

onfidential under section 24(25) of the Act on the Openness of Government Activities

## Objection related to social welfare and health care services or treatment

Section 23 of the Act on the Status and Rights of Social Welfare Clients (812/2000) and section 10 of the Act on the Status and Rights of Patients 785/1992)

An objection is not a way to appeal a decision.

For more detailed instructions on how to submit an objection, see page 2.

Address, zip code and post office of customer/patient       Telephone number         Person representing the customer:		
Person representing the customer: Name, address and telephone number of the guardian of a minor customer/patient		
Name, address and telephone number of the guardian of a minor customer/patient		
Name, address and telephone number of the guardian of a minor customer/patient		
Other cases of representing the customer: name, address and telephone number		
Office that the objection concerns		
🗌 Heinävesi 🗌 Ilomantsi 🗌 Joensuu 🗌 Juuka 🗌 Central hospital 🗌 Kitee 🗌 Kontiolahti 🗌 Lieksa		
🗌 Liperi 🗌 Nurmes 🗌 Outokumpu 🗌 Polvijärvi 🗌 Rääkkylä 🗌 Tohmajärvi 🗌 Valtimo		
Service unit / outpatient clinic / department or reception that the objection concerns and time of event		
Reason for objection (please indicate primary reason for reminder with number 1 and, if necessary,		
secondary reason with number 2)		
malpractice, service or procedural error inappropriate conduct or treatment		
compliance with secrecy provisions  prescription of medicines		
certificates and statements access to information		
client or patient record entries access to treatment/service		
other, please specify:		
Description of the event (in a separate appendix if necessary)		



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The measures that the person submitting the objection wants the social welfare or h an explanation of what we should have done to improve our service.	ealth care unit to take, or	
I consent that a copy of the reply to the objection may be sent to the social welfare and patient		
ombudsman		
Date, signature and name in block letters		
*A form delivered by post <sup>1)</sup> must be dated and signed by hand.		
Form delivery address <sup>1)</sup>	Received (Registry	
Kirjaamo	office fills in)	
North Karelia wellbeing services county - Siun SOTE		
Tikkamäentie 16		
80210 Joensuu		

Dear customer of social welfare and health care services,

Our aim is to maintain a high level of care and treatment in our social and health care. If You have been treated inappropriately or are not satisfied with your care/service, you have the statutory right to submit an objection.

We will reply to your objection in writing, and the objection will not result in any consequences to the patient or the person submitting the objection (the objection documents will be kept separate from patient records). All correspondence will be completely confidential. We aim to respond to the objection without delay and no later than within one month.

If a customer or patient is personally unable to submit an objection due to illness, mental impairment or another similar reason, or if they have died, the objection may be submitted by their legal representative, family member or other person close to them.

- If an objection is submitted with a power of attorney or the person submitting the objection is the official guardian of the person or a representative of an estate (e.g. the guardian of a minor or a guardian appointed by the District Court), the reply is sent to the person submitting the objection.

- If an objection is submitted on behalf of another person without authorisation, the reply is sent to the person whom the objection concerns.

The response to an objection may not be appealed (section 23 of the Act on the Status and Rights of Social Welfare Clients and section 10 of the Act on the Status and Rights of Patients). Submitting an objection does not



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prevent the patient from filing a complaint with the supervisory authorities (e.g. the Regional State Administrative Agency).

1) You can send the request directly to the wellbeing services county's registry using the electronic form at <u>https://miunpalvelut.fi/</u>. The use of the service requires identification.