

VARSINAIS-SUOMEN SAIRAANHOITOPUORI  
HOSPITAL DISTRICT OF SOUTHWEST FINLAND

# Annual Report 2009



## Annual Report of the Hospital District of Southwest Finland 2009

Editorial board: Esa Halsinaho (editor-in-chief), Kari Kandelberg,  
Merja Kronström, Vesa Lamminen, Hely Lehtokari, Anne Lindqvist,  
Päivi Rautava and Timo Vesala.

Translation: Semantix Lingua Nordica Oy

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The cover picture: The D-section of the TYKS T Hospital which was  
introduced in 2009. (Photo: Esa Halsinaho)

## To the reader

This is the Annual Report of the Hospital District of Southwest Finland for the year 2009. It also contains general information on the operations of the Hospital District.

The sources for this publication are the Hospital District's official financial statement and report on operations, the budget for 2010, the reports on operations of the profit centres and the personnel report of the Hospital District.

The Annual Report is published separately in Finnish, Swedish and English. The publications are available online (in PDF format) as follows: in Finnish at [www.vsshp.fi/julkaisut](http://www.vsshp.fi/julkaisut), in Swedish at [www.vsshp.fi/se/publikationer](http://www.vsshp.fi/se/publikationer) and in English at [www.vsshp.fi/en/publications](http://www.vsshp.fi/en/publications).

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# Hospital District Director's review

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The year 2008 had been a successful one for the Hospital District. Job satisfaction was increasing, treatment queues were the shortest in the country, and the T Hospital was under construction. Once the financial statement for 2008 was completed in February 2009, it became apparent that 2009 would be much more difficult. The municipal economy and society as a whole had plunged into a severe recession.

In 2008, operating expenses had gone 3.6% over budget. The difference between actual costs in 2008 and budgeted costs for 2009 was only 1.4%. Pay rises alone called for a cost increase of 3.5% in 2009, while the expected increase in the cost of outsourced services and materials purchases (drugs, for instance) was on the order of 7% to 8%.

Because of this, the Hospital District management team initiated significant cost-cutting in March 2009 to stay on budget. Cuts were made in personnel working hours, overtime, outsourced services, materials procurement, training costs – in fact everything where savings could realistically be achieved without seriously jeopardizing patient care.

The situation was paradoxical. We had only just brought treatment queues under

control, partly through overtime and outsourced services, and now the expenditure that made this happen was to be eliminated. There was also an awareness that quick slashing of personnel costs in a complex organization easily results in decreased productivity, because fixed structures cannot be dismantled as quickly.

The first financial prognoses produced in spring 2009 showed that the Hospital District was facing a record deficit, because the number of care performances – the Hospital District’s primary source of income – was declining.

Nevertheless, in the course of the year financial balance was achieved. Actual net non-discretionary expenses came in under budget at 99.7%! This was partly due to our determined efforts but partly also to external circumstances such as falling interest rates.

What was particularly pleasing was the increase in outside municipal sales, i.e. purchase of services by local authorities not belonging to our Hospital District. Insurance company billing also increased substantially. Patients’ customer fees likewise increased, due to an amendment to the Decree on Public Charges. On the other hand, the special government grant for teaching and research was reduced. The combined effect of these was that billing by the member municipalities of the Hospital District increased only by 1.5% and was wholly on budget.

As the financial statement shows a tiny surplus in addition to all this, we may describe 2009 as a financially very successful year.

The quality of patient care remained high, and the number of individual patients treated was 1% higher in 2009 than in 2008. Urgent care was provided as required by law, but the number of patients who had been queuing for non-urgent treatment for more than six months began to increase again as a result of

the cost cuts and a shortage of professionals in certain specialist fields. The number of outpatient appointments increased particularly in somatic care, but the number of treatment periods decreased.

A significant service restructuring was implemented in psychiatry, and this showed in a decrease of both inpatient and outpatient care.

The year 2009 was characterized by the exceptional precautionary measures taken in response to the worldwide threat of a pandemic of H1N1 influenza. The Hospital District management team initiated the required preparations and measures and reviewed the situation on a weekly basis. The number of influenza patients began to increase rapidly in the autumn, and an increasing volume of hospital care – including intensive care – was needed. However, we managed to avoid extensive suspension of non-urgent functions, which we had in fact already prepared for. Towards the end of the autumn, the H1N1 pandemic began to subside in our area, among other things because of vaccinations. The Hospital District, hospitals and the health care system as a whole retained their operating capacity and demonstrated their high level of expertise in combating the infection and in treating patients.

In autumn 2009, there was lively public debate nationwide and in our region about the forthcoming administrative reform in health care. In early September, Minister of Health and Social Services Paula Risikko made a proposal whereby a substantial portion of specialist medical care would be transferred from hospital districts to smaller social welfare and health care districts; there would be 40 to 60 of these as opposed to the present 20 hospital districts. On the other hand, the most demanding areas of specialist medical care would be administered by five specialist districts.

This reform sparked considerable debate in the health care sector, partly because the proposal contained no concrete details, thus leaving room for a variety of interpretations which were then praised or criticized by various parties. The situation did not calm down until early 2010 when the Government ruled that such a bill would not be submitted during the current Parliament. Instead, a bill for a reformed Health Care Act revising the content of the Primary Health Care Act and the Act on Specialized Medical Care is due to be submitted in spring 2010.

An interesting occurrence in 2009 was the interest shown by the Town of Rauma to transfer from the Hospital District of Satakunta to the Hospital District of Southwest Finland in connection with the debate on the future of Rauma Regional Hospital. There was also talk of cooperation between Vakka-Suomi Hospital and Rauma, but further discussion was postponed until 2010.

I would like to take this opportunity to thank the personnel of the Hospital District for their work in 2009, highly effective and economic despite the difficult circumstances. In May 2010, I took up the post of CEO of the Hospital District of Helsinki and Uusimaa. My time at the Hospital District of Southwest Finland, from 2001 to 2010, was a rewarding experience. Together with our sound and courageous decision-makers, our responsible personnel organizations and our expert employees we have made this Hospital District into an attractive organization with a bright future – for the good of our patients and the residents of our region!



Aki Lindén  
Chief Executive Director  
of the Hospital District

# Personnel

At the end of 2009, the Hospital District of Southwest Finland had a total of 6,493 offices and posts. At the end of the year, the Intermunicipal Hospital District employed 7,399 persons.

During the year, 55 new full-time positions and 10 part-time positions were founded, and 42.5 positions were discontinued. Of the latter, 25 were positions of employees transferred to Salo health centre.

Also, 96 substitute positions were founded in 2009. Substitutes are employ-

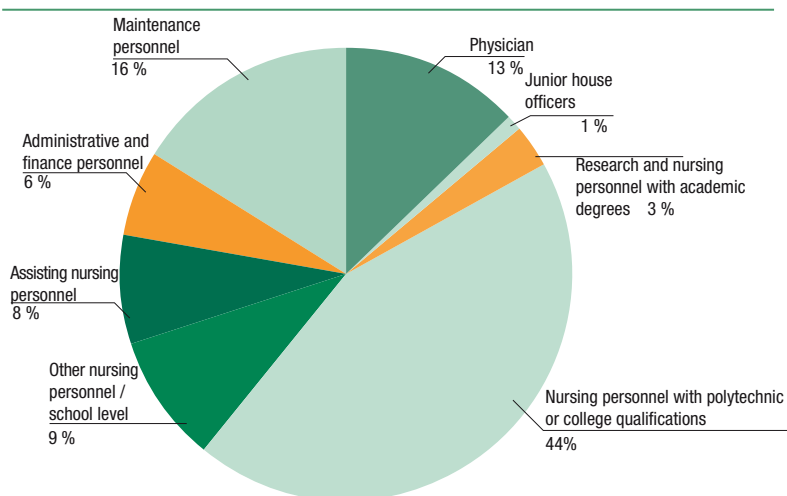
ees in a permanent employment relationship whose job is to perform the job duties of absent employees. About 17% of the annual holidays and other absences of regular personnel could be covered using substitutes. In the case of nurses, substitutes covered no less than 38%.

The labour input for 2009 was 5,333 full-time equivalents, an increase on the previous year of only four full-time equivalents, or 0.1%. The labour input is calculated by subtracting days of absence from days employed.

The personnel consisted of 85% women and 15% men. The distribution among physicians was 48% men and 52% women. There were 7% men in the nursing personnel and 19% in the administrative, financial and maintenance personnel.

The average age of all personnel in the Hospital District of Southwest Finland was 43.3 years and that of permanent personnel 45.5 years.

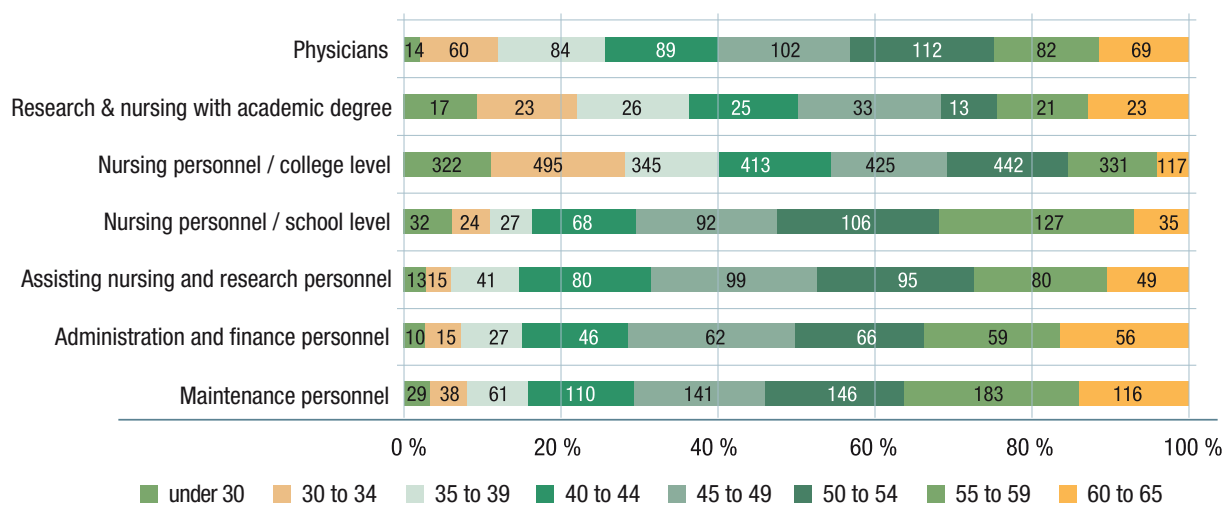
PERSONNEL GROUPS, % OF TOTAL PERSONNEL 31 DEC 2009 (EXCLUDING SUBSTITUTES)



OFFICES AND POSTS 31 DEC 2009

	TYKS	Loimaa Regional Hospital	Salo Regional Hospital	TYKS Vakka-Suomi Hospital	Turunmaa Hospital	Psychiatry Division	Administrative Centre*	Tyks-Sapa public utility	Total
Physicians	508	29	42	22	21	77	7	114	820
Junior house officers	48	3	0	0	0	1		3	55
Research and nursing personnel with academic degrees	56	1	1	1	5	65	2	67	198
Nursing personnel	2381	199	240	110	94	401	22	660	4107
Administration, finance and maintenance personnel	1067	6	6	8	27	21	157	21	1313
<b>Total</b>	<b>4060</b>	<b>238</b>	<b>289</b>	<b>141</b>	<b>147</b>	<b>565</b>	<b>188</b>	<b>865</b>	<b>6493</b>
Percentage of all Hospital District personnel	63 %	4 %	4 %	2 %	2 %	9 %	3 %	13 %	100 %
Förändring i vakanser jämfört med år 2008	178	-60	-122	-52	-1	-6	17	174	128

## REGULAR PERSONNEL, AGE DISTRIBUTION BY PERSONNEL GROUP 2009



The personnel of the Hospital District is highly educated compared with the average in the municipal sector, because a degree or qualification of some kind is required for almost all offices and posts.

## EDUCATIONAL ATTAINMENT OF REGULAR PERSONNEL IN THE HOSPITAL DISTRICT OF SOUTHWEST FINLAND AS AT 31 DEC 2009 COMPARED WITH OVERALL EDUCATIONAL ATTAINMENT IN THE MUNICIPAL SECTOR 2008

	Comprehensive school	Secondary school	Lowest tertiary education	Bachelor's degree	Master's degree	Post-graduate	Total
Hospital District employees	461	1 229	2 270	1 029	514	347	5 850
Hospital District %	7,9	21	38,8	17,6	8,8	5,9	100
Overall educational attainment in the municipal sector 2008 %	8,7	39,6	19,6	13,9	16,9	1,2	100

### Personnel expenses and equality of pay

Personnel expenses in 2009 came to EUR 314.1 million, an increase of 2.6% on 2008. Regular pay increased by 3.3% and premium pay by 4.3%. Premium pay includes evening, night, Saturday, Sunday, public holiday and holiday eve pay, emergency call pay and standby pay, and active

duty pay and emergency duty pay for physicians. Extra work premiums and overtime pay decreased by 7.7%, whereas in 2008 they increased by almost 14%.

The calculated price per working hour of work done by regular personnel was EUR 24.40.

Savings of EUR 3.4 million were implemented in personnel expenses during 2009, in accordance with the plan drawn

up in the spring. These savings were achieved through voluntary unpaid leave (EUR 1.2 million), reduction of extra work (EUR 1.1 million), converting physicians' holiday pay to time off (EUR 597,000) and less use of substitutes (EUR 450,000).

In 2009, about EUR 660,500 in performance bonuses was paid out to the units participating in the experimental performance-related pay scheme in 2008. This

scheme involved the invasive cardiology department at the internal medicine clinic at Turku University Hospital, the orthopaedics and traumatology clinic, the neurology clinic wards, the Technical Services Division and the Raisio adult psychiatry outpatient clinic.

In 2009, Tykslab paid about EUR 139,000 in performance bonuses to its personnel, amounting to 1.68% of each employee's annual salary.

Pay differences between genders are generally minimal, especially in job-specific pay components. The job groups with the largest differences between genders in total earnings were orderlies, department heads and deputy chief physicians.

The enclosed table shows a comparison of the pay of regular personnel in certain job groups. Total earnings include the job-specific pay component, seniority increments and indi-

vidual discretionary increments. The table includes titles held by at least six men and women.

#### COMPARISON OF THE PAY OF REGULAR PERSONNEL IN CERTAIN JOB GROUPS AS AT DECEMBER 2009

Title	Expense code	number		Monthly salary job-specific component, average		Difference %	Total monthly earnings, average		
		women	men	women	men		women	men	Difference %
<b>KVTES</b>									
Head nurse	03HOI020	119	11	2 551,99 €	2 568,27 €	-0,6 %	2 930,45 €	2 927,85 €	0,1 %
Physiotherapist	03HOI030	62	7	2 107,34 €	2 119,06 €	-0,6 %	2 337,97 €	2 315,58 €	1,0 %
Laboratory technician	03HOI030	261	7	2 113,36 €	2 120,38 €	-0,3 %	2 346,57 €	2 305,40 €	1,8 %
Radiographer	03HOI030	147	18	2 160,32 €	2 180,62 €	-0,9 %	2 367,75 €	2 347,83 €	0,8 %
Nurse	03HOI030	1674	116	2 143,81 €	2 155,75 €	-0,6 %	2 346,43 €	2 347,05 €	0,0 %
Orderly	03HOI040	13	31	1 908,89 €	1 926,17 €	-0,9 %	2 085,12 €	2 147,94 €	-3,0 %
Mental health nurse	03HOI040	43	37	1 886,53 €	1 891,55 €	-0,3 %	2 121,46 €	2 134,17 €	-0,6 %
Hospital porter	01VAH010	11	20	1 598,07 €	1 623,63 €	-1,6 %	1 804,21 €	1 792,25 €	0,7 %
<b>PHYSICIANS</b>									
Chief physician	L3SL1200	14	13	5 524,65 €	5 446,67 €	1,4 %	6 626,34 €	6 601,70 €	0,4 %
Department head	L3SL1100	16	26	5 612,10 €	5 674,86 €	-1,1 %	6 464,82 €	6 675,58 €	-3,3 %
Deputy chief physician	L3SL1200	8	12	5 189,10 €	5 206,35 €	-0,3 %	5 801,57 €	6 182,56 €	-6,6 %
Specialist	L3SL3000	108	109	4 504,38 €	4 497,01 €	0,2 %	5 307,06 €	5 358,18 €	-1,0 %
Specializing physician	L3SL4004	27	15	3 384,90 €	3 369,05 €	0,5 %	3 621,32 €	3 668,66 €	-1,3 %
Specializing physician	L3SL4002	20	12	3 196,98 €	3 162,04 €	1,1 %	3 355,85 €	3 336,98 €	0,6 %

## Absences

In 2009, absences from work totalled 670,370 calendar days, or 6,970 more than in 2008. The major reason for absence was an annual holiday, accounting for 43% of all days of absence.

Absences provided for by law include maternity and parental leave, other family leave, switch leave and study leave.

During 2009, 1,648 individual employees took family leave totalling about 115,000 days: 379 employees took parental and paternity leave totalling nearly 37,000 days; 1,000 employees took tem-

porary care leave to look after a sick child totalling about 4,400 days; 312 employees worked a shorter working days because of care leave on almost 63,000 days; and 298 employees were on full-time care leave totalling 48,000 days.

During 2009, 109 employees took part-time benefits or switch leave subsidized by the employment office.

Absences due to sickness totalled about 110,800 calendar days in 2009, a decrease of 3.8% on 2008. The greatest decrease was in sick days caused by accidents.

Employees are entitled to take sick

leave on their own notification to a maximum of three days at a time up to five times per calendar year. The number of these own notifications rose steadily until 2008, but in 2009 their number was almost 5% less than in the previous year. They accounted for 14% of all absences due to sickness.

The most common sicknesses cited as reasons for absence were musculoskeletal diseases (28%), mental health problems (16%) and respiratory infections (16%).

In the Hospital District overall, 41% of the employees took no sick leave at all in 2009.

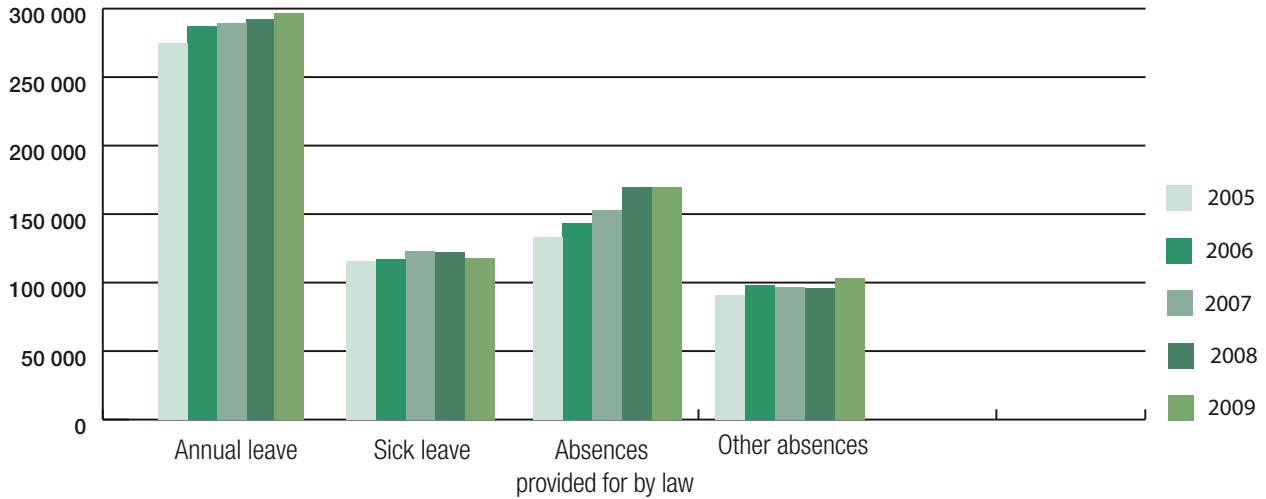
### HOURS OF ABSENCE, % OF TOTAL WORKING HOURS AND PAYROLL EXPENSES

	2005	2006	2007	2008	2009
% of total working hours	27	28,1	27,1	27,5	27,8
% of payroll expenses	15,9	16,2	16,1	16,3	16,2

### SICK DAYS, % OF WORKING TIME AND NUMBER PER POSITION

	2005	2006	2007	2008	2009
Sick days, % of total working time	4,4	4,2	4,4	4,4	4,2
Number of sick days per full-time equivalent	16,1	15,4	16,2	15,9	15,2

## ABSENCES BY CATEGORY 2005–2009



## Training

The Hospital District enhanced its training programme by setting up a position for a training planner; the first appointee to this position began work in spring 2009.

The Hospital District spent nearly EUR 2 million on training in 2009. About 80% of all personnel participated in continuing education provided by the employer.

The Hospital District organized 124 regional training events in 2009. There were nearly 6,000 participants in all, two thirds of them being Hospital District employees.

Nearly 3,900 employees attended a total of about 10,600 training sessions outside the hospitals. On any given working day, an average of 69 employees were involved in external training. Also, 49 employees took unpaid study leave during 2009.

# Use of specialist medical care services

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The Hospital District of Southwest Finland principally provides specialist medical care services for residents of its member municipalities. It also receives patients from other municipalities and cities, from occupational health services, from private physicians and on referral from the central government and from insurance companies.

Specialist medical care is traditionally divided into somatic care and psychiatric care.

There is also a third category, medical support services, which includes laboratory, imaging, ultrasound, isotope and pathological services and pharmacy, medical aids and clinical neurophysiology services. These are discussed in more detail in connection with the Tyks-Sapa public utility.

The Hospital District of Southwest Finland provides somatic care services at Turku University Hospital in Turku, Paimio and Raisio (TYKS), at Loimaa and Salo Regional Hospitals, at Vakka-Suomi Hospital in Uusikaupunki and at Turunmaa Hospital in Turku.

Psychiatric care services in Finnish are managed by the Psychiatry Division of the Hospital District, which has clinics at seven locations: Kaarina, Lieto, Loimaa, Raisio, Salo, Turku and Uusikaupunki. Psychiatric care services in Swedish are managed by the psychiatric unit of Turunmaa Hospital, located in Parainen in the municipality of Länsi-Turunmaa.

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## Demand

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The demand for medical services can be measured by the number of patient referrals and by the number of persons receiving services.

The number of referrals increased at a fairly steady rate in earlier years, but in 2009 there were markedly fewer of them than in the year before. In fact, the number

of referrals decreased by 2%, more or less to the 2007 level. This figure does not include internal referrals within hospitals.

However, 166,465 individuals used the services of the Hospital District in 2009, 1% more than in 2008. The number of users of somatic services has steadily increased year on year, but there has been no similar trend in the use of psychiatric services.

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## Inpatient care

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The Hospital District of Southwest Finland has been shifting the focus of its services towards outpatient services for many years. The use of inpatient wards has been slimmed down, the number of beds reduced and the operations of outpatient clinics enhanced. Whereas in 2005 there were 1,600 beds in the Hospital District, at the beginning of 2010 there were only 1,396, of which 183 were for psychiatric patients. The reduction of beds is continuing.

The number of treatment days in inpatient wards decreased by 16% between 2005 and 2009. A total of 371,604 patient days were recorded in 2009, 65% of them at TYKS, 20% at regional hospitals and 15% in psychiatric care.

Overall, the average cost of a patient day in an inpatient ward for member municipalities in 2009 was EUR 686, the average cost of a patient day being EUR 812 at TYKS, EUR 508 at regional hospitals and EUR 372 in psychiatric care.

The average length of treatment periods in inpatient wards has decreased in recent years. Somatic care treatment periods in inpatient wards have been decreasing since 2007. In psychiatry, treatment periods have shortened by about two days since 2005. In 2009, the average durations of treatment periods in somatic and psychiatric inpatient care were 4.2 days and 21.3 days, respectively.

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## Outpatient care

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The total number of outpatient appointments in the Hospital District increased by 16% from 2005 to 2009, 718,264 being logged in 2009: 62% of them at TYKS, 23% at regional hospitals and 15% in psychiatric care.

Overall, the average cost of an outpatient appointment for member municipalities in 2009 was EUR 235, the average cost being EUR 265 at TYKS, EUR 215 at regional hospitals and EUR 176 in psychiatric care.

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## Treatment periods

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The number of treatment periods per year, including both outpatient care and inpatient care, has been decreasing in somatic care for a long time and in psychiatric care since 2006. In 2009, the Hospital District logged 77,724 treatment periods: 74% at TYKS, 22% at regional hospitals and less than 4% in psychiatric care.

Overall, the average cost of a treatment period in 2009 was EUR 3,281, the average cost being EUR 3,421 at TYKS, EUR 2,127 at regional hospitals and EUR 7,929 in psychiatric care.

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## Surgical operations

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The total number of annual surgical operations has decreased in recent years. The number of operations performed in 2009 was 38,902, a decrease of 8% since 2005. The decreasing trend is even clearer in the number of operations that require inpatient care. The number of operations in ambulatory surgery has been increasing since 2007 due to systematic changes in operating focus.

Up to 75% of all surgical operations are performed at TYKS. However, about

one in every three ambulatory surgery procedures are performed at regional hospitals. Only one operation in five is performed at an outpatient clinic or otherwise as an emergency; 80% are elective, i.e. pre-planned.

A surgical robot was acquired for TYKS in spring 2010. The robot will be initially used primarily for operating on prostate cancer and gynaecological cancers.

### Deliveries

While the birth rate had been slightly increasing over previous years, in 2009 the number of children born in Southwest Finland was 41 less than in 2008. The number of deliveries was 4,112 at TYKS and 755 at Salo Regional Hospital, 4,867 altogether.

Deliveries at Loimaa Regional Hospital were discontinued as of 1 January 2009. Births in the Loimaa region were mainly transferred to TYKS, though some of them were transferred to Salo Regional Hospital.

In 2010, the Hospital District agreed that pregnant mothers in Raasepori may choose to give birth in Salo or Turku, at least until the end of 2010.

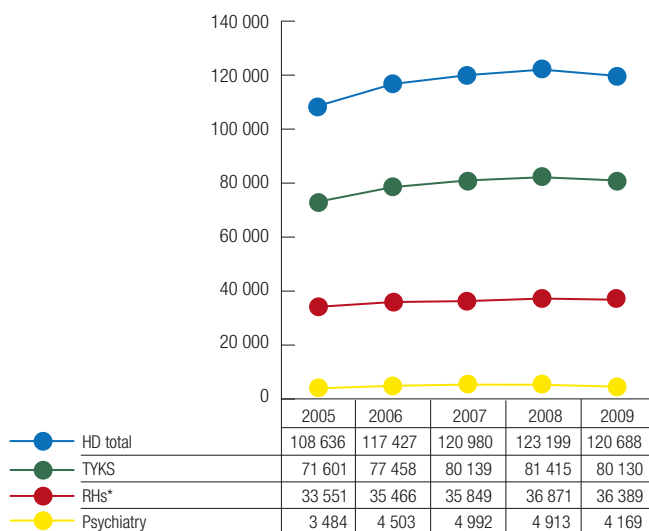
### Access to treatment

The number of patients waiting for access to treatment at the end of 2009 was 5,152, roughly the same as one year earlier. In the early part of the year, the number decreased, but it has been increasing again since autumn 2009 and stood at 5,742 at the end of March 2010.

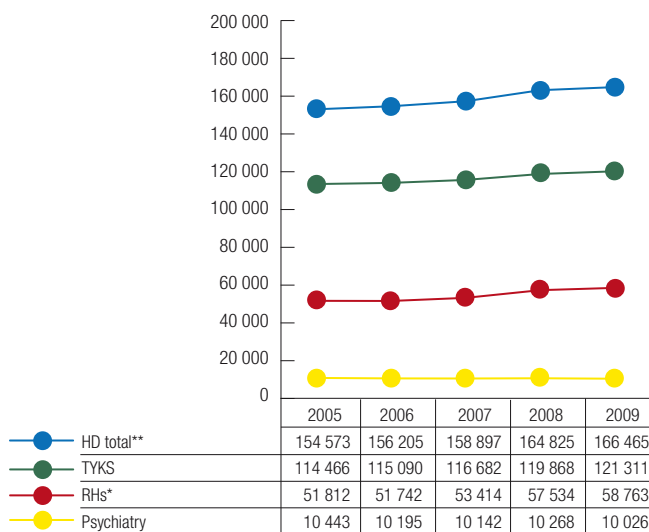
At the end of 2009, there were 182 patients who had been waiting for treatment for more than the six months allowed by law, 67 of them waiting for plastic surgery and 72 for neurosurgery.

As at the end of February 2010, the average waiting time for access to treatment was 34 days (median). In most areas of specialist medical care, the waiting times were shorter than the average in the Hospital District. The longest waiting times were in plastic surgery, neurosurgery and children's neurology.

### EXTERNAL REFERRALS



### INDIVIDUAL PATIENTS SERVED



\* Regional hospitals = Salo and Loimaa Regional Hospitals, Turunmaa Hospital and TYKS Vakka-Suomi Hospital total

\*\* Overlap between hospitals eliminated

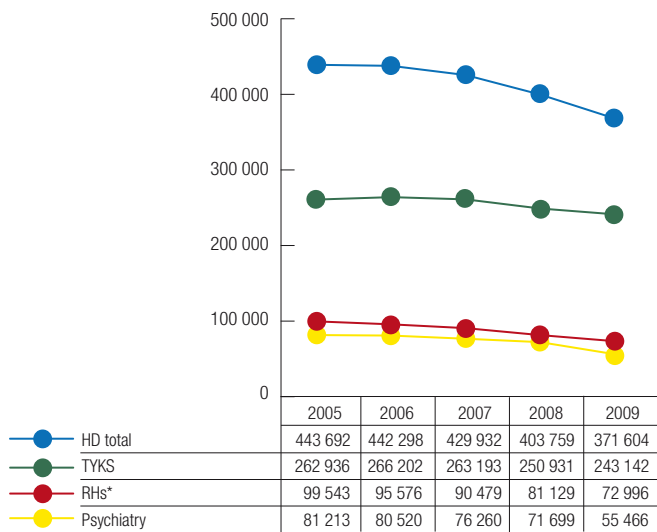
### HOSPITAL BEDS 1 JAN 2010

Hospital/ Division	TYKS	Salo RH	Loimaa RH	TYKS Vakka-Suomi Hospital	Turunmaa Hospital	Hospitals total.	Psychiatry	Grand total
Hospital beds	867	145	92	58	51	1213	183	1396

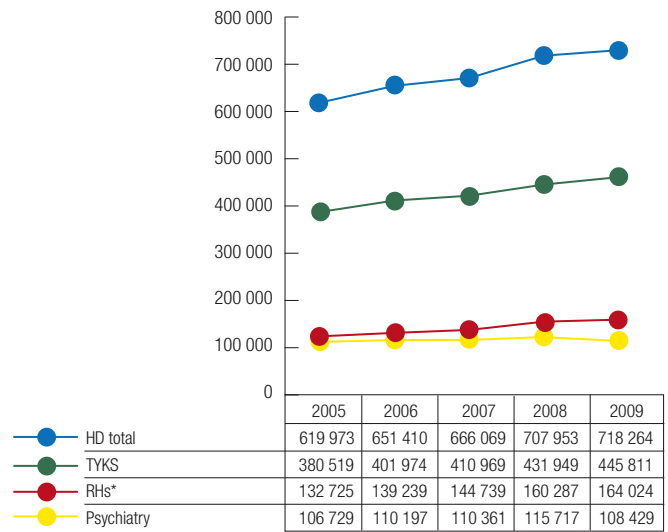
### AVERAGE LENGTH OF EPISODES OF TREATMENT IN INPATIENT CARE, DAYS

	2005	2006	2007	2008	2009
Somatic care	4,30	4,46	4,51	4,30	4,21
Psychiatric care	24,40	21,50	22,47	22,46	21,34

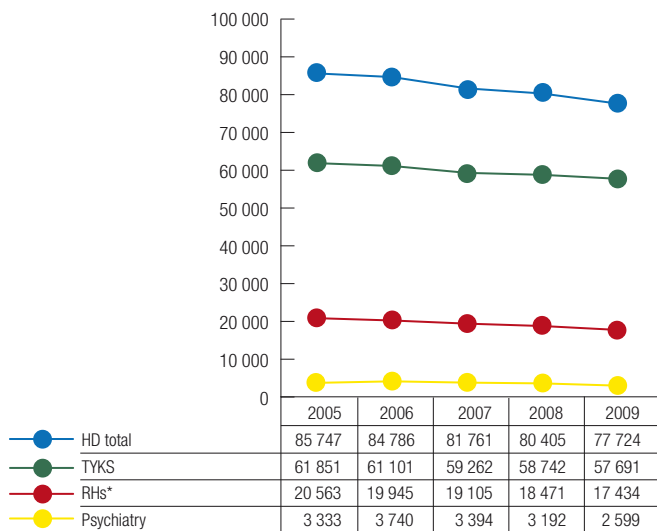
## INPATIENT WARD PATIENT DAYS



## OUTPATIENT APPOINTMENTS

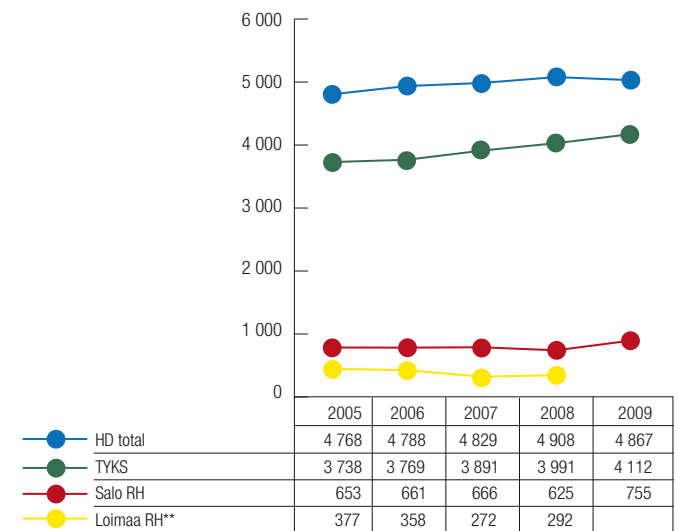


## TREATMENT PERIODS



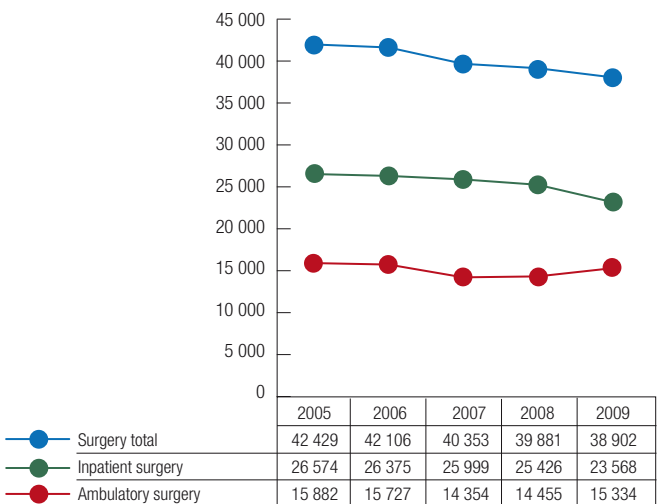
\* Regional hospitals = Salo and Loimaa Regional Hospitals, Turunmaa Hospital and TYKS Vakka-Suomi Hospital total

## BIRTHS

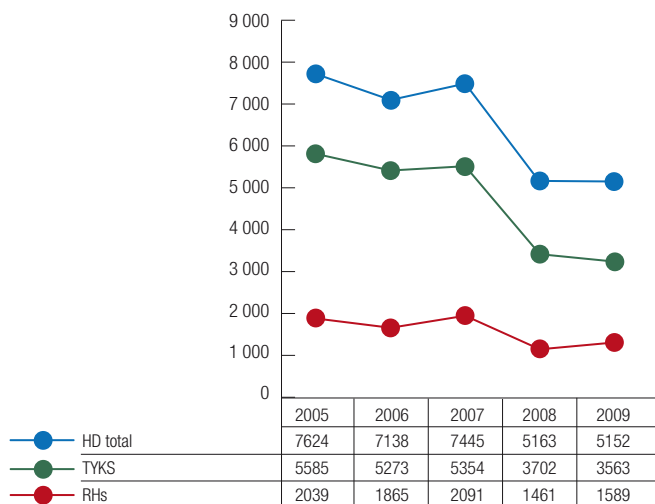


\*\* Deliveries at Loimaa Regional Hospital were transferred to TYKS as of 1 Jan 2009

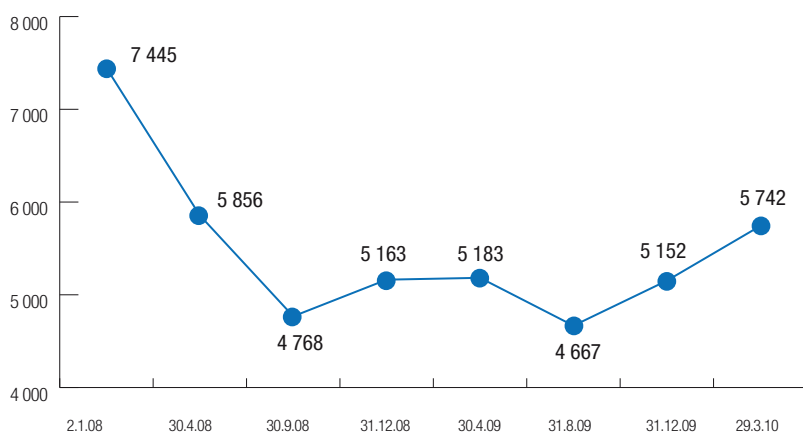
## SURGICAL PROCEDURES IN THE HOSPITAL DISTRICT



## PATIENTS AWAITING TREATMENT AT THE END OF THE YEAR 31 DEC



## PATIENTS AWAITING HOSPITAL TREATMENT 2008–2010



## SURGICAL PROCEDURES AT HOSPITALS OF THE HOSPITAL DISTRICT (ALL URGENT AND NON-URGENT SURGICAL PROCEDURES)

	2005	2006	2007	2008	2009	Change % 2008-2009
<b>Inpatient surgery</b>						
TYKS	20 516	20 619	20 585	19 871	18 649	-6,1
Loimaa Regional Hospital	1 573	1 500	1 300	1 318	986	-25,2
Salo Regional Hospital	2 487	2 372	2 399	2 433	2 104	-13,5
Turunmaa subdivision	976	975	882	885	886	0,1
TYKS Vakka-Suomi Hospital	995	909	833	919	943	2,6
<b>Inpatient surgery total</b>	<b>26 574</b>	<b>26 375</b>	<b>25 999</b>	<b>25 426</b>	<b>23 568</b>	<b>-7,3</b>
<b>Regional Hospitals total</b>	<b>6 031</b>	<b>5 756</b>	<b>5 414</b>	<b>5 555</b>	<b>4 909</b>	<b>-11,4</b>
<b>Ambulatory surgery</b>						
TYKS	11 185	10 946	9 852	9 823	10 503	6,9
Loimaa Regional Hospital	1 272	1 494	1 488	1 300	1 358	4,5
Salo Regional Hospital	1 313	1 098	982	1 016	1 176	15,7
Turunmaa subdivision	1 321	1 291	1 265	1 454	1 408	-3,2
TYKS Vakka-Suomi Hospital	791	898	767	862	889	3,1
<b>Ambulatory surgery total</b>	<b>15 882</b>	<b>15 727</b>	<b>14 354</b>	<b>14 455</b>	<b>15 334</b>	<b>6,1</b>
<b>Regional Hospitals total</b>	<b>4 697</b>	<b>4 781</b>	<b>4 502</b>	<b>4 632</b>	<b>4 831</b>	<b>4,3</b>

**USE OF SPECIALIST MEDICAL CARE (WARD CARE AND OUTPATIENT CARE) BY HEALTH CENTRE OR INTERMUNICIPAL FEDERATION RELATIVE TO POPULATION 2009**

Subdivision	Patient days/ 1,000 res.	Outpatient appointments/ 1,000 res.
Health centre / intermunicipal federation		
Turku 1)	629	1 151
<b>Salo region subdivision</b>		
Kaarina-Piikkiö HCIF	736	1 544
Paimio-Sauvo PHIF	761	1 498
Salo region PHIF	808	1 722
Somero HC	950	1 263
<b>Loimaa region subdivision</b>		
Huittinen region HEIF 2)	669	1 132
Härkätie PHIF	673	1 522
Loimaa region PHIF	981	1 810
Pöytyä region PHIF	825	1 579
<b>Raisio region subdivision</b>		
Masku PHIF	663	1 508
Mynämäki HC	638	1 336
Naantali PHIF	818	1 427
Raisio HC	710	1 477
Rusko HC	657	1 489
<b>Vakka-Suomi subdivision</b>		
Laitila-Pyhäranta PHIF	1 010	1 702
Uusikaupunki HC	946	2 339
Vehmassalo IF	989	1 728
<b>Turunmaa subdivision</b>		
Kemiönsaari HCIF	920	1 555
Länsi-Turunmaa HC	974	1 750
<b>Hospital District average</b>	<b>742</b>	<b>1 443</b>

1) Excluding the operations of Turku City Hospital.

2) Only member municipalities (Punkalaidun) taken into account in population and patient days.

**ABBREVIATIONS:**

HCIF = health centre intermunicipal federation  
 PHIF = public health intermunicipal federation  
 HEIF = health care intermunicipal federation  
 IF = intermunicipal federation, HC = health centre

**MEMBER MUNICIPALITY PATIENT DAYS 2009 \***

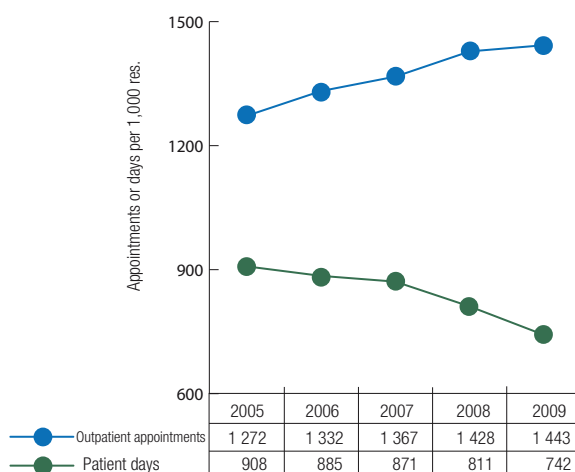
	Municipality	Patient days
1	Turku	110 674
2	Salo	44 565
3	Kaarina	22 684
4	Raisio	17 281
5	Loimaa	16 888
6	Naantali	15 180
7	Länsi-Turunmaa	15 060
8	Uusikaupunki	14 938
9	Lieto	9 887
10	Somero	8 952
11	Laitila	8 328
12	Paimio	7 803
13	Pöytyä	7 329
14	Kemiönsaari	6 689
15	Masku	6 273
16	Mynämäki	5 131
17	Rusko	3 824
18	Nousiainen	3 335
19	Aura	2 849
20	Koski Tl	2 480
21	Pyhäranta	2 471
22	Sauvo	2 309
23	Punkalaidun	2 234
24	Vehmaa	2 152
25	Taivassalo	1 667
26	Tarvasjoki	1 366
27	Marttila	1 341
28	Oripää	1 228
29	Kustavi	1 168
	<b>Total</b>	<b>346 086</b>

**MEMBER MUNICIPALITY APPOINTMENTS 2009 \***

	Municipality	Outpatient appointments
1	Turku	202 367
2	Salo	95 009
3	Kaarina	47 623
4	Uusikaupunki	36 917
5	Raisio	35 957
6	Loimaa	31 317
7	Länsi-Turunmaa	27 069
8	Naantali	26 488
9	Lieto	23 941
10	Paimio	15 631
11	Masku	14 749
12	Laitila	14 218
13	Pöytyä	13 678
14	Somero	11 896
15	Kemiönsaari	11 300
16	Mynämäki	10 745
17	Rusko	8 669
18	Nousiainen	7 111
19	Aura	5 808
20	Vehmaa	4 540
21	Sauvo	4 284
22	Koski Tl	4 104
23	Pyhäranta	3 981
24	Punkalaidun	3 780
25	Marttila	3 045
26	Tarvasjoki	3 022
27	Taivassalo	2 769
28	Oripää	2 121
29	Kustavi	1 408
	<b>Total</b>	<b>673 547</b>

\* ) All care provided by the Hospital District (including outsourced services)

**USE OF SPECIALIST MEDICAL CARE RELATIVE TO POPULATION**



# Finances

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## Financial statement for 2009

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The Hospital District showed a surplus of EUR 1.6 million for the year under review, although the budget goal was a deficit of EUR 2.7 million. The Intermunicipal Hospital District has accumulated a total surplus of EUR 12.9 million. According to the proposal submitted by the Board to the Council of the Intermunicipal Hospital District, the surplus declared for 2009 is to be left under the surplus/deficit for previous financial periods in the balance sheet.

At the end of 2009, the Council granted the Hospital District an authorization for a budget excess of no more than EUR 2.8 million in non-discretionary expenditure. This authorization was never used, as actual non-discretionary expenditure was EUR 1.3 million under budget.

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## Operating income

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In 2009, the Hospital District received nearly EUR 14.3 million more in operating income than budgeted. Out of the EUR 540 million in operating income, the majority (EUR 413 million) was paid by member municipalities for specialist medical care provided to their residents. Billing from member municipalities was almost exactly as budgeted.

The surplus was in fact due to greater income than expected from sales of services outside member municipalities. Other sales income too, such as revenue from laboratory and imaging services and other operating revenue, were substantially over budget. In all, operating income was 2.7% over budget, showing an increase of 4.1% on 2008.

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## Operating expenses

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The operating expenses of the Intermunicipal Hospital District were slightly more

over budget than operating income, by about EUR 15 million. Total operating expenses were EUR 511.8 million, 3.0% over budget and showing an increase of 3.6% on 2008.

Pay and social security contributions accounted for 64.3% of operating expenses. What was gratifying in 2009 was that these items were almost exactly on budget and even somewhat under. Savings of some EUR 3.4 million were achieved in payroll expenses through voluntary unpaid leave, conversion of doctors' holiday pay to time off, and moderate use of substitutes.

The largest single cause of the budget excess, accounting for EUR 10.9 million, was outsourced services. A significant percentage of outsourced services consisted of IT expenses, which were not realistically allowed for in the budget. Materials purchases were 2.9% (EUR 3.2 million) over budget. The excess is largely due to a change in the accounting practice for sales of stored supplies outside the Intermunicipal Hospital District.

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## Financial income and expenses

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As the Intermunicipal Hospital District is investing heavily in new construction, it is not accumulating revenue that could be invested to generate significant financial income.

Interest rates dropped sharply in spring 2009, and significant government intervention to revive the financial market kept interest rates down throughout the year. Therefore the interest paid on loans and interest paid to member municipalities on subscribed capital remained no less than EUR 4.1 million under budget. The interest on subscribed capital has been agreed to be based on the six-month Euribor rate, which was significantly higher in 2008 when the budget was drawn up than it was on the in-

terest rate determination date, 31 December 2009.

Net financing expenses were under budget by EUR 4.8 million, and as a result the overall financial performance showed a surplus instead of the budgeted deficit.

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## Depreciation

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Depreciation for the Intermunicipal Hospital District was almost exactly according to budget. At its June meeting, the Council passed a motion to change the depreciation principles by shortening the depreciation period on buildings and lowering the threshold on depreciation periods for equipment. The new principles apply to buildings taken into use and equipment procured after 11 June 2009. This change had no significant impact on depreciation for 2009, because the completed part of the most substantial investment project, the T Hospital, was not taken into use until the end of the year.

In June, the Council also passed a motion to change the depreciation plan for the U Hospital building so as to depreciate it completely by 31 December 2019, a reduction of about 10 years to the original plan. The changed depreciation plan for the U Hospital did not enter into force until 1 January 2010 and thus did not affect depreciation for 2009.

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## Construction investment continued

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The investment expenses of the Intermunicipal Hospital District totalled EUR 60.5 million in 2009, EUR 16.1 million under budget. This was mainly due to the construction of the T Hospital progressing differently than planned.

The next most significant investment project after the T Hospital was the new building at Salo Regional Hospital. Work

on this building progressed faster than planned, and the project thus went over budget.

Total investment in buildings was EUR 49.3 million, the budgeted figure being EUR 62.4 million.

Nearly EUR 10 million was spent on new equipment, but this was almost EUR 4.5 million under budget. The most significant items of equipment procured were a linear accelerator for radiation therapy, an angiography system and a gamma camera.

#### Financing position

The net cash flow from operations and investments in 2009 was EUR -37.8 million. Cash flow from operations covered all current finances and about 36% of investments. Net borrowing in 2009 totalled EUR 40 million, significantly more than in 2008. Cash funds increased somewhat, to EUR 8.2 million at the end of the year.

Because of the heavy investment programme, the outstanding loans of the Intermunicipal Hospital District increased to EUR 135 million at the end of the year. This weakened the solvency ratio of the Hospital District further and increased relative indebtedness. The solvency ratio as at 31 December 2009 was 43.0%, compared with 47.0% one year earlier. Indebtedness, i.e. the percentage of debt out of operating income, increased to 68.8% as compared to the substantially lower 47.6% as at 31 December 2008.

#### Financial outlook

In 2009, the economy took a dramatic downturn, the fastest and steepest since 1918. GDP decreased by a record 7.8% in 2009, after growth of 1.2% in 2008.

The financial downturn was reflected in the municipal economy more rapid-

ly than anticipated. The sharp increase in local government expenses together with unfavourable trends in tax revenue led to a decrease in annual balances and a substantial increase in borrowing in 2009.

Entering 2010, the economy took a turn for the better. Recovery will be slow, however, and the recession is expected to have the greatest impact on the municipal economy in 2010 and 2011. Member municipalities require the Hospital District to exercise strict fiscal control so that the expenses of the Intermunicipal Hospital District will not increase more rapidly than local government expenses in general. Because of this, the Hospital District is continuing financial adaptation measures in 2010. The aim is to achieve a saving of about 2% in personnel costs for instance by encouraging employees to take voluntary unpaid leave for a total of seven days during 2010. Productivity will be enhanced and efficiency improved by developing treatment chains and processes.

Financial management will be streamlined for instance by automating internal billing and simplifying the balance sheet structure so that the budget for 2011 will be drawn up using three balance sheet units instead of eight.

Because of the heavy construction programme and the change in the depreciation plan of the U Hospital, the Hospital District's finances will be encumbered in the near future by growing depreciation, estimated to increase by about EUR 10 million by 2017.

The continuing uncertainty on the financial market due for instance to the economic problems in Greece will be reflected in interest rates in unpredictable ways.

All in all, the Intermunicipal Hospital District faces a challenging financial future. Because of considerable borrowing, the indicators describing the finances of the Hospital District and its development will inevitably decline in the near future.

#### ACCUMULATED SURPLUS/DEFICIT 31 DEC 2009

	surplus + deficit - before 2009	surplus + deficit - 2009	accumulated surplus + deficit - 31.12.2009	share in sales income of member and other municipalities %
TYKS	2 152 240	3 500 387	5 652 627	1,9
TYKS Vakka-Suomi Hospital	647856	-588186	59 669	0,4
Loimaa Regional Hospital	-792 012	905 473	113 461	0,6
Salo Regional Hospital	2 443 240	-111 241	2 331 999	8,9
Turunmaa Hospital public utility	323 090	48341	371 431	3,4
Psychiatry Division	6 853 701	-3 522 086	3 331 615	10,9
Tyks-Sapa public utility	-222 896	1 372 847	1 149 951	
Shared resources (Administration Centre)	-157 000	4 000	-153 000	
<b>Hospital District total</b>	<b>11 248 220</b>	<b>1 609 534</b>	<b>12 857 754</b>	<b>3,2</b>

**BUDGET COMPARISON 1.1. - 31.12.2009**

Includes direct income and expenses of public utilities. Internal invoicing between public utilities and hospitals is eliminated.

<b>PROFIT AND LOSS STATEMENT FOR THE FINANCIAL PERIOD</b>	<b>Financial statement 2009, EUR</b>	<b>Difference % compared to budget</b>	<b>Change % from previous financial statement</b>
Sales income from member municipalities	367 253 411	1,5	3,2
Sales income from outside municipalities and other sources	35 211 854	12,8	12,3
Compensatory charges for expensive treatments	21 671 062	-17,5	-22,3
Special obligation charges	24 182 000	0,0	4,7
Special government grant	19 396 590	-9,5	-6,2
Other sales income	37 250 206	18,0	15,3
Payment income	19 928 770	2,2	5,3
Support and subsidies	2 652 115	89,3	5,1
Other operating income	12 634 419	48,2	12,9
<b>Total operating income</b>	<b>540 180 426</b>	<b>2,7</b>	<b>3,1</b>
Payroll	245 504 280	0,7	3,4
Social security contributions	68 518 554	-2,8	-0,2
Outsourcing	74 358 378	17,2	6,0
Purchase of materials	110 592 321	2,9	7,3
Rents	6 036 812	-11,0	7,6
Other operating expenses	6 796 975	40,2	42,1
<b>Total operating expenses</b>	<b>511 807 320</b>	<b>3,6</b>	<b>4,5</b>
INCOME FROM OPERATIONS	28 373 106	-2,5	-17,0
Net financial income/expenses	-6 556 646	-42,0	-40,0
RESULT BEFORE DEPRECIATIONS AND EXTRAORDINARY ITEMS	21 816 460	22,7	-6,2
Depreciation, amortization and value adjustments	20 288 219	-0,9	6,7
<b>SURPLUS/DEFICIT FOR THE FINANCIAL PERIOD</b>	<b>1 528 241</b>	<b>-</b>	<b>-64,2</b>
Depreciation difference increase/decrease	81 293	-	0,5
Reserves increase/decrease	0	-	-
Funds increase/decrease	0	-	-
<b>SURPLUS FOR THE FINANCIAL PERIOD</b>	<b>1 609 534</b>	<b>-</b>	<b>-63,5</b>
<b>INVESTMENT CASH FLOW STATEMENT</b>	<b>Financial statement 2009, EUR</b>	<b>Difference % compared to budget</b>	<b>Change % from previous financial statement</b>
Buildings	49 278 066	-21,0	9,3
Immovable structures and equipment	181 087	-	3044,8
Machinery and equipment	9 797 229	-31,2	26,2
Other inventory acquisitions	1 233 884	-	-58,7
Total investment expenses	60 490 266	-21,1	8,3
Total investment income	404 606	-10,1	-96,4
<b>INVESTMENT CASH FLOW NET</b>	<b>60 085 661</b>	<b>-21,1</b>	<b>34,8</b>
<b>FINANCING STATEMENT</b>	<b>Financial statement 2009, EUR</b>	<b>Difference % compared to budget</b>	<b>Change % from previous financial statement</b>
Result before depreciations and extraordinary items	21 816 460	22,7	-6,2
Adjusting items for cash flow financing	697 119	-	-2,4
Total cash flow financing	22 513 579	22,9	-6,8
Cash flow from investment activities	60 312 731	-15,9	35,8
OPERATING AND INVESTMENT CASH FLOW	-37 799 152	-34,7	86,5
Decreases in loan receivables	-130 184	-	-
Changes in loan portfolio	40 000 000	-30,4	166,7
Other changes in liquidity	-367 747	-	-
CASH FLOW FROM FINANCING ACTIVITIES	38 729 222	-33,1	1 342,9
<b>CHANGE IN LIQUID FUNDS</b>	<b>930 071</b>	<b>-</b>	<b>-105,3</b>

-) comparable figure is zero or negative

**BALANCE SHEET 31.12.2009**

ASSETS	31.12.2009	31.12.2008
<b>NON-CURRENT ASSETS</b>		
<b>Intangible assets</b>		
Other long-term expenses	267 859	345 990
Advance payments	1 634 790	929 121
	1 902 649	1 275 111
<b>Tangible assets</b>		
Land and water	12 759 642	12 375 095
Buildings	255 825 130	221 566 192
Immovable structures and equipment	1 046 399	1 055 411
Machinery and equipment	33 608 486	31 918 224
Other tangible assets	61 467	61 467
Advance payments and purchases in progress	60 703 871	57 931 567
	364 004 995	324 907 956
<b>Investments</b>		
Shares and holdings	2 728 857	2 655 991
Other receivables	691 897	561 713
	3 420 754	3 217 704
<b>Non-current assets total</b>	<b>369 328 397</b>	<b>329 400 772</b>
<b>CONTRACT-RESTRICTED ASSETS</b>		
Special margins of gift funds	336 032	327 979
<b>CURRENT ASSETS</b>		
<b>Inventories</b>		
Equipment and materials	6 177 453	7 918 035
<b>Receivables</b>		
<b>Long-term receivables</b>		
Loan receivables	3 512 247	5 642 563
Other long-term receivables	436 800	470 400
	3 949 047	6 112 963
<b>Short-term receivables</b>		
Accounts receivable	17 516 771	18 021 818
Loan receivables	2 130 316	2 380 316
Other receivables	8 284 955	8 007 228
Prepayments and accrued income	16 202 351	14 445 074
	44 134 393	42 854 436
Receivables total	48 083 440	48 967 399
Cash in hand and at banks	8 244 470	7 314 399
<b>Current assets total</b>	<b>62 505 363</b>	<b>64 199 834</b>
	<b>432 169 793</b>	<b>393 928 584</b>

LIABILITIES	31.12.2009	31.12.2008
<b>CAPITAL AND RESERVES</b>		
Subscribed capital	172 456 955	173 229 802
Surplus/deficit for previous financial periods	11 248 220	6 844 066
Surplus/deficit for the financial period	1 609 534	4 404 154
	185 314 709	184 478 022
<b>DEPRECIATION AND UNTAXED RESERVES</b>		
Accumulated depreciation difference	161 579	242 872
Untaxed reserves	0	0
	161 579	242 872
<b>PROVISIONS</b>		
Provisions for pensions	388 800	392 800
Other provisions	11 508 675	11 034 626
	11 897 475	11 427 426
<b>CONTRACT-RESTRICTED CAPITAL</b>		
Gift fund capitals	1 228 533	859 021
<b>LIABILITIES</b>		
<b>Long-term</b>		
Loans from financial and insurance institutions	120 000 000	75 000 000
Loans from other creditors	82 267	82 267
Other loans	594 592	0
	120 676 859	75 082 267
<b>Short-term</b>		
Loans from financial and insurance institutions	15 000 000	20 000 000
Advances received	1 284 681	1 316 067
Accounts payable	28 025 496	25 359 264
Other loans	10 385 512	9 954 661
Accruals and deferred income	58 194 949	65 208 985
	112 890 638	121 838 977
<b>Liabilities total</b>	<b>233 567 497</b>	<b>196 921 244</b>
	<b>432 169 793</b>	<b>393 928 584</b>

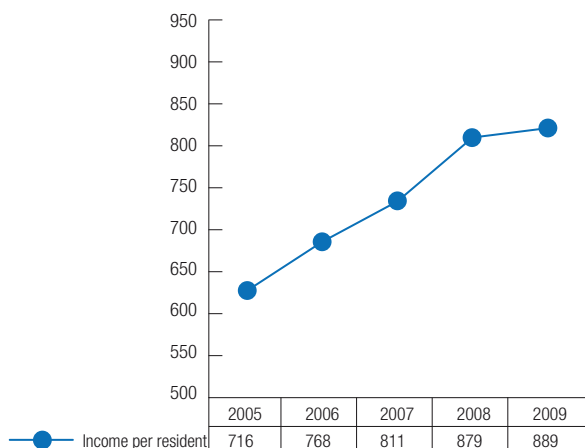
The Tyks-Sapa public utility and the Turunmaa Hospital public utility are included in the balance sheet.

## INCOME FROM MEMBER MUNICIPALITIES, PER RESIDENT AND TOTAL, 2009

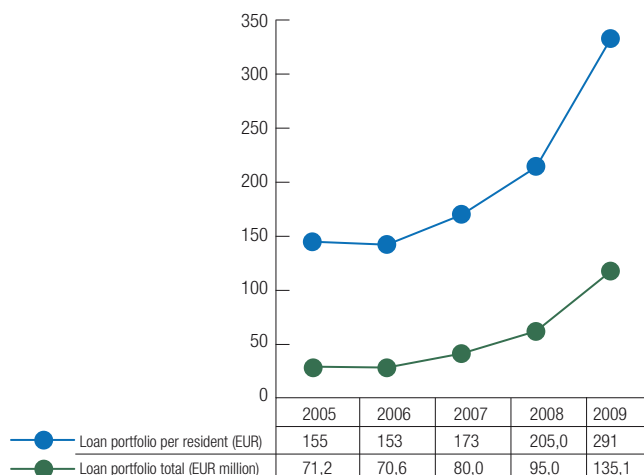
(= sum of sales income, compensatory charges for expensive treatments and special obligation charges received from member municipalities)

	MEMBER MUNICIPALITY	Income, EUR per resident	Income, EUR total	Population 1.1.2009
1	Koski Ti	1 117	2 758 945	2 470
2	Uusikaupunki	1 095	17 394 023	15 886
3	Kustavi	1 089	990 767	910
4	Vehmaa	1 058	2 586 367	2 445
5	Taivassalo	1 048	1 789 462	1 708
6	Loimaa	1 039	17 773 033	17 102
7	Pyhäranta	1 031	2 306 239	2 236
8	Laitila	1 012	8 568 059	8 470
9	Pöytyä	1 010	8 479 263	8 397
10	Länsi-Turunmaa	981	15 115 127	15 405
11	Kemiönsaari	957	6 990 235	7 303
12	Tarvasjoki	936	1 817 030	1 941
13	Salo	936	51 257 573	54 777
14	Sauvo	932	2 821 584	3 027
15	Somero	931	8 811 520	9 465
16	Masku	918	8 617 884	9 383
17	Paimio	917	9 299 146	10 145
18	Naantali	910	16 732 089	18 391
19	Rusko	908	5 229 616	5 758
20	Oripää	901	1 255 162	1 393
21	Kaarina	899	27 273 188	30 347
22	Raisio	897	21 655 709	24 147
	AVERAGE	889		
23	Nousiainen	882	4 243 180	4 809
24	Marttila	877	1 780 928	2 030
25	Aura	860	3 313 754	3 852
26	Lieto	859	13 546 994	15 772
27	Mynämäki	820	6 578 309	8 026
28	Turku	806	141 578 544	175 582
29	Punkalaidun	754	2 542 744	3 373
	TOTAL		413 106 473	464 550

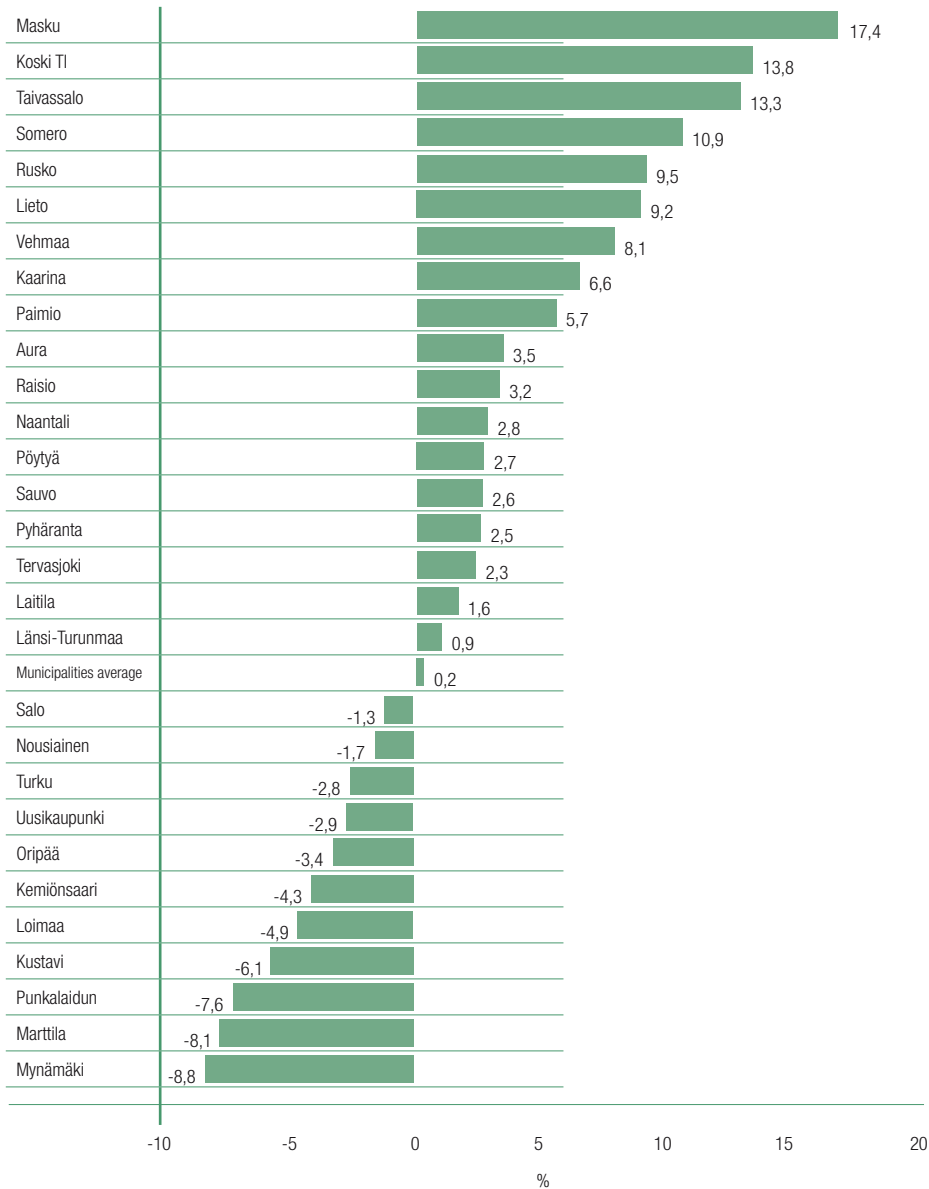
### INCOME FROM MEMBER MUNICIPALITIES PER RESIDENT (EUR)



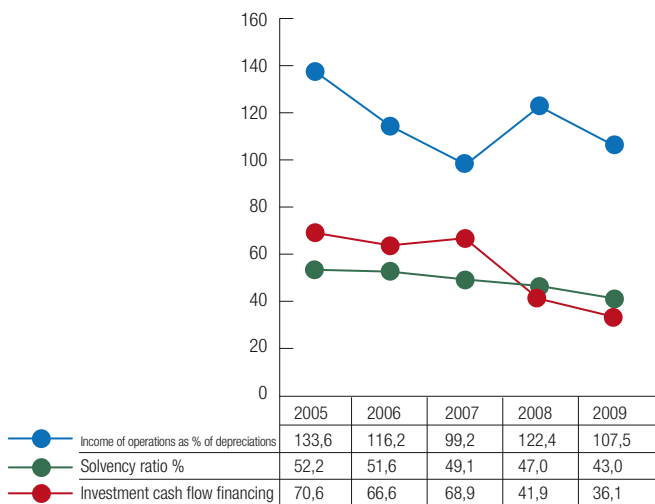
### LOAN PORTFOLIO PER RESIDENT (EUR) AND TOTAL (EUR MILLION) AS AT 31 DECEMBER



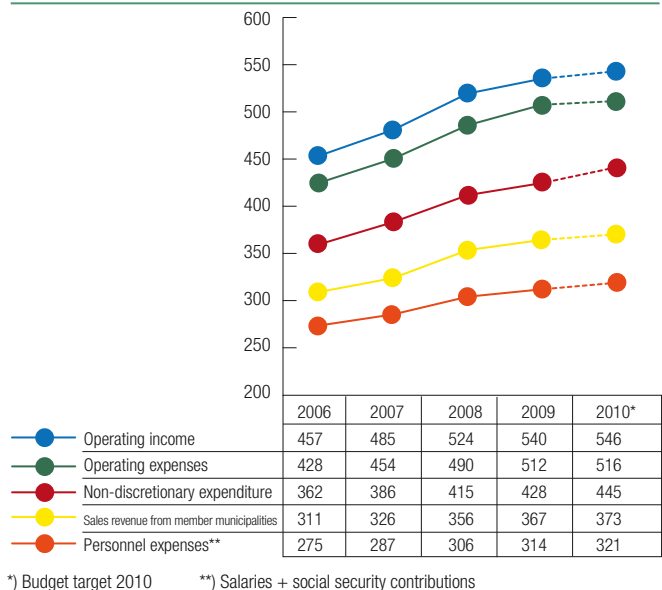
## MEMBER MUNICIPALITY INVOICING, DEVIATION FROM BUDGET (%) 2009



## INCOME OF OPERATIONS AS % OF DEPRECIATIONS, SOLVENCY RATIO AND INVESTMENT CASH FLOW FINANCING (%)



## HOSPITAL DISTRICT KEY FINANCIAL INDICATORS EUR MILLION



# Teaching and research

There are currently more than 400 research projects under way in the Hospital District of Southwest Finland, with a combined budget of about EUR 13 million. The research projects employ about 1,000 people. One third of the projects involve clinical drug studies, and the remaining two thirds mainly involve research in diagnostics, care and rehabilitation, and service system improvement.

The research is mainly conducted by and in the premises of Turku University Hospital and the Faculty of Medicine of the University of Turku; the research conducted here generated some 950 publications in 2009.

Turku University Hospital is also a teaching hospital, and in 2009 130 Licentiate of Medicine degrees, 68 Specialist in Medicine degrees and eight Specialist in Dentistry degrees were completed. Nursing students also complete part of their training at Turku University Hospital.

The Finnish government paid Turku University Hospital a total of EUR 18.9 million in special government grants for 2010 to compensate for the costs of the training of doctors and dentists and of health sciences research. The percentage received by TYKS out of the total special government grants paid to university hospitals had grown in previous years but in 2009 was the same as in 2008.

In addition to the special government grant, TYKS receives research funding from outside public and private funding providers. Agreements for research funding totaling EUR 5.6 million were signed with outside research funding providers on decisions made by the Chief Financial Officer in 2009.

A separate Research Office was set up at the Hospital District administration centre in 2008.

The duties of the Research Office include providing support services for the Ethics Committee; administering and monitoring the special government grants; or-

ganizing, promoting and supporting the scientific research of the Intermunicipal Hospital District; providing administration and legal advice for externally funded research projects; and providing support services for scientific research.

The Research Office has ten employees and is headed by the Chief Research Physician.

The University of Turku and the Hospital District of Southwest Finland also have a shared, networked clinical research centre, Turku CRC.

The duties of Turku CRC include counselling related to research planning

and reporting; counselling related to permits and statements and liaison with the authorities; providing ancillary services and logistics for research together with the researcher and the client; and research quality assurance and training duties.

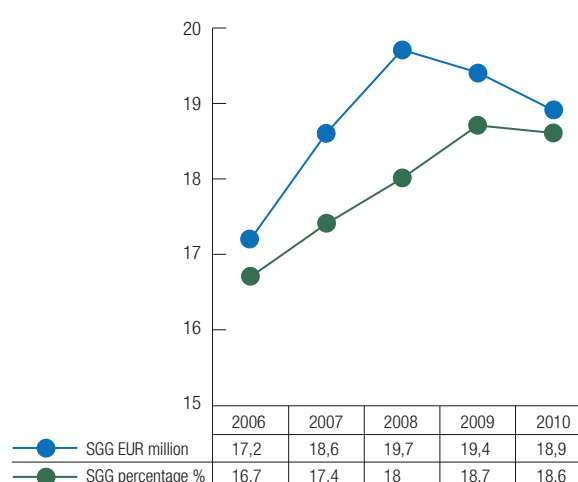
The Turku CRC network consists of the Research Office of the Hospital District, the Research and Industrial Services Unit of the University of Turku, and the units of the background organizations (profit centres of the Hospital District; units and departments of the University; the PET centre and Clinical Research Services Turku (CRST)). Further information: [www.turkuerc.fi](http://www.turkuerc.fi)

## DEGREE POINTS AND PUBLICATION POINTS ON WHICH THE TYKS SPECIAL GOVERNMENT GRANT (SGG) COMPENSATION IS BASED

	2006	2007	2008	2009	2010
Degree points	185	200	207	206	198
TYKS share % *	17,4	18,3	19	19	18,8
Publication points	1 086	1116	1 145	1 170	1 233
TYKS share % *	15,5	15,8	16,3	16,5	16,7

\* share of the combined SGG compensation received by the Helsinki, Kuopio, Oulu, Tampere and Turku University Hospitals

## TYKS SGG COMPENSATION (EUR MILLION) AND % OF SGG COMPENSATION RECEIVED BY ALL HOSPITALS



\* share of the combined SGG compensation received by the Helsinki, Kuopio, Oulu, Tampere and Turku University Hospitals

# Environment

The Environmental Programme of the Hospital District of Southwest Finland outlines aims and goals in eight sections:

- environmental management
- procurement
- waste management
- consumption management
- emissions management
- transport
- construction and repairs
- environmental awareness
- non-smoking hospital

Environmental aspects can be better taken into account in procurement thanks to the new logistics centre completed in 2009. Concerning the purchase of construction services, the correct sorting of waste and observation of safety factors is now the responsibility of the contractors.

Energy economics are being improved by adding modern air conditioning and automatic control engineering to all renovation projects where possible. An energy efficiency enhancement plan has been prepared by Technical Services.

The implementation of the environmental programme was evaluated in 2009, and the programme will be revised during 2010.

According to the environmental accounts, about 15% of the maintenance expenses on buildings and land areas are environmental expenses. These decreased substantially from 2008 to 2009.

The majority of environmental expenses are caused by waste management, electricity consumption and heating; all went up on the previous year in 2009.

## ENVIRONMENTAL ACCOUNT OF THE VARSINAIS-SUOMI HOSPITAL DISTRICT

	Environmental expenses * (EUR)			Change % 2008-2009
	2007	2008	2009	
Building maintenance services	445 507	513 219	190 490	-60,8
Land area maintenance services	45 737	40 679	39 830	-2,1
Waste transport	394 504	467 304	615 257	32,2
Electricity	3 343 473	3 194 767	3 362 747	10,3
Heating	2 954 558	3 385 748	3 610 902	17,9
Water	334 727	331 335	277 389	-14,2
Sewage costs	381 523	378 065	400 948	14,8
Building maintenance materials	68 320	70 927	50 894	-28,0
Land area maintenance materials	4 348	7 658	3 592	-53,2
<b>Total expenses</b>	<b>7 972 697</b>	<b>8 389 702</b>	<b>8 552 049</b>	<b>8,9</b>

\*) Environmental costs arise from action intended to benefit the environment, to deter, reduce or correct damage caused by environmental hazards, or to improve the level of future environmental protection or to promote sustainable use of natural resources.

## ELECTRICITY, HEATING AND WATER CONSUMPTION IN THE HOSPITAL DISTRICT OF SOUTHWEST FINLAND

	2007	2008	2009	Change % 2008-2009
Electricity kWh million	41,646	40,763	41,927	2,9
Heating MWh	67 695	65 304	73 211	12,1
Water m <sup>3</sup>	289 004	289 927	252 906	-12,8

# Administration and organisation

## Administrative Centre

At the beginning of 2008, the administrative functions of the Hospital District, i.e. the administrative personnel of the Hospital District, TYKS and the regional hospitals, were brought together in a new Administrative Centre. The HR personnel at the Loimaa and Salo regional hospitals and Vakka-Suomi Hospital, however, were not transferred to the Administrative Centre until the beginning of 2009.

The Administrative Centre has about 230 employees. Most of the Administrative Centre personnel work in the administration building on the Turku University Hospital Main Hospital campus. The Administrative Centre is managed by the Chief Executive Director of the Hospital District and is divided into ten bureaus. The Bureau of Administration includes the communications unit and the patient records centre. Occupational health care is under the Personnel Bureau.

A state-of-the-art logistics centre built in Biolaakso in Turku was taken into use in 2009. The centre has 4,740 sq.m of space. Logistics services, a unit under the Bureau of Acquisitions, has just over 30 employees. The logistics centre is a service warehouse that procures, stores and distributes health care supplies. It serves not only the Hospital District but other public-sector health care organizations in Southwest Finland too.

## Organization

Significant changes have occurred in the organization of the Hospital District in recent years.

At the beginning of 2008, all IT functions and personnel in the Hospital District were transferred to a new company named Medbit Oy. The administrative personnel of the Hospital District and of its hospitals were transferred to the new Administrative Centre. Moreover, catering services for the Hospital District were consolidated by merging the

catering services of the regional hospitals to Turku University Hospital catering services.

New organization levels were introduced at the beginning of 2009: the medical services public utility TYKS-Sapa, regional specialist medical care, and Maintenance Services and Technical Services serving the entire Hospital District.

Regional specialist medical care includes the Loimaa and Salo Regional Hospitals, Turunmaa Hospital and Vakka-Suomi Hospital. Their operations are coordinated by a Division Director, but hospitals still each have their own Medical Director and Leading Director of Nursing. They also each have their own Board of Directors except for Vakka-Suomi Hospital, for which a steering group has been appointed.

Several municipalities were merged at the beginning of 2009, as a result of which the number of member municipalities of the Hospital District of Southwest Finland decreased from 55 to 29. At the same time, the membership of the Council, the highest decision-making body of the Intermunicipal Hospital District, decreased from 105 to 75.

Turku University Hospital is now preparing for a substantial reorganisation based on the lines of treatment to be introduced at T Hospital. The current divisions, profit centres and clinics will be dismantled. The new organization is intended to be introduced as of 1 January 2013.

The current organisation of the Hospital District of Southwest Finland is shown in the figure.

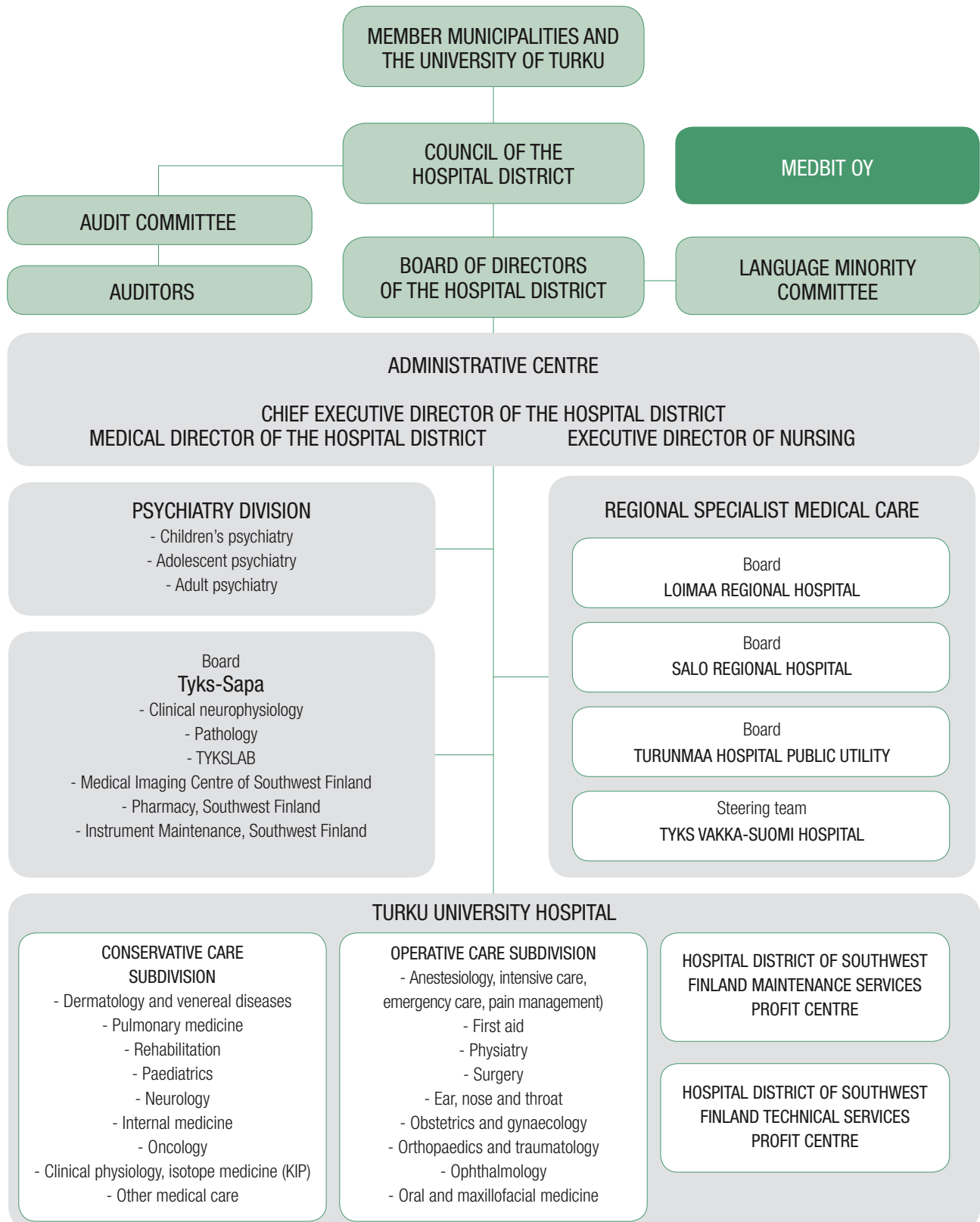
### ADMINISTRATIVE CENTRE BUREAUS AND THEIR PERSONNEL AS AT 1 JANUARY 2010:

Bureau of Administration	30
Bureau of Acquisitions	53
Personnel Bureau	64
Bureau of Nursing Care	12
Bureau of Development	4
Bureau of Medical Management Support Services	4
Financial Administration Service Centre	40
Bureau of Financial Planning	13
Audit Committee	1
Bureau of Data Administration	1
Research Bureau	7
Joint cost centre	2
<b>Total</b>	<b>231</b>

### ADMINISTRATIVE CENTRE FINANCIAL INDICATORS (EUR)

year	2007	2008	2009	2010*
Operating income	8 866 931	15 819 499	17 041 500	18 251 421
Operating expenses	7 387 396	15 794 387	16 990 400	18 289 835
Investment cash flow (net)	2 471 532	-4 697 352	25 000	113 587

\*) Budget target 2010



# Turku University Hospital

Today, Turku University Hospital is Finland's oldest hospital that has been in operation continuously since its founding, having celebrated its 250th anniversary in 2009. It can trace its history back to the charter signed by King Adolf Fredrik of Sweden on 17 December 1756; the hospital began to receive patients in May 1759. Since then, the hospital has operated continuously; it was subsequently made into a provincial hospital and in 1958 into a university central hospital.

Turku University Hospital provides specialist medical services in nearly all specialities, mostly at the Main Hospital in Turku. The Surgical Hospital in Turku and Paimio and Raisio Hospitals are also part of Turku University Hospital. T Hospital forms part of the Main Hospital.

Vakka-Suomi Hospital is also administratively part of Turku University Hospital, though functionally it belongs to the regional specialist medical care division. Its personnel, operations and finances are thus considered to be separate from Turku University Hospital.

About 4,100 of the Hospital District's employees are at Turku University Hospital: 500 doctors, 2,400 nurses and other care personnel. The employees in psychiatry, laboratory, imaging, pharmacy, administration and other support services are generally not counted as Turku University Hospital personnel; instead, they come under their respective divisions and profit centres.

The regional hospitals' maintenance and technical services personnel were merged with the Turku University Hospital maintenance and technical services personnel on 1 January 2009, following which they function as a district-wide profit centre.

## Conservative Care and Operative Care Subdivisions

The operations of Turku University Hospital are divided into the Conservative Care and Operative Care Subdivisions.

The Conservative Care Subdivision includes the units for dermatology and venereal diseases, pulmonary medicine, clinical physiology, isotope medicine and PET, rehabilitation, paediatrics, neurology, internal medicine, oncology and other medical care. The last-mentioned of these includes the general practice unit and the hospital hygiene and anti-infection unit.

The Operative Care Subdivision includes the anaesthesiology, intensive care, emergency care and pain management units, the emergency clinic and units for psychiatry; surgery; ear, nose and throat; obstetrics and gynaecology; orthopaedics and traumatology; ophthalmology; and oral and maxillofacial diseases.

The operating expenses of the Conservative Care and Operative Care Subdivisions in 2009 were EUR 192 million and EUR 165 million, respectively.

The hospitals of Turku University Hospital have about 120 inpatient and outpatient wards altogether, with 867 at the beginning of 2010.

Turku University Hospital received about 102,000 patient referrals in 2009 but treated nearly 120,000 different individuals, because many patients visit outpatient clinics without a referral.

The number of treatment periods and of patient days has decreased in recent years and the number of outpatient appointments has increased as a result of systematic shifts in operating focus. Figures for the first quarter of 2010 indicate that this trend is continuing in the present year.

The number of surgical procedures has decreased somewhat in recent years, due to

a substantial decline in the number of surgery requiring inpatient care. In 2009, the number of ambulatory surgery procedures was up 7% on 2008, and the trend is expected to continue.

The discontinuing of deliveries at Loimaa Regional Hospital at the beginning of 2009 caused a clear increase in the number of births at Turku University Hospital: 4,112 births were recorded in 2009 as opposed to 3,992 in 2008.

## Paimio Hospital, Raisio Hospital and the Surgical Hospital

In April 2010, the pulmonary medicine clinic transferred all its functions from Paimio Hospital to newly completed premises at the T Hospital in Turku. In the process, one outpatient clinic and one inpatient ward were discontinued. The pulmonary medicine clinic at the T Hospital now has three outpatient clinics and a total of 48 beds in two wards.

Paimio Hospital continues to run a rheumatology outpatient clinic, ward and operating theatre, a rehabilitation department and outpatient clinic, a laboratory, an X-ray unit, a psychiatry department and a pharmacy.

The separate surgical and internal medicine wards at Raisio Hospital were merged into a joint ward in autumn 2009. The beds removed as a result of the merger were rented out to the basic health care services of the Town of Raisio. The new joint ward has 30 beds for internal medicine patients and 10 beds for surgical patients. The beds may be flexibly reallocated according to demand.

In addition to the joint ward, Raisio Hospital has a joint surgery and internal medicine outpatient clinic, an operating theatre, a laboratory, an X-ray unit and a pharmacy.

The Surgical Hospital houses most of the orthopaedics and traumatology clinic, an X-ray unit and a laboratory. The hospital has three orthopaedics wards, an outpatient clinic, an operating theatre and one surgical ward. Turku City Hospital and the main health centre of the City of Turku are located in the same area as the Surgical Hospital.

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#### The T Hospital is the largest investment

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Investments at Turku University Hospital have increased greatly in recent years, mainly because of construction at the T Hospital.

The new seven-storey D wing of the T Hospital was inaugurated in May 2009. The addition of two new storeys to B wing was completed at the beginning of 2010. There are three other additions forthcoming to the T Hospital, to be completed by the end of 2012.

Once finally completed, the T Hospital will have 108,000 sq.m of floor area and nearly 2,000 employees. The construction work and equipment acquisition of the enlargement will cost about EUR 200 million in all.

The T Hospital will house the joint emergency services for basic health care and specialist medical care in the Turku area. It will also house demanding acute treatment functions such as the treatment of neurology, surgery, cardiology and oncology patients and accident victims.

Once the T Hospital is completed, some of the older treatment facilities of Turku University Hospital will be decommissioned.

Turku University Hospital is now preparing for a substantial reorganization based on the lines of treatment to be introduced at the T Hospital. This new organization will be in place from the beginning of 2013.

#### FINANCIAL INDICATORS (EUR)

	2007	2008	2009	2010 *
Operating income	356 073 523	384 162 516	416 166 997	413 310 100
Operating expenses	334 563 832	360 427 567	394 187 123	390 350 400
Investment cash flow (net)	20 925 742	37 037 550	43 402 883	53 700 000

#### OPERATING INDICATORS

	2007	2008	2009	2010 *
Treatment periods	59 262	58 742	57 691	58 169
Patient days	263 193	250 931	243 142	245 439
Inpatient surgery	20 346	19 871	18 649	19 600
Outpatient appointments	410 969	431 949	445 811	428 260
Ambulatory surgery	9 852	9 823	10 503	10 700
Surgical procedures total	30 198	29 694	29 152	30 300

\*) Budget target 2010

# TYKS Vakka-Suomi Hospital

Located in Uusikaupunki, Vakka-Suomi Hospital is a regional specialist medical care unit like Loimaa and Salo Regional Hospitals and Turunmaa Hospital.

Vakka-Suomi Hospital serves a population of about 33,000 in its catchment area. However, due to the large amount of holiday housing in the region, this can increase to more than 50,000 in the summer. There are some 190 employees at the hospital, 140 of them the hospital's own personnel and the rest employed by other divisions of the Hospital District.

Vakka-Suomi Hospital has 58 beds, 30 for surgical patients and 28 for internal medicine.

The following specialist medical services are provided in outpatient care: surgery, internal medicine, obstetrics, pae-

diatrics, ophthalmology, otology, oncology, rheumatic care, neurology, pulmonary medicine and psychiatry. The hospital also has a gastroenterology unit, a cardiology unit, a dialysis unit, an emergency clinic, a laboratory and an imaging service.

The emergency clinic at Vakka-Suomi Hospital manages joint emergency services in evenings, on weekends and on public holidays for the health centres of Kustavi, Laitila, Pyhäranta, Taivassalo, Uusikaupunki and Vehmaa.

In 2009, the hospital received 8,129 referrals and treated 15,671 individuals. The number of referrals increased by 6% on the previous year, but the number of individual patients remained almost the same. The number of treatment periods increased by 5%, but the average length of a treatment

period in inpatient wards decreased by a few per cent on 2008.

The number of both inpatient and ambulatory surgical procedures increased by about 3% on the previous year in 2009.

The average waiting time for surgical procedures at Vakka-Suomi Hospital decreased from 2 to 1.7 months in 2009. During the year, only two patients had to wait for a surgical procedure for more than six months because of reasons due to the Hospital.

## FINANCIAL INDICATORS (EUR)

	2007	2008	2009	2010*
Operating income	17 705 572	18 006 299	16 984 355	17 693 000
Operating expenses	16 434 518	16 998 177	16 693 530	16 742 000
Investment cash flow (net)	463 031	2 739 924	277 978	320 000

## OPERATING INDICATORS

	2007	2008	2009	2010*
Treatment periods	3 237	3 265	3 433	3 350
Patient days	17 019	14 162	14 510	13 760
Inpatient surgery	815	919	943	840
Outpatient appointments	32 169	45 101	45 735	43 270
Ambulatory surgery	767	862	889	860

\*) Budget target 2010

# Salo Regional Hospital

Salo Regional Hospital produces specialist medical care services in its catchment area, which has a population of about 80,000.

There are some 410 employees at the hospital, 290 of them the hospital's own personnel and the rest employed by other divisions of the Hospital District.

The hospital has both outpatient and inpatient wards in the following specialities: internal medicine; surgery; paediatrics; ear, nose and throat; and obstetrics and gynaecology. Only outpatient care is available in the following specialities: neurology; ophthalmology; pulmonary medicine; physiatry; and oncology. The hospital maintains a 24/7 specialist medical care emergency clinic. There are 145 beds.

Demand for the services of the Salo

Regional Hospital increased slightly in 2009; the hospital received 15,481 referrals and treated 18,766 individuals.

The number of treatment periods and patient days at the hospital decreased on the previous year in 2009, but the number of outpatient appointments and ambulatory surgical procedures increased. The average length of a treatment period decreased by 6%. The number of births recorded was 755, a substantial 20% increase on the previous year. This increase is explained by the discontinuing of deliveries at Loimaa Regional Hospital as of 1 January 2009 and the transfer of births in the Loimaa region to Salo.

The average waiting time for a surgical procedure at Salo Regional Hospital

decreased from 1.9 months to 1.4 months in 2009. At the beginning of 2010, no patient had had to wait for treatment for more than the statutory maximum of six months.

Salo Regional Hospital currently has a new hospital building under construction and is renovating its existing facilities. The new building will house up-to-date facilities for joint emergency services, outpatient wards, operating theatres and a new observation unit. The new facility was introduced in May 2010.

The construction project, to be completed in 2010, will cost a total of EUR 20 million, of which EUR 15.5 million for the new building.

## FINANCIAL INDICATORS (EUR)

	2007	2008	2009	2010*
Operating income	33 522 488	32 976 293	31 115 711	33 213 600
Operating expenses	31 472 599	33 586 489	30 207 845	31 839 600
Investment cash flow (net)	1 743 075	5 318 367	12 456 143	7 410 000

## OPERATING INDICATORS

	2007	2008	2009	2010*
Treatment periods	8 699	8 325	8 025	8 120
Patient days	36 004	32 679	29 639	29 570
Inpatient surgery	2 393	2 433	2 104	2 100
Outpatient appointments	54 883	55 796	58 262	54 750
Ambulatory surgery	982	1 016	1 176	1 300

\*) Budget target 2010

# Loimaa Regional Hospital

Loimaa Regional Hospital serves a population of about 85,000. In addition to the municipalities in its catchment area, its services are used by certain nearby municipalities that actually belong to the Hospital Districts of Satakunta, Kanta-Häme and Pirkanmaa.

There are some 300 employees at the hospital, 240 of them the hospital's own personnel and the rest employed by other divisions of the Hospital District.

The hospital has one surgical ward which also treats obstetrics patients, one internal medicine ward and one multi-purpose ward for patients requiring specialist care in internal medicine and surgery and for patients requiring enhanced supervision. There are 92 beds.

The hospital provides outpatient care in the following specialist fields: paediatrics; otology; oncology; neurology; pulmonary medicine; and physiotherapy. The hospital also has a laboratory, an X-ray

unit, an ambulatory surgery unit, a dialysis unit and a 24/7 emergency clinic.

In 2009, the Loimaa Regional Hospital received 8,495 referrals and treated 14,515 individuals. The number of referrals decreased by 7% on the previous year, but the number of individual patients increased by some 2%.

During 2009, the average waiting time for a surgical procedure decreased from 1.6 months to 1 month. During the year, only two patients had to wait for a surgical procedure for more than six months because of reasons due to the Hospital.

Deliveries were discontinued at Loimaa Regional Hospital as of 1 January 2009, and births in the Loimaa region were transferred mainly to the TYKS Hospital but also to Salo Regional Hospital. The discontinuing of deliveries reduced the number of treatment periods at the hospital by about 300 and the number of patient days by about 800.

In recent years, the number of treatment periods, patient days and inpatient surgical procedures at the hospital have been decreasing. This is partly due to the fact that municipalities in the Loimaa region have not been sending as many patients for inpatient care. A shortage of physicians and the aforementioned discontinuing of deliveries have also contributed to the trend.

The average length of treatment periods in inpatient wards has decreased in recent years and is now just under 5 days.

Loimaa Regional Hospital has recently invested in renovating its buildings. The renovation of the surgical ward was completed in 2009, and the emergency clinic is being renovated during 2010. These renovations support the hospital's aim of shifting its focus from inpatient care to outpatient care and ambulatory surgery.

## FINANCIAL INDICATORS (EUR)

	2007	2008	2009	2010*
Operating income	21 719 996	22 932 577	22 437 836	24 428 900
Operating expenses	21 747 518	22 255 514	20 506 568	23 348 100
Investment cash flow (net)	403 627	793 669	1 393 641	1 140 000

## OPERATING INDICATORS

	2007	2008	2009	2010*
Treatment periods	5 166	4 905	4 108	4 300
Patient days	27 634	24 422	20 333	23 100
Inpatient surgery	1 296	1 318	986	1 300
Outpatient appointments	38 662	38 601	38 784	40 710
Ambulatory surgery	1 492	1 300	1 358	1 500

\*) Budget target 2010

# Turunmaa Hospital

Turunmaa Hospital has been a municipal public utility since the beginning of 2006. It provides specialist medical care services to its own catchment area, serving a population of about 23,000 in Länsi-Turunmaa and Kemiönsaari, and to many other municipalities in Southwest Finland. Being a fully bilingual hospital, it is much favoured by the Swedish-speaking population. The hospital has about 150 employees.

Turunmaa Hospital has inpatient wards for internal medicine, surgery and gynaecology, an ambulatory surgery ward and an operating theatre.

Outpatient wards are available in internal medicine, surgery, pulmonary medicine, paediatrics, gynaecology, ophthalmology, otology and psychiatry. The hospital also has a laboratory and an imaging unit.

Turunmaa Hospital also runs a psychiatry unit at Parainen in Länsi-Turunmaa. This unit has a children's, adolescent and

adult psychiatry outpatient ward, a 20-bed inpatient ward and a rehabilitation unit.

In 2009, the hospital received 7,253 referrals and treated 9,813 individuals. Measured by these indicators, the demand for services grew by 5% to 7%.

The hospital provides some 1,900 treatment periods in somatic care and 230 in psychiatric care per annum. In 2009, the average treatment period decreased to 4.6 days in somatic care but increased slightly, to 18 days, in psychiatric care.

The number of surgical procedures has remained stable in recent years. All hospital services were provided within the statutory time limits.

Turunmaa Hospital is focusing increasingly on outpatient care and ambulatory surgery. The number of beds is being reduced. Ambulatory surgery and inpatient care are being concentrated into concise units where treatment processes can be managed smoothly and efficiently.

To improve its operations, the hospital intends to restructure its facilities in the near future. Net investments will remain relatively low, as the hospital receives substantial outside funding.

## FINANCIAL INDICATORS (EUR)

	2007	2008	2009	2010*
Turnover	10 137 231	12 000 217	11 874 233	11 927 400
Operating income total	11 161 797	13 022 087	13 059 073	13 096 600
Operating expenses total	11 233 563	12 634 345	12 962 656	13 060 400
Operating surplus (deficit)	-71 767	387 742	96 416	36 200
Investment cash flow (net)	206 831	-195 233	24 965	50 000

## OPERATING INDICATORS

	2007	2008	2009	2010*
<b>Somatic care</b>				
Treatment periods	2 000	1 976	1 868	1 955
Patient days	9 822	9 866	8 514	9 215
Inpatient surgery	857	885	886	880
Outpatient appointments	19 025	20 789	21 243	22 800
Ambulatory surgery	1 291	1 454	1 408	1 450
<b>Psychiatric care</b>				
Treatment periods	232	244	226	230
Patient days	3 621	4 167	4 090	4 000
Outpatient appointments	8 975	8 903	9 868	8 960

\*) Budget target 2010

# Tyks-Sapa

The Tyks-Sapa public utility belonging to the Hospital District of Southwest Finland began operations on 1 January 2009. It was created by merging the Tykslab public utility; the Turku University Hospital clinical neurophysiology and pathology units; the Southwest Finland imaging centre; Pharmacy, Southwest Finland; Instrument Maintenance, Southwest Finland; and all personnel involved in instrument maintenance throughout the Hospital District. The merged units were formed into six divisions within Tyks-Sapa, each with its own directors, customer contacts and personnel.

The Tyks-Sapa public utility is run by a Board of Directors to which the Council of the Hospital District appoints eight representatives of member municipalities and the University of Turku appoints one member. There are also representatives appointed by the personnel and the Board of Directors of the Intermunicipal Hospital District on the board. The public utility employs some 870 people.

The Tyks-Sapa public utility provides medical care services for actors in the health care sector. Most of its turnover consists of internal sales to hospitals and other units in the Hospital District. Health centres in the region account for 20% of sales on average. Tyks-Sapa has separate managers for research and teaching.

According to the target set by the Council, Tyks-Sapa operates on a non-profit principle. In order to attain this target, Tyks-Sapa paid its municipal customers a total of EUR 1.4 million in customer rebates in 2009. However, even after this the accounts showed a surplus of EUR 1.4 million, and accordingly the budget for 2011 could be drawn up showing a deficit. Therefore, Tyks-Sapa will be able to improve its productivity through restructuring during 2011.

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## TYKSLAB

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Set up at the beginning of 2004, Tykslab is a unit which sells laboratory services and comprises the laboratories of the Main Hospital of Turku University Hospital, Salo and Loimaa Regional Hospitals, the Vakka-Suomi, Turunmaa, Paimio and Raisio Hospitals, Turku City Hospital, the primary health care sector of the City of Turku, and five other health centres. The unit has about 340 employees.

Tykslab has 33 laboratories; customers may themselves decide where to go to give their samples. The results are sent to the treatment facility that sent the test request. Patients with an appointment are admitted at the agreed time without queuing. Appointments can be booked by phone or online.

Tykslab has expertise in clinical chemistry, microbiology and pharmacology.

Tykslab performs about 5 million tests each year.

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## Medical Imaging Centre of Southwest Finland

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The Medical Imaging Centre of Southwest Finland (VSKK) was formed by merging the medical imaging units of Turku University Hospital, the regional hospitals and the health centres of Turku and certain other municipalities into a single organisation.

The Medical Imaging Centre of Southwest Finland offers imaging examinations to hospitals and health centres in the Hospital District and to certain other public institutions such as universities and the Defence Forces, and also to a number of private customers.

The Centre has 60 examination rooms at 14 locations and some 290 employees, and also undertakes examinations and procedures

in inpatient wards, using portable equipment. The Centre has 26 X-ray imaging devices, six CT scanners, five X-ray screening devices, four MRI scanners and a mammography scanner. Ultrasound examinations are conducted in 12 examination rooms and in inpatient wards.

The Centre conducts nearly 300,000 imaging examinations per annum, about three quarters of them involving X-ray imaging. The number of X-rays has been systematically cut down, and the number of MRI scans increased. Extra capacity has been sourced from the PET Centre and from a private supplier.

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## Pharmacy, Southwest Finland

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From the beginning of 2007, the Turku University Hospital pharmacy and the dispensaries of the regional hospitals were combined into a single profit centre entitled Pharmacy, Southwest Finland. Pharmacy, Southwest Finland has about 60 employees.

It serves more than 800 customer units, most of which belong to the Hospital District, and delivers about 3.7 million drug packages per annum to its customers.

The hospital pharmacy at Turku University Hospital stocks nearly 9,000 different drug preparations. Also, the Pharmacy produces more than 50,000 preparations of its own each year, including injections, infusions, eye and nose drops, other sterile solutions, allergy tests, powders, capsules and creams. In 2008, the hospital pharmacy at Turku University Hospital prepared more than 23,000 individual doses of cytotoxic drugs for cancer treatment.

The hospital pharmacy at the Turku University Hospital is responsible for organising centralised competitive tendering for pharmaceutical acquisitions in the Hospital Districts of Southwest Finland and Satakunta,

and Ålands hälso- och sjukvård; this has resulted in considerable savings.

In the near future, a new building will be built for Pharmacy, Southwest Finland adjacent to the T Hospital. The new centre is estimated to be completed in 2011 and will have about 3,900 sq.m of floor area.

### Clinical neurophysiology

The clinical neurophysiology division conducts tests on individual patients on referral from a physician to diagnose disorders of the nervous system, the muscular system, alertness and the sensory system and to monitor their treatment. The division employs 21 people.

The tests concern disorders of consciousness, epilepsy, localised neural trauma and nerve compression, among other things. Other tests conducted include electroencephalography (EEG), electroneuromyography (ENMG), sleep and alertness tests, and evoked potential tests.

### Pathology

The duties of the pathology division include the preparation of cytological and histological microscope samples and diagnostics based on them. The pathology laboratory also performs autopsies and specialist pathological tests such as immunohistochemistry tests, in situ hybridization tests, flow cytometry DNA analyses, and electron microscopy examinations. The pathology division has about 50 employees.

The division processes between 45,000 and 50,000 patient tests per year: about 23,000 tissue samples, 15,000 cell samples and 11,000–12,000 specialist and further analyses. Also, the pathologists perform about 350 clinical autopsies annually to confirm diagnoses.

### Instrument maintenance

Instrument Maintenance, Southwest Finland produces cleaned, disinfected or sterilised instruments and instrument packages for the use of customers and provides advice and training on instrument maintenance.

The division operates at 22 locations at hospitals in the Hospital District and also has three instrument maintenance centres; the total number of personnel is about 100.

### FINANCIAL INDICATORS (EUR)

	2009	2010*
Turnover	118 192 973	117 488 600
Operating income total	121 404 621	120 705 200
Operating expenses total	119 816 858	121 344 700
Operating surplus (deficit)	1 587 763	-639 500
Investment cash flow (net)	1 409 125	985 000

\*) Budget target 2010

### OPERATING INDICATORS

	2009
<b>TYKSLAB</b>	
Number of samples taken	740 600
Clinical chemistry tests	3 260 746
Clinical microbiology tests	357 205
Laboratory haematology tests	1 027 384
<b>Medical Imaging Centre of Southwest Finland</b>	
Native imaging (X-ray)	219 785
Ultrasound examinations	27 369
CT scans	25 171
MRI scans	9832
Angiography	916
Outsourced examinations	8 677
<b>Pharmacy, Southwest Finland</b>	
Pharmacy orders from customers	9 500 000
Deliveries	370 000
Own preparations (dispensation units)	80 000
<b>Clinical neurophysiology</b>	
Examinations total	6 700
<b>Pathology</b>	
Tissue samples	22 442
Cell samples	14 233
Autopsies	334
<b>Instrument maintenance</b>	
Performances by instrument maintenance centres	289 829

# Psychiatry Division

The Hospital District of Southwest Finland concentrated its Finnish-language specialist medical care in psychiatry in the Psychiatry Division as of the beginning of 2006. The Psychiatry Division provides children's psychiatry, adolescent psychiatry and adult psychiatry services in a decentralized manner, near the homes of the users.

The division operates at seven locations, most of them outpatient clinics or day wards. Inpatient wards are available in Turku, Salo and Uusikaupunki. The division has 565 employees, of which 9 in the children's and adolescents' forensic psychiatry unit.

The Psychiatry Division of the Hospital District of Southwest Finland aims to be the mental health service provider with the highest percentage of outpatient care in Finland. The division has systematically converted psychiatry treatment practices from institutional care to outpatient care. Accordingly, the number of inpatient wards and beds has been reduced systematically, and the resources thus freed have been transferred to outpatient care. The division has eliminated 73 beds in the past three years.

In 2009, 50 beds were eliminated in the Psychiatry Division. These consisted of 22 beds from the transfer of the geriatric psychiatry unit at Halikko Hospital to the Town of Salo, 18 beds from the reorganization of the rehabilitation service sector, 8 beds from the conversion of the Loimaa unit to outpatient care, and 2 beds from the reorganization of the child psychiatry units. At the end of 2009, there were 167 beds in the Psychiatry Division.

With these changes, the number of treatment periods and patient days in psychiatry has decreased substantially. At the same time, outpatient services have been developed to meet the needs of the population better; for instance, access to treatment is now quicker, and more home services are provided.

The number of outpatient appointments in specialist medical care has decreased because some of the outpatient care in adult psychiatry in Salo and Turku has been converted to basic medical care.

The average length of a treatment period in inpatient care has continued to decrease, being just under 22 days in 2009.

The investigation on abandoning the Halikko Hospital facility and relocating the beds, begun in 2008, was continued in 2009; accordingly, Halikko Hospital undertook no major investments during the year. The centralization of patient care in two buildings caused some minor investment expenses.

In the A building in Uusikaupunki, renovation of premises freed up by other functions was continued to prepare for the child psychiatry family unit and outpatient clinic; also, the windows of the A building were replaced and its heating system readjusted to reduce heating expenses.

## Psychiatry Division locations and services:

### Kaarina

- children's, adolescent and adult psychiatry outpatient wards
- adult psychiatry day and rehabilitation unit

### Lieto

- children's, adolescent and adult psychiatry outpatient wards

### Loimaa

- children's, adolescent and adult psychiatry outpatient wards
- adult psychiatry day unit

### Raisio

- children's, adolescent and adult psychiatry outpatient wards

### Salo

- adolescent and adult psychiatry outpatient wards
- adult psychiatry day unit
- adult psychiatry crisis clinic and outpatient ward
- Halikko Hospital
  - children's psychiatry outpatient ward and day unit
  - adult psychiatry acute wards
  - adult psychiatry rehabilitation clinic and ward
  - geriatric psychiatry clinic and ward

### Åbo

- children's psychiatry inpatient ward
- children's and adolescent psychiatry outpatient wards
- adolescent psychiatry examination and treatment ward
- adolescent psychiatry crisis clinic and reception ward
- adult psychiatry crisis clinic and ward, addiction outpatient ward and neuropsychiatry outpatient clinic

### Uusikaupunki

- children's psychiatry outpatient ward and family unit
- adolescent psychiatry outpatient ward
- adult psychiatry outpatient ward
- adult psychiatry examination and treatment ward
- adult psychiatry rehabilitation unit
- geriatric psychiatry ward

## FINANCIAL INDICATORS (EUR)

	2007	2008	2009	2010*
Operating income	41 211 042	46 066 582	37 734 842	43 736 400
Operating expenses	39 108 872	42 482 947	40 343 382	43 567 200
Investment cash flow (net)	773 224	500 519	1 007 340	680 000

## OPERATING INDICATORS

	2007	2008	2009	2010*
Treatment periods	3 162	2 948	2 373	2 240
Patient days	72 639	67 532	51 376	55 067
Outpatient appointments	101 386	106 814	98 561	117 630

\*) Budget target 2010

# Elected bodies of the Hospital District of Southwest Finland 2009

## COUNCIL

The intermunicipal council assembled three times in 2009.

Chairman Pentti Huovinen, 1st Vice Chairman Eero Kuisma, 2nd Vice Chairman Petri Aaltonen.

<b>Member municipality</b>	<b>Member</b>	<b>Deputy member</b>	<b>Member municipality</b>	<b>Member</b>	<b>Deputy member</b>
Aura	Markku Kalm until 18.5.2009 Hanna Komu as of 18.5.2009 Hannele Tanner-Penttilä	Arvo Laakso  Susanna Nyberg-Simola	Punkalaidun	Ritva Koivula Pasi Siukola	Anna-Liisa Kouvo Antti Haapaniemi
Kaarina	Arto Degerholm Petri Asklöf Paula Hakala Olli Vuorinen	Jarkko Järvinen Tuomo Laine Silja Ristimella Kari Friman	Pyhäranta	Asko Tanhuanpää Mervi Tattari	Arja Numme Matti Ylikleemola
Kimitoön	Carola Antskog Jari Lehtivaara	Sven-Erik Kinos Annika Qwarfordt	Pöytyä	Ilmo Helttula Mirjami Flemmich	Tiina Säylä Reijo Viiri
Koski Tl	Heikki Pietilä Marja Mattila	Juhani Hörkkö Riitta Honkala	Raisio	Reija Pitkänen Sanna Peltonen	Martti Matintalo Jaana Vähätalo Maarit Salminen until 18.5.2009 Anneli Kivijärvi as of 18.5.2009
Kustavi	Antti Ääritalo Eero Kuisma Minna Reunanen Virve Aho	Jarmo Mäntynen Helvi Kähkölä Pirkko Vuorinen Jarkko Männistö	Rusko	Aarre Lehtonen Jouko Dietrich Kirsti Tuominen	Aimo Koskela Jari Rusanen Marianne Leino
Laitila	Arja Niemelä Jaakko Heininen Mari Lindroos	Mari Leppänen Juhani Hirsimäki Marja-Leena Nummelin	Salo	Juha Punta Minna Valjanen Asmo Ojanperä Pirjo Virtanen	Tuomo Erkkola Sini Laakkio Liisa Kirjavainen Timo Tammi
Lieto	Arja Niemelä Jaakko Heininen Mari Lindroos	Mari Leppänen Juhani Hirsimäki Marja-Leena Nummelin	Sauvo	Jaakko Kivisaari Marita Tuovinen	Elise Anttalainen-Kulmala Eeva-Kaarina Sundberg
Loimaa	Lauri Poso Petri Aaltonen Elina Kankainen	Matti Ristolainen Riitta Soro Simo Rantala	Somero	Mauri Salo Pia Maavirta Harri Kurttila	Mirja Rouhiainen Eero Manni Jonna Siltanen
Marttila	Juhani Tynjälä Marja-Leena Nystedt	Hannu Koskinen Satu Mäki	Taivassalo	Jorkka Lehtonen	Arja Lehtonen
Masku	Mika Raukunen Eeva Järvilahti Pirjo Liitola	Pirkko Helenius Petri Nurmi Jarmo Sillanpää	Tarvasjoki	Minna Hallanheimo	Pauliina Seppä
Mynämäki	Esko Lehtonen Kirsi Järvi Eeva Strand	Sakari Kaasinen Päivi Punta Hilkka Kaplas	Turku	Pentti Huovinen Seppo Koski Heikki Pälve Frans Schaper Marja Vyyryläinen	Katriina Kerttula Jari Suominen Markku Knuutila Kati Laine Merja Nurmio
Naantali	Saku Lamminen Elina Salokangas Martti Sipponen	Juhani Vaaranen Anne Linja Usko Suominen	Uusikaupunki	Antti Haapavuori Sirikka Mikkola Oili Suikkanen	Pirkkoliisa Heino Markku Tuominen Tenho Soini
Nousiainen	Riitta Kairi Alpo Penttinen	Ari Leino Susanna Salonen	Vehmaa	Riitta Luotonen Teuvo Manner	Helke Korpela Mariella Pyhäranta
Oripää	Tuulikki Lankinen	Susanna Salonen	Västaboland - Länsi-Turunmaa	Kurt Kronehag Carola Selin Tiina Johansson	Ole Åberg Monica Forss Eskil Engström
Paimio	Anja Halinen Tuula Ikuli Reijo Hallisto	Anne-Mari Kaarto Anette Kittilä Jukka Hongisto Mia Huhtala	University of Turku	Juha Peltonen Markku Sutinen	Marko Salmi Meri Louhi

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## THE BOARD AND THE SECTIONS REPORTING TO THE BOARD

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### BOARD 2009

Chairman

I Vice Chairman

II Vice Chairman

Members

### Member

Virpa Puisto

Jaakko Ossa

Jukka Kärkkäinen

Raimo Honkanen

Maria Puhakka

Pirjo Reide

Lasse Virtanen

Anneli Kivijärvi

Matti Lehtinen

Seppo Lehtola

Antti Toivonen

Riitta Karjalainen

Anna-Liisa Koivisto

Mauri Salo

Pentti Aitamurto

Tuija Ollikkala

Ole Åberg

Sanna-Mari Tammilaakso

Matti K. Viljanen until 30.11.2009

Harri Lönnberg as of 1.12.2009

Janne Sjölund

### Deputy member

Ruth Hasan

Alpo Penttinen

Alpo Lähteenmäki

Katri Karimo

Pirjo Ranti

Jukka Nuoranne

Pauli Kurkilahti

Irja Gustafsson

Ari Hellsten

Sirpa Koskinen

Mikko Sedig

Jari Jussimäki

Mirjam Karila

Hannu Junnila

Ritva Lehtonen

Niina Virranheimo

Tarja Rinne

Sirpa Jalkanen

Olli Lassila

Personnel representative

### ADMINISTRATIVE SECTION 2009

Chairman

Vice chairman

Members

### Member

Jaakko Ossa

Anna-Liisa Koivisto

Anneli Kivijärvi

Antti Toivonen

Jukka Kärkkäinen

Raimo Honkanen

Maria Puhakka

Jussi Rantanen

### Deputy member

Lasse Virtanen

Mirjam Karila

Tuija Ollikkala

Ruth Hasan

Ritva Lehtonen

Pauli Kurkilahti

Jukka Nuoranne

Personnel representative

### BUILDING SECTION 2009

Chairman

Vice chairman

Members

### Member

Mikko Sedig

Pirjo Reide

Seppo Lehtola

Sanna-Mari Tammilaakso

Alpo Lähteenmäki

Lasse Virtanen

Mauri Salo

Markku Lähteenmäki

### Deputy member

Anneli Kivijärvi

Maria Puhakka

Matti Lehtinen

Matti K Viljanen until 22.12.2009

Harri Lönnberg as of 22.12.2009

Pentti Aitamurto

Raimo Honkanen

Riitta Karjalainen

Personnel representative

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## BOARDS

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### LOIMAA REGION SUBDIVISION BOARD 2009

Chairman

Vice chairman

Members

Intermunicipal Board representative

Personnel representative

#### Member

Jarmo Rasi

Arvo Laakso

Tuulikki Lankinen

Seppo Solla

Kari Haapanen

Marita Jokinen

Tiina Riuttamäki

Jouko Vähä-Rahka

Auli Guevara

Matti Lehtinen

Sirpa Launonen

#### Deputy member

Reijo Viiri

Juha Lalli

Pirjo-Liisa Nuotio

Riitta Soro

Matti Metsistö

Leila Tamminen

Taina Haavisto

Merja Rouvali

Sampsa Heinonen

Pentti Aitamurto

### SALO REGION SUBDIVISION BOARD 2009

Chairman

Vice chairman

Members

Intermunicipal Board representative

Personnel representative

#### Member

Marita Tuominen

Antero Leppänen

Päivi Isotalo

Tatu Johansson

Jaakko Nieminen

Jaana Latva-Äijö

Jouni Eskola

Tuire Kukko

Wilhelmiina Kallio

Raimo Honkanen

Elina Lietzén

#### Deputy member

Hanna Koivisto

Pekka Gustafsson

Minna Pentti

Eino Nygren

Sami Heikkiniemi

Jonna Siltanen

Jani Mussaari

Leila Koskinen

Leena Halonen

Hannu Junnilla

### TURUNMAA SUBDIVISION BOARD 2009

Chairman

Vice chairman

Members

Intermunicipal Board representative

Personnel representative

#### Member

Ole Åberg

Ilkka Heinaro

Ritva-Leena Ehrnström

Ingmar Forne

Bengt Backman

Kurt Kronehag

Carola Selin

Barbro Sulonen

Inger Wretdal

Tuija Ollikkala

Sanna Kaukovalta

#### Deputy member

Jim Willberg

Monica Eriksson

Marja-Leena Engström

Knut-Mikael Hellbom

Leif Blom until 1.8.2009

Folke Andersson as of 24.11.2009

Yngve Mattson

Gunilla Sandelin

Kerstin Lindholm

Johanna Jansson

Jukka Kärkkäinen

### TYKS-SAPA BOARD 2009

Chairman

Vice chairman

Members

Intermunicipal Board representative

Managing Director

Personnel representative

#### Member

Irja Gustafsson

Jaakko Ossa

Matti Ankelo

Pirjo Liitola

Ruth Hasan

Janne Aso

Kari Lehtola

Auli Guevara

Jussi Mertsola

Mauri Salo

Olli-Pekka Lehtonen

Marita Jauhainen

#### Deputy member

Martti Sipponen

Alpo Penttinen

Jukka Nuoranne

Maria Puhakka

Susanne Hakala

Elina Kelonimi-Hurttila

Risto Soukka

Tepa Ahonen

Pauli Puolakkainen

Niina Virranheimo

Anri Tienhaara

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## OTHER ELECTED BODIES

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### MINORITY LANGUAGE COMMITTEE 2009

Chairman  
Vice chairman  
Members

#### Member

Björn Taxell  
Risto Nurmela  
Sven Forsell  
Gunilla Sahlberg  
Ritva-Leena Ehrnström  
Christjan Brander  
Monica Forss  
Camilla Sonntag-Wilenius  
Carola Antskog  
Ruth Hasan  
Ulla Widjeskog

#### Deputy member

Wilhelm Liljeqvist  
Kurt Tuominen  
Sebastian Lagerlöf  
Eva-Stina Hellbom  
Anita Tuominen  
Kim Lindsted  
Merja Fredriksson  
Anna Relanto  
Kerstin Lindholm

Intermunicipal Board representative  
Personnel representative

### TURUNMAA MINORITY LANGUAGE DIVISION 2009

Chairman  
Vice chairman  
Members

#### Member

Marjaana Hoikkala  
Anna Filatoff  
Lauri Ekbohm  
Pirjo Johansson  
Esko Antikainen

#### Deputy member

Mauno Rajala  
Hanna Järvinen  
Sirpa Nieminen  
Ilkka Hamunen  
Kauko Pietikäinen

### AUDIT COMMITTEE AND AUDITOR 2009

Chairman  
Vice chairman  
Members

#### Member

Juha Punta  
Minna Hallanheimo  
Kari Friman  
Piki Kettinen  
Merja Nurmio  
Martti Sipponen  
Leena Ronkamo

#### Deputy member

Jarmo Sillanpää  
Reijo Hallisto  
Antti Ääritalo  
Pia Maavirta  
Marja Vyyryläinen  
Jarkko Järvinen  
Seija Liinoja

Auditor  
Intermunicipal Auditor

PwC Julkistarkastus Oy/Principal Chartered Public Finance Auditor Tomi Moisio  
Synnöve Niemi

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## LIST OF ACCOUNTABLE PARTIES

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### Accountable bodies

The Council and the Board of the Intermunicipal Hospital District of Southwest Finland have appointed the members for the following bodies, the members of which being accountable.

- The Audit Committee
- The Intermunicipal Board
- The Administrative Section of the Board
- The Building Section of the Board
- The Minority Language Committee
- Salo Subdivision Board
- Loimaa Subdivision Board
- Turunmaa Subdivision Board (public utility)
- Board of Public Utility of Health Care Related Services (TYKS-SAPA)

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### Accountable officeholders 31.12.2009

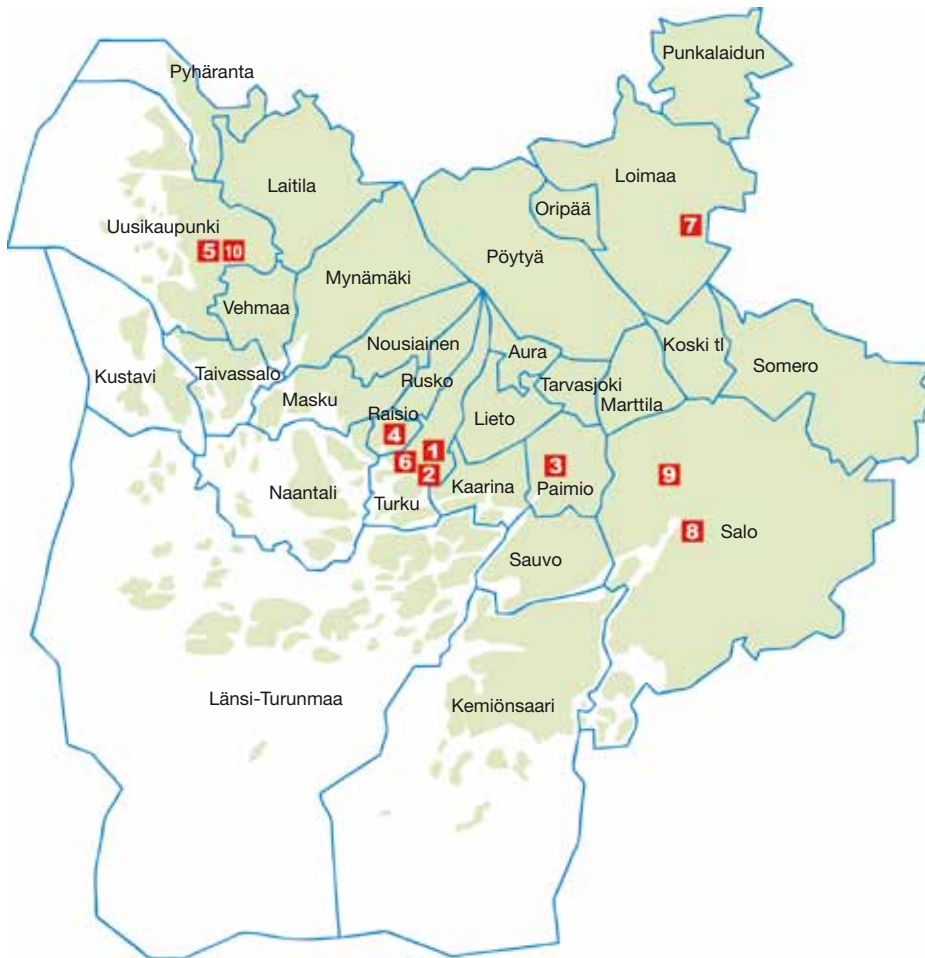
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Accountable members of the hospital district management team include the Chief Executive Officer of the Hospital District, the Medical Director of the Hospital District, the Executive Director of Nursing, the Chief Financial Officer, the Director of Administration, the Chief Personnel Officer, the Director of the Operative Care Division, the Director of the Conservative Care Division, the Director of the Division of Psychiatry and the Director of the Regional Specialized Health Care Division.

Other accountable officeholders reporting to the Intermunicipal Board are the Leading Director of Nursing of the Division of Psychiatry, the Director of Administration of the Division of Psychiatry, the Medical Director of TYKS Vakka-Suomi Hospital, the Chief of Economic Services, the Financial Manager, the Materials Manager, the Chief of IT Services, the Chief of Maintenance Services, the Chief Technical Officer, the Manager of the T Hospital Construction Project, the Chief of Procurements for the T Hospital Construction Project and the Functional Planning Manager of the T Hospital Construction Project.

Accountable officeholders on divisional level are the Medical Director, the Leading Director of Nursing and the Director of Administration of Salo Regional Hospital and the Loimaa regional Hospital, as well as the Managing Directors of the public utilities Turunmaa Hospital and the Tyks-Sapa public utility.

# Hospitals of the Hospital District of Southwest Finland



## 1 TYKS Main Hospital

Tel. +358 2 313 0000  
Postal address: P.O. Box 52, FI-20521 Turku  
Street addresses:  
A and U hospitals: Kiinamylynkatu 4-8  
T hospital: Hämeentie 11

## 2 TYKS Surgical Hospital

Tel. +358 2 313 0000  
Luolavuorentie 2, P.O. Box 28, FI-20701 Turku

## 3 TYKS Paimio Hospital

Tel. +358 2 313 0000  
Alvar Allon tie 275, FI-21540 Preitilä

## 4 TYKS Raisio Hospital

Tel. +358 2 313 0000  
Sairaalakatu 5, P.O. Box 43, FI-21201 Raisio

## 5 TYKS Vakka-Suomi Hospital

Tel. +358 2 314 1000  
Terveystie 2, P.O. Box 12, FI-23501 Uusikaupunki  
[www.vakkasuomensairaala.fi](http://www.vakkasuomensairaala.fi)

## 6 Turunmaa Hospital

Tel. +358 2 271 600  
Kaskenkatu 13, P.O. Box 663, FI-20701 Turku

## Psychiatric Unit

Tel. +358 2 454 5130  
Vapparintie 15, FI-26100 Parainen  
[www.abolandssjukhus.fi](http://www.abolandssjukhus.fi)

## 7 Loimaa Regional Hospital

Tel. +358 2 314 3000  
Seppälänkatu 15-17, P.O. Box 17, FI-32201 Loimaa  
[www.loimaanluesairaala.fi](http://www.loimaanluesairaala.fi)

## 8 Salo Regional Hospital

Tel. +358 2 314 4000  
Sairaalanatie 9, FI-24130, Salo  
[www.salonaluesairaala.fi](http://www.salonaluesairaala.fi)

## 9 Halikko Hospital

Tel. +358 2 314 5000  
Märyntie 1, FI-25250 Halikko

## 10 Uusikaupunki Psychiatric Hospital

Tel. +358 2 314 1000  
Välskärintie 2, 23500 Uusikaupunki

## Member municipalities of the Hospital District of Southwest Finland

Aura  
Kaarina (S:t Karins)  
Kemiönsaari (Kimitoön) \*  
Koski t.l (Koski åbl)  
Kustavi (Gustavs)  
Laitila (Letala)  
Lieto (Lundo)  
Loimaa  
Länsi-Turunmaa (Väståboland) \*  
Marttila (S:t Mårtens)

Masku  
Mynämäki (Virmo)  
Naantali (Nådendal)  
Nousiainen (Nousis)  
Oripää  
Paimio (Pemar)  
Punkalaidun  
Pyhäranta  
Pöytyä (Pöytis)  
Raisio (Reso)

Rusko  
Salo  
Sauvo (Sagu)  
Somero  
Taivassalo (Tövsala)  
Tarvasjoki  
Turku (Åbo) \*  
University of Turku  
Uusikaupunki (Nystad)  
Vehmaa (Vemo)

\*) Bilingual municipality