

ISD/PHC Team



## Global Patient Safety Action Plan 2021-2030: Towards eliminating avoidable harm in health care in Africa

### Rationale

Patient safety is a key dimension of the quality of health care. By and large, it involves carrying out strategies for reducing all unnecessary harm to patients associated with health care. The Seventy-second World Health Assembly 2019 adopted resolution WHA72.6 on global action on patient safety. All WHO Member States were urged to prioritize patient safety in health sector policies and programs to achieve Universal Health Coverage (UHC). In furtherance of the resolution, the Global Patient Safety Action Plan (GPSAP - 2021–2030) was adopted at the Seventy-fourth WHA in May 2021.

The African Region has for decades recognized patient safety as a priority and an important component of quality health care delivery. As far back as 2008, the WHO Africa regional committee adopted the resolution AFR/RC58/8 to urge countries to pay the highest attention to patient safety issues. To facilitate implementation, a guide for developing a national patient safety policy and strategic plan was designed to support improvement efforts. Other significant efforts in the past comprised the WHO African Partnerships for Patient Safety (APPS) established in 2009 and the ISQua high-level forum on patient safety held in Cape Town, South Africa, in 2019.

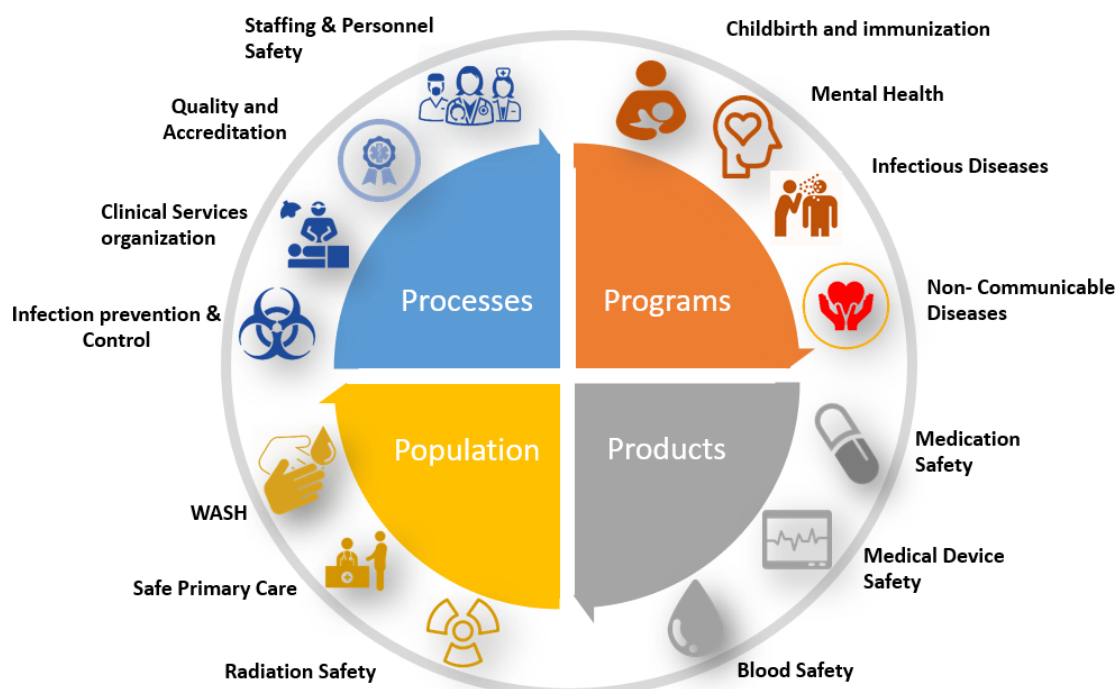
### Key messages

In the WHO African Region in 2021:

- 20% of countries have developed a national patient safety action plan (or equivalent)
- 19% of countries have a system for reporting “never events” (or sentinel events) in place
- 19% of countries have a significant reduction in medication-related harm (adverse drug events)
- 19% of countries have targets established for a reduction in healthcare-associated infections
- 16% of countries have a patient representative appointed to the governing board in most hospitals
- 14% of countries have patient safety included in professional postgraduate education curricula
- 15% of countries endorsed and signed the WHO charter on “Health worker safety: a priority for patient safety”
- 5% of countries have Healthcare facilities participating in a patient safety incident reporting and learning system
- 0% of countries have an annual report on patient safety performance published every year
- 0% of countries have a national patient safety network established

# 1. Scope of the situation in the WHO African Region

The infographic on patient safety framework below depicts the centrality of Patient Safety in all aspects of health service delivery.



Patient safety underpins all health interventions – programmes products and process designed for population health and wellbeing. The framework of organized activities that creates cultures, processes, procedures, behaviors, technologies, and environments in health care that consistently and sustainably lower risks, reduce the occurrence of avoidable harm, make error less likely and reduce the impact of harm when it does occur.

## 1.1 Context

- Increased Healthy life expectancy - from 47.1 in 2000 to 56.1 years in 2019.
- UHC service coverage index- (weighted) from 24 in 2000 to 46 in 2019. It ranged from 28 to 75 in 2019.

Communicable and non-communicable conditions and violence/injuries drive the burden of disease. Weak health systems, including limited governance and leadership, inappropriate infrastructure, low use of technologies, under-equipped health facilities, limited funding, inadequate human resources and ineffective data management systems. The COVID-19 pandemic further challenged all the health system's core components, including patient safety concerns

## 1.2 Burden of patient safety

The Region is facing limited data on patient safety with:

- High rates of healthcare-associated infections- (Algeria 9.8%, Tanzania 14.8% and Mali 18.9%), with patients undergoing surgery most frequently affected.
- The African region has the highest prevalence of poor-quality medicines, with an 18.7% prevalence of substandard and falsified medicines.
- Unsafe surgical care is a serious challenge affecting all countries, with major complication rates ranging from 3%–16% and death rates ranging from 0.2% to 10% annually.

## 1.3 Importance of patient safety improvement

There is a high probability of adverse events or patient harm due to multifaceted health system challenges:

- Weak governance, leadership and regulation.
- Inappropriate funding of health care systems.
- Unavailability of strategies, guidelines and tools.
- Inadequate number and poor mix of human resources for health, gaps in health care professionals' knowledge and practices.

Poor patient safety culture facilitating denial, blame and inconsistent reporting and learning system. Sub-optimal infrastructure, limited logistics and under-equipped health facilities. High illiteracy and limited involvement of patients and civil society in improving patient safety. Gaps in data/information, research and communication

## 1.4 Efforts at addressing patient safety

Resolution WHA 55.18 in 2004 urged member states to strengthen patient safety and quality of health care systems. The 58th session of the AFRO regional committee endorsed a technical paper on patient safety AFR/RC58-8 and some workshops were organized in 2009 to support countries to implement recommended actions.

African partnerships for patient safety project 2010-2015 (involved 20 countries in a fruitful North-south partnership). Nine countries conducted national patient safety situational analysis and developed roadmaps to bridge the gaps identified (2013-2016). Launch of 3rd Global Patient Safety Collaborative in Cape Town October 2019 African Patient Safety Initiative.

### Other initiatives:

Implantation of global patient safety challenges: 'Clean Care is Safer Care' (2004) with focus on reducing healthcare-associated infections; Safe surgery saves life (2008); Medication safety challenge (2017). Programme-specific actions- immunization, maternal and child health, etc Several initiatives such as conduction of situation analysis, development and implementation of national patient safety strategy/framework in member states: **Ghana, Kenya, Uganda, Namibia, Botswana, South Africa**, etc.

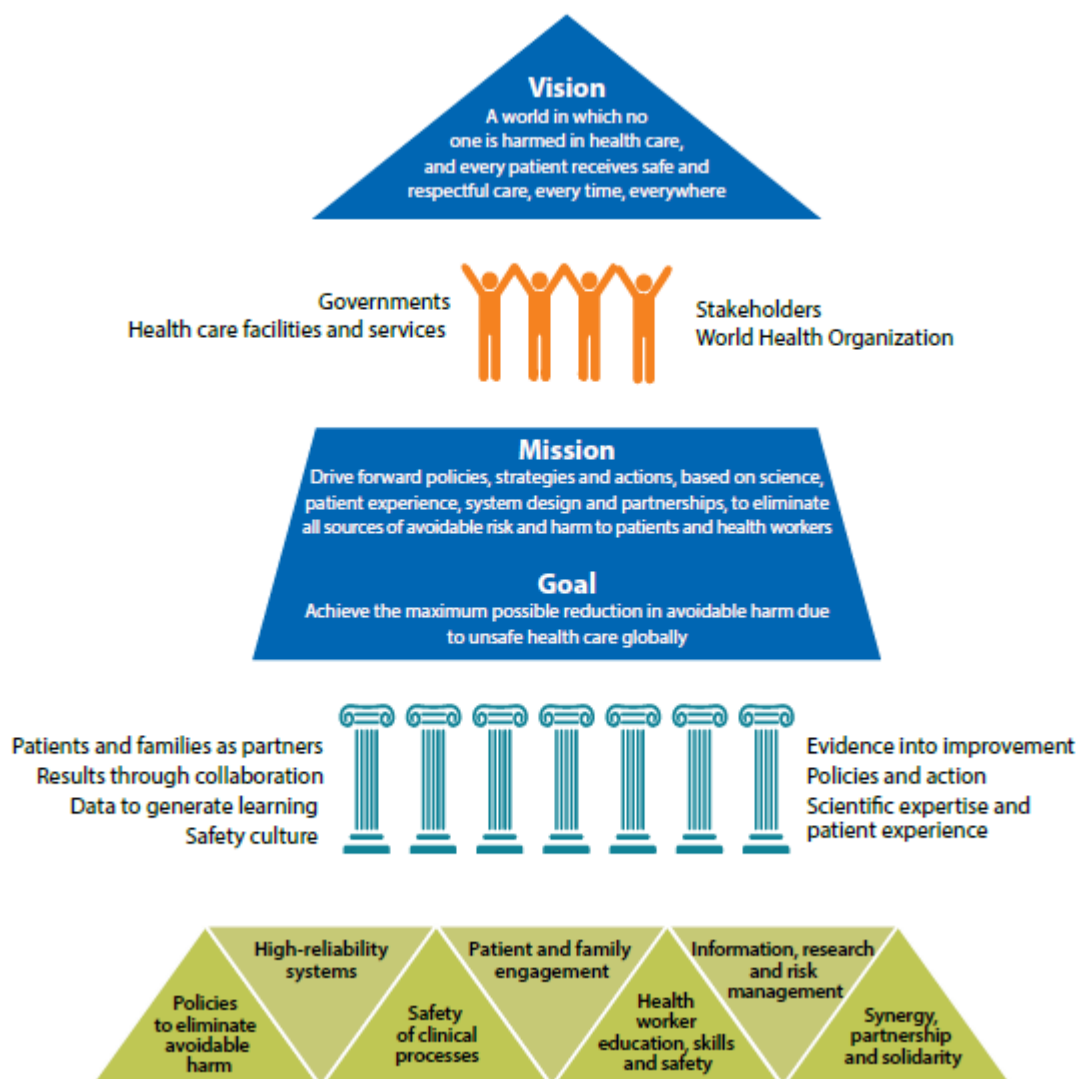
A regional webinar was held in June 2021 to orient and create awareness of the GPSAP.

**Global Patient Safety Action Plan 2021-2030** offers an excellent opportunity to mainstream patient safety in health care within the broader context of health system strengthening and progress towards UHC.

- Adapt the global action plan to the regional context to address challenges.
- Develop an operational implementation plan.
- Facilitate Africa Patient Safety Networks and platforms for interaction, exchange of experience, challenges and best practices.

## 2. Global patient Safety Action plan 2021-2030: Overview

The Seventy-fourth World Health Assembly (in 2021) approved the Decision WHA74(13) to adopt the Global Patient Safety Action Plan 2021–2030 and to request the Director-General to report back on progress in the implementation of the Global Patient Safety Action Plan 2021–2030 to the Seventy-sixth World Health Assembly in 2023 and thereafter every two years until 2031.



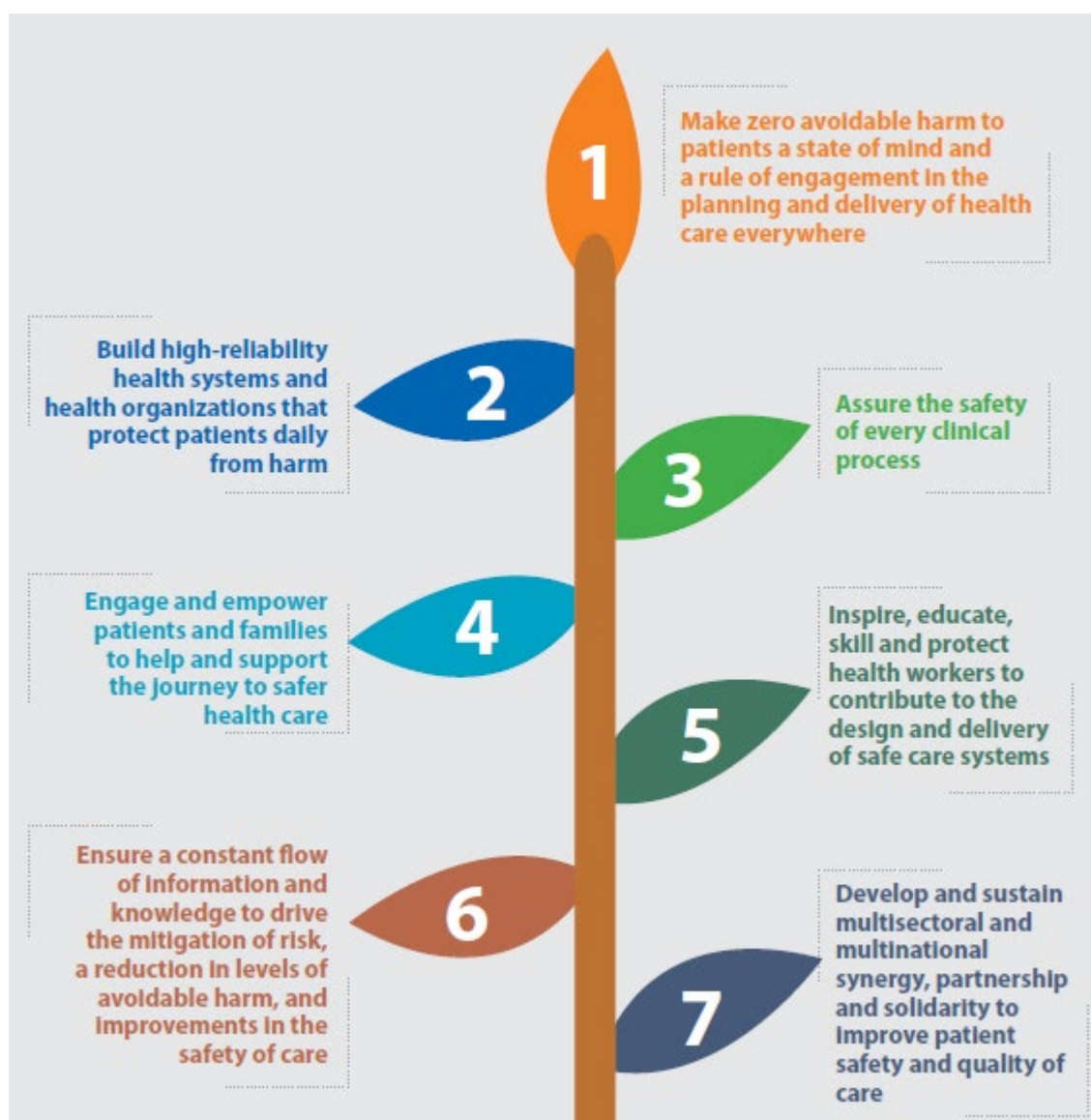
Today, patient harm due to unsafe care is a growing global public health challenge and is one of the leading causes of death and disability worldwide. Most of this patient harm is avoidable. As countries strive to achieve universal health coverage and the Sustainable Development Goals, the beneficial effects of improved access to health services can be undermined by unsafe care. Patient safety incidents can cause death, disability and suffering for victims and their families. The financial and economic costs of safety lapses are high. There is often reduced public confidence and trust in local health systems when such incidents are publicized. Health workers involved in serious incidents involving death or serious harm to a patient can also suffer lasting psychological harm, deep-seated guilt, and self-criticism.

Policymakers and political and health leaders worldwide have recognized the benefits of having a strategic and coordinated approach to patient safety, addressing the common causes of harm and the approaches to preventing it. Global advocacy in recent years has culminated in the adoption by the Seventy-second World Health Assembly (in 2019) of resolution WHA72.6 on “Global action on patient safety”.

The resolution urges Member States and, where applicable, regional economic integration organizations to recognize patient safety as a health priority in health sector policies and programmes to achieve universal health coverage. The World Health Assembly also requested the World Health Organization (WHO) to formulate a global patient safety action plan in consultation with Member States and all relevant stakeholders.

## 2.1 Framework for action: Strategic objectives

The framework includes seven strategic objectives, which can be achieved through 35 specific strategies:

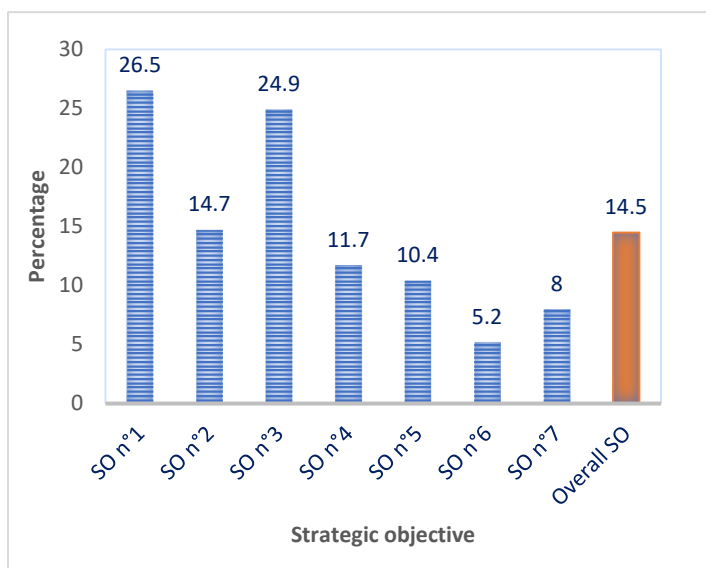


Few large organizations in any sector worldwide operate effectively without a clear, simple set of objectives that govern strategic and operational activities that are understood and owned by all staff. Establishing these at a high-level strategic objective for a system helps to focus all existing policies and activities of the health care system towards a common purpose.

The objectives should not create an extra burden or replace existing performance measures within countries or their systems and facilities. Instead, they should unify the work of the leadership, and the endeavors of managers and the care of doctors, nurses and other health workers. The strategies should constitute the guiding principles for everyday health care work to the big strategic decisions about the design of health care systems and serve as a simple public accountability framework.

## 2.2 Analysis of the overall strategic objectives in the WHO African Region

**Figure 1:** Strategic objectives of the Global Patient Safety Action Plan fully met in the WHO African Region, 2021 (*source: WHO*)



- Among the 21 countries that participated to the survey in 2021, **14.5 % have fully met** the overall strategic objectives of GPSAP 2021-2030.
- The strategic objective that contributed to the increase in the overall strategic objectives was the strategic objective 1 on Policies to eliminate avoidable harm in health care framework for action with 26.5 % of countries that fully met that objective.
- The strategic objective 6 on information, research and risk management pulled down the strategic objective 7, with only 5.2% of countries that fully met that objective

SO: Strategic objective

**Table 1:** Scorecard of Strategic Objectives of the Global Patient Safety Action Plan in the WHO African Region, 2021 (*Source: WHO*)

Strategic objectives (SO)	Score	Level
SO n°1	5	2
SO n°2	3.5	2
SO n°3	4.9	2
SO n°4	3.1	2
SO: n°5	2.8	1
SO: n°6	2.6	1
SO: n°7	2.9	1
<b>Overall strategic objective</b>	<b>3.5</b>	<b>2</b>

- The overall score of strategic objectives of the Global Patient Safety Action Plan in the WHO African Region in 2021, was **3.5** meaning that the Region were **progressing** in the implementation of the GPSAP 2021-2030.

### Scoring criteria:

Level 0: Not Initiated with Score < 1

Level 1: Basic with Score 1-3

Level 2: Progressing with Score 3-6

Level 3: Advanced with Score 6-9

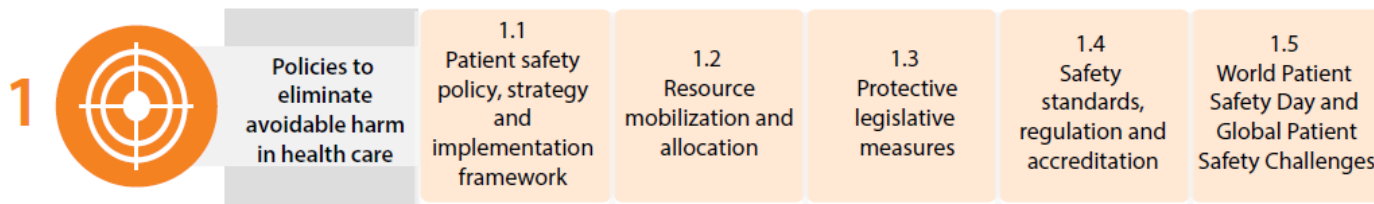
Level 4: Developed with Score > 9

### 3. Progress towards the strategic objectives in the WHO African Region

The strategic objectives are intended to be easily understood and envisioned, readily communicated, and have an uplifting and inspiring tone as well as being few enough in number not to prove daunting and to cause implementation overload.

#### 3.1. Strategic Objective 1: Policies to eliminate avoidable harm in health care framework for action

**Make zero avoidable harm to patients a state of mind and a rule of engagement in the planning and delivery of health care everywhere**



This first objective, dealing with the idea of zero harm, has been very carefully judged. Arguments range in global health circles about the wisdom of setting a central or overarching goal. On the one hand, some people say that without a compelling vision, a programme will have no chance of adoption amongst the many global health programmes that set their direction on a highly desirable and beneficial outcome for humanity.

Others claim that setting an unreachable goal is demoralizing and demotivating and will not attract people to its cause. The Global Patient Safety Action Plan 2021–2030 sets a vision and philosophy of zero harm, rather than a concrete target.



##### 3.1.1. Situational Analysis

In the WHO African Region, in 2021:

- 50% of countries' national health policies and strategies have prioritized patient safety.
- 25% of countries have developed a patient safety policy and strategy, while 20% have developed a national patient safety action plan.
- 10% of countries have a budget line in the national health budget for patient safety. However, no countries report having mobilized adequate financial and human resources to support a patient safety program in the long term.
- 60% of countries have established laws for mandatory licensing of health care facilities and authorization of medical products; 15% of countries have dedicated legislation addressing patient safety as part of health service delivery.
- 30% of countries have regulations for health data protection and confidentiality; 5% provide legal protection to health workers who report patient safety incidents.
- 35% of countries have defined minimum safety standards and included them in criteria for licensing of health care facilities; 55% have included safety standards as criteria for health service assessments; 45% have defined safety standards for specific clinical services (e.g., radiotherapy, dialysis, transfusion services, surgical services, emergency service)
- 60% of countries celebrated World Patient Safety Day, and 40% launched a national campaign aligned with the global WPSD. 15% reporting prioritizing and implementing WHO Global Patient Safety challenges nationally.

### 3.1.2. Progress towards Strategic Objective 1

The WHO African Region is **progressing** (with a score of 5) in implementing strategic objective 1: Policies to eliminate avoidable harm in health care framework for action.

**Table 2:** Overview of the Global Patient Safety Strategic Objective one implementation in the WHO African Region, 2021, (Source: WHO)

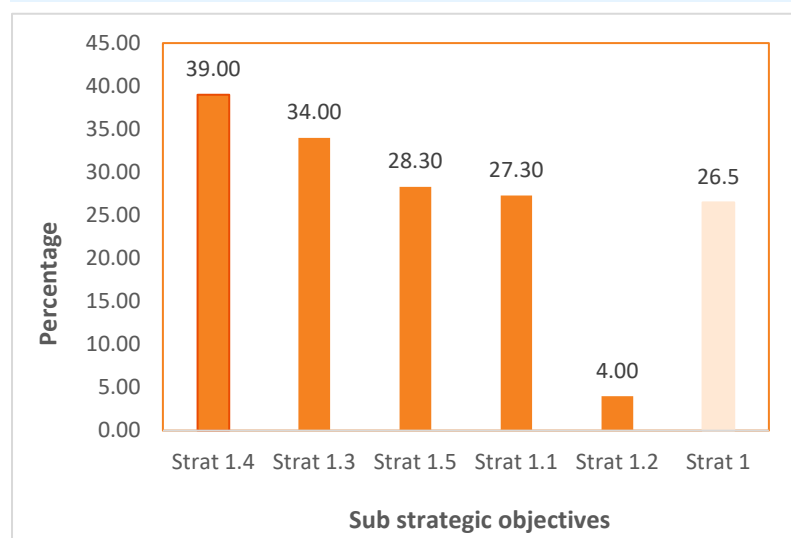
Strategy	Fully Met	Partially Met	Not Initiated	Not Applicable	Score
Strategy 1.1: Patient safety policy, strategy and implementation framework	27.3%	48.6%	24.1%	0%	5.2
Strategy 1.2: Resource mobilization and allocation	4%	50%	40%	6%	3.1
Strategy 1.3: Protective legislative measures	34%	30%	31%	5%	5.1
Strategy 1.4: Safety standards, regulation, and accreditation	39%	49%	9%	3%	6.5
Strategy 1.5: World Patient Safety Day and Global Patient Safety Challenges	28.3%	44.4%	27.3%	0%	5.0
<b>Strategic Objective 1: Policies to eliminate avoidable harm in health care framework for action</b>	<b>26.5%</b>	<b>44.4%</b>	<b>26.3%</b>	<b>2.8%</b>	<b>5.0</b>

**Not initiated:** No initiative has been taken.

**Partially met:** Some aspects of patient safety have been addressed in other health service improvement programmes.

**Fully met:** A national patient safety programme has been established as a stand-alone or a distinct entity in another initiative and is fully operational.

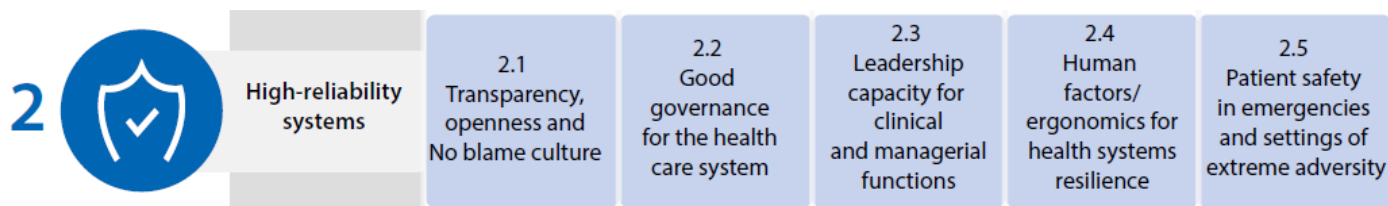
**Figure 2:** Sub-strategic objectives 1 that have been fully met in the WHO African Region, 2021, (Source: WHO)



- Among the 21 countries that participated to the survey in 2021, **26.5% have fully met the strategic objective 1.**
- The sub-strategic objective that contributed to the increase in the Strategic objective 1 was the strategy 1.4 on Safety standards, regulation, and accreditation diseases with 39 % of countries that fully met that objective.
- The sub-strategic objective 1.2 on resource mobilization and allocation were the sub-strategic objective pulled down the Strategic objective 1, with only 4% of countries that fully met that objective

## 3.2. Strategic Objective 2: High-reliability systems

**Build high-reliability health systems and health organizations that protect patients daily from harm.**



A key success factor in high-risk industries other than health care is the emphasis placed on preventing accidents, harm and mistakes that have serious consequences. The concept that has emerged from this approach is resilience, which is an organization's capacity and capability to constantly maintain a safe state of operating and to recover quickly and restore this safe state when something goes wrong.

Such organizations have an ability to anticipate problems, use data to monitor processes and work conditions, respond to signals in anticipation of challenges, and consistently learn from successes and failures.



### 3.2.1. Situational Analysis

In the WHO African Region, in 2021:

- 14% of countries in the region have included a culture of safety as a key intervention in their health programming; 19% of countries have legislation that establishes a patient safety institutional framework.
- 19% report having a functional system to report never or sentinel events, and 9% have an administrative mechanism in place to report adverse events; only 5% report having periodic surveys and assessments on how organizational safety culture is being established.
- 57% of countries report having a national patient safety officer, and 40% have a national body to coordinate patient safety activities.
- 19% of countries recognized leadership capacity building as a key strategy in patient safety programming; less than 10% reported having leadership capacity building initiatives among clinical and managerial leaders, the development of resources for capacity development.
- Low reporting (5%) on expertise and training opportunities around the application of human factor principles to improve patient safety; Structural safety norms and codes were reported as being enforced in all healthcare facilities of 14% of countries, and non-structural safety norms in 24% of countries.
- 19% of countries report that all known and potential threats to a safe and functional health system have been identified, and a risk mitigation strategy is being developed for these
- 29% report that patient safety has been incorporated into health emergency preparedness and response, and 19% of countries have a real-time alert system for imminent patient safety risks.

### 3.2.2. Progress towards Strategic Objective 2

The WHO African Region is **progressing** (with a score of 3.5) in implementing strategic objective 2: High-reliability systems.

**Table 3:** Overview of the Global Patient Safety Strategic Objective two implementation in the WHO African Region, 2021, (Source: WHO)

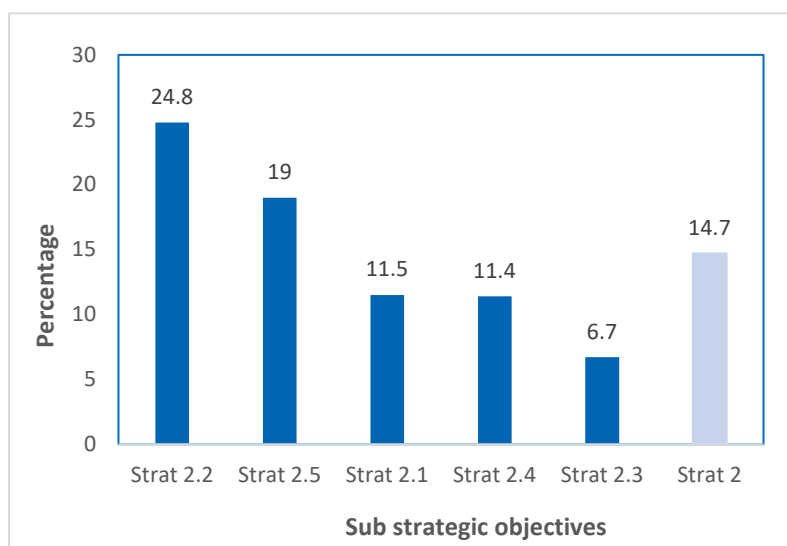
Strategy	Fully Met	Partially Met	Not Initiated	Not Applicable	Score
Strategy 2.1: Transparency, openness, and No blame culture	11.5%	47.0%	41.5%	0%	3.5
Strategy 2.2: Good Governance for the health care system	24.8%	41.9%	31.4%	1.9%	4.6
Strategy 2.3: Leadership capacity for clinical and managerial functions	6.7%	36.2%	55.2%	1.9%	2.5
Strategy 2.4: Human factors/ergonomics for health systems resilience	11.4%	40%	47.6%	1%	3.2
Strategy 2.5: Patient safety in emergencies and settings of extreme adversity	19%	38.1%	40%	2.9%	3.9
<b>Strategic Objective 2: High-reliability systems</b>	<b>14.7%</b>	<b>40.6%</b>	<b>43.2%</b>	<b>1.5%</b>	<b>3.5</b>

**Not initiated:** No initiative has been taken.

**Partially met:** Some aspects of patient safety have been addressed in other health service improvement programmes.

**Fully met:** A national patient safety programme has been established as a stand-alone or a distinct entity in another initiative and is fully operational.

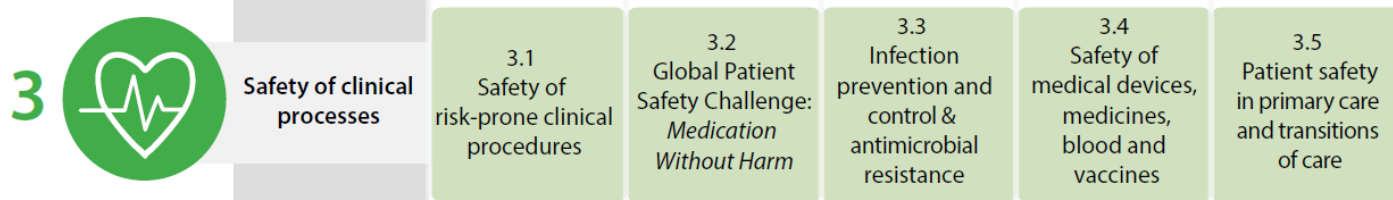
**Figure 3:** Sub-strategic objectives 2 that have been fully met in the WHO African Region, 2021, (Source: WHO)



- Among the 21 countries that participated to the survey in 2021, **14.7% have fully met the strategic objective 2.**
- The sub-strategic objective that contributed to the increase in the Strategic objective 2 was the strategy 2.2 on good governance for the health care system with 24.8 % of countries that fully met that objective.
- The sub-strategic objective 2.3 on leadership capacity for clinical and managerial functions pulled down the Strategic objective 2, with only 6.7% of countries that fully met that objective.

### 3.3. Strategic Objective 3: Safety of clinical processes

Assure the safety of every clinical process.



As patients seek help from a health care system for advice, investigation, diagnosis, treatment and rehabilitation, they enter a series of care processes that are often extensively interconnected. The number and range of clinical processes and procedures is huge and varies from the relatively simple, such as prescribing a medicine, to the much more complex, such as major heart surgery.

In the latter case, every part of the preparation, the procedure itself, and the aftercare comprises many processes, each involving separate steps and stages, even routinely encompassing 60 people and sometimes more.



#### 3.3.1. Situational Analysis

In the WHO African Region, in 2021:

- 10% of countries have expert groups to assess key clinical practice domains that contribute to significant harm and have patient safety improvement initiatives to address major sources of harm during care.
- 15% of countries have a program to improve patient safety across every discipline and health programmes; and mechanisms in place to disseminate lessons learned from safety and quality improvement programs.
- 14% of countries have taken actions to improve medication safety in select situations (transitions in care high-risk conditions etc.), and of 19% countries have a reporting mechanism in place to report adverse drug events and medication errors.
- 10% or less have a national expert group to implement medication without harm (the third WHO Global Patient Safety Challenge) or initiatives to enhance patient awareness around safe medication.
- 23% of countries have a mechanism for measuring medication-related harm, and 19% have set a national target for the reduction of medication-related harm.
- 43% of countries have a national program for infection prevention and control; 38% have guidelines to prevent and control healthcare-associated infections and provide IPC training to all health workers. 9% countries have a system to monitor compliance with IPC guidelines
- 75% of countries have a functional immunization safety system in place, with an adverse events review committee and reporting mechanism; 4 of 7% countries have a program to assure the safety of medicines; 62% have a national blood program.
- Standard operating procedures around safe transitions in care and continuity of care exist in 15%; 20% of countries have included patient safety interventions in primary care services

### 3.3.2. Progress towards Strategic Objective 3

The WHO African Region is **progressing** (with a score of 4.9) in implementing the strategic objective 3: Assure the safety of every clinical process.

**Table 4:** Overview of the Global Patient Safety Strategic Objective three implementation in the WHO African Region, 2021, (Source: WHO)

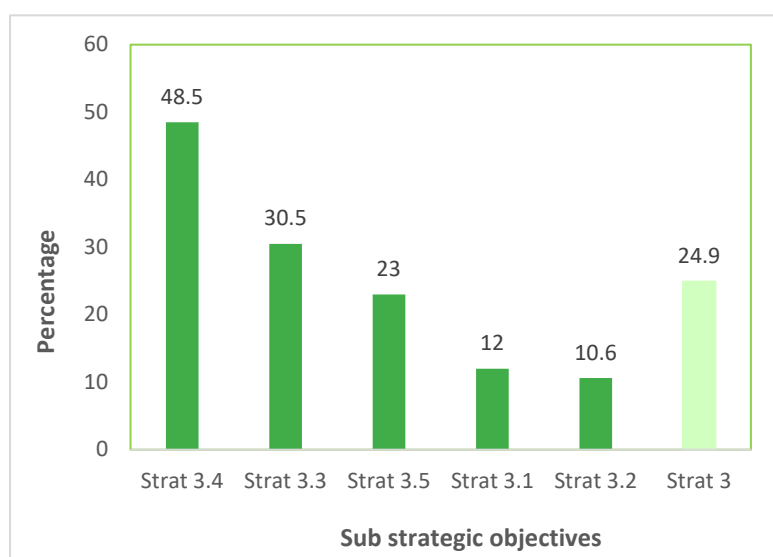
Strategy	Fully Met	Partially Met	Not Initiated	Not Applicable	Score
Strategy 3.1: Safety of risk-prone clinical procedures	12%	47%	40%	1%	3.6
Strategy 3.2: Global Patient Safety Challenge: Medication Without Harm	10.6%	60.5%	29%	0%	4.1
Strategy 3.3: Infection prevention and control & antimicrobial resistance	30.5%	47.6%	21.9%	0%	5.4
Strategy 3.4: Safety of medical devices, medicines, blood and vaccines	48.5%	43.6%	6.9%	1%	7.1
Strategy 3.5: Patient safety in primary care and transitions of care	23%	44%	33%	0%	4.5
<b>Strategic Objective 3: Safety of clinical processes</b>	<b>24.9%</b>	<b>48.5%</b>	<b>26.2%</b>	<b>0.4%</b>	<b>4.9</b>

**Not initiated:** No initiative has been taken.

**Partially met:** Some aspects of patient safety have been addressed in other health service improvement programmes.

**Fully met:** A national patient safety programme has been established as a stand-alone or a distinct entity in another initiative and is fully operational.

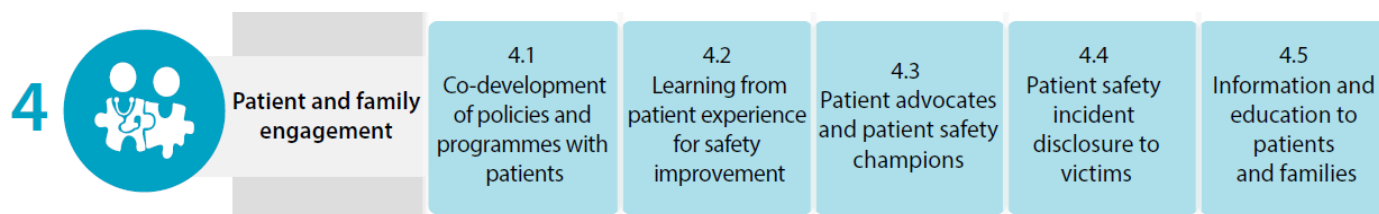
**Figure 4:** Sub-strategic objectives 3 that have been fully met in the WHO African Region, 2021, (Source: WHO)



- Among the 21 countries that participated to the survey in 2021, **24.9% have fully met the strategic objective 3.**
- The sub-strategic objective that contributed to the increase in the Strategic objective 3 was the strategy 3.4 on Safety of medical devices, medicines, blood and vaccines with 48.5 % of countries that fully met that objective.
- The sub-strategic objective 3.2 on Global Patient Safety Challenge: Medication Without Harm pulled down the Strategic objective 3, with only 10.6% of countries that fully met that objective.

### 3.4. Strategic Objective 4: Patient and family engagement

**Engage and empower patients and families to help and support the journey to safer health care.**



Patient engagement and empowerment is perhaps the most powerful tool to improve patient safety. Patients, families, and other informal caregivers bring insights from their experiences of care that cannot be substituted or replicated by clinicians, managers, or researchers.

This is especially so for those who have suffered harm. Patients, families, and caregivers can serve as vigilant observers of a patient's condition and can alert health care professionals when new needs arise. Given proper information, the patient and family can help to be the eyes and ears of the system.



#### 3.4.1. Situational Analysis

In the WHO African Region, in 2021:

- 20% of countries have identified patient networks and civil society organizations that engage in patient safety, and 10% have formally included patient representatives in national/subnational committees.
- 45% of countries have developed a national patient rights charter, with safe care as a core component; 15% have patient representatives appointed to the boards of at least 60% of health care facilities.
- 14% of countries have mechanisms to gather feedback from patients and their families on quality of care and to incorporate patient feedback into healthcare design and delivery.
- 5% have initiatives to document patients' experience of harm and unsafe care that aim to incorporate feedback to health system design; 5% of countries recognized the role of patients in improved patient safety and have developed technical and educational resources to enhance patient advocates' capacities.
- 26% of countries have national guidance around informed consent; 10% or less have procedures in place to give patients access to their medical records, to disclose adverse events to patients/ families, and to provide psychological support to patients and health workers following an adverse event.
- Less than 10% of the region's countries have invested in enhancing public knowledge about patient safety, engaging patients and families in shared decision-making for care, and exploring digital technologies to better engage patients and families in safe care

### 3.4.2. Progress towards Strategic Objective 4

The WHO African Region is **progressing** (with a score of 3.1) in implementing strategic objective 4: Engage and empower patients and families to help and support the journey to safer health care.

**Table 5:** Overview of the Global Patient Safety Strategic Objective four implementation in the WHO African Region, 2021, (Source: WHO)

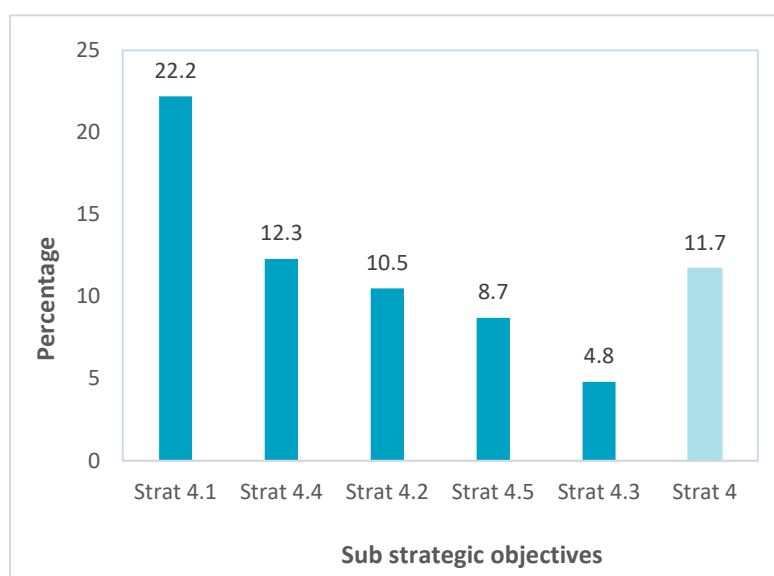
Strategy	Fully Met	Partially Met	Not Initiated	Not Applicable	Score
Strategy 4.1: Co-development of policies and programmes with patients	22.2%	41.3%	35.5%	1.1%	4.3
Strategy 4.2: Learning from patient experience for safety improvement	10.5%	42.9%	44.8%	1.9%	3.3
Strategy 4.3: Patient advocates and patient safety champions	4.8%	30.5%	61.9%	2.9%	2.0
Strategy 4.4: Patient safety incident disclosure to victims	12.3%	37.5%	49.3%	1%	3.1
Strategy 4.5: Information and education to patients and families	8.7%	35.6%	50%	5.8%	2.8
<b>Strategic Objective 4: Patient and family engagement</b>	<b>11.7%</b>	<b>37.5%</b>	<b>48.3%</b>	<b>2.5%</b>	<b>3.1</b>

**Not initiated:** No initiative has been taken.

**Partially met:** Some aspects of patient safety have been addressed in other health service improvement programmes.

**Fully met:** A national patient safety programme has been established as a stand-alone or a distinct entity in another initiative and is fully operational.

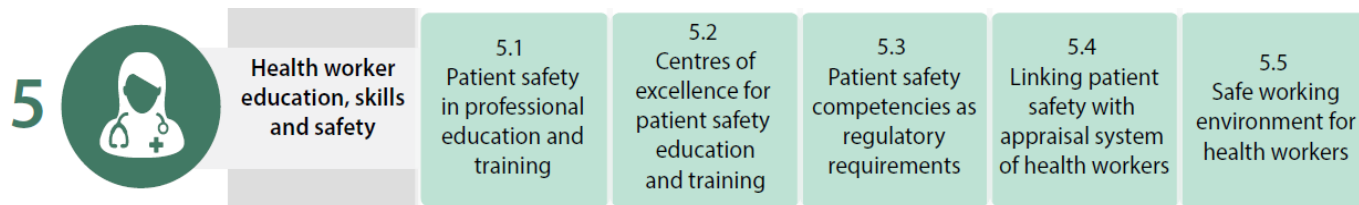
**Figure 5:** Sub-strategic objectives 4 that have been fully met in the WHO African Region, 2021, (Source: WHO)



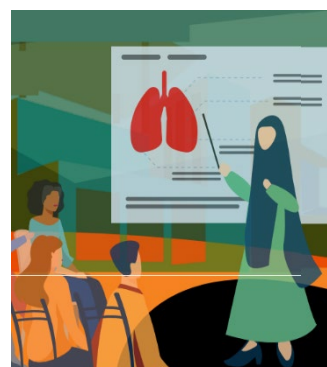
- Among the 21 countries that participated to the survey in 2021, **11.7% have fully met the strategic objective 4.**
- The sub-strategic objective that contributed to the increase in the Strategic objective 4 was the strategy 4.1 on co-development of policies and programmes with patients with 22.2 % of countries that fully met that objective.
- The sub-strategic objective 4.3 on patient advocates and patient safety champions pulled down the strategic objective 4, with only 4.8% of countries that fully met that objective.

### 3.5. Strategic Objective 5: Health worker education, skills, and safety

**Inspire, educate, skill, and protect health workers to contribute to the design and delivery of safe care systems.**



Whilst all health workers are committed to keeping their patients safe, the majority will believe that they are discharging this commitment through practicing within the ethical code of practice, which is synonymous with being a member of their profession. Fewer will think beyond this to fully appreciate the scope of the risks involved in the delivery of health care and the scale of avoidable harm, including preventable and treatable harm, that arise daily within every health care system in the world.



#### 3.5.1. Situational Analysis

In the WHO African Region, in 2021:

- 5% of countries reported that the WHO Patient Safety Curriculum Guide has been adopted at the national level.
- 9% have incorporated patient safety in medical undergraduate curricula, and 14% have included it in postgraduate medical curricula.
- 19% countries have incorporated health workers safety into in-service training for health professionals.
- 14% of countries have a national institution designated for providing education and training in patient safety, and 9% report having subnational training centers.
- 10% of countries recognize patient safety as a core competence for healthcare professionals, linked with licensing procedures for health workers, and this competence is strengthened through refresher in-service trainings.
- 38% of countries have a periodic performance appraisal system for all categories of health professionals; 5% have a linked system where credits for participating in patient safety count towards in-service professional development programs.
- 15% of countries have endorsed and signed the WHO charter on health worker safety; 20% have a national program on occupational health and safety of health workers and mechanisms for vaccinating health workers against preventable infections.

### 3.5.2. Progress towards Strategic Objective 5

The level of the WHO African Region is still **basic** (with a score of 2.8) in implementing the strategic objective 5: Inspire, educate, skill, and protect health workers to contribute to the design and delivery of safe care systems.

**Table 6:** Overview of the Global Patient Safety Strategic Objective five implementation in the WHO African Region, 2021, (Source: WHO)

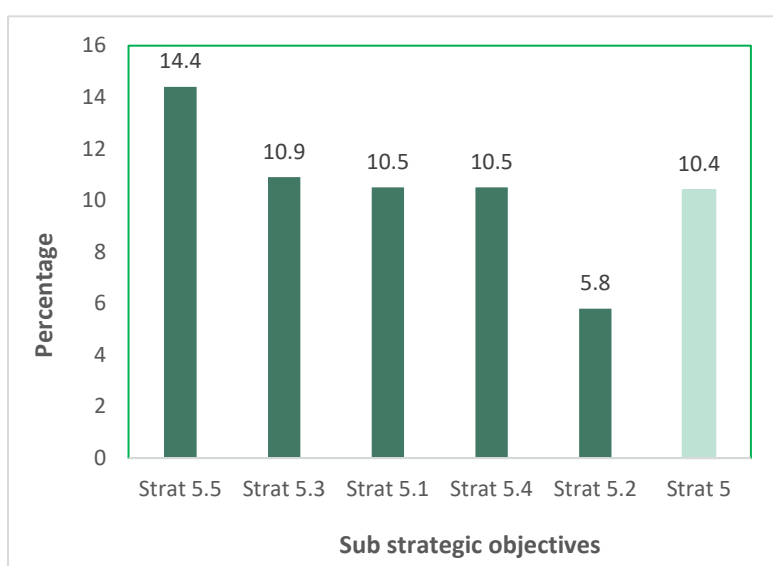
Strategy	Fully Met	Partially Met	Not Initiated	Not Applicable	Score
Strategy 5.1: Patient safety in professional education and training	10.5%	35.2%	50.5%	3.8%	2.9
Strategy 5.2: Centres of excellence for patient safety education and training	5.8%	21.1%	66.4%	6.7%	1.7
Strategy 5.3: Patient safety competencies as Regulatory requirements	10.9%	39.6%	48.5%	1%	3.1
Strategy 5.4: Linking patient safety with appraisal system of health workers	10.5%	32.4%	53.3%	3.8%	2.8
Strategy 5.5: Safe working environment for health workers	14.4%	39.3%	43.2%	3%	3.5
<b>Strategic Objective 5: Health worker education, skills, and safety</b>	<b>10.4%</b>	<b>33.5%</b>	<b>52.4%</b>	<b>3.7%</b>	<b>2.8</b>

**Not initiated:** No initiative has been taken.

**Partially met:** Some aspects of patient safety have been addressed in other health service improvement programmes.

**Fully met:** A national patient safety programme has been established as a stand-alone or a distinct entity in another initiative and is fully operational.

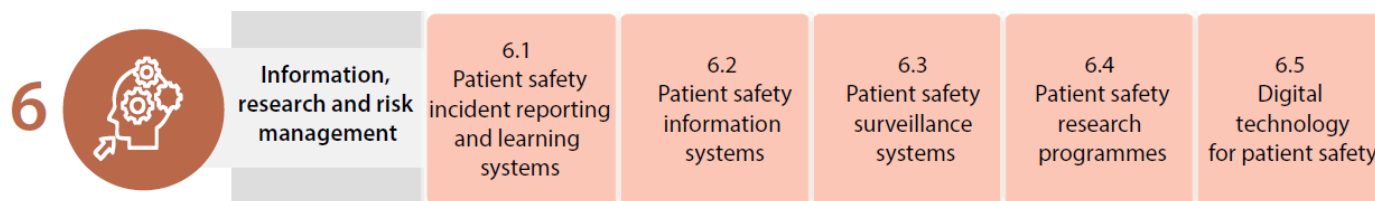
**Figure 6:** Sub-strategic objectives 5 that have been fully met in the WHO African Region, 2021, (Source: WHO)



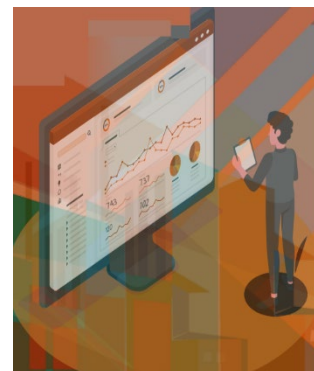
- Among the 21 countries that participated to the survey in 2021, **10.4% have fully met the strategic objective 5.**
- The sub-strategic objective that contributed to the increase in the Strategic objective 5 was the strategy 5.5 on safe working environment for health workers with 14.4 % of countries that fully met that objective.
- The sub-strategic objective 5.2 on centres of excellence for patient safety education and training pulled down the strategic objective 5, with only 5.8% of countries that fully met that objective.

## 3.6. Strategic Objective 6: Information, research, and risk management

**Ensure a constant flow of information and knowledge to drive the mitigation of risk, reduction in levels of avoidable harm, and improvements in the safety of care.**



Every health programme requires a source of valid, reliable data to provide information and construct measures for its key activities, for example, identifying priorities and problems, comparative benchmarking, formulating action, and monitoring performance and impact. There has been a long tradition of developing such an information infrastructure in established fields of public health, notably communicable disease prevention and control. In some cases, this goes back to the late 19th century. Indeed, without good data and information systems, little progress would have been made in reducing the spread and overall burden of infection worldwide.



### 3.6.1. Situational Analysis

In the WHO African Region, in 2021:

- 9% of countries have a system to define and classify patient safety incidents, and 15% use a standardized format for reporting aligned with WHO protocol around classification and incident reporting.
- Less than 10% of countries report consistent usage of patient safety incident reporting across health facilities, or the presence of regular alerts on significant sources of patient risk and harm.
- 19% of countries have incorporated patient safety indicators into their health information systems; 5% report the presence of an accountability mechanism to improve indicators on patient safety.
- 10% of countries have an independent mechanism in place to investigate sentinel events or cases of severe harm; 5% have periodic assessments of patient safety processes and practices in health care facilities.
- 10% of countries reported using evidence from international and national research to inform policy and practice decisions; No investment was reported in identifying priority research areas at the local/national level, resource allocation for patient safety research, translational and implementation research on patient safety.
- 5% of countries have identified emerging technologies that can improve the safety of health services and have created a digital health strategy that has a strong focus on patient safety.

### 3.6.2. Progress towards Strategic Objective 6

The level of the WHO African Region is still **basic** (with a score of 2.6) in the implementation of the strategic objective 6: Ensure a constant flow of information and knowledge to drive the mitigation of risk, reduction in levels of avoidable harm, and improvements in the safety of care.

**Table 7:** Overview of the Global Patient Safety Strategic Objective six implementation in the WHO African Region, 2021, (Source: WHO)

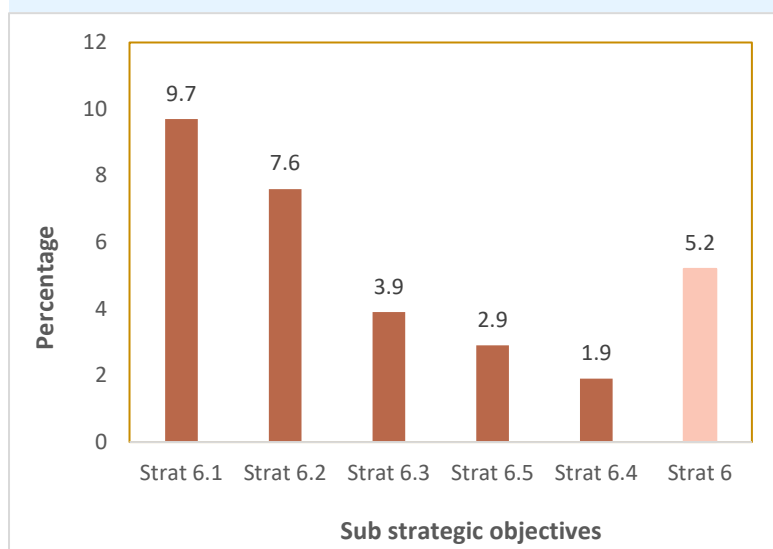
Strategy	Fully Met	Partially Met	Not Initiated	Not Applicable	Score
Strategy 6.1: Patient safety incident reporting and learning systems	9.7%	44.2%	42.3%	3.9%	3.3
Strategy 6.2: Patient safety information systems	7.6%	43.8%	45.7%	2.9%	3
Strategy 6.3: Patient safety surveillance systems	3.9%	32.9%	63.2%	0%	2
Strategy 6.4: Patient safety research programmes	1.9%	24.8%	66.7%	6.7%	1.5
Strategy 6.5: Digital technology for patient safety	2.9%	53.3%	39%	4.8%	3.1
<b>Strategic Objective 6: Information, research, and risk management</b>	<b>5.2%</b>	<b>39.8%</b>	<b>51.4%</b>	<b>3.6%</b>	<b>2.6</b>

**Not initiated:** No initiative has been taken.

**Partially met:** Some aspects of patient safety have been addressed in other health service improvement programmes.

**Fully met:** A national patient safety programme has been established as a stand-alone or a distinct entity in another initiative and is fully operational.

**Figure 7:** Sub-strategic objectives six that have been fully met in the WHO African Region, 2021, (Source: WHO)



- Among the 21 countries that participated to the survey in 2021, **5.2% have fully met the strategic objective 6.**
- The sub-strategic objective that contributed to the increase in the Strategic objective 6 was the strategy 6.1 on patient safety incident reporting and learning systems with 9.7 % of countries that fully met that objective. The sub-strategic objective 6.4 on patient safety research programmes pulled down the strategic objective 6, with only 1.9% of countries that fully met that objective.

## 3.7. Strategic Objective 7: Synergy, partnership and solidarity

### Synergy, collaboration, and solidarity.



Over the last two decades, the approach to improve patient safety has been primarily through a health system lens, with few defined mechanisms and structures to translate patient safety system elements to the point of care at the patient end. Several allied, safety-related programmes and clinical programmes have tended to operate in isolation with limited interaction, integration or any direct and mandated linkages with the health system elements of patient safety.

The missing link has been the lack of institutionalization of patient safety in different programmes and practice areas. Patient safety is an important part of health care delivery at all levels, including community, primary and hospital settings.



### 3.7.1. Situational Analysis

In the WHO African Region, in 2021:

- 19% of countries have identified all relevant stakeholders to be engaged in improving patient safety and have conducted a stakeholder analysis to understand how engagement, contributions and knowledge exchange can be strengthened.
- 9% have developed a mechanism for coordinating the engagement of different categories of stakeholders and improving synergy through the engagement of private sectors.
- 9% of countries have incorporated strategic elements of the Global patient safety action plan into their national policies and plans for patient safety and have defined national goals and targets aligned with the global patient safety targets.
- 5% of countries report that patient safety is a priority agenda topic high-level strategic and policy discussion, and 23% report that the participation of high-level political leaders (ministers or equivalent) is ensured during high-level discussions and summits on patient safety.
- 19% of countries share best practices and innovative solutions on global and regional platforms; 5% participate in global patient safety incident reporting systems.
- 29% of countries have integrated patient safety strategies into all relevant programs and disciplines (surgical safety, IPC, blood safety etc.), and 5% have incorporated these into health system strengthening programs (water, sanitation, occupation health etc.).

### 3.7.2. Progress towards Strategic Objective 6

The level of the WHO African Region is still **basic** (with a score of 2.9) in the implementation of the strategic objective 7: Synergy, partnership, and solidarity.

**Table 8:** Overview of the Global Patient Safety Strategic Objective seven implementation in the WHO African Region, 2021, (Source: WHO)

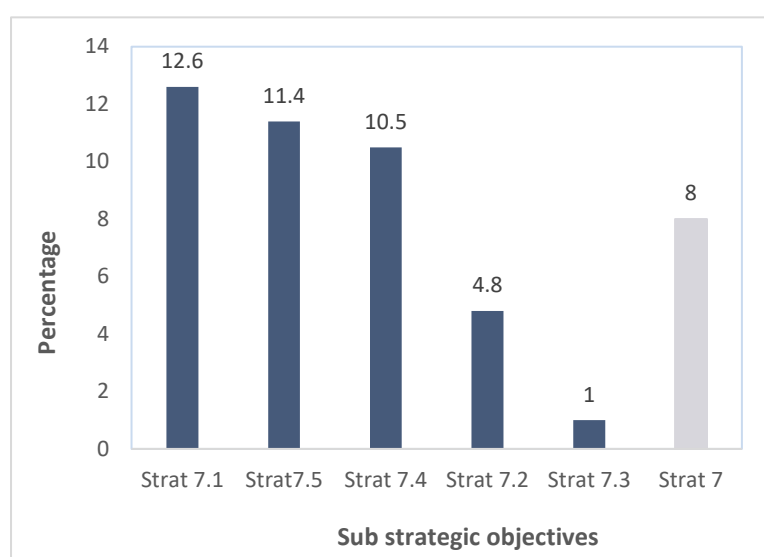
Strategy	Fully Met	Partially Met	Not Initiated	Not Applicable	Score
Strategy 7.1: Stakeholder's engagement	12.6%	36.5%	51%	0%	3.1
Strategy 7.2: Common Understanding and shared commitment	4.8%	39%	55.2%	1%	2.4
Strategy 7.3: Patient Safety Networks and collaboration	1%	41%	57.1%	1%	2.2
Strategy 7.4: Cross geographical and multisectoral initiatives for patient safety	10.5%	31.4%	52.4%	5.7%	2.8
Strategy 7.5: Alignment with technical programmes and initiatives	11.4%	59%	27.6%	1.9%	4.2
<b>Strategic Objective 7: Synergy, partnership and solidarity</b>	<b>8%</b>	<b>41.4%</b>	<b>48.7%</b>	<b>1.9%</b>	<b>2.9</b>

**Not initiated:** No initiative has been taken.

**Partially met:** Some aspects of patient safety have been addressed in other health service improvement programmes.

**Fully met:** A national patient safety programme has been established as a stand-alone or a distinct entity in another initiative and is fully operational.

**Figure 8:** Sub-strategic objectives seven that have been fully met in the WHO African Region, 2021, (Source: WHO)



- Among the 21 countries that participated to the survey in 2021, **8% have fully met the strategic objective 7.**
- The sub-strategic objective that contributed to the increase in the Strategic objective 7 was the strategy 7.1 on stakeholders' engagement with 12.6 % of countries that fully met that objective.
- The sub-strategic objective 7.3 on patient safety networks and collaboration pulled down the strategic objective 7, with only 1% of countries that fully met that objective

## 4. WHO recommendations

- Improved awareness creation on the GPSAP and the WHO Global Patient Safety challenges nationally.
- Establishment of baselines as well as development and implementation of national patient safety improvement frameworks. This includes streamlining and/or integrating patient safety intervention in all programmes at all levels of service delivery, especially, quality of care, IPC and customer care programmes.
- Increased national and local patient safety budget required, including ensuring long-term financial and human resources availability to sustain the programme as part of efforts to revitalize the implementation of the Primary Health Care approach.
- Improved support mechanisms for health workers are required, including improved legal protection, preventing punitive action when reporting adverse incidents, wellbeing and psychological support, etc.
- Higher investment in training and skill building to develop expert groups who can assess key practice domains that contribute to significant harm and develop patient safety improvement initiatives to address major sources of harm during care.
- Consistent investments in patient safety incident reporting and administrative mechanisms to report adverse events, including functional systems to report never or sentinel events. Alongside this, periodic surveys and assessments must be put in place to assess in real-time how organizational safety culture is being established within the health system.
- Fostering multisectoral actions to engage and raise the voice of health service users, families and civil societies in the design and delivery of health services.

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Data on Patient safety come from World Health Organization: Patient Safety Report.xlsx

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