This resource outlines an approach to improving patient safety using a partnership model, structured around 12 action areas for improvement and with spread as a central aim. It lists some critical considerations for improvers at the start of their improvement journey.
A series of APPS resources have been co-developed and utilised by the first wave of hospital partnerships participating in the APPS programme. Although focused on a partnership model, these resources can be useful to any hospital committed to creating safer health care for patients. These resources may also be of utility to decision makers involved in planning for patient safety.
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Introduction

*Improving Patient Safety – First Steps* has been developed to help teams’ participating in WHO’s African Partnerships for Patient Safety to understand the actions required to strengthen their systems in relation to patient safety, to build capacity for patient safety and to advocate for patient safety improvement.

However, it can also be used by anyone interested in improving patient safety in African health-care institutions.

*Improving Patient Safety – First Steps* suggests how to approach improvement in relation to each of 12 Patient Safety Action Areas and provides a starting point for patient safety improvers.

**12 Action Areas for Improvement**

African Partnerships for Patient Safety has constructed an approach to improvement that addresses the main issues and challenges associated with affecting the state of patient safety within the WHO Region of Africa.

These issues and challenges were initially described by the WHO Regional Committee for Africa in 2008 who listed 12 areas where action would need to be channeled if sustainable improvement were to be realized.
The six-step APPS process

APPS has three interrelated objectives (figure 1) that support a common goal of patient safety improvement.

Objective 1 is concerned with developing patient safety partnerships. Objective 2 relates to patient safety improvement at the hospital level. Finally, objective 3 is concerned with catalyzing the spread of patient safety improvement across hospitals, communities and countries.

APPS relies on the establishment of a formal patient safety partnership between two hospitals. Partners work together to establish the patient safety baseline in their respective hospital using the Situational Analysis Template. The results of the analysis are then examined to identify gaps which might contribute to patient harm, and decide on priorities for action. Once priorities are agreed, an action plan is developed with the involvement of both partner hospitals, and action is taken to address the patient safety gaps. A 6 monthly review and annual evaluation cycle is established.

The entire process can be summarized in six steps:

**Step 1: Partnership development:**
Teams agree to work together to improve patient safety, with a focus on mutual benefits, using a partnership approach.

**Step 2: Needs Assessment:**
Using the Situational Analysis Template the patient safety baseline is established.

**Step 3: Gap analysis:**
Partners review the Situational Analysis findings, identify gaps and agree priorities.

**Step 4: Action Planning:**
The priorities are translated into a written plan of action utilizing the APPS Planning Framework and the Hospital Partnership Plan Guide and Template.
**Step 5: Action:**
On completion and approval of the Hospital Partnership Plan – partners start action/activities to improve patient safety.

**Step 6: Evaluation and review:**
In addition to local review meetings and cross-partnership discussions each partnership provides a series of routine reports on progress culminating in an annual evaluation.

The process can be seen in figure 2.

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**How to use Improving Patient Safety – First Steps**

Improvers should familiarise themselves with *Improving Patient Safety – First Steps* at the start of the 6-step process.

This resource lists the **critical considerations** for patient safety improvers at the start of their journey in each of the 12 Action Areas. Some of these may already have been addressed and therefore the emphasis will be on strengthening and sustaining improvement.

*Improving Patient Safety – First Steps* is intended to help to strengthen the health system, build patient safety capacity and ensure that improvers have the best chance of success in advocating and sustaining change.
The importance of research and education

WHO Patient Safety has dedicated significant time and attention to the development of some important resources designed to help build capacity of the workforce in patient safety and to ensure robust measurement of the extent of harm in health care.


The WHO Patient Safety Research Guide for Data Poor Settings has been produced to help health practitioners and patient safety researchers in developing and transitional countries measure and tackle patient harm at the health-care facility level. The methods within the Guide have been piloted in four developing countries and have shown that they can effectively be utilized even in the absence of good medical record keeping.

These two resources are worth a review at the start of the patient safety improvement process.

Behind the Scenes

At every stage of the six-step process, remember the following important aspects of APPS.

**Partnerships:**

Look at the Principles of Partnership. Consider how will you work together as a partnership on each action area?

**Resource Map:**

Consult the APPS Patient Safety Resource Map matrix to identify the relevant resources that can be used to improve patient safety in this action area.
**Measurement:**
The Situational Analysis results provide simple baseline data against which to measure improvement. Additional evaluation will be undertaken in a number of areas – refer to the APPS Evaluation Framework for further information.

**Sustainability:**
Addressing the initial and essential targets described in the next section will help to ensure improvement is sustained – refer to Sustainability: the APPS Approach for further information.

**Spread:**
Start planning for spread now – refer to the APPS Spread Pack for further information. Sensitize hospital and community leaders to patient safety using APPS advocacy and communications pack.
Critical Considerations - First Steps

*Improving Patient Safety – First Steps* is based on the assumption that improvers are starting at a level where no or very little action has taken place on patient safety improvement, or previous action has been taken but results have not been sustained.

**Action Area 1: Patient Safety and Health Services and Systems Development**

- **Get patient safety on the agenda**
  - Start talking about it at all meetings you attend

- **Put patient safety in the hospitals strategy**
  - If hospital strategies and plans are due for updating
    - Add patient safety and quality improvement aims

- **Talk to hospital managers about patient safety**
  - Identify and develop patient safety leaders (and deputies) in your hospital

- **Start a patient safety group**
  - Establish a group within the hospital that is focused on setting-up a patient safety and quality program

- **Record all patient encounters**
  - What do you need to do to introduce methods to record all patient encounters in hospital records

**Notes (use this space to make any additional notes):**
Action Area 2: National Patient Safety Policy

- Develop a hospital patient safety policy
  - Work with APPS team and national focal points to lobby for national policy on patient safety and to develop model hospital policies

- Link your hospital with national projects
  - Try to find a list of all projects being supported by national plans that address any aspect of patient safety and explore whether your hospital can become part of the project.

- Identify someone to link with national policy
  - From your pool of patient safety leaders assign the role of liaison with national policy makers and make the necessary introductions;

- Link with NGO’s on safety
  - Examine how your hospital can work with non-governmental organisations (NGOs) in supporting the development of national patient safety policy

Notes (use this space to make any additional notes):
Action Area 3: Knowledge and Learning in Patient Safety

- Lobby for patient safety in hospital plans
  - Lobby at meetings to introduce patient safety and quality issues into hospital training plans

- Identify patient safety champions
  - Continue to develop identified patient safety leaders to champion knowledge and learning

- Undertake simple audits of adverse events
  - Introduce simple audit systems into clinical areas to record adverse events to act as a baseline for improvement

- Work with educators
  - Work with educators to determine how to develop a system for the continuing education for all health professionals in patient safety

Notes (use this space to make any additional notes):
Action Area 4: Patient Safety Awareness Raising

Lobby for patient safety in hospital plans
- Introduce patient safety and patients rights into hospital strategies and plans (refer to national charters)

Encourage champions to raise awareness
- Nurture your patient safety leaders to help raise awareness of the need for safer healthcare.

Talk to educators about patient safety
- Introduce patient safety and patient and community engagement into staff training

Talk to patient/community based organizations
- Find out about patient groups/community based organizations working on patient safety talk to them. Use APPS advocacy tools

Notes (use this space to make any additional notes):
Action Area 5: Health Care-associated Infections

- **Lobby for policies**
  - Work with APPS team, WHO experts and national focal points to lobby for national policies – build on any previous work undertaken by NGOs. Develop local policies.

- **Undertake 2 key assessments**
  - Undertake WHO Core Components for Infection Control Assessment and WHO Hand Hygiene Self Assessment Framework.

- **Identify leaders**
  - Identify a leader and deputy for infection prevention and control.

- **Procure alcohol based handrub**
  - Introduce alcohol-based handrub into the hospital as the first step in adopting the WHO Multimodal Hand Hygiene Improvement Strategy.

- **Introduce simple surveillance**
  - Consider introducing simple surveillance systems for recording health care-associated infections.

**Notes (use this space to make any additional notes):**
Action Area 6: Health-care Worker Protection

- **Lobby for policies**
  - Work with APPS team and national focal points to lobby for national policies and develop local policies

- **Focus on vaccination of healthcare workers**
  - Work with national bodies and NGOs to strengthen implementation of vaccination against vaccine-preventable pathogens for healthcare workers

- **Develop leaders**
  - Identify and develop patient safety leaders (and deputies) in your hospital for healthcare worker protection

- **Improve access to PPE**
  - Establish mechanisms to improve the availability of personal protective equipment (PPE) for healthcare workers, including working with local producers

- **Talk to educators about training**
  - Plan a training and audit programme

Notes (use this space to make any additional notes):
Action Area 7: Health-care Waste Management

- **Lobby for national policy, develop local policies**: Work with APPS team, partners and national focal points to lobby for national policy on waste management and develop hospital policies in alignment with national policies.

- **Improve access to supplies**: Work with national bodies and NGOs to ensure access to adequate supplies for waste safety.

- **Develop leaders**: Identify and develop leaders for healthcare waste management.

- **Talk to educators about training**: Plan training for staff on the importance of safe waste handling.

- **Approach NGOs for funding**: Find out if NGOs have funds mandated for repair or updating of incinerators or other structures for safer waste handling.

**Notes (use this space to make any additional notes):**
Action Area 8: Safe Surgical Care

**Lobby for national policy, develop local policies**
- Work with WHO experts and national focal points to lobby for national policy on safe surgery, develop hospital policies on safe surgery focused on introducing or strengthening the use of the WHO Safe Surgical Checklist.

**Develop Leaders**
- Identify and develop leaders for safe surgery.

**Improve the system for record keeping**
- Consider how to establish or strengthen mechanisms to record hospital deaths or complications following surgery.

**Focus on measurement**
- Consider how to establish hospital data capture mechanisms that measure key parameters of safe surgery in hospital operating rooms.

Notes (use this space to make any additional notes):
**Action Area 9: Medication Safety**

- **Lobby for national policy, develop local policies**: Work with APPS team and national focal points to lobby for national policy on medication safety and consider how to develop local hospital medicine formulary.

- **Act to set up a committee for medication safety**: Prepare to establish a hospital drug and therapeutic committee.

- **Develop leaders**: Identify and develop leaders for hospital medication safety.

- **Focus on training**: Prepare to establish training on prescribing and dispensing based on protocols.

- **Consider reporting systems**: Explore how to develop systems for reporting adverse drug reactions and errors.

**Notes (use this space to make any additional notes):**
Action Area 10: Patient Safety Partnerships

Lobby for national policy, develop local policies
- Introduce the importance of partnerships and involvement between patients, family members, health professionals and policy makers into hospital strategies and plans

Set up a forum for partnerships for patient safety
- Establish or strengthen a forum to develop partnerships between patients, family members, health professionals and policy makers

Develop leaders
- Identify and develop leaders focused on patient safety partnerships

What does patient safety mean to communities?
- Sensitize partners to patient safety using the language of the community

Target 1 improvement in partnership with local community
- Link with the local community on specific patient safety improvements e.g. improving hand hygiene

Notes (use this space to make any additional notes):
Action Area 11: Patient Safety Funding

- **Lobby for patient safety budget at hospital level**
  - Introduce the importance of a dedicated hospital budget allocation for patient safety activities, as part of hospital strategies and plans

- **Talk to WHO APPS team re public private partnerships**
  - Consider the use of a public-private partnership in order to secure critical elements of a patient safety system e.g. alcohol-based hand rub supply

- **Develop leaders**
  - Identify and develop patient safety leaders that can advocate for patient safety funding

- **Talk to Ministry, WHO and NGOs re funding**
  - Consider the potential funding of patient safety projects through national or international sources and explore the possibility of working with an NGO to propose a higher level of activity in the country based on the areas of action you have chosen in your plan

Notes (use this space to make any additional notes):
Action Area 12: Patient Safety Surveillance and Research

Lobby for patient national policy
- Work with WHO experts and national focal points to lobby for national policy on patient safety research and surveillance

Talk to hospital and university researchers
- Facilitate hospital research on patient safety focused on national priority areas

Develop leaders
- Identify and develop leaders for patient safety surveillance and research

Focus on starting surveillance systems
- Consider how to establish a hospital patient safety surveillance system that connects to any existing national surveillance system; talk to colleagues across the APPS network

Notes (use this space to make any additional notes):