



Consensus statement

Role of policy-makers and health care leaders in implementation of the Global Patient Safety Action Plan 2021–2030

This consensus statement is founded on the policies articulated in numerous global and regional resolutions and decisions on patient safety adopted by governing bodies of the World Health Organization (WHO) and other international organizations. It is based on the proceedings of the WHO Policy Makers' Forum, highlighting the central and specific role of policy-makers and health care leaders in implementation of the Global Patient Safety Action Plan 2021–2030 at all levels in all countries.

Approximately 310 participants from around 90 countries across the world – including senior policy-makers, health care leaders, patient safety experts at national, subnational, regional, organizational and health care facility levels, patient safety advocates, and representatives of key international organizations – met (virtually) on 23–24 February 2022 to participate in the Policy Makers' Forum organized by the Patient Safety Flagship unit, WHO headquarters, Geneva, Switzerland.

1. Endorsement and commitment

- 1.1 We welcome and embrace the vision of the Global Patient Safety Action Plan 2021–2030 for moving towards eliminating avoidable harm in health care and its overall purpose of improving patient safety so as to reduce avoidable harm and to systematically remove the risks of harm in health care;
- 1.2 **We recognize** that patient safety is a global health priority that requires urgent action from Member States and all partners to reduce the current worldwide unacceptable burden of avoidable harm;
- 1.3 **We reaffirm** our commitment to the implementation of resolution WHA72.6 on "Global action on patient safety", adopted by the Seventy-second World Health Assembly in May 2019, and decision WHA74(13), by which the Seventy-fourth World Health Assembly, in May 2021, adopted the Global Patient Safety Action Plan 2021–2030;
- 1.4 **We acknowledge** the importance of focusing on the seven strategic objectives and their 35 strategies (set out in the Global Patient Safety Action Plan 2021–2030) as the fundamental organizing framework for implementation and for planning priority actions;
- 1.5 **We take ownership** of the role and duty of policy-makers and health care leaders to implement World Health Assembly patient safety resolutions and decisions, so as to realize the global vision to improve the safety of care provided to patients, and to reduce the avoidable harm associated with the planning and delivery of health services;
- 1.6 **We assert** that this means making patient safety a key priority for health sector policies and programmes as well as for health care professional practice, and also involves taking, at national, subnational, organizational and health care facility levels, the comprehensive range of actions set out in the Global Patient Safety Action Plan 2021–2030;
- 1.7 **We note** the importance of implementing WHO flagship initiatives such as the Global Patient Safety Challenges and World Patient Safety Day.

2. Upholding and sustaining core values

- 2.1 **We strongly emphasize** that the primary task of leaders at all levels is to establish and maintain a culture of patient safety in all settings and facilities where health care is planned, organized and delivered;
- 2.2 **We dedicate ourselves** to ensuring that the experience of patients and families, especially those who have suffered avoidable harm, becomes a

- fundamental shaping force in designing and delivering safe health care, and also to promoting their empowerment for active participation in patient safety programmes;
- 2.3 **We will promote** a way of thinking about patient safety whereby identifying, anticipating and mitigating the risks of avoidable harm are given equal prominence to learning from its occurrence;
- 2.4 **We will make it our business** to ensure that achieving the goals of patient safety is integral to achieving universal health coverage;
- 2.5 **We will be ever mindful** of the need to test all actions to improve patient safety so that they promote equity and protect the vulnerable;
- 2.6 **We commit to** openness and transparency with patients, health workers and the public about patient safety practices, performance and results, including adverse events and patient harm.

3. Building momentum for implementation

- 3.1 **We will nurture and encourage** all steps and programmes necessary to build leadership capacity for strengthening patient safety systems and processes;
- 3.2 We will foster strong and effective partnership and collaboration across a wide range of sectors and organizations embracing professional bodies, specialist agencies, nongovernmental organizations (including patients' organizations and professional bodies), and academic and research institutions;
- 3.3 **We will promote** the importance of integrating patient safety and health worker safety concepts and practices in emergency preparedness, response and recovery plans for safer and more resilient health systems, based on learnings from the experience of, and research studies carried out during, the COVID-19 pandemic;
- 3.4 **We will help to build** global solidarity towards the achievement of safer care for patients;
- 3.5 **We will seek out** synergies that will enhance the prospects of successful implementation, particularly in collaboration with high-risk and high-reliability industries (such as aviation, nuclear, oil and gas) to share knowledge and experience, and to adopt or adapt their safety practices and their understanding of human factors and ergonomics applications in safety of critical situations.

4. Creating conditions and enablers for safer care

- 4.1 **We will make use** of the best technical advice and expertise in designing, developing and improving patient safety incident reporting systems to generate learning (including through investigative and analytical tools and techniques);
- 4.2 We will ensure that the overarching concepts of patient safety embrace and consolidate the specific areas of safety, clinical and health system programmes such as medication safety, surgical safety, infection prevention and control, blood transfusion safety, injection safety, safe patient identification, radiation safety, immunization safety, diagnostic safety, quality of care, antimicrobial resistance, maternal health, mental health, communicable and noncommunicable diseases in all areas of health care, and also in other allied areas such as social science, ethics and law;
- 4.3 **We will encourage** the designation of an agency or a centre, appropriate to the national context and at different levels, to take responsibility for the coordination of patient safety implementation;
- 4.4 **We will seek to embed** patient safety education and training curricula within all institutions of learning and in programmes for health professionals within our jurisdictions;
- 4.5 **We will encourage or commission** research, innovation and the design of solutions for building safer health care systems;
- 4.6 **We will take necessary steps** to ensure the safety of health workers and to provide safe working environments.

5. Providing technical support and guidance

- 5.1 **We will guide** organizations and individuals to the most appropriate systems of governance, policy making, leadership and management, and monitoring and evaluation to advance improvements in patient safety for their circumstances and settings;
- 5.2 **We will establish (or help to establish)** national and subnational patient safety networks to share and disseminate best practices and mutual learning so as to reduce patient harm;
- 5.3 **We will make available** guidance on how to create cultures that operate transparently and in a non-punitive manner, and that encourage speaking up;

- 5.4 **We will help to develop** tools and information to assist patient safety leaders, such as priority-setting frameworks, economic impact data, standards and evaluation criteria, and monitoring metrics;
- 5.5 **We will help to develop** tools to proactively recognize errors due to technology and implement processes to mitigate those risks and protect patient safety;
- 5.6 We will facilitate the adaptation of design and implementation of patient safety practices and programmes to the whole spectrum of care settings (including primary care services, mental health services, care homes for older people, facilities for disabled adults and children, and hospitals and clinics).

6. Conclusion

6.1 **We pledge** to gain widespread adoption of and commitment to this consensus statement amongst our fellow policy-makers and health care leaders around the world.

WHO/UHL/IHS/PSF/2022.3 – © World Health Organization 2022

Some rights reserved. This work is available under the CC BY-NC-SA 3.0 IGO licence.

Suggested citation. Role of policy-makers and health care leaders in implementation of the Global Patient Safety Action Plan 2021–2030: consensus statement. Geneva: World Health Organization; 2022 (WHO/UHL/IHS/PSF/2022.3). Licence: CC BY-NC-SA 3.0 IGO.

Disclaimer

This consensus statement is the outcome of a high-level WHO Policy Makers' Forum on Patient Safety Implementation, 23–24 February 2022. It does not necessarily represent the decisions or policies of the World Health Organization, or of all governments and organizations represented.