

Medication Without Harm



WHO Global Patient Safety Challenge



**World Health
Organization**

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Foreword



More than 10 years ago, with colleagues in the World Health Organization (WHO), I was involved in establishing the foundation programme of a global patient safety initiative that was the first of its kind. It was wide-ranging and led to the launching of two Global Patient Safety Challenges. It also created a programme led by patients and families who had suffered avoidable harm from health care, and it set a clear agenda for research and development, among many other areas of work aimed at improving safety globally.

In the last decade, the WHO Patient Safety Programme has raised awareness across the world of the key concepts and strategies in patient safety. It has inspired passion for the universal cause of making health care safer. It has secured commitment at the highest level among health ministers and health leaders in Member States of WHO. It has provided standards, evidence-based guidance and practical tools to support those involved in the design of patient safety programmes within countries' health care systems. It has championed the use of the stories of patients and families who have been the victims of unsafe care.

Significant portions of the Programme's initial work have been delivered and a new direction and new priorities are now required for the next phase in this programme. Moreover, the global context of patient safety as a science has evolved considerably since the creation of the Programme. At the time, there were few, if any, national agencies with a recognized mandate to work on patient safety and virtually no training and education programmes in patient safety globally. Currently, many Member States have active safety and quality programmes, campaigns and agencies, although some still ask the World Health Organization to provide implementation assistance.

The WHO Patient Safety Team has received strong feedback from major stakeholders and

experts that a third global patient safety challenge should be the first of these new priorities and would be greatly welcomed. The Global Patient Safety Challenge is essentially a programme of change aimed at improvement and risk reduction. The programme blends evidence-based interventions with multi-modal implementation strategies. They seek to achieve widespread engagement and commitment. They span the needs of all countries. They are most impressive when they develop the features of a social movement, as the first and second challenges managed to do.

I was delighted and honoured, two years ago, when Assistant Director-General, Dr Marie-Paule Kieny, asked me to advise on the design of a third Global Patient Safety Challenge on medication safety. Dr Kieny and WHO's Director-General, Dr Margaret Chan have given me, as well as the world's patient safety community, unfailing support in continuing to pursue the goal of safer care as a core component of universal health coverage. In the hard work of bringing this historic Challenge to life, the WHO Secretariat

and leading world experts and stakeholders have given invaluable advice and support. In participating in the work to create this third Global Patient Safety Challenge, I have been driven and inspired by three things. Firstly, an awareness of studies in the 1960s that identified sources of medication error that can, and do, kill and harm patients in hospitals around the world today, nearly sixty years on. Secondly, that there are many individuals and groups in the fields of pharmacy, medicine, nursing, and other professions, who have been fighting for decades to see the day when medication safety would become a global priority; their passion has always been to save lives from this long-standing intractable type of avoidable harm. Thirdly, over the years, I have spoken to many people who have lost loved ones to medication-related harm; their stories, their quiet dignity and their acceptance of situations that should never have arisen have moved me deeply. It is to the memories of all those who have died due to incidents of unsafe care that this Challenge should be dedicated.

Sir Liam Donaldson

WHO Envoy for Patient Safety



Global Patient Safety Challenges

Global Patient Safety Challenges identify a patient safety burden that poses a significant risk to health, then develop frontline interventions and partner with countries to disseminate and implement the interventions. Each Challenge focuses on a topic that poses a major and significant risk to patient health and safety. WHO provides leadership and guidance in collaboration with Member States, stakeholders and experts, to develop and implement interventions and tools to reduce risk, improve safety and facilitate beneficial change.

Previous Global Patient Safety Challenges

Beginning in 2004, the World Health Organization (WHO) working in partnership with the (then) World Alliance for Patient Safety, initiated the two previous Global Patient Safety Challenges: *Clean Care is Safer Care*, followed a few years later by *Safe Surgery Saves Lives*. Both aimed to gain worldwide commitment and spark action to reduce health care infection and risk associated with surgery, respectively.

The scale and speed of implementation of these Challenges remains unprecedented. They secured strong and rapid commitment from health ministers, professional bodies, regulators, health system leaders, civil society and health care practitioners. Their success resulted from the following solid basis and achievements:

- an evidence-based analysis of the key problems and proposed solutions;
- an invitation to Member States and other relevant parties to pledge, or sign up, to address the aims of the Challenge;
- high-profile actions to generate passion and enthusiasm;
- facilitation of implementation by the WHO Secretariat and associated experts and advisers;
- strong leadership and extensive internal and external communication.

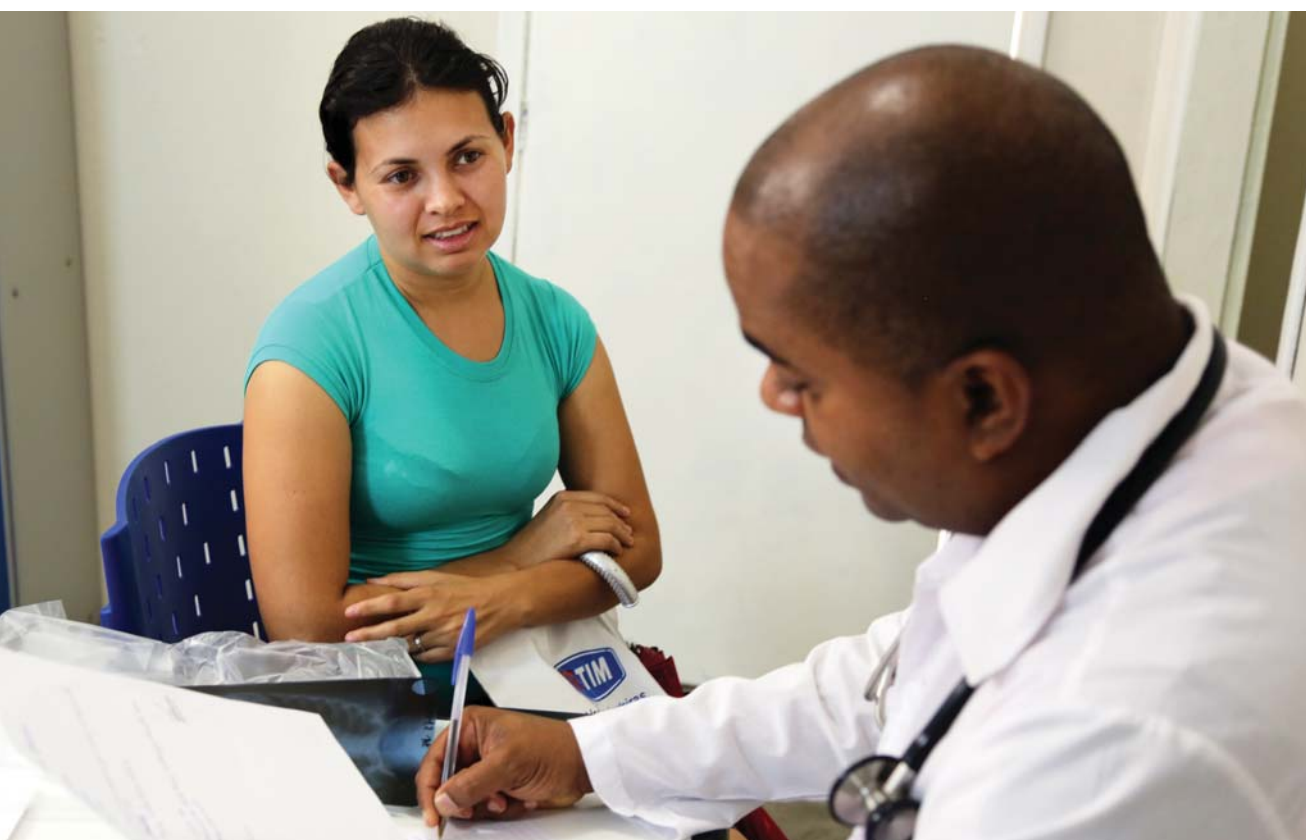
The third Global Patient Safety Challenge

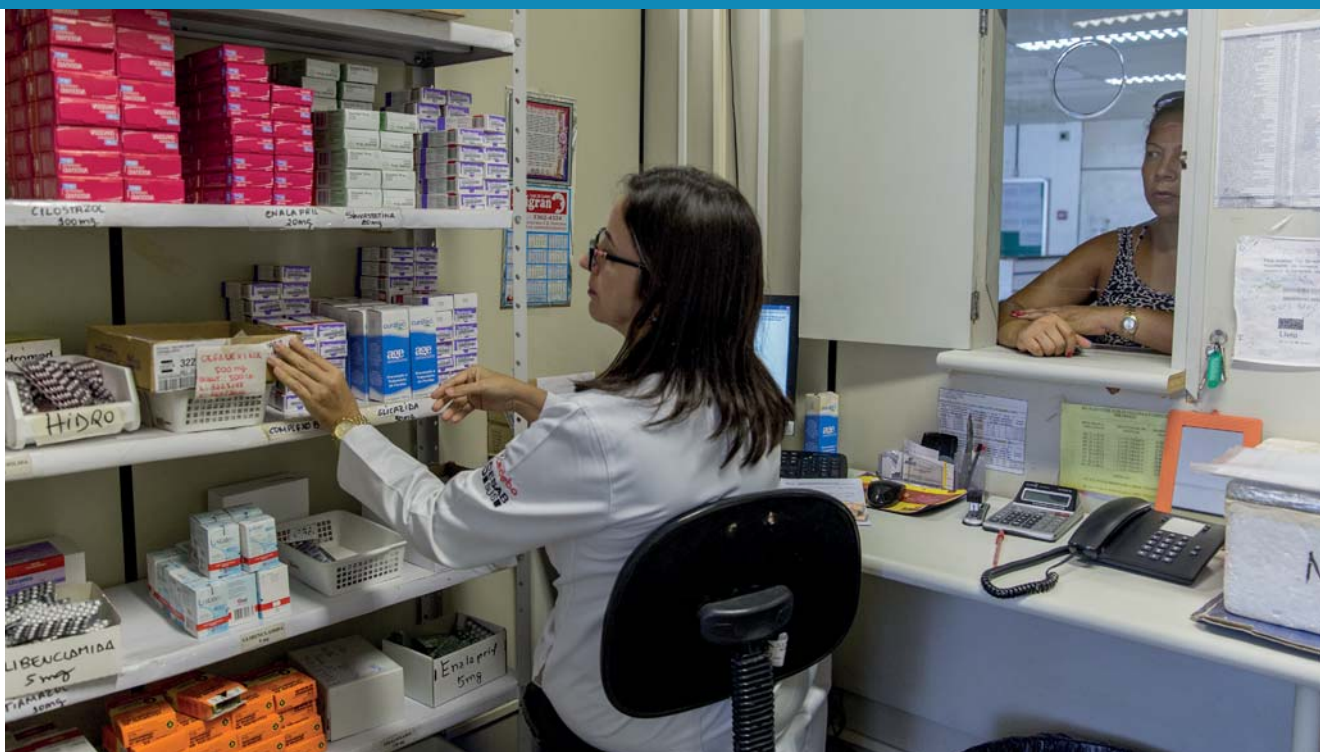
Medication Without Harm

WHO is initiating the third Global Patient Safety Challenge with the theme of medication safety. It is set within the philosophy of patient safety previously developed by WHO, namely that errors are inevitable and provoked in large part by weak health systems, and so the challenge is to reduce their frequency and impact. The Challenge was launched in March 2017, at the Global Ministerial Summit on Patient Safety in Bonn, Germany. By seeking the commitment of high-level delegates, ministers of health and experts, the launch created an opportunity for leaders to drive change and work together to make real difference to the lives of patients, families and health workers at the frontline. This Challenge will draw on the experience accumulated during the previous Challenges and will drive a process of change to reduce patient harm generated by unsafe medication practices and medication errors.

Every person around the world will, at some point in their life, take medicines to prevent or treat illness. Medicine has forever altered our ability to live with disease and generally increased the duration of our lives. However, medicines do sometimes cause serious harm if taken incorrectly, monitored insufficiently or as the result of an error, accident or communication problem.

Experience from other high-risk industries, and WHO's longstanding work with experts in health care safety, demonstrate that human beings make mistakes rarely through neglect, but instead because the systems, processes and procedures that they work with are often flawed or dysfunctional. This inevitably gives rise to errors and medication harm is no exception to this rule. All medication errors are potentially avoidable. They can thus be greatly reduced or even prevented by





improving the systems and practices of medication, including ordering, prescription, preparation, dispensing, administration and monitoring. Given that the subject is so vast, the approach of this third Challenge aims to save lives and reduce the medication-related harm caused by unsafe practices and errors, by specifically addressing the weaknesses of service delivery and developing more effective health care systems.

Severity of the problem

- Unsafe medication practices and medication errors are a leading cause of avoidable harm in health care systems across the world.
- The scale and nature of this harm differs between low-, middle- and high-income countries. Globally, the cost associated with medication errors has been estimated at US\$ 42 billion annually.
- Patients living in low-income countries experience twice as many disability-adjusted life years lost due to medication-related harm than those in high-income countries.
- Medication errors occur when weak medication systems and/or human factors such as fatigue, poor environmental conditions or staff shortages affect prescribing, transcribing, dispensing, administration and monitoring practices,

which can then result in severe harm, disability and even death.

- Errors occur most frequently during administration, however there are risks at different stages of the medication process.

Overall goal

The Global Patient Safety Challenge on Medication Safety focuses on improving medication safety by strengthening the systems for reducing medication errors and avoidable medication-related harm.

Reduce the level of severe, avoidable harm related to medications by 50% over 5 years, globally

The goal of the third Global Patient Safety Challenge on Medication Safety is to gain worldwide commitment and action to reduce severe, avoidable medication-related harm by 50% in the next five years, specifically by addressing harm resulting from errors or unsafe practices due to weaknesses in health systems. The Challenge aims to make improvements at each stage of the medication process, including prescribing, dispensing, administering, monitoring and use.



Objectives of the Global Challenge on Medication Safety

The Global Patient Safety Challenge on Medication Safety will facilitate a strengthening of systems and practices that can initiate corrective action within countries to improve patient safety and decrease avoidable harm related to medications.

dispensing, administration and monitoring practices, which can be adopted and adapted by Member States.

3. DEVELOP guidance, materials, technologies and tools to support the setting up of safer medication use systems

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