the grievance or threat of obvious maladministration. Notwithstanding secrecy provisions, they must also notify the Regional State Administrative Agency if the grievance or threat of obvious maladministration is not rectified without delay.

The Regional State Administrative Agency or the National Supervisory Authority for Welfare and Health may issue an order to eliminate the maladministration and decide on additional measures concerning it as separately provided for.



The responsibility for utilising the information obtained in risk management in development lies with the party responsible for operations, but employees must report any detected risks to the management.

**How can customers and relatives highlight any shortcomings, quality deviations and risks they observe and how are they handled?**

If necessary, customers and relatives can give feedback to the supervisor responsible for the service or the official of the client.

Any feedback and reminders will be processed without delay and resolved with all relevant persons by the supervisor. If the matter or feedback concerns the supervisor's activities, the feedback will be processed by the Service Manager. Any inappropriate treatment is addressed immediately, and the employer has a warning or dismissal procedure in place, if necessary, in the event of a significant error on the part of the employee. Feedback can also be given electronically and anonymously through the company's website.

Possible adverse events and dangerous situations are always discussed with the customer and/or family member whenever necessary

**Dealing with risks and concerns**

**Description of how adverse events and near-misses are recorded, handled and reported.**

All risk and deviation situations are reported to the Falcony reporting system. A report is made of all events that caused or could have caused harm to the recipient of the service, employee or customer.

The causes and backgrounds of risk situations and deviations are investigated with the parties involved, and exceptional situations are recorded in a quality deviation report. The report is submitted for analysis and processing in accordance with the meeting practice described in the quality system.

Deviations of the month are handled nationwide once a month under the leadership of the Quality and Resource Manager in operational meetings of the development team (including the Business Director, Service Managers, Quality and Resource Manager and Team Managers).

Deviations concerning the service unit are discussed separately in more detail in team meetings led by the team supervisor at least once a month and recorded in the meeting memorandum (involving the supervisor and the unit's staff).

Serious risk and non-conformance situations leading to immediate corrective actions are submitted as a summary to the responsible physician, quality group, business director, CEO and quality and resource manager. The resources required for patient safety work are assessed annually in connection with the financial planning process.

## Corrective actions

### Describe the monitoring and recording of corrective actions:

If necessary, shortcomings and deviations are reacted to immediately when a defect is discovered. The events are reviewed with the unit/area supervisor and, if necessary, with the business management. If necessary, corrective and preventive measures are taken. Measures may include, for example, changing instructions and operating methods and arranging additional orientation or training. Customers and/or relatives as well as the subscriber of the service are involved if the risk is of such a nature that this is appropriate, necessary or necessary. Corrective actions are recorded in the Falcony system.

### How are agreed changes in work and other corrective actions communicated to staff and other partners?

Risk and deviation situations are communicated to the cooperation partners regularly in office meetings or, in accordance with the agreement, once a month. Team supervisors are responsible for informing employees and service recipients, and the service manager is responsible for informing the wellbeing services county's partner. If the matter requires communication by the entire Group, the health and social services management together with the Director of Marketing and Communications is responsible for communications.

**See also the Ministry of Social Affairs and Health's publication [Customer and patient safety strategy and implementation plan 2022-2026:](#)**

## 5 STATUS AND RIGHTS OF THE CUSTOMER

### Service and care plan

**How is the client's service and care plan drawn up and updated? Who is responsible for updating? How will the implementation of the service and care plan and the need for updating be monitored?**

The client's service needs are determined by the authority ordering the service, such as a social worker, mapping team or service counsellor. When assessing the need for services, the criteria for service provision drawn up by officials are taken into account.

The assessment of service needs begins with a survey visit to the service recipient, which is carried out by the wellbeing services county's mapping team, and in the case of self-paying clients, by the supervisor of Onni home care. The wishes regarding the service and his/her habits and habits are discussed with the service recipient and his/her relatives. The recipient of the service receives information and guidance on services produced at home. In addition to those in the wellbeing services county, a separate care and service plan is drawn up for Onni home care, and a service agreement is also drawn up for self-paying clients.

Service voucher for the customer and self-paying customer A service agreement and a service and care plan are drawn up by a team supervisor (also acting as a nurse at the

unit) in the DomaCare ERP system. The client is involved in drawing up and updating the service and care plan. If necessary, the customer can bring a family member or case manager with them.

The service and care plan is updated for service voucher and self-paying customers at least every six months or when the client's service and treatment changes. The responsibility for updating lies with the unit's team supervisor, but the actual service and care plan made with the client is updated by the family nurse in cooperation with the team supervisor and the client. In connection with the update, the RAI assessment describing the customer's functional capacity will also be updated. The update will be entered in the DomaCare activity management system as a recurrence for the next six months, so the update of the service and care plan must always be up-to-date.

The plans are stored in the electronic system Doma Care, from where they are available to the employee participating in the treatment and guides the client's daily service and care.

The need for updating is monitored during customer visits.

**According to section 15a of the Act on Services for the Elderly, municipalities must use the RAI assessment tools to assess the functional capacity of an elderly person if, according to a preliminary assessment, the person already needs regular social services to ensure their care and care. The use of the international RAI assessment tool in services for the elderly will become statutory on 1.4.2023.**

**What indicators are used to assess the functional capacity of an elderly person?**

In home care, the RAI assessment is used to assess the functional capacity of an elderly person. The RAI assessment is carried out for all home care clients, regardless of the number of hours. The client and/or his/her family members always participate in the service and care plan and RAI assessment. The wishes of relatives are taken into account as far as possible, as long as they do not cause harm or danger or unreasonable inconvenience.

**How will the client and/or his/her relatives and loved ones be involved in drawing up and updating the service and care plan?**

A time for drawing up and updating the service and treatment plan is agreed together with the client. The customer is told that he or she has the opportunity to bring a relative, a loved one, to the event. Together we agree on a suitable day for everyone and the event is held at the customer's home. During the preparation of the service and care plan, the service recipient and his/her relatives discuss the service recipient's wishes regarding the service and his/her habits and habits.

**How can we ensure that the personnel are familiar with the content of the service and care plan and act accordingly?**

The service and care plan is written in the customer's information in the Doma Care ERP system, which is an employee's tool. The employee is obliged to familiarise themselves



with the customer's information before going to the customer visit and to familiarise themselves with the customer's information. The employee has a customer visit to the mobile DomaCare, which contains essential information about the customer to support the visit. The service and care plan is implemented and monitored at each customer visit. The employee is obliged to comply with the service and care plan defined in writing and to record the customer visit. The customer is involved in recording the customer visit whenever possible.

The need to update the service and care plan is systematically monitored through the entries in the Doma Care system and the implementation of treatment. In home care, structural recording is used.

## **Customer treatment**

### **Ensuring self-determination**

**How does the unit strengthen and ensure the realisation of matters related to the clients' right to self-determination (such as the right to privacy, the freedom to decide on one's own everyday activities and the opportunity for an individual and personal life)**

The task of home care workers is to respect the client's home, which is also their working environment. The customer's privacy is respected by not interfering in the customer's personal affairs or their own habitual ways of operating in their home. Respect the customer's daily rhythm and opinions. We will strengthen the customer's autonomy and support their participation in the planning and implementation of their services.

This autonomy is further emphasised when working in the customer's home. Employees act respectfully towards the customer and implement the customer's wishes whenever possible and realistically feasible, identifying and utilising the customer's own power shadows.

Everyone has the right to live their own full life in their own home.

### **Appropriate treatment of the customer**

The way of meeting and addressing customers adopted in the service tells about the prevailing operating culture and the values and operating principles adopted behind it. The services must pay special attention to and, if necessary, react to inappropriate or offensive behaviour towards the customer.

**How to ensure appropriate treatment of customers and what to do if inappropriate treatment is detected?**

Social welfare clients have the right to high-quality social welfare and treatment without discrimination. The client must be treated with respect for his or her dignity, convictions and privacy.

If necessary, customers can give feedback to the supervisor responsible for the service or the official of the client. Feedback can be given electronically, by phone and also anonymously through the company's website. Any feedback and reminders will be

processed without delay and resolved with all relevant persons by the supervisor. If the matter or feedback concerns the supervisor's activities, the feedback will be processed by the Service Manager. Any inappropriate treatment is addressed immediately, and the employer has a warning or dismissal procedure in place, if necessary, in the event of a significant error on the part of the employee.

The customer also has the right to submit a complaint if they are dissatisfied with their treatment or the quality of the service. If necessary, the objection can also be submitted by his/her legal representative, relative or close relative. The objection is submitted to the authority responsible for organising the service, the wellbeing services county that ordered the service.

**How is inappropriate treatment, adverse event or dangerous situation experienced by the customer handled with the customer and, if necessary, his/her family member or close relative?**

Responding to feedback in the manner desired by the customer or his/her relatives/loved ones: in writing, by calling or arranging a customer meeting.

## **Customer involvement**

**Participation of customers and relatives in the development of the unit's quality and self-monitoring**

**How do customers and their families participate in the development of the unit's service and self-monitoring?**

Taking customers and loved ones into account is an essential part of developing the content, quality, customer safety and self-monitoring of the service.

Clients and their loved ones can give feedback to home care workers during customer visits and participate in the development of self-monitoring based on their observations. We encourage our customers to participate in customer surveys and also give immediate feedback. Home care contact information has been given in writing to all home care customers to make contacting them as easy as possible.

All customer feedback is collected and reported to Onni's management team for analysis. The results of the collected customer feedback are also part of Onni's self-regulation report and the self-regulation development plan included in it (see summary of *the development plan in this document*). Customer feedback revealing quality deviations is systematically reacted to by improving and developing the service and, as a result of the development work, by monitoring audits, observations and self-monitoring reporting.

**How and how often is customer feedback collected?**

A national customer survey charts the functionality and quality of services provided at home in different respondent groups. The survey will be sent electronically to the subscribers and service recipients of the wellbeing services county. The surveys are carried out once a year in the autumn.

## How is feedback from customers utilised in developing and/or correcting operations?

Customer feedback can be given orally and in writing, under one's own name or anonymously (via the electronic feedback form). Customer feedback is recorded in the quality system Falcony, from where it is processed by the person responsible for the operations. The supervisor in charge investigates and resolves feedback, the processing of which is communicated to the unit's management. Customer feedback and actions are reviewed in a personnel meeting or, if necessary, discussed with the person who received feedback.

## Legal protection of the customer

A person dissatisfied with the quality of the service or the treatment received by the customer has the right to submit an objection to the person in charge of the operating unit or a senior official. If necessary, the objection can also be submitted by his/her legal representative, relative or close relative. The addressee of the objection must process the matter and provide a written, reasoned reply within a reasonable time.

### Addressee, position and contact details of the objection:

Team manager: Karoliina Nummi, tel. 041 731 2118 [karoliina.nummi@onnion.fi](mailto:karoliina.nummi@onnion.fi)

Service Manager Elina Soini, tel. 041 731 0795 [elina.soini@onnion.fi](mailto:elina.soini@onnion.fi) ,

or directly to the wellbeing services county of Ostrobothnia. A form for the reminder can be found on the website of the wellbeing services county.

## Contact information of the Social Services and Patient Affairs Officer and information on the services he or she provides

The social welfare officer is available Mon-Fri 8-14, tel. 040 5079303, [sosiaaliasiavastaava@ovph.fi](mailto:sosiaaliasiavastaava@ovph.fi) (unsecured email)

The patient advocate is available Mon-Thu 9-11 and 12-14 tel. 06 21801080 [potilasasiavastaava@ovph.fi](mailto:potilasasiavastaava@ovph.fi) ( unsecured email)

The Social Services and Patient Affairs Officer advises clients, relatives and staff in matters related to the treatment, participation and legal protection of clients. The Social Services and Patient Affairs Officer is an impartial person whose task is advisory and he or she may also act in a mediating role. The service is free of charge for customers.

The Social Services and Patient Affairs Officer advises clients of the wellbeing services county of Ostrobothnia on the status and rights of social welfare clients and healthcare patients in matters related to the Act on the Status and Rights of Patients. Advises and assists the client and patient as well as their legal representative, family member or other close relative in filing an objection. Provides advice on how a complaint, rectification claim, complaint, claim for damages, compensation claim for patient or pharmaceutical injury, or other matters related to the legal protection of the client and patient can be

initiated before a competent authority. Promotes and implements the rights of clients and patients. Does not make decisions or grant benefits. Does not comment on the patient's treatment decisions or whether an injury has occurred during the treatment.

**Contact information of the Consumer Advisory Services and information on the services available through it**

The Consumer Advisory Services' online services provide [www.kuluttajaneuvonta.fi](http://www.kuluttajaneuvonta.fi) instructions and help in matters related to consumption. tel. 029553901 from 9 am to 3 pm.

**How are reminders, complaints and other supervision decisions processed and taken into account in the development of operations?**

Reminders are first processed internally and the team supervisor is responsible for handling deviations. If a quality deviation is significant, the team supervisor notifies his/her supervisor of the deviation.

**Target time for processing reminders**

The processing of reminders will take place within two weeks.

**Self-employed**

According to the Social Welfare Act, a social welfare client must be assigned a personal worker for the duration of the customer relationship. An employee does not need to be appointed if another employee responsible for the services has already been appointed for the customer or if the appointment is manifestly unnecessary for some other reason. The task of a person acting as a self-employed person is to promote that services for the customer are arranged in accordance with the assessment of service needs, in accordance with the customer's needs and interests.

**Has a self-employed person been appointed for customers?**

The wellbeing services county of Ostrobothnia defines a self-employed person in its own organisation for its outsourced service customers.

## 6. SELF-MONITORING OF THE CONTENT OF THE SERVICE

**Activities supporting wellbeing, rehabilitation and growth**

**How does the service promote the physical, mental, cognitive and social functioning of customers?**

The physical, mental, cognitive and social functional capacity of the clients is maintained and promoted with a rehabilitative approach to work, and the client is involved at each client visit, as much as his or her functional capacity allows. Involving the client in one's own care is a key part of client-oriented care. Through involvement, we promote the

client's autonomy and commitment to treatment. The client participates in: drawing up their own care and service plan in client meetings, treatment situations and by giving feedback. The aim is to support exercise and outdoor activities if the customer orders a service for the customer. We encourage our customers and relatives to engage in social interaction and events, as well as to enable outdoor activities. The customer can also buy outdoor help from our home care.

The functional capacity of clients is assessed at each home care visit. Every visit of customers is recorded in the customer information system and, where possible, the customer participates in the recording. The customer's self-help is assessed continuously. Through RAI assessments, the customer's functional capacity is assessed regularly at least once every six months and in a situation where the customer's functional capacity or service needs change.

### **How is the achievement of goals concerning clients' functional capacity, well-being and rehabilitative activities monitored?**

The client's functional capacity and well-being are monitored at each visit. The customer's needs, wishes and goals are reviewed regularly. The activities are supervised together with the office-holder.

## **Nutrition**

### **How is the food supply of the unit organized?**

Customers and/or relatives either take care of the nutrition and food supply themselves, or they have catering and/or shop services. During the visits, the client's nutrition and monitoring are ensured and, if necessary, help with eating. The customer is guided towards healthy and varied eating habits. For the elderly, in accordance with nutritional recommendations. Possible diets are always taken into account in meal orders and store orders.

### **How is the adequate nutrition and fluid intake and nutritional level of customers monitored?**

The level of nutrition, fluid intake and nutrition is monitored during customer visits.

The client's weight is monitored regularly once a month by weighing, BMI meter and MNA meter. The client's hydration is monitored by monitoring urine output and dehydration symptoms, among other things. If necessary, ask a nurse to take blood tests. Changing situations are reacted to immediately by consulting a doctor.

## **Hygiene practices**

**How does the unit monitor the general level of hygiene and how does it ensure that hygiene practices that meet customer needs are implemented in accordance with the given instructions and customers' service needs? How does the above? the staff performing the tasks have been trained/trained in the implementation of the cleaning and laundry maintenance of the unit in accordance with instructions and standards?**

Regular and systematic cleaning and cleaning of textiles are an essential part of customers' well-being and comfort. A good level of hygiene also prevents the spread of infectious diseases.

Hygiene practices are part of the personnel's general orientation, such as workwear, jewellery use, protective equipment and special situations. We also follow the instructions of the hygiene nurse in the wellbeing services counties. All employees are introduced to the basics of good hand hygiene. If necessary, employees receive customer-specific orientation in aseptics. Employees are provided with protective gloves, shoe covers and hand sanitiser. If necessary, mouth-nose protection or isolation masks are used. The unit has drawn up guidelines for hygiene practices. Instructions are included in the onboarding. The customer's hygiene is taken care of in accordance with the service and care plan. We will also take care of ordering the customer's incontinence protectors.

The cleaning of customers' apartments is taken care of by the customer and his/her relatives. Customers either buy cleaning from a private service provider or take care of it either themselves or with the help of a relative.

The unit's common areas are cleaned by staff. There is no need for laundry maintenance in the unit. The staff takes care of the laundry maintenance of your own workwear.

## **Infection control**

### **Name and contact details of the hygiene contact person**

Hygiene nurse in the wellbeing services county of Ostrobothnia:  
etunimi.sukunim@ovph.fi

The website of the wellbeing services county of Ostrobothnia lists persons by area.

Protective clothing and masks are used in home care if it is known that the client has an infectious disease. Protective gloves and hand sanitizers are also used, as well as shoe covers.

### **How can the spread of infections and infectious diseases be prevented?**

Following good hand hygiene is by far the most important way to implement good hygiene practices. This includes following an aseptic procedure, taking care of hand washing and disinfection, and using shelters correctly. Adequate vaccination protection can prevent the spread of infectious diseases. (especially influenza).

## **Health care and medical care**

### **How to ensure compliance with the instructions concerning oral care, non-urgent medical care, emergency medical care and sudden death of clients?**

Service recipients are primary health care clients on the same basis as other persons living at home. If necessary, employees help with booking appointments for primary health care, dental care and can also act as an escort during visits.

Customers' oral care is taken into account during customer visits, for those customers who are unable to take care of oral care themselves.

In the case of outsourced service customers, the home health care doctor of the wellbeing services county. Some of the clients have a family doctor in primary health care. Onni's nurses help the family doctor in cooperation or contact him or her with the customer's consent.

Onni's staff works in close cooperation with the wellbeing services county's health care and medical care.

The pharmacotherapy plan is updated once a year, and the team supervisor, who is the unit's nurse, is responsible for implementing the plan. The home care physician is responsible for the client's medication as a whole. Med Group Oy's physician in charge, Riika Merivirta, and the unit's team supervisor are responsible for pharmacotherapy as a whole.

The unit also has instructions in case of sudden death.

### **How is the health of clients with long-term illnesses promoted and monitored?**

The health of long-term clients is promoted in accordance with the service and care plan and monitored regularly during client visits, and any changes are notified to the unit's nurse, who makes a customer visit to the client. The service and care plan for people with chronic illnesses is updated as necessary and at least every six months,

### **Who in the unit is responsible for the health and medical care of customers?**

The home care doctor of the wellbeing services county of Pojanmaa is responsible for the health care and medical care of outsourced customers. In accordance with the doctor's instructions, Onni home care nurses are responsible for clients' health care and medical care and cooperate with the wellbeing services counties in customers' health and medical care matters.

### **How is the pharmacotherapy plan monitored and updated?**

The implementation of the pharmacotherapy plan is monitored by the unit's nurse. The nurse inducts the new employee into the pharmacotherapy plan, and after updating the pharmacotherapy plan, the plan is discussed in a team meeting. The pharmacotherapy plan is updated once a year or otherwise in connection with matters or changes in the person in charge. The responsibility for updating the pharmacotherapy plan lies with the team supervisor/responsible nurse.

### **Who is responsible for the unit's pharmacotherapy as a whole?**

The client's pharmacotherapy as a whole is the responsibility of the home care of the wellbeing services county of Ostrobothnia and the client's family physician. Med Group's physician in charge Riika Merivirta is responsible for the unit's pharmacotherapy as a whole, as well as the unit's team supervisor, who is also the nurse in charge of the unit.

### **Limited medicine storage**

Home care units do not have medicine storage. As a rule, customers have dose-dispensing medicines and other possible medicines that are stored at the customer's home.

### **Multidisciplinary cooperation**

**How has cooperation and flow of information with other social and health care service providers and different administrative branches included in the client's service package been arranged?**

Cooperation and flow of information between the service recipient, employees of services provided at home and other social and health care service providers is an essential part of providing high-quality and consistent care and support.

**Multiprofessional cooperation:** Multiprofessional personnel participate in the treatment and support of clients: the party ordering the service, the attending physician, the nurse in charge of the unit and, if necessary, the client counsellor. Cooperation within the team is important to ensure that services are consistent and customer needs are taken into account.

**Information flow methods:** The flow of information takes place in writing, for example through treatment plans, reports or emails, or by telephone, in which case discussions and decisions are properly documented. It is important to ensure that all necessary information is available and updated for all parties.

**Customer information systems:** Doma Care which is used as a customer information system and information flow management. The system contains information about the client's treatment, services, medication and other matters related to treatment. Encrypted e-mail is used between subscriber customers and service providers.

**Cooperation agreements and practices:** Cooperation and information flow are guided by the outsourced service agreement and practices made with the client, which define the responsibilities and procedures of different operators.

**Regular team meetings:** Regular meetings related to customer matters are important for cooperation and information flow. In team meetings, the client's situation is discussed and treatment is planned together while respecting the client's autonomy and wishes.

**Customer involvement:** Customer participation and information are important. The customer is always offered the opportunity to participate in the flow of information and decision-making concerning him/her.



## 7 CUSTOMER SECURITY

### **Cooperation with authorities and operators responsible for safety**

#### **How are the risks related to the healthiness of the unit's premises managed?**

The risks related to the healthiness of the premises are assessed in connection with occupational safety and health risk assessments, which are carried out annually at the operating unit. If risks or problems are detected in the healthiness of the premises at other times, they are immediately addressed and the matter is taken forward by the team supervisor and service manager and corrective measures are drawn up. The annual risk assessments help identify and describe risks related to the unit's operations, assess the significance of the risks and the likelihood of them materialising, and define procedures for managing, monitoring and reporting risks. The risk assessments involve the service manager, team supervisor and occupational safety representative, as well as personnel representatives. The risk assessment and plan are carried out together with the personnel by discussion or interview. Based on the risk assessment, occupational safety and health development targets and measures to manage risks are selected. The implementation of the measures is monitored regularly in home care by the quality and resource manager, service manager and occupational safety representative. The risk and hazard assessment and action plan are prepared and updated annually in the Falcony system.

There is no patient/client work on the unit's premises.

If necessary, cooperation is carried out with the following parties: health authorities, rescue departments, police, social welfare authorities and Regional State Administrative Agencies.

In accordance with its action plan, Regional State Administrative Agencies regularly carry out occupational safety and health inspections at the unit.

#### **How to cooperate with other authorities and actors responsible for customer safety?**

When becoming a customer, the practices to be followed at the site and instructions related to customer safety are clarified with the customer ordering the service.

The fire and rescue authorities are notified in accordance with the Rescue Act if a concrete fire hazard or other accident risk is detected in the customer's home. There are instructions for employees on the Onni home care intranet for submitting the notification, and the matter is in the employee's orientation.

Employees are obliged to inform the supervisor if they notice any shortcomings in customer safety, for example if the customer's condition changes. In such situations, the unit's supervisor will contact the client's designated contact person if necessary.

### **Staff**

#### **Number, structure and adequacy of nursing and nursing staff and principles for the use of substitutes**

**How is the sufficiency of the unit's personnel monitored in relation to the customers' service needs? How will the sufficiency of human resources be ensured?**

The unit has: 1 team supervisor who also acts as the nurse in charge of the unit, work planner, 11 permanent practical nurses, Substitutes and hourly employees approx. 8

As our services expand, we are hiring new people.

We ensure the sufficiency of human resources by:

1. Regularly monitor how many employees are in relation to the number and needs of customers in workforce planning and customer work planning.
2. Service needs assessment: Customers' service needs are assessed regularly in order to identify changes and respond to them in shift planning and work planning.
3. Workforce planning: Flexible and efficient workforce planning will be drawn up that takes into account variations in customers' service needs and enables sufficient staff in all situations.
4. Recruit substitutes for the unit: which will allow a rapid response to sudden staff shortages.
5. Monitoring well-being at work: Monitoring and supporting employee well-being, thus ensuring sufficient staffing.
6. Anticipation and planning: Anticipating future needs, increasing service needs, and planning personnel
7. Cooperation with educational institutions: Collaborate with educational institutions in recruiting students (always taking credits into account).

Home care is provided by our own staff. Permanent staff are assisted by employees who are called to work when necessary, who substitute as needed. They have been familiarised with customer work and Onni's practices.

In order for the immediate supervisor to have enough time for his or her work, his or her duties are organised:

1. Clearly define the responsibilities and duties of immediate supervisors. This helps to avoid duplication and unnecessary workload.
2. Prioritization: Helping immediate supervisors prioritize tasks and focus on those that are most important to team and organizational goals.
3. Delegation: Encourage immediate supervisors to delegate tasks to their subordinates if possible. This not only reduces their workload, but also develops the skills and responsibility of subordinates.
4. Resource adequacy: Ensure that immediate supervisors have access to the necessary resources, such as staff and equipment, to carry out their duties effectively.
5. Training and support: Provide immediate supervisors with training and support in task management, time management and leadership skills.

6. Work load monitoring: Regularly monitor the workload of immediate supervisors and, if necessary, make changes to work organisation.
7. Efficient work processes: Develop and maintain efficient work processes that reduce unnecessary bureaucracy and make decision-making more efficient.
8. Leveraging technology: Leveraging technology, such as electronic tools and systems, to facilitate administrative tasks and information management.
9. Collecting and utilising feedback: Collect feedback from immediate supervisors on their workload and task organisation, and use this information to develop operations.
10. Review of management structures: Regularly review management structures and division of tasks to ensure that the workload of immediate supervisors remains under control.
11. Promoting the well-being of the work community: Promote the well-being and cooperation of the work community, which can reduce the workload of immediate supervisors and improve work efficiency.

### **What are the principles of using substitutes?**

In home care, the service and care of clients is ensured by hiring and maintaining sufficient substitute staff. In home care, the use of substitutes is planned in accordance with the annual clock well in advance, preparing for holidays and other public holidays as well as sudden and unpredictable absences of employees.

The number of substitutes, the verification of professional qualifications and the verification of competence in accordance with orientation are the responsibility of the team supervisor.

The team supervisor discusses the use of substitutes and employment relationships with the service manager and makes a plan annually. The use of substitutes in the unit is monitored weekly and monthly and the future is anticipated.

### **How can we ensure that the tasks of the responsible persons/immediate supervisors are organised so that there is enough time for the work of the immediate supervisors?**

The service manager and team manager agree in advance how much time the organization of tasks will require on a daily, weekly and monthly basis. The team manager calendars their own organizing tasks in the Outlook calendar and reports to the service manager. Workforce planning takes into account the time taken to organise tasks. The rest of the time, the team supervisor is mainly involved in customer work, which is part of quality self-monitoring.

### **Principles of staff recruitment**

#### **How does the employer ensure that employees have sufficient language skills?**

If a person has completed a degree in Finland, Valvira recognises the professional qualification and grants the right to practise a profession on the basis of the completed

qualification. Valvira does not check language skills - i.e. Finnish or Swedish - even if the degree has been completed in English, for example.

If the degree has been completed in an EU/EEA area, Valvira may check the proficiency in Finnish or Swedish from all applicants who have completed their degree or obtained their professional qualifications in a language other than Finnish or Swedish or from those who have completed so-called general education studies in a language other than Finnish or Swedish.

Valvira considers the matter on a case-by-case basis. Available information on the person's language skills is taken into account. The nationality of the applicant is irrelevant.

In practice, the verification of language proficiency means that the applicant must present a certificate of studies or that he or she has completed the State Certificate of Language Proficiency (satisfactory level) or the National Certificate of Language Proficiency (YKI 3 in all areas).

The recruiting supervisor at Onni must always be sure that the language skills of the social welfare and health care professional are at a sufficient level required by their duties. If necessary, Onni's recruiting supervisor will contact Valvira and check whether language skills have been checked as required by law.

### **What are the principles governing the recruitment of staff in the unit?**

When hiring employees, particular attention shall be paid to their suitability and reliability. When recruiting, the employer must check the register information concerning the professional rights of healthcare and social welfare professionals from the Central Register of Social Welfare and Health Care Professionals (Terhikki/Favorite). In addition, the unit may have its own recruitment principles related to the structure and competence of the personnel, of which open communication is important for both job applicants and other employees in the work community. Valid training and competence in pharmacotherapy will be ensured.

Employees are recruited taking into account the customer's individual needs and wishes. Public announcements are used as a recruitment channel. The employee's role and the objectives and contents of the work are described realistically. The qualification requirements of the personnel, the duration of the employment relationship and the nature of the work are also described in the recruitment advertisement.

The team manager interviews new employees before starting the employment relationship. During the interview, the jobseeker's certificates and the employee's qualification information on registration with the National Supervisory Authority for Welfare and Health (Valvira) are checked. According to the Supervision Act that entered into force on 1.1.2024, every new employee must present an extract from the criminal record. The date of presentation of the extract from the criminal record is documented in the personnel management system.

Recruitment is regulated by the Act on the Protection of Privacy in Working Life (759/2004). Accordingly, the employer may only process personal data that is directly necessary for the employee's employment relationship and that is related to the management of the rights and obligations of the parties to the employment relationship or to the benefits offered by the employer to employees, or due to the special nature of the work tasks. The employer must primarily collect personal data concerning the employee from the employee himself/herself. If the employer collects personal data from a source other than the employee himself/herself, consent must be obtained from the employee for the collection of personal data.

If information about an employee has been obtained from someone other than the employee himself or herself or collected without his or her consent, it cannot be used in decision-making or must be reported to the employee before making a decision. Googling an employee and the information that emerges from it cannot therefore be used as part of the recruitment process or to support the selection decision.

Several laws also safeguard equality in recruitment and prevent discrimination. These include: The Constitution of Finland, the Non-Discrimination Act and the Act on Equality between Women and Men. According to these laws, no one may be placed in a different position without an acceptable reason. It is therefore forbidden to base the recruitment decision on anything other than matters that are essential for success at work, such as e.g. gender, religion, political affiliation, trade union activity, family situation, sexual orientation or state of health. When recruiting and changing tasks, only language skills that are required to perform the task may be required.

### **How is the employee's suitability and reliability taken into account in recruitment?**

The reliability of employees, including substitutes, is investigated before signing the employment contract. References may be requested from the jobseeker. The personal credit information of job applicants selected for employment is checked when necessary and always with an extract from the criminal record. The employee is obliged to show the team supervisor a criminal record extract before signing the employment contract. Check the right of potential foreign jobseekers to work

The Act on the Supervision of Social Welfare and Health Care 741/2023 introduced the inspection of extracts from criminal records in accordance with section 28 as of 1.1.2024. The employer has the right and obligation to check the extract from the criminal record of employees in social and health care services for older people. The regulation applies to tasks that permanently and essentially involve assisting, supporting, caring for or other care of older persons or other work in personal interaction with an elderly person. The change will also be extended to disability services on 1.1.2025.

The supervisor conducts the interviews and makes the selections. If necessary, several rounds of interviews can also be conducted, in which case the second round includes e.g. supervisor's supervisor or HR. Depending on the position, the complexity of the position and the nature of the employment relationship, how many rounds of interviews are necessary. In some positions, it may be useful to carry out suitability assessments using some methods, or in the final stages of recruitment, it may also be possible to allow team

members to meet the most potential candidates. At Onni, you can always discuss the contents of the recruitment process with your HR manager.

Before making a selection decision, you can ask for references and call through, for example, the selection process. Two references. In reference calls, the referee is asked to tell about the employee's current tasks, performance, strengths and development areas, and to ask if the employee would recommend the employee in question. Post.

### **Description of induction and further training of personnel**

#### **How to ensure that employees and students are familiarised with customer work and the implementation of self-monitoring.**

The employer is obliged to ensure that the new employee is familiarised with the work and the working environment. The supervisor is responsible for the orientation of the new employee. The supervisor does not need to familiarise themselves with all matters, but their task is to ensure that the employee receives the information and orientation they need. Good orientation ensures that the employee quickly becomes part of the work community and has quick and efficient access to their work. Good orientation promotes occupational safety and well-being.

Home care has its own written induction card and material for employees in each unit, and the ONNI Academy online induction platform is also in use. ONNI Academy is a place where you can find ONNI's induction materials.

According to ONNI's induction plan, the team supervisor inducts new employees at the beginning of the employment relationship.

During the orientation, the new employee also familiarises themselves with self-monitoring and pharmacotherapy plans. The supervisor is responsible for ensuring sufficient orientation. The orientation focuses on customer work, processing of customer data and data protection, as well as the implementation of self-monitoring. The same applies to students working at the unit and those who have been absent from their duties for a long time after their return. The importance of leadership and training is emphasised when the work community adopts a new kind of operating culture, for example, in supporting self-determination or in the planning and implementation of self-monitoring.

#### **How and how often is in-service training organised?**

The Act on Social Welfare and Health Care Professionals lays down provisions on employees' obligation to maintain their professional competence and on employers' obligation to enable further training for personnel. A particularly important part of continuing education in home care is ensuring employees' competence in pharmacotherapy, training related to patient document practices, supplies and the use of equipment, and data protection.

Supplementary training is arranged for personnel in accordance with a separate training plan and whenever necessary. The training plan is drawn up in connection with annual budgeting, and wishes for continuing education are also brought up in development discussions.



The unit's regular team meetings, held at least once a month, are part of the training section, which are implemented and documented one section at a time.

## **Premises**

### **Principles of use of premises**

As a rule, employees work in the home of the service recipient. The service recipient's home may also be in an assisted living facility.

## **Technological solutions**

**What technological solutions for access control does the unit use? What technological solutions do customers have for personal use (acquired by the unit)? How is the functionality of security and calling devices for customers' personal use and the response to alarms ensured?**

Security services at the service recipient's premises are provided through the customer-customer. Functionality and responding to alarms are tested together with the customer on a monthly basis.

Onni does not have its own security or monitoring equipment.

**Name and contact details of the person responsible for the operational reliability of safety and calling devices?**

The supplier is responsible for the reliability of the calling devices.

## **Medical devices**

**How can the appropriate implementation of the acquisition, use control and maintenance of assistive devices and medical devices used by the unit be ensured?**

It is the duty holder's responsibility to map assistive devices. Employees report any need for assistive devices that they have observed, and the supervisor or nurse contacts the official. Employees receive orientation in the use of assistive devices. Caregivers of small assistive devices can apply from the assistive device lending service to the service recipient for loan use directly within the opening hours of the assistive device lending shop. The unit maintains a separate device register of its own equipment, where information about the equipment and maintenance, e.g. maintenance, are recorded. RR meters.

The personnel is always obliged to report any deviations that may have an impact on the customer, personnel or a third party.

The employees are familiarised with the medical devices in the unit and the orientation is recorded in the device passport. The device passport is stored in the employee's employment documents in an electronic system.

#### **How is it ensured that appropriate vigilance reports are made for medical devices?**

The personnel is always obliged to report any deviations that may have an impact on the customer, personnel or a third party. In all these cases, the quality system is followed, as described earlier in the risk management section.

Incidents involving medical devices are reported to the Finnish Medicines Agency Fimea. The responsibility for submitting this notification lies with the person responsible for medical devices.

#### **Name and contact details of the person responsible for medical devices**

Name and contact details of the person responsible for medical devices:

Team Manager Karoliina Nummi tel. 041 7312118 [karoliina.nummi@onnion.fi](mailto:karoliina.nummi@onnion.fi)

## 8 PROCESSING AND RECORDING OF CUSTOMER AND PATIENT DATA

### **Recording customer work**

#### **How are employees familiarized with recording customer work?**

Recording customer work is the responsibility of every professional. The registration obligation begins when the social welfare authority has been informed of a person's possible need for social welfare or when a private service provider begins to provide social services on the basis of an agreement. All employees sign a non-disclosure agreement and receive a clear orientation to it. In addition, employees complete the organization's data protection training (GDPR) In the customer information system Domacare, customer visits are recorded immediately upon the visit by involving the customer or, if the situation requires, after the visit. Recording follows structural posting. The task of the team supervisor is to ensure that the processing of customer and patient data is carried out in accordance with the Personal Data Act and good data processing practices. A description of the processing of confidential personal data has been prepared for the unit. The new employee is familiarised with the processing of personal data and information security through data protection training and information security training provided by ONNI Academy. The personnel undergo training every three (3) years. Unit-specific information on the needs for developing service quality and customer safety is obtained from several different sources. The process of implementing self-monitoring (risk management process)



handles all customer safety risks, grievance reports and development needs that have come to light. A plan for corrective actions is agreed according to the severity of the risk.

**How can we ensure that customer work is recorded promptly and appropriately?**

It is the team manager's responsibility to ensure that the recording of customer work takes place without delay and is appropriate, descriptive and of high quality in accordance with the structural record-keeping.

**How can we ensure that the unit complies with legislation related to data protection and the processing of personal data, as well as the instructions and official regulations drawn up for the unit?**

The team leader is responsible for ensuring that data protection issues are known, and data protection training has been completed. Data protection and legislation related to the processing of personal data are implemented. No customer or personal data is stored in the unit. Customer data is stored in an electronic system, to which employees have limited access rights and the management of the rights lies with the team manager. Personnel data is stored in the electronic Mepco system, to which there are limited access rights.

**How will orientation and supplementary training related to the processing and data security of personnel and trainees be ensured?**

The task of the service manager and team leader is to ensure that the processing of customer and patient data is carried out in accordance with the Personal Data Act and good data processing practices. As part of the employment contract, all employees sign a non-disclosure agreement and receive a clear orientation to it. The processing of personal data and data security is a separate course at Onni Academy under the name Information Security Training for Every Onni Employee. The course is obligated by everyone to complete,

**Name and contact details of the Data Protection Officer**

Privaon Oy [tietosuoja@onnion.com](mailto:tietosuoja@onnion.com)

Has a record been drawn up for the unit concerning the processing of confidential personal data?

Yes  No

**9 SUMMARY OF THE DEVELOPMENT PLAN**

Unit-specific information on the needs for developing service quality and customer safety is obtained from several different sources. The process of implementing self-monitoring (risk management process) handles all customer safety risks, grievance reports and development needs that have come to light. A plan for corrective actions is agreed according to the severity of the risk.

## Development needs identified in operations

The development of quality and customer safety is part of Onni's ISO 9001 quality system, in which every development need received from customers, personnel and through risk management is recorded, monitored and, if necessary, corrective actions or changes are drawn up in accordance with the quality system. Continuous induction of personnel and development of self-monitoring are key areas in providing high-quality service. Here are measures to continuously develop the unit's operations:

1. Continuous orientation of personnel according to customer needs.
2. Continuous updating of the onboarding plan according to customer needs.
3. Competence monitoring: Monitoring the competence and qualifications of personnel on a regular basis and identifying training needs related to changes in customer needs.
4. Continuous learning: Encourage continuous learning and self-development among staff. This includes, for example, new necessary online courses at Onniakatemia.

Continuous development of self-monitoring in accordance with feedback:

1. Communication and openness: Open communication to personnel and customers on how feedback is utilised in the development of self-monitoring.
2. Culture of continuous improvement: Creating and maintaining a culture where feedback and self-monitoring are seen as tools for continuous improvement.

In addition, we develop the functionality of the ERP system in use; for example, in the new DomaCare 2, employees can see customer visits and planned shifts. In addition, employees can send messages to their colleagues and supervisor in the system and participate in discussions concerning the customer in a secure manner.

In 2024, special attention will be paid to ergonomic work and assistive device expertise. In connection with this, a project has been carried out in cooperation with SeAMK's physiotherapy students, in connection with which a staff training day was organised. The project material will be published as training in ONNI's electronic training environment, so that it can be utilised later.

## 10 MONITORING OF THE SELF-REGULATION PLAN

**According to the Act on the Organisation of Health and Social Services, wellbeing services counties and private service providers must draw up a self-monitoring programme for the tasks and services for which they are responsible. The programme shall define how compliance with the obligations referred to in subsection 1 as a whole will be organised and implemented. The self-monitoring programme must state how the implementation, safety, quality and equality of healthcare and social welfare services will be monitored and how any shortcomings detected will be corrected. Self-**

monitoring plans and patient safety plans separately prescribed by law are part of the self-monitoring programme.

The self-regulation programme and the observations based on monitoring the implementation of the self-regulation programme and the measures taken based on them shall be published in the public information network and in other ways that promote their publicity.

*The self-regulation plan is approved and confirmed by the responsible manager of the operating unit.*

Place and date

29.7.2024

Signature

A handwritten signature in black ink that reads 'Elina Soini'.

Elina Soini, Service Manager