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Foreword

The majority of us will require help and services from the public services during our lives. This may be due to illness, a dysfunction of some kind, a difficult life situation or other changes in circumstances.

When the need for help arises it can be difficult to find out what services are available, what we have the right to and where to go. Neither is it always so easy to know how the services are designed and are to be implemented.

For these reasons we have produced this handbook, a guide to municipal health and social services – as a hopefully useful and informative guide.

Our aim is to provide you with an overview of the rights and obligations laid down in legislation governing health and social services and how to proceed in approaching your local government services in connection with applications, rulings and complaints/appeals.

The handbook provides an overview of the key services offered by the municipalities and the principles on which these are based.

The handbook was prepared by The Norwegian Directorate of Health, and this authority will also be responsible for updating the content of the handbook. The handbook will also be published on the Directorate of Health’s Internet pages.

I hope and trust that you will find the handbook useful when you need help and assistance in your daily life, that it will contribute to enhancing your experience in making contact simpler and more reassuring with the staff responsible for services in your municipality, that you receive the services you need, and, not least that you can participate in forming the services you need.

Best regards

Bjørne Håkon Hanssen
Minister of Health and Care Services
The book follows Kari and Per in the pink frames.

The handbook follows Kari and Per and focuses on a number of the questions they have with regard to which body provides which services as they progress through their lives. We meet Kari and Per in their twenties, when they have decided that they wish to share their lives.

Nina and Carlos are followed in the green frames.

We also meet Nina and Carlos when they are in their twenties. Nina met Carlos while she was on holiday on the Costa del Sol in Spain, and they have been together since. Spanish Carlos moved to Norway a couple of years ago.

**The aim of the handbook**

The handbook provides you with information about the health and social services the municipalities have a mandatory obligation to provide to the general public, and how you should proceed when seeking and applying for services.

The handbook presents an overview of the services provided together with your rights and obligations. At the back of the handbook you will find a list of organisations, telephone numbers and so forth where further and more detailed information can be obtained.

The handbook does not encompass the services offered by NAV (previously Aetat, the social security offices and sections of the municipal social services). More information on services supplied by NAV is available at www.nav.no or you can telephone the NAV office in your municipality. For information concerning financial support you can contact the social services (NAV) in your municipality.
When you have a need for health and social services, the municipality in which you live, either permanently or on a temporary basis, offers a range of services. These are organised differently and may vary from place to place, but regardless shall meet the needs of the individual on the basis of the regulations in force at one time. This handbook deals with the services available in the majority of municipalities in Norway. If you are uncertain as to whom you should contact, simply phone the municipality’s main switchboard.

The regular general practitioner arrangement
All persons registered as domiciled in a Norwegian municipality through the Register of Persons has the right to be listed with a regular general practitioner. This right also applies to asylum seekers and their families when they are members of the national insurance scheme. Your regular general practitioner offers services including medical examinations, prescriptions and when necessary will refer you to specialist health services.

Maternity and child health care centre
All municipalities have health centres for expectant mothers and for children from birth to school age. The service is designed to assist in helping infants in mastering and parents to master their parenting roles. The service offers advice, guidance, health checks, vaccinations and so forth. The service encompasses infants and young people up to the age of 20, expectant mothers and parents/guardians. The health centres shall have routines for cooperation with your regular general practitioner, with other municipal services and with specialist health services.

All children and young people have the right to medical health checks under the municipality’s services. Parents have an obligation to ensure that children attend such health checks.
Dentist/dental hygienist
All dentists and dental hygienists shall assist you in your dental care. You can choose to use the services of the dentist/dental hygienist of your choice. If you are in one of the priority groups (link to priority groups) you must contact the public dental health service as shown in detail here.

Voluntary Service Centres and other voluntary work
Many municipalities have a number of areas for voluntary work where one can contribute with voluntary work or receive assistance from voluntary workers. Many municipalities have established voluntary service centres with a variety of tasks for those who wish to contribute voluntarily to the betterment of their local communities. Such tasks are often helping with everyday errands and similar, for example taking someone to the doctor, hairdressers, post office and so forth. If you would like to help or learn more, please contact voluntary service centre in your municipality.

In many municipalities one will for example find senior citizen centres, group activities such as "exercise for the elderly" and social activities organised under the auspices of voluntary organisations (for example dementia organisations, ADHD organisations, diabetes organisations, COPD organisations etc). Call your municipality for details of organisations and groups in your area.
Municipalities have a general obligation to provide you with information and advice on the services offered. One of the aims of the municipal health and social services is to organise services so that the recipients of these have the best possible standard of life. The services shall provide stimulation and support the individual's own ability to master everyday life and situations.

The municipality is responsible for all its citizens, regardless of age, functionality and ethnic background. The services described below are general, and also apply to infants and young people. Services available to the individual citizen will vary. This is because it is the individual's needs that will form the basis for the services offered. The services and measures are listed below:

- General medical services
- Emergency medical services
- Home help
- "Meals on Wheels"
- Accommodation for those over 18
- Environmental preventive health measures
- Accommodation for those under 18
- Paid care
- User-controlled personal assistance
- Parking permits
- Day care
- Practical assistance and
- Occupational therapy training in the home
- Regular general practitioner service
- Mental health services
- Physiotherapy
- Measures to combat alcoholism/drug abuse
- Convalescence and rehabilitation
- Personal support contacts
- Health centre and school health service
- Prenatal checks
- Assistive aids and technology devices
- Nursing home accommodation
- Home help
- Dental health services
- Home nursing
- Security alarm
- Crisis centre
- TT card
- Companion certification

The regular general practitioner arrangement
All citizens can choose their own regular general practitioner from a register.

Persons who do not have a regular general practitioner, can contact NAV on tel. 810 59 500 or go to www.nav.no. It may be that the doctor you wish to use does not have the capacity to take on more patients, and you must then choose a different doctor. You can change your doctor twice annually. As a general rule children under 16 have the same regular general practitioner as their mother. On reaching 16 children can choose their own regular general practitioner. Those that do not wish to have a regular general practitioner, or who wish to use a doctor who is not a member of the regular general practitioner arrangement are free to do so. In such cases the own contribution for medical services will be higher.
Regular general practitioners shall see their patients within a reasonable time. A regular general practitioner shall also receive patients that need immediate attention during normal surgery hours, and if required carry out home visits. Regular general practitioners can also have a dedicated telephone number for emergency assistance in addition to their own surgery office number. If you require urgent medical assistance outside standard surgery hours kept by your regular general practitioner you can contact the emergency service, see page 31.

If you are unsure with regard to the regular general practitioner’s diagnosis and treatment, you can seek a second opinion from another doctor. If you are dissatisfied with the treatment given by your regular general practitioner, you can complain to the Norwegian Board of Health Supervision. The Norwegian Board is found at the Regional Commissioner’s Office of each county.

The own contribution must be paid for medical consultations with your doctor and when purchasing medicines from the retail pharmacy. Own contributions can vary. Standard medicines that are not issued on so-called blue prescriptions – subsidised medicines – are paid for at full retail price. Your doctor and NAV can provide information on own contributions and the terms and conditions for qualifying for the exemption card arrangement.

**Relief home care services**

This is a service that provides extensive care for those who require a high level of care. The objective is to ensure that the care provider is relieved of his/her daily care tasks. Relief services can be provided for a number of hours on certain days or as an extended full 24-hour service. You must check with your municipality to see if you qualify for such services and the scope and content of services that may be offered.

The services are available by application. The municipality will assess each case individually and then pass a ruling. The ruling shall
inform the applicant whether the application has been accepted in part or in full. If an application is rejected, information regarding deadline for appeals and where an appeal shall be sent must be included. No own contribution is chargeable for the services.

**Accommodation for those over 18**

Municipalities offer various types of accommodation. If a person has no home or is unable to get a home, the municipality shall assist in providing a home.

The majority of municipalities can offer the following alternatives:

- If you do not require specially adapted accommodation many municipalities have rented accommodation.

- If you do need specially adapted accommodation (for example everything on one floor and without doorsteps/thresholds because you use a wheelchair or rullator), many municipalities have rented accommodation with full life span standard. Many municipalities call such accommodation sheltered accommodation. As a general rule there are no services linked directly to sheltered accommodation of this type in that it is the individual user’s situation and need for adaptation that is the decisive factor for which services the individual receives.

- Many municipalities offer accommodation with staffing on a part or full time basis for those who require extensive health and/or care services and cannot live alone. These services are known by different names from municipality to municipality, for example dwellings with staff-based services, senior citizen centres, retirement homes, accommodation and service centres, accommodation and activity centres, retirement villages and similar.

- Nursing homes are available in all municipalities. These are described in more detail on page 39.
Rent is charged for accommodation, but it is possible to apply for support from Husbanken - the Housing Bank. Contact the municipality for more details.

**Accommodation for those under 18**
In some cases dedicated accommodation (or shared accommodation units) can be established for children and adolescents under 18. Such accommodation can be established in connection with the parents’ dwelling or as a separate dwelling. This will depend to some degree on the level to which parents are involved in day-to-day care. No own contribution is paid for this service.

**User-controlled personal assistance (BPA)**
This service is designed for those who have major, complicated needs. The arrangement works thus: the recipient of the services (the user) organises the work and tasks of the service provider(s) (assistant(s)). This enables the user to decide both what tasks are to be done and when these shall be done.

The user (alternatively a relative of other person) functions as "work leader". The municipality has a mandatory to provide work leader training. The assistant can be a municipal employee, a member of a housing or other co-operative organisation or directly employed by the user. The municipality decides where the assistant is to be employed. The practical arrangements around the service vary from municipality to municipality.

The services are available by application. The municipality will assess each case individually and then pass a ruling. The ruling shall inform the applicant whether the application has been accepted in part or in full. If an application is rejected, information regarding deadline for appeals and where an appeal shall be sent must be included. No own contribution is chargeable for the services. If however the assistant also carries out practical tasks (cleaning - i.e. housework - and similar) or other services that are normally subject to a charge, an own contribution may be charged for these.

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Kari is unlucky and skids on her bicycle. She has a number of grazes, knocks out one tooth and damages several others. She needs to go to a dentist. What does she do?

If her regular dentist is open she should get in touch with him or her or alternatively contact a different dentist.
Life has not been good to Per recently. He has lost his job due to cutbacks, and his childhood friend of many years died suddenly after a heart attack. Per is also suffering from ill health. He is depressed and isolates himself socially. Neither Kari nor their daughter can help him. Who can help Per?

One important partner in such cases is the regular general practitioner, who can help or if necessary refer the case to the specialist health services, for example DPC (district psychiatric centre) or a psychologist. All municipalities have a range of services in mental health care. Per should talk to his doctor or take the initiative to contact the municipality to check out the options available to him that he may wish to investigate further. These can include a range of activities, conversations with someone from the municipality’s mental health staff or courses in mastering depression and so forth.

Day care
All municipalities shall offer day care services. The service is designed to meet the needs of those that require services during the day as part of a number of health services. The services are available by application. The municipality will assess each case individually and then pass a ruling. The ruling shall inform the applicant whether the application has been accepted in part or in full. If an application is rejected, information regarding deadline for appeals and where an appeal shall be sent must be included. The own contribution for such services is stipulated in a separate regulation governing charges.

Some municipalities offer places in day care centres. These vary, and are often aimed at a number of different group categories (those suffering from dementia, mental disability or dysfunction etc. Transport services to and from the home are often available in connection with these services. An own contribution is levied for these services.

Occupational therapy
The municipality can also organise occupational therapy services that can contribute in providing and adapting technical aids for persons with reduced functionality. In some municipalities this service is part of the physiotherapy service. Occupational therapists can provide skills and physical training in every day activities to those who due to illness or injury have reduced functionality. No charge is levied for services supplied by the municipal occupational therapy services.

Regular general practitioner service
See general medical practitioner services.
Physiotherapy

Municipalities have a mandatory obligation to provide physiotherapy services.

The Physiotherapy Service encompasses municipal physiotherapists and private practice physiotherapists that have practice agreements with the municipality.

Physiotherapists that have practice agreements with the municipality provide treatment in physiotherapy institutes. Both municipal employees and contract physiotherapists can provide treatment in the home as necessary. Nursing homes must also provide offers of physiotherapy.

In order to claim costs incurred in physiotherapy from NAV refunded, one must have a referral from a physician, chiropractor or manual therapist. If the patient contacts a manual therapist who has a practice agreement with the municipality, no referral is necessary to claim costs refunded.

Children under 12, persons suffering from industrial injury and those with special diagnoses are exempted from the own contribution charge in accordance with special rules. No own contribution shall be paid for preventive medicine and health-promoting physiotherapy in the school medical services. Payment can be demanded for participation in training groups.

If the services of a physiotherapist who does not have a contract with the municipality are employed, the full cost of the treatment is paid by the recipient.

Convalescence and rehabilitation

The convalescence and rehabilitation service is focused on children and adults with congenital injuries or who have become disadvantaged by ill health or dysfunction early in life.
Rehabilitation is aimed more at those who are suffering from acute illnesses or functionality disorders later in life.

Municipalities shall have a co-ordinating unit that shall ensure that services for the individual are dealt with as a whole. Continuity in measures and initiatives is a prime factor. The co-ordinating unit shall contribute to ensuring that service providers co-operate and make the necessary preparations for the participation of the recipients of services in the planning and organisation of the convalescence and rehabilitation services.

Convalescence and rehabilitation encompass a number of activities that are designed to re-establish and train up important physical functions or develop new functionality, thus enabling the recipients to master their every day lives to a higher degree. Activities shall be time-limited and planned, and all service providers must co-operate in achieving the aims and ambitions of the individual participants.

The municipality holds overall responsibility for the provision of convalescence and rehabilitation services to the individual recipient. The municipality shall refer the recipient to the specialist health services as necessary. The last-mentioned are responsible for the provision of specialised convalescence and rehabilitation services.

No own contribution is paid for the majority of reconvalescence and rehabilitation services supplied by the municipality. The exception is if the recipient is admitted to a convalescent or rehabilitation centre (cf. the regulations governing fees).

Children and adolescents with reduced functionality
Children with reduced functionality often have the need for services from a number of service-suppliers. The municipal apparatus is responsible for preparing an individual plan and for all convalescence/rehabilitation that does not require specialist
expertise. Read more about individual plans on page 45. The municipality shall ensure that a service provider is responsible for monitoring and co-ordinating the services.

The convalescence/rehabilitation process encompasses the child’s total life situation and is the sum of all measures that must be applied in order to ensure that the child and family achieve the best possible control of their life situation.

Stimulation and activity are of particular import for the majority of children with a functional disability. Physiotherapy is often a key factor in early life. The municipal physiotherapy service is free on the basis of age or diagnosis for this group. Parents are free to contact the service directly.

The municipal physiotherapy service is free and is not age-dependent. Parents are free to contact the service directly.

Prenatal/child care health centres and the school health service
Health centres and the school health service are mandatory services that are designed to provide preventive and health-promoting services for expectant mothers, parents, infants and adolescents from 0–20. The service shall offer a complete range of services that cater to the physical and mental health of the young and their families. It shall include medical examinations, vaccinations, visiting services and information on health and health-related matters. Health centres and the school health service shall be easily accessible in the case of both minor and major problems. There is no own contribution, as is also the case with the child vaccination programme. Other vaccinations are subject to an own contribution charge.

All children and adolescents have the right to health checks in the municipality. Parents have a mandatory obligation to ensure that children attend medical examinations cf. the Act Relating to Municipal Health Services § 2-2. All schools shall have a school

We have moved forward many years in time. Kari is now a widow, and is no longer able to take care of her home. She has particular difficulty in using the stairs to the first floor several times a day. What can she do?

Kari probably needs a home that is easier to take care of, and on one level. She can sell her house and buy a flat. Many municipalities also offer rented accommodation with life-long standard. Accommodation of this type is often known as sheltered or care homes.
health service up to and including colleges of further education. This applies to both state-run and private sector schools.

The school health service shall operate planned preventive and health-promoting work focussed on the individual student, groups and the school as a unit. The school health service has an obligation to contribute to increasing the knowledge and understanding amongst children and adolescents of how they can master their own lives and take independent decisions in relation to their health and lifestyles. The school health service shall co-operate closely with the home and school in contributing to the promotion of good social conditions and a good social and natural environment.

An increasing number of municipalities are establishing health centres for adolescents up to the age of 20. These are a supplement to and not a replacement for the school health service. The centres provide young people with advice and guidance on sexual matters and mental, physical and social health. Opening hours are limited, but it is not necessary to make an appointment. A number of municipalities have dedicated male-only centres. Oslo also has a dedicated health centre for lesbian, gay, bisexual and transgender adolescents and young adults between the ages of 13–30.

**Assistive aids and technology devices**

It is possible to borrow certain Assistive aids and technology devices that enable the user to love his or her life as independently as possible. Some of these can be borrowed from the municipality on short-term arrangements. If such aids and devices are required for periods of more than two years an application must be sent to the Assistive Aids Section at NAV. The municipality will assist your with you’re application.

The housing bank can provide grants and loans for home improvements. The municipality can provide you with details of this.
**Home help**

See under the section Practical assistance and training in the home.

**Home nursing**

If you need assistance with medication, dressing wounds, personal hygiene and similar, you can contact the home nursing service. The service is available by application. The municipality will assess each case individually and then pass a ruling. The ruling shall inform the applicant whether the application has been accepted in part or in full. If an application is rejected, information regarding deadline for appeals and where an appeal shall be sent must be included. No own contribution is chargeable for the services.

**Crisis centre**

Every county in Norway has a crisis centre for women and their children. Crisis centres shall provide a safe and secure environment in difficult or threatening/dangerous life situations, and the opportunity to talk to carers and experts who can advise on or refer clients that have been subjected to violence. Information about the individual crisis centres is available at www.krisesenter.com or in the telephone directory.

There are also a number of crisis centres for men in some districts in Norway.

**Companion certification**

Many municipalities have introduced companion certification for persons who due to reduced functionality need assistance from a companion when attending arrangements, using public transport and engaging in leisure time activities. The arrangement is part of a chain of measures designed to combat the isolation of the individual and to increase the quality of life of individuals with reduced functionality. The municipality will provide you with information about how to acquire a companion certificate.

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Kari is now suffering from age-related dementia. She can no longer live alone at home. What alternatives are open to her?

The best solution is sheltered accommodation with permanent 2-hour staffing, which is what Kari actually needs at this point in her life. A number of municipalities are able to offer such facilities. The range of services varies from place to place, but the usual alternatives are either a place in a community-housing unit or in a nursing home ward. Many municipalities have dwellings adapted for dementia sufferers.
Emergency medical services
(Casualty Department, Accident & Emergency Service/Ward)
All municipalities have a mandatory obligation to provide emergency medical services sufficient to meet the need for emergency medical aid outside normal regular general practitioners surgery hours.

The emergency medical services are organised in different ways in the various municipalities. In some areas there are intercommunity emergency services in the evenings/nights/weekends. Emergency services during normal surgery hours are provided by general practitioners. In some cases emergency services are staffed 24-hours 365 days a year.

Municipalities must ensure that the emergency medical services switchboard number is made public knowledge. Emergency medical services are subject to an own contribution fee.

In genuine cases of life or death emergencies you can call the Emergency Medical Services Centre Emergency Help Line, 113.

Meals on Wheels (nutritional services)
Municipalities can provide assistance in connection with meals. Services vary from municipality to municipality. Some municipalities have a dedicated "meals on wheels" service, where individual recipients have meals delivered to their home, either hot, or cold meals that can be heated in the home. If the meals service is deemed to be necessary an application must be submitted and the municipality will assess each case individually and then pass a ruling. The ruling shall inform the applicant whether the application has been accepted in part or in full. If an application is rejected, information regarding deadline for appeals and where an appeal shall be sent must be included.

There is an own contribution fee for the service. If the meals service is deemed to be necessary and your income is less than twice the basic national insurance scheme amount, you will not be asked to pay more than the minimum stipulated by Stortinget (The Norwegian

Kari is now near the end of her life. Her daughter was killed in an accident a few years ago. She has no grandchildren or close relatives. Who will take care of the funeral arrangements when there are no surviving family members?

There is a law covering burials and funerals. Pursuant to the law the municipality shall make and pay for funeral arrangements when the deceased has no surviving relatives or if the surviving relatives do not wish to pay for the funeral. It is the funeral directors (undertakers) that will contact the municipality. Funeral director companies can provide more information concerning the arrangement.
Parliament). The municipality can nonetheless demand payment for raw materials regardless of income level.

**Environmental preventive health measures**
(noise and pollution problems in the immediate environment)
Municipalities have inspectorate duties and shall advise on noise and pollution in the local environment (for example traffic noise and commercial/industrial activities, drinking and bathing water pollution, inspections of indoor climate in schools, child day care centres and institutions, metering radon in dwellings and so forth).
Contact your municipality for more details.

**Paid care**
Carers who have particularly heavy care burdens may qualify for economic support. This is provided without taking into account age, degree of disability/dysfunction or illness of the care recipient. The municipality decides whether support shall be given at and what level. When ruling on such support the municipality can take into account whether the care recipient receives supplementary benefits and/or other services. The services are available by application. The municipality will assess each case individually and then pass a ruling. The ruling shall inform the applicant whether the application has been accepted in part or in full. If an application is rejected, information regarding deadline for appeals and where an appeal shall be sent must be included.

**Parking permits**
Many municipalities offer parking permits to those with reduced functionality. The permits allow the holder to park free of charge in reserved parking spaces.

**Practical assistance and training in the home**
This can encompass cleaning, the preparation of meals, laundry, shopping, snow clearance, personal hygiene and assistance in other necessary practical tasks. The aim of the service is to provide the recipients with sufficient help to enable them to live in their own homes.

Nina suffered from angst (anxiety) during her formative years. She has periods when she needs the help and support of the municipal mental health service. What help and assistance can they offer to Nina?

Mental health problems span a wide register from light depression to serious psychoses that cause one to lose touch with reality. The earlier one gets help the better the chance of successful treatment. It is important that you contact a doctor or other health professionals that can provide the help needed. Treatment varies depending on the problem or suffering you are dealing with and how deep this goes. One fairly standard option is conversational therapy. This is talking about your problem with a qualified health professional with the focus on dealing with the experiences you may have been through or psychological problems and providing the motivation to start participating in social activities and other activities in day-today life.
The services are available by application. The municipality will assess each case individually and then pass a ruling. The ruling shall inform the applicant whether the application has been accepted in part or in full. If an application is rejected, information regarding deadline for appeals and where an appeal shall be sent must be included. The municipalities can levy an own contribution for services that do not encompass personal care and hygiene.

**Training**
The municipality shall also offer assistance for training designed to equip the individual to take best possible care of him/herself in day-to-day life. This can be for example training in personal hygiene routines and self-care. No own contribution fee is levied for such training.

The service can also include help through dialogue in the form of discussions with qualified health professionals. The discussions focus on dealing with one’s experiences and emotional problems and on motivating the individual to re-engage in social activities and other day-to-day activities.

**Mental health work**
Emotional problems and suffering can affect people of all age groups and social strata. The manner in which such problems manifest themselves varies from person to person, dependent on the person’s current situation and the scope of the problem. The degree to how the individual deals with his or her everyday situation, is content and functions with others also has an effect.

Mental health work in the municipality shall contribute to encouraging and bolstering independence and a sense of belonging to the whole in those who are suffering from psychological problems. The aim is to improve their ability to master their own lives and situation.

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Nina and Carlos have their first child. The child is to be called Nils. Nils was born with Downs Syndrome. Where can Nina and Carlos find more information about Nils’ condition and what developments they can expect as he grows up?

The parents will receive information from the hospital about the baby's illness/ailments at the time of birth. The health centre will also be able to provide information. An important source of support and help is to talk to other parents with children who have the same illness/ailment. The hospital, health centre and regular general practitioner can provide more information.

There is a dedicated Internet site dealing with Downs Syndrome, www.downssyndrom.no, which is an excellent source of information. The Internet site of Funksjonshemmedes Fellesorganisasjon The Norwegian Federation of Organisations of Disabled People - FFO (www.ffo.no) also provides useful information about a number of disabilities/ailments.

It is important to contact the municipality at an early stage, so that information about municipal health and care services they have the right to can be obtained. This may for example include help in the home, adapted child day care centre place and so forth.
If you experience mental health problems of any type you can contact a number of different bodies and organisations in the municipality to ask for help and support in dealing with the problem. Family and other close relatives can also contact these.

In addition to the regular general practitioner service, health centres and the school health service, the municipalities have developed a number of services aimed at for children, young people and adults with psychiatric or mental health problems. These can for example be in the form of a visiting team, support through individual discussions, practical assistance, discussion groups and a variety of accommodation alternatives with individual services. Many municipalities have established excellent Internet sites that provide overviews of where and how help is available.

Whether or not an own contribution is levied depends on the services you receive.

**Measures to combat alcoholism/drug abuse**

People of all ages and social strata can be affected by problems involving alcohol and/or other addictive substances. The manner in which the problem manifests itself varies from individual to individual. Many factors play a role, for example the intoxicant/narcotics involved, whether one also has other problems to deal with and so forth. The municipal social and health care services can be contacted. These can supply advice and guidance and can refer clients to a number of different initiatives and treatments. The family and other close persons can also contact the social and health services for advice and guidance.

The key services available are the social services, regular general practitioner and public health nurse/health visitor. Both the social services and your doctor can arrange referrals to multi-professional specialised treatment in the specialist health services, whether the required or recommended form of treatment is based on polyclinic, institutional or medicine-based. The municipality’s social services
shall provide a follow up service for those with addictive problems receiving polyclinic treatment and prior to, during and after treatment in an institution.

If you discover that young people are experimenting with drugs or alcohol, you can contact the municipal social service responsible for preventive work in connection with problems of this type, or/and speak to the school, youth club and so forth. Some municipalities also offer assistance to families and relatives of persons with addiction problems.

Whether an own contribution is charged or not depends on the services supplied.

**Personal support contact**

A personal support contact is someone paid by the municipality to help another in achieving a good and meaningful social life. The personal support contact can carry out home visits, accompany the client on visits to cafes, the cinema, sports and athletics events and similar social activities. Municipalities organise personal support contacts in various ways. In some municipalities they are known as leisure time contacts, training contacts or arrangers. The service can be either individual or in the form of group activities. There is no barrier to prevent a person you know and have confidence in becoming your personal support contact. Contact your municipality for more details. No own contribution is levied for the service.

**Prenatal examinations**

All expectant mothers are entitled to prenatal examinations from their regular general practitioner or midwife at the health centre. Prenatal examinations are organised in various ways in the municipalities. In areas where there is a delivery room ward the same midwives who monitor the expectant mother shall also be present at the delivery. This is also the case with a number of maternity wards that have contracts with municipalities to provide prenatal course and examinations.
The regular general practitioner and municipal midwife co-operate with the delivery room/maternity ward that will deliver the baby. If the pregnancy is such that examination by a specialist is necessary, the health personnel can refer the expectant mother to the hospital’s polyclinic.

No own contribution fee is charged for prenatal checks and examinations.

**Nursing home accommodation – time-limited stays (short-term) and long-term residency**

All municipalities shall ensure that there is a 24-hour based service staffed by medical professionals.

Nursing homes offer both short-term and long-term residency accommodation. Short-term accommodation can be arranged when for example the recipient needs training (rehabilitation) or extensive professional medical assistance for a limited period.

An own contribution charge is made for outpatient, overnight short term and long-term admittances. The amount to be paid is stipulated annually in the national budget.

Patients who are admitted for long-term stays pay a certain proportion of their income (pension, earnings on interest and so forth). The institution cannot demand payment from capital assets (fixed property, bank deposits, shares etc). The regulations governing fees regulate the amount of the contribution.

The services are available by application. The municipality will assess each case individually and then pass a ruling. The ruling shall inform the applicant whether the application has been accepted in part or in full. If an application is rejected, information regarding deadline for appeals and where an appeal shall be sent must be included.
Dental health services

The public dental health services are the responsibility of the county council. The public dental health service is responsible for offering preventive measures for the population at large. Regular and visiting services are mandatory for:

A. Children and young people up to and including the age of 18.
B. Mentally handicapped persons in institutions or their own homes.
C. Groups elderly, long-term ill and disabled person in institutions and under home care services.
D. Young adults of 19 or 20 years in the treatment year.
E. Other groups the county council has elected to prioritise.

The county council is responsible for providing dental work necessary for long-term inmates in prisons. For more information on this contact the prison health service in the county. Asylum seekers and refugees in state-run receiving centres can request information about dental services from the county chief dental officer.

Young adults have the right to a reduction in charges for dental work from the year they reach 19 to and including the year they reach 20. The dentist will provide information about this.

The county council dental service is also responsible for organising visiting dental services for alcohol and drug abusers that are receiving services from municipal care serves, and are under long-term treatment in a health institution or LAR. Some municipalities have organised a low threshold health service that also encompasses dental treatment.

The population otherwise pays for dental services. In certain cases one can claim a refund from NAV or a deduction in taxable income. Your dentist will provide you with information about this. In the case of ordinary dental work does not qualify for refunds from NAV, it is possible to apply for economic support from the municipality prior to commencing treatment. Such social support is only available to those who have no financial means. The municipality will provide...
you with more details of the arrangement around financial support through the social services.

Security alarm
Many municipalities offer security alarms. A security alarm can be a personal alarm carried on the person (for example an alarm button alarm) or a fixed unit installed at a convenient place in the dwelling. A security alarm allows the user to make rapid contact with a helper when the need arises. If a security alarm is considered to be necessary, an application must be submitted and the municipality shall pass a ruling. The ruling shall inform the applicant whether the application has been accepted in part or in full. If an application is rejected, information regarding deadline for appeals and where an appeal shall be sent must be included. If it is deemed that a security alarm is a necessary service and your income is less than 2 x basic national insurance scheme amount, the fee shall not be higher than that stipulated by Stortinget.

TT Card
The TT Card arrangement is a service offered to those who are functionally handicapped and have difficulty in travelling and are thus unable to use the ordinary public transport services or their own vehicle. A TT Card covers a defined number of journeys by taxi or special vehicle. An own contribution fee is charged for each journey.

The rules governing who can receive a TT Card vary. Your municipality will be able to provide you with details of the service and how to apply.

Many municipalities also offer other services than those described herein. Contact your municipality for an overview of the services offered.

Nils' condition worsens and he needs more extensive health and care services. The municipality wants Nils to move into a nursing home, but Nina and Carlos want him to stay in his own sheltered home. Who has the right to decide where Nils is to live?

The basis for all provision of services is the principle of acquisition from the recipient of the services. In certain situations the recipient of the services is not in a position to arrive at the correct decision. In such situations the Guardianship Act, and the Patient’s Rights Act amongst others provide guidance on who can make such decisions on behalf of the recipient. Regardless, the municipality is not authorised to order admittance to a nursing home if the recipient of the service or the person protecting his or her interests does not wish for this.
The main principles applicable to municipal services

Services offered by municipalities are governed by the following main principles:

Information, advice and guidance
The municipality shall provide information, advice and guidance on the area of health and social services to all who ask for it. The information shall be provided in a manner understandable to the enquirer. An interpreter shall be offered if this is required. All conversations shall be dealt with in the strictest confidentiality, and the recipient/client can demand that the conversation is kept confidential from third parties. No own contribution is payable for the receipt of confirmation from the municipality.

User participation
An important principle when you are receiving health and social services is user participation. This means that you will be included in discussions and listened to when a physician, the municipality or a hospital is to supply a service to you. User participation also means that you shall be given the opportunity to influence the form and type of the services offered to you. The main focus shall be on you and your need for services, but it is the individual municipality that assesses and rules on the form and scope of the services.

User participation also means that the municipality must contact you to clarify when and how the services are to be provided. You cannot decide for yourself when you wish to receive the services, but you must be given the opportunity to present your wishes.
Individual plan
If you are in need of long-term and co-ordinated health and social services from several providers, you have the right to have an individual plan prepared with the objective of ensuring that the services you receive are co-ordinated and that a single service provider has overall responsibility for monitoring the plan. Your agreement must be attained in advance when such a plan is to be prepared.

Regulations governing measures that place restrictions on self-determination
It is up to you to decide whether or not you wish to accept services offered to you – it’s your life and your decision.

There is legislation in place that has dedicated provisions designed to prevent and limit the use of compulsion and/or force, while at the same time preventing those who are mentally disadvantaged, those who are addicted to narcotics/inebriants and those who are mentally ill and may expose themselves or others to the risk of injury or harm. The law is extremely restrictive in the way the use of compulsion and/or force is applied. There are specific and dedicated rules applicable to the processing of cases involving such measures.

- The use of compulsion and/or force when applied to the mentally disadvantaged is governed by Article 4A of the Social Services Act and § 6-10 of the Act Relating to Municipal Health Services.

- In the case of those who are addicted to narcotics/inebriants Article 6 of the Social Services Act applies.

- Article 3 of the Mental Health Care Act applies to those who are mentally ill.

- In the case of those who are incapable of making rational decisions and who refuse such help, Article 4A in the Patient’s Rights Act will come into force from 2009.

Right of appeal or complaint against the services provided
If you are dissatisfied with the services – either the scope or the manner in which they are provided - you have the right to appeal or complain. The appeal or complaint shall be sent to the body responsible for the ruling or the service provider(s) (for example a doctor or the municipality). You can also complain to the Board of Health Supervision in your county, if you are dissatisfied with the manner in which services are provided. If the body to which you appeal or complain to does not approve the appeal/claim, you can bring the matter before a higher organ. Information about how to do this shall be included in the reply you receive to your appeal/complaint. If the municipality provides non-mandatory services, the municipality may have a separate body that deals with appeals/complaints. The municipality will provide details of this.
What you must do to receive services

The services described above (with the exception of dental health services, health centres, the school health service and the casualty/E&R service, and regular general practitioner arrangement), are all subject to needs testing. This means that it is your needs that determine that are the decisive factor in determining whether you will receive a service and the scope of services shall have. It is the municipality that assesses your needs and decides (through a so-called simplified ruling) whether or not you qualify for the service(s), and in what scope they shall be supplied. This shall be done in consultation with you.

If you wish to have your needs assessed you must contact the municipality where you live on a temporary or permanent basis. Many municipalities will require you to complete an application form. The municipality will provide you with whatever help you need in completing the form. Contact the municipality for further advice and assistance.

In many cases the municipality will need to gather information about your health, for example from your regular general practitioner. The municipality can only do this if you give your consent.

If you would like to contact the municipality, but are for any reason prevented from doing so, you can ask a member of your family to do so on your behalf. You also have the right to an interpreter if this is necessary. If others approach the municipality on your behalf, you must provide your representative with a power of attorney. The power of attorney must be in writing.

On receipt of your application the municipality must thoroughly examine the case. Many municipalities may wish to discuss the matter with you in more detail in order to identify the best possible
solution to meet your needs. Such discussions can be conducted by telephone or a visit to your home.

It will be necessary to look at your needs in connection with applications for services.

Some of the information requested by the municipality will be sent to a central register called IPLOS. Names and addresses of individuals are not kept in the register. Your social security/ national ID number is replaced by a random number. It is therefore impossible for anyone to identify any individual through the register. The objective of the IPLOS register is to gain a better understanding and knowledge of the services and users in order to improve services and plan for the future. You have the right to refuse the submission of diagnoses to the IPLOS register. All those who receive services have the right to inspect the information registered about their persons. If the information is erroneous or incomplete, you have the right to demand that this is rectified.

You’re application for services will either be accepted or rejected in whole or part. If you’re application is accepted, it is up to the municipality to decide on the scope of the services. You have the right to appeal/complain against the decision if you are dissatisfied. If you’re appeal/complaint is turned down it is automatically forwarded to the Regional Commissioner’s Office or the Board of Health Supervision in your county. This only applies to mandatory services (services that require an application and ruling). The rejection shall include details of how you can lodge a complaint/appeal.

The municipality has a mandatory obligation to register you’re application and other relevant information. Strict rules are in place that govern how personal information shall be registered and archived. All who are involved in your case are subject to strict confidentiality.
Standards of quality you have the right to expect from the services you receive

The services supplied shall be of a good professional standard and sufficient for purpose. It is the organ or body that adopts the ruling that shall decide what is sufficient to cover your basic needs. Further, services shall be supplied in a manner that shows basic respect for the recipient’s right to self-determination, inviolate rights as an individual and lifestyle.

There are dedicated regulations under law that prescribe the quality of municipal health and social services. Pursuant to these regulations you as a recipient have the right to expect that such services shall

be planned as well as possible so that the services are supplied at the proper time;
- comprehensive, co-ordinated and flexible;
- be prepared in consultation with the recipient. The recipient shall also have the right to influence how services shall be implemented on a day-to-day basis.

The municipality shall organise its services so that they
- show respect for the recipients and ensure predictability and security for the range of services
- provide the opportunity for independence and control by recipients over their own lives
- provide the opportunity for recipients to care for themselves
- cover physical needs such as sufficient food and drink and healthy, varied diet with a reasonable choice of food
- accommodate the recipient’s personal hygiene and natural functional needs

- provide adapted assistance with dressing/undressing

- provide the necessary medical examinations, treatment and convalescence/rehabilitation

- provide levels of care adapted to the individual's condition

- provide suitable services for persons that have difficulty in formulating their needs

- ensure a dignified passing in a secure and comforting atmosphere

In addition to the above, service recipients that live in an institution or 24-hour staffed sheltered accommodation shall have, through established procedures, services that ensure

- adapted assistance at mealtimes and sufficient time to eat

- necessary dental services and dental hygiene

- the possibility to have a normal living and circadian cycle and to avoid unnecessary time in bed

- the chance of social intercourse, social contact, company and activities

- offers of varied and suitable activities

- peace, quiet and privacy

- a single room for long-term admittances/accommodation

If you are dissatisfied with the services you receive you may appeal/complain. The municipality must provide you with information of the procedures for this.

Many municipalities carry out user-surveys and prepare quality indicators in order to better quality-assure their services.
Your rights and obligations

As we go through life we all find ourselves in situations where for short or long periods we need the municipal health and/or social services. You have the right to help from these services if you have physical ailments or find yourself in a situation where you need help to cope with the challenges of everyday living and to live a normal social life.

Confidentiality

All employees in the health and social services you come into contact with are sworn to confidentiality. There are a few, extremely restricted exceptions to this mandatory duty. Breaches of confidentiality can result in extremely severe reactions.

These rights and obligations are part of general Norwegian legislation. There are five acts that are of particular import to you in this respect. These are:

The Civil Administration Act of 10th February 1967

The act provides regulations for the processing of cases, for example your application for services. The following provisions of the act are important:

- The bodies/organs providing the services must give you information about the services and guidance on how to proceed in applying for these. This includes assistance in completing application forms and so forth.

- The personnel that deal with your application (or their managers), cannot process your papers if they are related to you or a close friend (conflict of interest). A case manager will also excluded if he/she has a special interest in the result or conclusion of the case.
- The personnel dealing with your case have an obligation to gather all relevant information of import to the processing of the application. Information may only be gathered if you have agreed to this in advance.

- You have the right to a reply to your application within four weeks. If the application has not been finalised, you will receive a letter telling you when you can expect an answer.

- You have the right to access and read all documents pertaining to your case (so-called right of access).

- The reply (a so-called simplified ruling) shall state whether the application has been accepted in whole or part or rejected. Grounds shall be stated.

- You have the right to appeal or complain if you disagree with the ruling. The deadline for appeals/complaints and the procedures for lodging this shall be stated in the reply. You can appeal against the scope of the services and the types of services you have been granted/denied (rejection). It is important to state why you are appealing or complaining. The appeal/complaint shall be sent to the body that passed the ruling. If your appeal/complaint is rejected, it will be sent to the Regional Commissioner of your county for a final decision. If your case is sent to the Regional Commissioner you must be given the opportunity to comment further on the case.

The law provides for all who live in a municipality the right to receive necessary health services.

The Social Services Act of 13th December 1991 No. 81
Pursuant to this act the municipalities shall:
- provide information, advice and guidance,
- resolve or prevent social problems in the municipality
- contribute to that the individual is afforded the opportunity to live independently
- contribute to an active and meaningful existence in the company of others

Those that cannot manage the burden of caring for themselves, or are in part or whole dependent on practical or personal help in dealing with day-to-day matters and tasks, have the right to receive the services listed below:

- Practical help (help around the home) and training, hereunder user-controlled personal assistance, for those who have a need for extensive services due to illness, disability, age or other causes.

- Relief for persons and families who have a need for such services due to reduced functionality, age or social problems.

- Supporting contact for persons and families who have a need for such services due to reduced functionality, age or social problems.

- Place in an institution or dwelling with 24-hour care facilities for persons who have a need for such services due to reduced functionality, age or other causes.

- Carer remuneration for persons with extensive care work.

The Act Relating to Municipal Health Services of 19th November 1982 No. 66
This act obliges municipalities to establish a number of health services including general practitioner (hereunder the regular general practitioner arrangement), emergency medical services (casualty/A&E), physiotherapy services, public health nurse/health visitor, home nursing services, midwife services and nursing homes.
The municipality has a mandatory obligation to contribute to helping persons that cannot protect their own interests in the housing market. The municipality is obliged to find temporary accommodation for those that cannot manage this by their own means.

Through various help initiatives, advice and guidance the municipality shall help those that are addicted to narcotics/inebriants back to normalcy.

The act also provides the right to financial assistance, but this is not discussed in this handbook. The municipality can tell you more about this.

**Patients’ Rights Act of 2nd July 1999 No. 63**

This act covers your rights as a recipient of health services. The act applies to all health services you receive – including dental work, regular general practitioner services, municipal health services and specialist health services. Amongst other things these rights encompass:

- Your right to necessary health services and to be diagnosed/assessed by qualified health personnel. If you do not agree with the assessment you have the right to a second opinion.

- Your right to be informed of your health situation and the recommended treatment. You have the right to be consulted (co-operation) prior to treatment commencing.

- Your right of inspection of your medical records on demand.

- Your right to an individual plan if you require long-term social and health care services from several service providers.

- That any medical treatment requires your prior agreement. The law has special provisions covering special circumstances such as the need for emergency medical treatment and if you are otherwise not capable of making a good judgment regarding acquiescence.

- That your relatives have certain rights to be informed of your medical condition if you wish for this.

**The Health Personnel Act of 2nd July 1999 No. 64**

The act governs health personnel and the duties incumbent on them. Health personnel are defined for our purposes here as the personnel you come into contact with when you receive health services. As a recipient of health services you should know the following:

- Health personnel have a duty of confidentiality about you and your health.

- Health personnel have the duty to provide emergency medical treatment if your condition is critical.

- Health personnel may not receive expensive gifts from you or your relatives. In some municipalities health personnel may not receive gifts of any value.

- Health personnel are legally obliged to contact the Child Welfare Service if they suspect that a child has been exposed to violence or maltreatment.

**Patient Ombud**

The Patient Ombud’s task is to protect the needs, best interests and legal rights of the individual in the relationship to the health services and to contribute to improving the quality of the health services.

If you have had an experience relating to the health service that you wish to take up you can contact the Patient Ombud in your county. The Patient Ombud will be able to inform you of your rights as a
patient or relative. The Patient Ombud can assist you in formulating and forwarding questions or complaints to the correct recipient.

**The Fees Regulations**
These regulations apply to nursing homes or sheltered dwellings with 24-hour care and nursing services. The regulations regulate the amounts that can be charged for the services supplied by the municipality, and which services the municipality can charge for.

More detailed information can be obtained from your municipality and/or see: www.lovdata.no/for/sf/ho/ho-19950426-0392.html

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**Postscript**
Municipalities have a mandatory responsibility for establishing a range of services and – to the degree this is possible – adapting these to the needs of the individual.

If you require assistance from the municipal health and social services you must contact the municipality. The municipality can help you in identifying the services best suited to your needs. It is through dialogue and planning that good services are created.

This handbook provides you with an overview of the services the municipality can and must provide. Many municipalities offer additional services, and may have extended content in services in comparison to that described in the handbook.

As a user of health and social services your experience of the services you receive shall be that these are co-ordinated – regardless of whether you are in contact with your regular general practitioner, the municipal health and care services or the specialist health services.

It is our hope that this handbook will be of use to you, so that you can easily find out what rights you have to health and care services, and whom you must contact to have your needs assessed.

The Directorate of Health offers its thanks to all organisations that have participated in the reference group and test group in connection with the preparation and publication of this handbook.

Bjørn-Inge Larsen
Director, Health Services
Where to obtain more information

The municipality is your key contact for information about health and social services. Municipalities in Norway have varying forms of organisation. If you are unsure of whom to contact, call the municipality’s switchboard.

If you require information about the public dental health service, contact the dental health service in your county.

There are also a number of Internet addresses that provide information about rights, services and so forth. Check out www.helsedirektoratet.no/helseogomsorg for important, updated information. The following is a selection of useful Internet sites:

Public bodies and organs
Barne- and likestillingsdepartementet
*The Ministry of Children and Equality:*
www.regjeringen.no/nb/dep/bld.html?id=298

Barne-, ungdoms- and familiedirektoratet
*Norwegian Directorate for Children, Youth and Family Affairs:*
www.bufetat.no

Datatilsynet
*The Data Inspectorate:*
www.datatilsynet.no
Fylkesmannen/Helseinspektoratet i i fylkene, felles oversikt
Regional Commissioner’s Office /Health Inspectorate:
www.helsetilsynent.no/templates/sectionpagefylke2129.aspx

Fylkeskommunene
The County Councils:
http://app.norge.no/styresmakter/liste.asp?el=59&inside=fylke

Helsedirektoratet
The Norwegian Directorate of Health:
www.helsedirektoratet.no

Helse- and omsorgsdepartementet
The Ministry of Health and Care Services:
www.regjeringen.no/nb/dep/hod.html?id=421

Helsetilsynet
The Health Inspectorate:
www.helsetilsynet.no

Husbanken
The Housing Bank:
www.husbanken.no

NAV:
www.nav.no

Overformynderiet: se den enkelte kommunes hjemmeside
The Courts of Protection – refer to the home pages of your municipality

Pasientombudet
Patient Ombud:
www.helsedirektoratet.no/pasientombudet

Lenkesamling for sjeldne tilstander/diagnoser
Links to rare conditions & diagnoses:
www.rarelink.no

Regjeringens hjemmeside
Government home pages:
www.regjeringen.no

Sivilombudsmannen
The Civil Ombudsman:
www.sivilombudsmannen.no

TAKO, landsdekkende kompetansesenter for oral helse ved sjeldne medisinske tilstander
Nation-wide centre of expertise for oral health in connection with rare medical conditions:
www.tako.no

Regionale helseforetak (RHF)
Regional Health Enterprises
Helse Midt-Norge RHF (Central Norway) www.helse-midt.no
Helse Nord RHF (Northern Norway): www.helse-nord.no
Helse Sør-Øst RHF (South-Eastern Norway): www.helse-sorost.no
Helse Vest RHF (Western Norway): www.helse-vest.no

Special interest organisations, groups, boards/councils and committees
Funksjonshemmedes fellesorganisasjon
Norwegian Federation of Organisations of Disabled People (FFO):
www.ffo.no
Fylkeskommune eldreråd:  
se den enkelte fylkeskommunes hjemmeside  
Senior Citizens’ Councils:  
Check your county council’s home pages

Kommunale eldreråd:  
se den enkelte kommunes hjemmeside  
Municipal Senior Citizens’ Council:  
Check your municipality’s home pages

Kommunale råd for mennesker med funksjonsnedsettelse:  
se den enkelte kommunes hjemmeside  
Municipal Board for the functionally disabled:  
Check your municipality’s home pages

KS (Kommunesektorens interesse- og arbeidsgiverorganisasjon)  
The Norwegian Association of Local and Regional Authorities:  
www.ks.no

Landsforbundet Mot Stoffmisbruk (LMS)  
The National Alliance against Drug Abuse:  
www.motstoff.no

Landsforeningen for Pårørende innen Psykiatri  
The National Association for Relatives in Psychiatry:  
lpp.interaktiv.as

Interesseorganisasjoner, råd og utvalg  
Funksjonshemmedes fellesorganisasjon (FFO):  
www.ffo.no

LAR-Nett Norge:  
www.larnett norge.no

Mental Helse  
Mental Health:  
www.mentalhelse.no

www.narkoman.net

Mental Helse Ungdom  
Mental Health Youth:  
http://www.mentalhelse.no/Mental_Helse_Ungdom

Norsk pensjonistforbund (NPF)  
The Norwegian Pensioners’ Association:  
www.pensjonistforbundet.no

Nasjonalforeningens dementialinje  
The National Associations’ Dementia Line:  
dementialinjen@nasjonalforeningen.no

Rusmisbrukernes interesseorganisasjon (RIO)  
Interest group for narcotics addicts:  
www.riorg.no

Rådet for psykisk helse  
The Norwegian Council for Mental Health:  
www psykiskhelse.no

Samarbeidsforumet av funksjonshemmedes organisasjoner (SAFO)  
Forum for co-operation of organisations for the functionally disabled:  
www.safo.no

Statens råd for likestilling av funksjonshemmede  
The Norwegian State Council on Disability:  
www.helsedirektoratet.no/srff
Laws, regulations and guidelines
- ACT-2001-05-18-24: Act on health registers and the processing of health information (health register act)
- ACT-2000-04-14-31: Act on the processing of personal data
- ACT-1999-07-02-64: Act on health personnel etc.
- ACT-1991-12-13-81: Act on social services etc. (the Social Services Act)
- ACT-1982-11-19-66: Act on health services in municipalities (the Act Relating to Municipal Health Services)
- ACT 1983-06-03 nr 54 Act on the dental health service
- ACT-1979-06-19-69: Act relating to public access to documents in the public administration (Freedom of Information Act)
- ACT-1962-06-22-8: Act concerning the Storting’s Ombudsman for public administration
- ACT-1927-04-22-3: Act relating to guardianship for persons who are legally incapable (The Guardianship Act)
- ACT-1999-07-02-63: Act on patients’ rights (The patients’ Rights Act) Section 8
- ACT 1967-02-10: Act relating to procedure in cases concerning the public administration (Public Administration Act)
- IS-7/2006: Access to and distribution of information in electronic patient journals. 2001.06.28 No. 0765: (HOD) Regulations on convalescence and rehabilitation
- IS-17/2006: The obligation and right of health personnel to inform the Child Welfare Service, Police and Social Services if there is suspicion of:
  - maltreatment of a child in the home
  - other forms of serious lack of proper care of a child
  - the abuse of narcotics during pregnancy
- IS-1253: Guidelines to the regulations on individual plans
- FOR-1995-04-26-392: Regulations on fees for stays in institutions etc.
- FOR-2004-12-23-1837: Regulations on individual plans pursuant to legislation on health care and the Social Services Act
- FOR-2003-06-27-792: Regulations on quality in nursing and the care services for the provision of services pursuant to the Act of 19th November 1982 No. 66 on Municipal Health Services and the Act of 13th December 1991 No. 81 on Social Services etc.
- FOR-2002-12-20-20-1731: Regulations on internal control in the social and health services sector
- FOR-2000-12-21-1385: Regulations on patient journals
- FOR-2000-12-15-1265: Regulations on the processing of personal data

- FOR 2000-04-14 nr 328: Regulations on regular general practitioner arrangement in the municipality

- FOR 2006-02-17 nr 204: Regulations on pseudonym registration of individual based nursing and care statistics

- FOR 2001.06.28 nr 0765: Regulations on convalescence and rehabilitation

- FOR 2000.05.24 No. 1268 Regulations on fees for dental health care services in the public dental health care service

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**Information and help lines**

If you need someone to talk you, you can call one of the following numbers. You can remain anonymous if you wish.

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>AA Anonyme alkoholikere / Alcoholics Anonymous</td>
<td>810 30 030</td>
</tr>
<tr>
<td>Angsttelefonen / Angst (anxiety) line</td>
<td>22 22 35 30</td>
</tr>
<tr>
<td>Angstringen / Angst ring</td>
<td>22 71 26 09</td>
</tr>
<tr>
<td>Arbeidslivstelefonen (Mental helse) / Mental health in the work place</td>
<td>815 44 544</td>
</tr>
<tr>
<td>Barneombudet / Ombudsman for Children</td>
<td>22 24 26 30</td>
</tr>
<tr>
<td>Barnetelefonen om krig / The child-line on war</td>
<td>800 33 321</td>
</tr>
<tr>
<td>Bekymringstелефon for foreldre / Help line for concerned parents</td>
<td>810 03 940</td>
</tr>
<tr>
<td>Helsedirektoratets Servicephone for sjeldne tilstander</td>
<td>800 41 710</td>
</tr>
<tr>
<td>The Ministry of Health service line for rare illnesses</td>
<td></td>
</tr>
<tr>
<td>Hjelpelinjen for spilleavhengige / Help line for gamblers</td>
<td>800 800 40</td>
</tr>
<tr>
<td>Hjelpetelefonen til Mental Helse Norge (alltid åpen)</td>
<td>810 300 30</td>
</tr>
<tr>
<td>Help line to Mental Health Norway (24 hours all days)</td>
<td></td>
</tr>
<tr>
<td>Homofiles ungdomstелефon / Homosexual youth talk/help line</td>
<td>810 00 277</td>
</tr>
<tr>
<td>Informationstelefonen om aids / Information line, AIDS</td>
<td>810 03 200</td>
</tr>
<tr>
<td>Informationstelefonen om tvangsektespak / Information line, Forced Marriages</td>
<td>815 55 201</td>
</tr>
<tr>
<td>Service Description</td>
<td>Phone Number</td>
</tr>
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<tr>
<td>Help line for women with eating disturbances</td>
<td>22 42 22 22</td>
</tr>
<tr>
<td>Kirkens SOS / The State Church SOS line</td>
<td>815 33 300</td>
</tr>
<tr>
<td>LLH’s ungdomstelefon / LLH help line for young people</td>
<td>810 00 277</td>
</tr>
<tr>
<td>Drug Addicts Anonymous</td>
<td>905 29 359</td>
</tr>
<tr>
<td>Nasjonalforeningen dementialinjen / The National Dementia Association help line</td>
<td>815 33 032</td>
</tr>
<tr>
<td>Norwegian epilepsy association</td>
<td>22 00 88 00</td>
</tr>
<tr>
<td>A Norwegian aid to children organisation</td>
<td>22 99 09 00</td>
</tr>
<tr>
<td>Help line for children/parents with narcotics/other problems</td>
<td>08 588</td>
</tr>
<tr>
<td>Red Cross line for children and adolescents</td>
<td>800 33 321</td>
</tr>
<tr>
<td>Smoker's line – tobacco addiction stop smoking help line</td>
<td>800 40 085</td>
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<tr>
<td>Centre for couples and sexuality</td>
<td>800 33 866</td>
</tr>
<tr>
<td>Sexual health line</td>
<td>810 02 244</td>
</tr>
<tr>
<td>Anonymous tip-off line for notifying suspicion of the sexual abuse of children</td>
<td>09 989</td>
</tr>
<tr>
<td>Help and concern line help for and notification of abuse of the elderly</td>
<td>800 30 196</td>
</tr>
</tbody>
</table>