

Self-Monitoring Report 3/2025

The content of the report consists of the areas defined in the Fimlab's self-monitoring plan. By monitoring and developing these areas, we ensure high-quality and safe laboratory services.

Areas monitored in the self-monitoring plan include:

- Customer and patient safety
- Quality of services
- Personnel
- Premises and equipment
- Medical devices, data systems and use of technology
- Risk management
- Feedback

Observations and Actions from the Third Third of 2025

During the third observation period of the year, there were 933,069 sample collection situations and 5,518,512 examinations.

Quality of services

For the most part, there have been a sufficient amount of sample collection services available throughout our operational area, and we have achieved the set quality goals well as a whole. The number of significant deviations detected in sample analysis has remained low, the turnaround times for examinations have mainly been realised, and we have achieved our diagnostic process quality goals. We also achieved the turnaround time goals set for urgent on-call samples throughout our operating area.

We have continued our internal audits in accordance with the annual plan. During the observation period, we implemented 27 internal audits, 10 of which are still in the middle of the process. We registered 22 observations from the audits, some of which were development suggestions. The observations were related to the updatedness and sufficiency of waste instructions and chemical registers, in particular. Corrective measures have been completed or are ongoing.

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Personnel

There has been enough professional personnel. Employee retention and attractiveness have remained strong. Turnover has remained on a moderate level. The number of employees retiring with old-age pension at the end of the year surpassed those doing so at the beginning of the year. The retirement age is very high, on average. Competence development has continued strong. The development of the onboarding entity has proceeded as planned, and the digital platform supporting the implementation of onboarding has been implemented. Onboarding responsibilities and roles have been clarified. The harmonisation of vocational onboarding methods continues.

The company-wide development project we implemented for job descriptions is coming to an end during January 2026. Job descriptions have been standardised, the process with roles and responsibilities has been defined, and job descriptions have been made visible for the entire personnel.

Service Development Based on Customer Feedback

The NPS (Net Promoter Score) for consumer customers at sample collection service locations was 90. There were a total of 8,391 responses, and the average of the responses was 9.52.

The NPS (Net Promoter Score) for professional customers was 40. There were a total of 120 responses, and the average of the responses was 8.19.

We received a total of 1,035 pieces of customer feedback:

- 68% were customer complaints
- 23% were enquiries
- 11% were compliments

Most of the feedback was directed at customer service, sample collection and the website. We went over our operating instructions and customer service's service promise on the basis of the feedback.

Customer and Patient Safety Observations and Deviations

During the observation period, there was one significant deviation to customer and patient safety.

A total of 255 notifications were received:

- 245 patient safety notifications
- 3 data security notifications

- 7 operational environment notifications

Based on these notifications, we reviewed and updated our procedures and developed our data systems.

Objections, Complaints and Other Contacts from Authorities

Across our operational area covering five wellbeing services counties, we received 15 contacts from authorities during the review period. Six of these were objections from the wellbeing services counties and seven were inquiries from the Patient Insurance Centre. In addition, the Traffic Accident and Patient Injury Board sent a response request for an earlier recommendation from the Patient Insurance Centre, and the Wellbeing Services County of Ostrobothnia requested assistance in clarifying a Regional State Administrative Agency complaint.

Two of the objections from the wellbeing services counties were regarding a processing error at the laboratory. During review, they were noted to be errors that occurred at the laboratory. The other objections had to do with calls regarding deviating results and laboratory referrals visible in the IT systems. The inquiries from the Patient Insurance Centre had to do with a potential nerve damage, phlebothrombosis, in connection with blood specimen collection, a customer falling as well as requests for laboratory results and pathology slides. The inquiries and objections have been reviewed through self-monitoring methods and, where necessary, the deviation has been discussed with the employees in question. Written explanations and responses have been issued, and no errors or issues to remark were detected in the operations with the exception of two sample processing errors.