

Global Patient Safety Challenge

Clean Care is Safer Care

Report on the Informal Briefing
58th World Health Assembly
19 May 2005

**REPORT ON THE INFORMAL BRIEFING
58th WORLD HEALTH ASSEMBLY
Thursday 19 May 2005**

**INTRODUCING
THE GLOBAL PATIENT SAFETY CHALLENGE:
Clean Care is Safer Care**

Panellists:	Sir Liam Donaldson, Chair of the World Alliance for Patient Safety and Chief Medical Officer of the United Kingdom of Great Britain and Northern Ireland Dr J. Nyikal, Director of Medical Services, Kenya Dr Hussein A. Gezairy, Regional Director, WHO Regional Office for the Eastern Mediterranean Professor Didier Pittet, leading the Global Patient Safety Challenge and Director of the Infection Control Programme, University of Geneva Hospitals
Chair:	Ms Jane Halton, Secretary, Department of Health and Ageing, Australian Government
Host:	Dr Timothy Evans, Assistant Director-General, Evidence and Information for Policy Cluster, WHO
WHO Discussants:	Dr James Bartram, SDE/PHE/WSH* Dr Meena Cherian, HTP/EHT/CPR* Dr Neelam Dhingra, HTP/EHT/BTS* Dr Philippe Duclos, FCH/IVB/VAM*

Three panellists and the Chair:
Sir Liam Donaldson,
Ms Jane Halton,
Dr J. Nyikal, and
Dr Hussein A. Gezairy



The objectives of the informal briefing were to introduce the Global Patient Safety Challenge to WHA country delegations and inform them about the integration of existing WHO strategies in the Global Challenge and the development of the WHO Guidelines on Hand Hygiene in Health Care.




Background

The Global Patient Safety Challenge is a core element of the Alliance's work. The challenge is a topic that covers a significant aspect of risk to patients receiving health care and will change every two years. The challenge for the 2005-2006 period is health care-associated infection.

Health care-associated infection is a major patient safety issue which affects millions of people worldwide. Infections add to the burden of resource use, promote resistance to antibiotics, and contribute to patient deaths and disability. Hand hygiene, a very simple action, is of primary importance in the reduction of health care-associated infection, enhancing patient safety in health care.

The Global Patient Safety Challenge will promote WHO strategies in the areas of hand hygiene; blood safety; injection safety; safe clinical practices; and safe water and sanitation in health care, to help reduce the incidence of health care-associated infection. Commitment by policy-makers and stakeholders is necessary to strengthen institutional and systemic processes, and to develop improved practices for "Clean Care is Safer Care".

The Global Patient Safety Challenge will involve three major strategies:

-  Raise awareness of the impact of health care-associated infection on patient safety and promote preventive strategies within countries for "Clean Care is Safer Care";
-  Build commitment from countries to prioritize the reduction of health care-associated infections;
-  Implement in six districts worldwide the new WHO Guidelines on Hand Hygiene in Health Care as part of an integrated package of actions derived from existing WHO strategies in the areas of: clean products (blood safety); clean practices (safe clinical procedures); clean equipment (injection safety); clean environment (safe water and sanitation in health care).

THE BRIEFING

Dr Timothy Evans opened the briefing with welcome remarks and noted the growing concern of health care-associated infection and the key role of the Alliance's Global Patient Safety Challenge to address this issue.

The Chair of the briefing, Ms Jane Halton, highlighted the importance of tackling patient safety issues, particularly when it comes to addressing health care-associated infection and improvements in hand hygiene practices. "The World Alliance focus on Clean Care is Safer Care is to be congratulated. There is no health system in the world that cannot be improved on this front" Ms Halton stated.

Sir Liam Donaldson

According to Sir Liam Donaldson, the first presenter to the briefing, adverse events in health care exact a high toll in terms of lives lost and human suffering. Sir Liam briefly described several cases of serious harm to patients and focused on a case of an infant who had acquired methicillin-resistant *Staphylococcus Aureus* while receiving hospital care.

Sir Liam emphasized the importance of learning from errors and developing appropriate solutions that can improve the safety of care. Juxtaposing the effectiveness of safety practices of the airline industry with the inadequacy of systemic safety procedures within the health sector, Sir Liam stated that "The airline industry has improved safety issues from several decades of learning from their errors. We can do the same with the health care sector. We can do this through the World Alliance for Patient Safety that was launched in October 2004 to take effective and concerted action to reduce adverse events in health care". The Alliance aims to bring together the impetus that has been developed from patient safety work from around the world, and to implement efforts to reduce the adverse consequences of unsafe health care.

A key programme of the World Alliance was highlighted as the Global Patient Safety Challenge that focuses on addressing health care associated infection for 2005-2006 with the theme "Clean Care is Safer Care". The Challenge has three main components: to raise awareness of the impact of health care-associated infection through a global campaign; to build commitment from countries to prioritise the reduction of health care-associated infection; and to implement in six districts an integrated package of actions to reduce health care associated infection.

"Health care-associated infection is a problem in most parts of the world. The Global Patient Safety Challenge, taken for two years, is an important initiative to address this problem."

The Global Challenge promotes WHO strategies to improve safety by focusing on five action areas: clean environment, clean practices, clean products, clean equipment and clean hands. The briefing brought together discussants from four other WHO departments collaborating on the Global Challenge programme.

WHO Discussants

Dr James Bartram, Coordinator of WHO's Water, Sanitation and Health Programme, highlighted the importance of clean environment for effective health service delivery. Dr Bartram explained that "clean environment" in health care facilities means access to safe water as well as the physical cleanliness of the surfaces and tools used, and the safe disposal of wastes generated.

To contribute towards clean environments in health care WHO, has been developing: norms and standards and implementing the "Guidelines for Waste Management in Health Care Settings" and finalizing "Water and Sanitation Minimum Standards in Health Care Settings and Schools"; tools and guidelines for disease control and risk reduction; policy papers such as "Safe Health Care Waste Management". Research & Development, and the testing of new technologies are also an important part of WHO efforts in this area.

Dr Bartram concluded by saying that major improvements can be achieved in terms of health benefits and economic savings by better managing the environment .

The discussant from the Clinical Procedures department, **Dr Meena Cherian**, talked about the lack of trained personnel and access to

World Alliance for Patient Safety



Global Patient Safety Challenge

Défi mondial pour la sécurité des patients

2005-2006 tackles health care- associated infection that:	2005-2006 pour limiter les infections associées aux soins de santé qui:
Kills millions of people each year and causes serious disability	Sont à l'origine de millions de décès chaque année et entraînent des incapacités graves
Endangers every patient in the world	Constituent un risque pour chaque patient dans le monde
Promotes drug resistance	Encouragent la pharmacorésistance
Adds to billions of dollars of losses every year	S'ajoutent aux milliards de dollars de pertes annuelles
Endangers health care workers	Constituent un risque pour les prestataires de soins de santé
Puts patients relatives at risk	Représentent un danger pour les familles des patients

Alliance mondiale pour la sécurité des patients

World Alliance for Patient Safety

Global Patient Safety Challenge

Défi mondial pour la sécurité des patients

2005-2006
Clean Care
is Safer Care
tackles
health care-
associated
infection
by promoting:

Clean hands

Clean environment

Clean equipment

Clean practices

Clean products

2005-2006
A bonne hygiène,
bons soins
pour limiter
les infections
associées
aux soins
de santé:

Hygiène des mains

Hygiène du milieu

Sécurité du matériel




Sécurité des pratiques

Sécurité des produits

Alliance mondiale
pour la sécurité des patients

safe clinical procedures in health care facilities in developing countries.

Strengthening capacities and improving access to quality emergency care services, tackles issues such as:




-  Developing the skills of providers;
-  Improving availability of emergency equipment;
-  Ensuring safety of surgical care, such as correct site procedures.

The *WHO Manual on Surgical care at the District Hospital* encompasses a set of minimum standards and guidance for education to improve of clinical procedures.

According to **Dr Neelam Dhingra**, Coordinator, Blood Transfusion Safety, providing a safe unit of blood to a patient who requires blood transfusion is a multi-step process, from identifying safe blood donors for blood donation, safe blood collection without harming the blood donor and the blood unit, testing the blood for HIV and hepatitis, separating into components and issue to the patient when prescribed and also making sure that it contributes to improved health and survival of the patient.

The key challenges in this process are broadly two-fold. Firstly, making the blood and blood products available and accessible to all patients, both in urban and rural areas. Secondly, providing safe blood, which does not cause any harm to the patient, and does not transmit any infection. Global data have shown a gross inequity in blood safety and availability between the developing and the developed world, which also relates to the level of health care system. About 80% of the global population has access to only 40 % of total global blood supply, of which only about 50% is collected from safe voluntary blood donors. As the Global Patient Safety Challenge focuses on prevention of health care-associated infection, provision of safe blood products is a key challenge.

Contributions to the *Clean Care is Safer Care* programme are:

-  *Safe for the blood donors:* use of sterile blood bags;
-  *Safe blood products:* Safe blood collection and processing to prevent any contamination and testing of blood to prevent HIV and hepatitis and other blood-borne pathogens, and their safe storage and transportation;
-  *Safe for the patient:* Safe and appropriate transfusion practice.

The discussant from the department of Immunizations, Vaccines and Biologicals (IVB), **Dr Philippe Duclos**, stated that monitoring the safety of all aspects of immunization includes: the quality of vaccines and administration equipment, storage and handling, vaccine administration and the disposal of sharps. WHO responses to these challenges include the recommendation of "Best Infection Control Practices"; a call led by WHO, UNICEF and UNFPA for the exclusive use of auto-disposable syringes; a strategic focus on safe and effective vaccination systems; management of immunization-related waste; and mechanisms to respond to adverse events.

In collaboration with the WHO Mediterranean Centre for Vulnerability Reduction and two WHO Regional Offices, IVB has initiated the "Focus" project aiming for safety, access and appropriate use of injection and disposal equipment. The project builds capacity within countries to formulate and implement relevant policies.



To address "Clean Care is Safer Care" the immunization team proposes a strategy that promotes the use of auto-disposable syringes and safe injections, and awareness-raising among health care staff on the safe use sharps, needles and immunization equipment. The strategy stresses correct waste segregation and use of safe equipment, in addition to setting up proper procurement and logistics systems and monitoring and supervision.

Dr J. Nyikal

Following the WHO technical presentations, the Director of Medical Services from the Ministry of Health, Kenya, agreed on the importance of maintaining safety procedures in health care delivery in developing countries. He reinforced the reality that the numerous infrastructural impediments in resource-poor settings hamper the implementation of even simple solutions. For example, the lack of clean water in health care settings, or the need for simple commodities such as disinfectant, gloves, sterilizing equipment, syringes and incinerators obstruct the

delivery of clean and safe health care. These challenges are further exacerbated by the lack of training of health care workers and appropriate behaviour that ensures that hygiene practices are practiced.

Dr Nyikal described policies that Kenya has put in place on injection safety and management of medical waste. These have been applied in the areas of reproductive health and prevention of infection. Health care professionals and workers are being trained in infection prevention, and the Ministry of Health is piloting an injection safety strategy. Efforts are also being focused on building a sustainable water supply and 52 bore holes have been established to supply water to medical facilities. "Infection prevention costs a lot of money" said Dr Nyikal "but it pays off". Last year Kenya spent about half a million US dollars for the purchasing of non-pharmaceutical commodities such as syringes, gloves and swabs, and this year this amount has been increased to 2.5 million dollars. "These are basic commodities, but to many peripheral facilities they have an enormous impact on delivering effective health care" added Dr Nyikal.

Dr Hussein A. Gezairy

The initial remarks of the EMRO Regional Director were that health care professionals aim to cure or treat a patient in the most cost-effective way and in the shortest possible time. "It is therefore very important to avoid the spread of any health care-associated infection" stated Dr Gezairy. The WHO Regional Director emphasized the importance of increasing resources for patient safety as this is "money well spent". He described that the Eastern Mediterranean Regional Office is now planning for a resolution on patient safety so that all the countries of this region will continue to address this issue.

Other important developments in the region are the preparation of regional strategies, guidelines and health workers' training manuals on patient safety. Dr Gezairy concluded that the Regional Office is actively raising awareness on patient safety among the countries of the region, and discussions are underway for develop a Regional Patient Safety Centre in Kuwait. The Centre will provide technical advice and support to Member States to improve the quality of health care and exchange information and best practices on patient safety between countries.



Professor Didier Pittet

Leading the Global Patient Safety Challenge, Professor Pittet outlined the main objectives and components of the Global Challenge. The Challenge is a topic that covers a significant aspect of risk to patients receiving health care and will change every two years. The Challenge for the 2005-2006 period is health care-associated infection.

Professor Pittet focused on the development of the WHO Guidelines on Hand Hygiene in Health Care and the Implementation Strategy, through two international expert consultations. With hand hygiene as the cornerstone, the Challenge plans to integrate a number of existing interventions included in WHO strategies and guidelines on infection control and prevention. These are: blood safety, safe clinical practices; injection safety, and safe water and sanitation in health care.



Together, these interventions will be promoted by the Alliance to encourage their use by all Member States. Implementation of the strategies will initially take place in six districts, one in each WHO region, and will be closely monitored to assess impact.

Professor Pittet concluded his presentation by reminding the audience that at the beginning of the briefing Sir Liam and himself were shaking hands with entering participants. This was done in order to simulate the cross-transmission of pathogens during the delivery health care. Through the use of UV lights, the audience was able to see the fluorescently-visible bacterial blotches that had spread through hand shaking. This demonstration reinforced the notion that health care-associated infection can easily spread by cross-transmission and that hand hygiene is an extremely important measure to reduce these infections.

The briefing concluded with a Questions & Answers session chaired by Sir Liam Donaldson.



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SDE/PHE/WSH: Water, Sanitation and Health, /Protection of the Human Environment, Sustainable Development and Healthy Environments

HTP/EHT/CPR: Clinical Procedures/ Essential Health Technologies, Health Technology and Pharmaceuticals

HTP/EHT/BTS: Blood Transfusion Safety/Essential Health Technologies, Health Technology and Pharmaceuticals

FCH/IVB/VAM: Vaccine Assessment and Monitoring / Immunization & Biologicals, Family and Community Health

