Welcome

Dear friends, colleagues and fellow patient safety champions, 2014 marked a significant milestone for WHO PFPS, since it was the tenth anniversary of the formation of our network. Reflections and resolutions going forward will certainly form part of our Ten Year Report Project, but today I want to speak to you at a more personal level.

As WHO Patients for Patient Safety champions we are not career advocates. We are volunteers who are committed to being collaborative partners and co-producers of safe care. Circumstances have brought us to this work. We have not chosen this work ourselves, rather it is a responsibility which has been thrust upon us, one which we would gladly forfeit for the restoration of the lives and wellbeing of our loved ones who have been harmed by health care, albeit unintentionally. We strive with the determined hope that these experiences become catalysts for change in an improved health service. We accept that we cannot change the past, but that past can certainly inform the present which we can then use to influence the future.

In 1967, Vera Keane wrote in the Bulletin of Nurse Midwifery, “Facts do not change feelings and feelings are what influence behaviour. The accuracy, the clarity with which we absorb information has little effect on us. It is how we feel about the information that determines whether we will use it or not.”

We have always maintained that the most effective tool we have to bring about health-care improvement is to relate our experiences, tell our stories, because we know our stories evoke feelings. You and your family members have very powerful stories to tell. I have no doubt that following your presentations you receive incredibly appreciative feedback.

I ask you to bear with me as I share with you an email which was forwarded to me by the course co-ordinator in the Royal College of Surgeons of Ireland following my presentation to her graduate entry medical students. The reason I send this to you is that I feel very strongly that this feedback is for you, too. I would be delighted if when reading the email you substitute your own name for Ms. Murphy and the name of your harmed loved one for Kevin Murphy. I do this because I salute you as teachers and your loved ones as the conscience of health care.

With love and fond good wishes to each of you at this special time of year - and here is the email:

‘Dear Margaret, good to hear you arrived home safely. The class rep sent this lovely message of appreciation on Saturday.

“Dear Dr Doherty,

I wanted to send you an email to thank you for arranging Ms Margaret Murphy to speak to our class last week. Ms Murphy’s opening words were particularly poignant, as she highlighted the importance of integrity, humility and compassion - factors which are often underestimated and/or quickly forgotten in the world of medicine.”
...It was an absolute honour to hear Ms Murphy talk. To turn such an unspeakable loss into such powerful words was so touching. As young medical students, our minds are malleable and eager to learn new material. We learn about the human body and diseases which afflict it, but how we care for patients is not taught. Last week, Ms Murphy taught. She went where no other lecturer had been before. She taught us about emotion, about communication and about caring for the patient and their family. She taught us what it takes to become a great doctor.

I won't ever forget Kevin Murphy nor Margaret Murphy - in heart nor in mind - both true inspirations in their own right.

Thanks again for organising this incredible lecture”.

Welcome from Geneva HQ!

Kathyana Aparicio, Nittta Prasopa-Plaizier, Felicity Pocklington

Welcome to the PFPS News special edition for Winter 2014 - Spring 2015. It has been a particularly busy period for Patients for Patient Safety (PFPS), with lots of exciting events and activities in which the champions and the PFPS programme have taken part.

Two new PFPS national networks have been established, Thailand (in August 2014) and Paraguay (in November 2014). This is part of our commitment to foster patient and family engagement across the world. We welcome the new champions from these two countries and encourage them to actively contribute to PFPS globally and their respective health systems, to bring the patient voice to health care. PFPS is leading the development of the WHO Framework on Patient and Family Engagement, collaborating with the Gordon and Betty Moore Foundation, a US-based non-profit organization, following the first global expert consultation which kick-started the project. This will be one of the most important policy guidance in this area of work from our department and WHO.

In October 2014, we also welcomed the newly appointed PFPS Advisory Group to its first face-to-face meeting. The group has committed to leading the PFPS Global Network in engaging and empowering patients, families and communities more strategically and sustainably. PFPS has also been represented in many high-profile events such as the “Multi-stakeholder meeting on the Justification of Individual Exposure”, organized by the Heads of the European Radiation Protection Competence Authority (HERCA), the ISQua annual conference in Brazil, the Shanghai International Summit for Nursing, the WHO Interregional Workshop on Consumer Information and Education in Traditional and Complementary Medicine, the Qatar Patient Safety Week and the Injection Safety Launch at WHO HQ in Geneva.

Around the world, PFPS champions have been working hard, engaging a variety of stakeholders through advocating for patient safety. PFPS Canada has expanded its network, growing in members and also in contributions. The publication of the “Manual de prevención y control de infecciones asociadas al cuidado de la salud” (“Manual for the prevention and control of infections associated with health care”) has been published in Mexico with the contribution of two PFPS champions, Denice and Evangelina. We congratulate Jeanine Thomas on being invited to join the newly formed U.S. Stakeholder Forum on Antimicrobial Resistance (S-FAR) and Regina Kamoga for the Patient Solidarity Day celebrated in Uganda.

Last but not least, we would like to thank each and every PFPS champion for their hard work, especially those who share their experience with us in this edition of PFPS News.
PFPS in Geneva

Hosting two meetings at WHO-HQ

1. Expert Consultation on the WHO Framework on Patient and Family Engagement

On the 27–28 October 2014, at WHO headquarters (HQ) in Geneva, Patients for Patient Safety (PFPS), in collaboration with the Gordon and Betty Moore Foundation, a US-based non-profit organization, co-hosted the first ‘Expert Consultation on the WHO Global Framework on Patient and Family Engagement (GPFE)’ (Fig. 2, 3, 4), with Nittita Prasopa-Plaizier as Technical Lead. An Advisory Group was established to guide the development of the Framework, with Sir Liam Donaldson (WHO Envoy for Patient Safety), Dr Dominick Frosch, Susan Baade, Margaret Murphy, Dr Vivian Lin and Dr Edward Kelley working alongside Nittita Prasopa-Plaizier as members of this group.

The consultation participants included 18 internal experts from relevant WHO units and departments and 37 external experts from 16 different countries across all six WHO regions. These experts were from government and non-government sectors, including patients, health-care providers, policy-makers and academics.

The preliminary WHO engagement framework was informed by qualitative research conducted by the PFPS team at WHO HQ, which assessed how the PFPS global network of patient advocates (champions) have used their experience in health care to advocate for improvements in patient safety.

The expert consultation enabled leading experts from the field of patient and family engagement (PFE) to discuss issues, share experience and contribute to the WHO Framework for Patient and Family engagement. They discussed current evidence, practices, approaches, potential practical tools and resources needed to facilitate patient and family engagement for efforts on patient safety, quality and people-centered care, in the context of universal health coverage (UHC).

Examples of approaches for patient and family engagement (PFE) from around the world were presented by the Gordon and Betty Moore Foundation, members of the WHO Service Delivery and Safety Department, Planetary and the Patient-Centred Outcomes Research Institute (PCORI). Case studies from Canada, Ecuador, Malaysia and Thailand were also presented to illustrate the diverse ways that PFE can engage and empower people and advocate for safe, high quality, people-centred health services, that are accessible to people from all sociocultural settings.
2. PFPS Global Advisory Group Meeting

Felicity Pocklington

On 29-30 October, the first face-to-face meeting of the PFPS Advisory Group was held in WHO-HQ (Fig. 5). For many, this was the first time PFPS champions had been able to interact directly with WHO staff and other PFPS champions from different countries. It allowed PFPS champions to have a central role in developing PFPS Global Network Strategic Plan, 2015-2017. The PFPS AG determined objectives, suggested activities, discussed priorities and proposed a strategic plan for accomplishing the goals. Each participant had the opportunity to contribute their voice in the construction of a practical list of actions to guide the implementation of the PFPS Strategic Plan.

From the discussions, consensus was reached for the WHO Global Framework on Patient and Family Engagement to be the umbrella to guide PFPS activities, projects and initiatives. The meeting also facilitated the formal announcement of the new PFPS Advisory Group members, which include:

Denice Klavano (CAN), Evangelina Vazquez (MEX), Martin Hatlie (USA), Helen Haskell (USA), Regina Kamoga (UGA), Robinah Kaitiritimba (UGA), Hussain Jafri (PAK), Nagwa Metwally (EGY), Margaret Murphy (IRE), Christine Perera (SRL), JS Arora (IND), Stephanie Newell (AUS), Manvir Jesudasan (MAA).

Margaret Murphy (Ireland) was appointed Chair, and Helen Haskell (USA) and Hussain Jafri (Pakistan) as vice chairs. Congratulations to all and we look forward to working with you.

WHO PFPS in meetings

Felicity Pocklington, Nittita Prasopa-Plaizier

The PFPS Team in Geneva participated in several important meetings during the winter 2014 quarter, including:

September 2014

Nittita Prasopa-Plaizier represented WHO and PFPS at the multi-stakeholder meeting on justification of individual exposures in Brussels on 26 September. The meeting was organized by HERCA (Heads of the European Radiological Protection Competent Authorities) (Fig. 6).

Since 2012, the Patients for Patient Safety (PFPS) Programme has been involved in work related to radiation safety and has collaborated very closely with colleagues in the Radiation and Environmental Health Programme at WHO. The PFPS team were invited to this meeting which looked at issues relating to medical imaging (radiation safety), in order to address approaches to justification of individual exposures, concentrating on exposures associated with diagnostic rather than therapeutic procedures.
October 2014

1. PFPS coordinated WHO activities at and participated in the 31st ISQua conference, held in Rio de Janeiro, Brazil on 4-7 October.

The lead of PFPS, Nittita Prasopa-Plaizier organised and facilitated four WHO presentation sessions. She also gave a presentation during one of the WHO-organised sessions titled “Engaging patients and the community for people-centred health services – why is it important for universal health coverage?”, along with Sue Sheridan, Denice Klavano and Nuria Toro Polanco (Fig. 7). The session was chaired by Sir Liam Donaldson, WHO Envoy for Patient Safety, who also participated in two other sessions. As the designated technical officer (DTO) for WHO-ISQua official relations, Nittita also coordinated a WHO stand, as well as facilitating the WHO-ISQua Conference scholarships.

The meeting enabled PFPS to meet face-to-face with several PFPS Champions, as well as to network with other stakeholders and conference delegates who were interested in PFPS.

2. Nittita Prasopa-Plaizier also participated in the 2014 Shanghai International Summit for Nursing, held between 15 and 17 October 2014 (Fig. 8). The international summit themed “We Care, We Change”, was attended by approximately 500 healthcare professionals, from all settings (academic, hospitals, government departments, community-based organizations).

Nittita delivered a 45-minute keynote speech during the plenary presentation providing an overview of patient safety and quality improvement and patient and people engagement in the contexts of the new and expanded WHO Service Delivery and Safety Department.

She also conducted a workshop, alongside Professor Xuchun Ye, which focused on patient and people engagement with approximately 70 participants, all of whom were female nurses. The purpose was to explore opportunities for capacity-building for engagement among health-care providers. The workshop explored the participants understanding of the concepts of engagement and their perceptions of factors or attributes that would facilitate patient and family engagement in health care.

During her time in Shanghai, she had the opportunity to visit the Nursing School of the Second Military Medical University (SMMU) and later Shanghai Hospital, which is a 2000-bed teaching hospital. Based on visual observations, Nittita found that hand hygiene and the Safe Surgery Checklist seemed to be the most adopted WHO Patient Safety initiatives, with posters on ‘Hand Hygiene 5 moments’ visible everywhere!

November 2014

Nittita and Dr Qi Zhang, Coordinator of the TCM Unit in the Service Delivery and Safety (SDS) Department, participated in and provided technical support for the WHO Interregional training workshop on consumer information and education in traditional medicines/complementary and alternative medicines (TM/CAM), held in Macau, SAR, China, from 5-7 November.

The workshop was part of an ongoing collaboration between WHO and the Government of Macau SAR on TM/CAM. The workshop was funded by the Health Bureau of the Government of Macau SAR. There were 40 participants from 18 countries across all six WHO regions. The objectives of the interregional training workshop were to support Macau SAR’s efforts to promote the proper use of TM/CAM by consumers through building national capacity for developing reliable consumer information, establishing consumer information programmes and creating national mechanisms to monitor and control TM/CAM information targeting consumers.

From the PFPS perspective, this was an opportunity to strengthen the capacity of policy-makers to engage consumers and the community in services related to TCM.
During the workshop, Nittita Prasopa-Plaizier introduced the concepts and principles of patient safety as well as patient and consumer engagement and empowerment relevant to TM/CAM. She also helped guide the group to design and develop an action plan on both producing consumer information and on establishing a national programme on consumer information on TM/CAM.

**January 2015**

The PFPS team started the New Year in the constructive manner it means to continue, by participating in the Qatar Patient Safety Week (QPSW) (Fig. 9, 10). Nittita and Kathyyana helped to organize and run a workshop as a concurrent session in the conference held as part of the Second QPSW, 18-24 January 2015.

They were joined by Hussain Jafri (PFPS champion from Pakistan), Sue Sheridan (PFPS US) and Dr Nor’Aishah Abu Bakar from the Ministry of Health Malaysia, to conduct a workshop on “Patient and Family Engagement” in collaboration with EMRO (Dr Mondher Letaief, Dr Mohammad Assai Aradakani, Dr Sameen Siddiqi) and the WHO Country Office in Qatar. The event was hosted by the Supreme Council of Health, Qatar (Shimous Mohammed Elamin, Shams Eldin and Dr Huda Amer Al-Katheeri). The workshop on patient and family engagement for patient safety and health-care quality improvement represented a first step to implement this initiative in Qatar.

Chaired by Sue Sheridan, the panel provided an overview of the patient and family engagement from the WHO perspective, emphasizing the importance of meaningful engagement for improved health outcomes, improved patient experience and lower costs for health services. Hussain shared his experience as a patient advocate while Dr Nor ‘Aishah provided the perspective of policy-makers.

Kathyyana presented the work of the PFPS Pan-American Network in engaging and empowering patients and families for safety and quality improvement. Through the concrete examples of Ecuador and Paraguay, she explained how these countries are creating strong networks of PFPS with the support of their respective governments.

**February 2015**

The WHO injection safety policy launch took place within the meeting of the Safety Injection Global network on 23-24 February 2015 (Fig. 11). The Injection Safety Launch initiative, opened by Dr Margaret Chan, was led by our colleague, Dr Selma Khamassi. Regina Kamoga (PFPS champion from Uganda) represented PFPS in this meeting, bringing the patient’s voice to discussions. The meeting was well attended with approximately 70 participants including Ministers of Health, industry representatives, NGO representatives, and colleagues from other WHO departments as well as from regional offices.

The new Injection Safety Strategy and Policy has two key elements. Firstly, to ensure a more rational use of injections, by reducing unnecessary injections and decreasing the demand by patients for injections which they think are more effective and work faster than other formulations. The strategy will work with communities and patients to educate and empower individuals on their risks related to the use of unsafe injections. But will also ensure safe injection practices by using safety devices, training health-care workers and putting in place a good sharps waste management system.

Three countries were selected to conduct pilot testing, Egypt, Uganda and India.
Update from AFRO

Uganda - Patient Solidarity Day

Author: Regina Kamoga
Reviewer: Felicity Pocklington

Patient Solidarity Day (PSD) was commemorated in Uganda at Kojja Health Centre, Ntenjeru Sub County, Mukono District on 5 December 2014 (Fig.12, 13). Patient Solidarity Day is an annual event commemorated by patient organizations in Africa and elsewhere. It was founded by Alice Mwongera from Moses Morris Foundation in Kenya. In 2011, Uganda organized the first PSD with the support of the International Alliance of Patients Organizations (IAPO). Since then, it has been a major regional activity in the African Region, which is greatly supported by the WHO African Region and a number of AFRO country offices.

The central theme of Patient Solidarity Day 2014 in Uganda was “Universal Health Coverage (UHC).” The event brought together over 1200 people, including local and international non-governmental organizations, private sector representatives, media representatives, and WHO representatives. Representatives attended from Joint Medical Stores, Uganda Cares, Medical Access, PACE (Prevent Arrhythmic Cardiac Events), the AIDS Support Organisation (TASO), the pharmaceutical industry, religious and political leaders, and the general public.

The keynote address emphasized the need for local leaders, the private sector, advocacy organizations, government and patients, to be the pillars of health care. It emphasized that these stakeholders needed to be at the forefront of advocating for UHC in Uganda.

Activities of the day included:

- Networking and identifying opportunities for collaboration with key health-care stakeholders to promote UHC and patient-centered health care
- HIV counselling and testing (241 people tested for HIV, 15 were found to be HIV+ and referred for treatment)
- Breast and cervical cancer screening (91 tested, 3 suspected and referred for further investigation)
- Hepatitis B screening (96 screened, 1 tested positive and referred for treatment)
- Providing information and treatment for general conditions (532 accessed information and treatment)
- Distributing mama kits with birthing materials (100 kits were distributed to pregnant mothers)
- Providing testimonies from patients on the prevention and management of disease
- Awareness-raising through music, dance and drama
- Providing health information on different diseases through exhibitions and interaction with health-care professionals.

Patient organizations noted with concern that high-quality, equitable, affordable health care is little more than a dream for most people in Uganda. They emphasized the fact that UHC is a human right and made a call to key stakeholders to ensure that fair and impartial access to quality health care coverage becomes a reality. They called on the government to speed up the National Insurance health policy in order for all Ugandans to access health care. They further noted that Uganda suffers the double burden of communicable and non-communicable diseases coupled with a number of health-care challenges like inadequate funding, inadequate human resources to tackle health crises, low health literacy, inadequate access to medical facilities and treatment, and mismanagement of funds allocated for health service delivery.
WHO committed to continue working with the Ministry of Health to ensure that health centres have the capacity to offer treatment to patients and to ensure that people get affordable treatment through the National Health Insurance.


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**Update from AMRO/PAHO**

**Canada**

*Update from Patients for Patient Safety Canada (PFPSC)*

The voice of patients and families is making a profound impact on patient safety in Canada and internationally as presented in the Canadian Patient Safety Institute’s (CPSI) 2013-2014 Annual Review:

[http://www.patientsafetyinstitute.ca/English/About/Documents/CPSI%20Annual%20Review%202014.pdf](http://www.patientsafetyinstitute.ca/English/About/Documents/CPSI%20Annual%20Review%202014.pdf)

We are well on our way to having 100% of the programmes of CPSI developed and/or delivered in partnership with patients, because we have learned that when patients are present in our work we lead by example (Fig, 15, 16). This was evident from the increase in requests received from Canadian and international organizations in the last year for our patient champions to be part of committees, working groups, boards and events.

As in every year, this year the collection of PFPSC member stories will include a few new ones. Join Canada’s Virtual Forum to be among the first to see them! Registration is free and you are only required to have a computer with internet connection to participate. Margaret Murphy, WHO External Lead Advisor spoke on 29 October. Learn more at [www.asklistentalk.ca](http://www.asklistentalk.ca).

We are very glad to share with you that beginning September 2014 Sharon Nettleton took over the Co-Chair, transitioning in from Carol Kushner (Fig, 14). Denice Klavano became Sharon’s partner Co-Chair in March, transitioning in from Donna Davis. Both Sharon and Denice will strengthen the impact and reputation of PFPSC.

We would like to thank Carol and Donna for their hard work, and wish them well in their future endeavours.

Finally, we were very pleased to connect with colleagues and share the work of PFPSC at the Institute for Patient and Family-Centred Care conference in Vancouver. Donna Davis and Hugh MacLeod’s honest conversation on patient engagement in patient safety, together with Terri Szabo and Ioana Popescu’s discussion about heroes who help make care safer were well attended. Hundreds of participants stopped by our booth to learn more about CPSI and PFPSC from Miriam Hurtig and Barb LeFort. We learned a lot over the summer and know there is lots more to learn from you and other colleagues.

Greetings from Patients for Patient Safety Canada (PFPSC) and thank you for the opportunity to share our news with other PFPS groups internationally.

PFPSC is growing steadily in members and in the contributions that we are making together – locally, provincially and nationally. Our committed membership group helped increase our numbers - we currently have 64 members residing in 9 of our 10 provinces.
In this last quarter, our members shared the patient/family voice, perspective and experiences in many activities, including:

- providing patient safety information and education sessions with frontline providers, leaders and those being trained to work in health-care;
- publishing an article entitled ‘Improving Safety: Engaging with Patients and Families Makes a Difference’;
- meeting with the Canadian Patient Safety Institute (CPSI) Board of Directors where we shared our continued commitment and desire to be present and involved with them and their partners in promoting a national patient safety strategy;
- being involved in planning and an initial launch of each of the four national safety initiatives: surgical safety, infection prevention and control, medication safety, and home care safety;
- sharing our stories and experiences as keynote speakers, panel members and facilitators (Fig. 17) – locally, provincially and nationally at a variety of patient safety related meetings and conferences – including CPSI’s 10th anniversary and Canada’s Forum with virtual participants from USA, Australia, France, Uruguay, Slovenia, Germany, Macedonia, Netherlands, Albania, Romania, Brazil, Portugal, Saudi Arabia, and Egypt.

Four members also recorded their stories last Fall. The 20 stories now available on our website are viewed by many and used at meetings and conferences, and by frontline health-care providers. Members have been involved in revising care standards with our national accrediting body, Accreditation Canada. The standards, to be released in 2015, include patient engagement and participation of patients/families in their own care.

PFPSC made a submission to the Health Canada National Advisory Committee on Health Innovation, requesting that patient engagement and patient safety be included in the national health innovation agenda.

A proud accomplishment was the inaugural Patient Safety Champion Awards, which recognized patients/families and organizations who through partnership significantly impacted patient safety. PFPSC contributed to the judging panel, to the presentation of the awards to the finalists and to the webinar with the finalists.

Internally, our Newsletter Group published and shared our internal resource with our members, CPSI staff and Board. The Knowledge Transfer Group offered workshops to members on disclosure, ways to share their story, and on how to be part of committees (tips available here). The Membership Group, brought together our members in a virtual, meeting with no agenda, simply to help us get to know each other and discuss issues of interest to members.

We are so thankful for all the volunteer hours and the extraordinary commitment of our members and everything they do as collaborators to make patient care safer!

Mexico

Author: Evangelina Vazquez Curiel
Reviewer: Felicity Pocklington

The "Manual for the Prevention and Control of Infections Associated with Health Care" has been published in Mexico. The original title in Spanish is: "Manual de prevención y control de infecciones asociadas al cuidado de la salud" (Fig. 18). This manual was a joint collaboration between health-care professionals, health care, academic and research institutions and patients. Alexis Esperato, Denice Klavano and Evangelina Vazquez are the authors of chapter 30, showing their dedication towards patients who are acting for, and towards, control and surveillance of health care associated infections.

After the summer break in 2014, members of the PFPS Mexican network came together in September with activities around the National Institute of Medical Sciences and Nutrition "Salvador Zubirán". This is part of a continuing education programme within the institution, and together with members of the Mexican Association for the Study of Nosocomial Infections (AMEIN), training courses were delivered on hand hygiene to new health professionals joining the institution.

Evangelina also gave a speech at the International Symposium on Quality, Safety and Health Systems, organized by the School of Medicine and Health Sciences.
of the Technological Institute of Monterrey, on 26 September. Very interesting discussions were generated since the participants showed interest in patient safety and a willingness to engage with patients and implement the WHO Curriculum Guide.

On 15 October 2014, Evangelina was invited to talk about “Bringing the Patient’s Voice” in an academic session organized by the National Homeopathic Hospital. This hospital is interested in incorporating leading practices in patient safety, such as hand hygiene and patient engagement.

Paraguay

The first PFPS workshop of Paraguay, “listening to the patient’s voice” took place in the capital, Asuncion, on 13-14 November 2014 (Fig. 19, 20). It was supported by the host organisation, IPS (Instituto de Prevision Social), the WHO Country office, WHO-HQ and the coordinator of the Pan-American Network, Evangelina Vazquez.

The workshop was opened by Dr Anibal de los Rios, Director of the Social Affairs Institute (IPS) of Paraguay. Dr Anibal de los Rios provided an overview of the national health system and emphasized the support from IPS for the creation of the Patients for Patient Safety network in Paraguay. Dr Maria Teresa Baran, Vice-Ministry of Health, congratulated the organizers for the ongoing efforts to improve patient safety in Paraguay and expressed her gratitude towards the WHO Country Office and WHO-HQ for supporting this activity.

The welcome session was followed by the launch of the recently approved document by the health authorities about “patients’ rights and responsibilities”.

An important session on the “why the health systems should engage patients in health care” generated a lot of interest and questions among the participants. The session started with a presentation from Katthyana Aparicio, stating the importance of engaging patients and families in the context of quality and safety improvement. Evangelina Vazquez presented the work done so far by the PFPS Pan-American Network in this area. The case of Paraguay was presented by Liropeya Camblor who runs an association for patient safety in her country.

A debate around the role of health institutions in patient engagement and patient safety was another important topic. Dr Hernan Rodriguez, Senior Advisor on Health Systems in the WHO Country Office gave an overview of patient safety. Dr Perla Lovera who was, prior to the workshop, the only PFPS champion in Paraguay, explained the actions taken so far by the IPS in the area of patient safety. To finish this session, Dr Zully Vera, Dean of the Medicine School of Asuncion, talked about the role of universities in improving patient safety. She highlighted the importance of teaching patient safety at university as this is the starting point, she also mentioned that Paraguay has started to implement the WHO Curriculum Guide for patient Safety in public universities.

After this important introduction on the concepts of patient safety, the workshop was followed by the session “listening to patients’ voices”. Thus, the floor was given over to the patients and high profile cases of adverse events, but also patients suffering from chronic diseases. This lead to interesting discussions between patients and health-care providers.
During the second day Evangelina Vazquez talked about the key factors to set-up a successful PFPS network and illustrated it through the concrete cases of Mexico and Colombia. Some videos were shown to demonstrate how patients can advocate for patient safety and contribute to improving the quality and safety of health-care.

Katthyana Aparicio and Evangelina explained the purpose of creating a PFPS network and the expectations from each member. A working group session allowed the participant to exchange different point of view as well as to share commonalities. The participants showed a lot of interest and enthusiasm to work together for a common goal: to improve patient safety. After meeting consensus, each group presented the outcomes in a plenary session and a summary of the principles that would lead the Paraguay PFPS Network were presented.


### USA

**Jeanine Thomas**

Jeanine Thomas, founder and president of MRSA Survivors Network has been invited to join the newly formed U.S. Stakeholder Forum on Antimicrobial Resistance (S-FAR), organized by the Infectious Disease Society of America (IDSA). S-FAR was formed to tackle the growing problem of antimicrobial resistance (AMR) in the United States.

Jeanine Thomas was invited to speak and present in the Food and Drug Administration’s (FDA) Clinical Development of Drugs for the Prevention of Infections caused by Staphylococcus aureus in the Health Care Setting Workshop on 5 September 2014, in Washington D.C. The US centers for Disease Control and Prevention (CDC), the National Institute for Health (NIH), along with leading researchers and industry representatives attended the event.

Streaming Live, the 6th Annual World MRSA Day & Global clostridium difficile (C. Diff) Summit, organized by the MRSA Survivors Network was held on 2 October 2014 at the Community House in Hinsdale, IL (Fig. 21). Leading World-renowned infectious disease experts presented and survivors shared their stories, followed by a panel discussion with questions from the audience. The event concluded with a Remembrance and Award Ceremony. World MRSA Day – October 2 and World MRSA.

See: [www.MRSA survivors.org](http://www.MRSA survivors.org) and [www.WorldMRSAday.org](http://www.WorldMRSAday.org)

### Update from EMRO

#### Egypt

**Author:** Nawga Metwally  
**Reviewer:** Felicity Pocklington

Nagwa Metwally’s efforts to obtain a donation of 20 million Egyptian pounds to rebuild the Geriatric Hospital of Cairo was recognised at the Annual Geriatric Conference held in November, as was the volunteer work that she is doing to bring patients’ voices together to try to improve the health care of elderly people in her country.

Following this conference, Nagwa was invited to attend the board meeting of the Medical School of the Ain Shams University in Cairo (Fig. 22). The heads of departments and managers of the hospitals of the medical school were among the audience. Nagwa gave her opinion about the patient safety situation in these hospitals. She also agreed with the suggested measure to reduce health-care costs to make them affordable for the most disadvantaged people of the region. Nagwa also suggested implementing continuous training programmes for health care professionals, explaining the importance of keeping the staff up to date on new procedures and knowledge. Nagwa is the first and only representative to the board who is not a staff member or professor of the medical school. She said, “They listened to me and they agreed with my comments. This is a great recognition of the patient’s voice and a huge step forward in the patient safety arena in Egypt”.

Last but not least, Nagwa was invited to attend the infection control scientific day organised by the central units of Infection Control and Intensive Care. The event was held on 10 November 2014, in the Training and Education Development Center of Ain Shams University Hospital. The topic was the antimicrobial stewardship programme, “Get Smart about antibiotics”.

![Figure 22: Nagwa Metwally attending patient safety board meeting](image)
World Diabetes Day was celebrated in the city of Tantan on 14 and 15 November 2014, with the support of the Moroccan Ministry of Health, the Province of Tantan, and the Moroccan League for the Fight Against Diabetes (a member of the International Federation of Diabetes) (Fig. 23, 24). The event was conducted in collaboration with the Municipal and Provincial Councils of Tantan, the Association of Social Works for the Province of Tantan, the Moroccan Federation Supporting People with CKD/Organ Transplantation and Hemodialysis, and the Social Association of Tantan.

This event was part of the action plan of the League for the Fight Against Diabetes, to benefit the needy and remote areas of the Kingdom. The action plan includes general education and awareness-raising about diabetes and other nutrition-related diseases and also contributed to the training of general practitioners (GPs) in the region.

The programme of the event was powered by specialists and doctors who are members of the League for the Fight Against Diabetes, The programme included:

- A campaign for education, information and awareness-raising to empower people living with diabetes and the public in general
- A campaign to screen for diabetes, obesity and hypertension in the population of Tantan city and the surrounding region
- An influenza vaccination campaign for people living with diabetes
- Continuing Medical Education for GPs on the prevention and management of diabetes and its complications

The event was complemented by artistic, theatrical and musical performances and cultural activities demonstrating the benefits of healthy habits in preventing diabetes.

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**Morocco**

*Author: Said El-Kharrasri*  
*Reviewer: Felicity Pocklington*

**France**

*Kathyyana Aparicio, Nittita Prasopa-Plaizier, Felicity Pocklington*

The PFPS team were invited to participate in a joint WHO – Le Lien meeting on patient engagement, in order to share experience and identify areas for future collaboration. The meeting marked the first steps to setting up future collaboration opportunities with France on patient and family engagement.

Le Lien is a patient organization, founded by a patient who had experienced a health care-associated infection. It provides advocacy and support (information and advice) to patients and families who have experienced any kind of adverse event. It is based in Paris, but has a membership that spreads across France. Originally, a PFPS workshop was envisaged instead of the meeting. However, as the organizers wished to engage with a range of stakeholders to raise awareness of family engagement for patient safety, and because there was a high number of participants, a workshop format was considered unsuitable for the meeting’s purpose. The event was therefore organized as a session for “sharing and learning” experiences between PFPS and Le Lien, including its key stakeholders. The meeting was also an opportunity to identify areas for future collaboration.
Nittita, Kathryana Aparicio and Margaret Murphy, External Lead Advisor to the PFPS programme, represented the Patients for Patient Safety (PFPS) Programme, presenting the work of WHO on patient and family engagement. All key members of Le Lien, including Jean Pierre Hulot, Claudine Richon, Alain Michel Ceretti and Beatrice Ceretti were present (Fig. 25). Other stakeholders included politicians and government officials from the French Health Department and HAS (Haute Autorité de Santé).

This full-day meeting was held on 25 November in the Palais Bourbon, where the French Parliament is housed, and was opened by the MP for the Département of Meurthe et Moselle. Approximately 70 people attended the meeting, including policy-makers, health-care providers and patients. Le Lien indicated that it remained interested in conducting a PFPS workshop in the future.

Update from SEARO

Thailand

Felicity Pocklington (taken from case-study report 2015)
Credits: Piyawan Limpunyalert

Patient and community engagement in Thailand was formally initiated in August 2014, when they convened the first PFPS Thailand workshop with the support of WHO (Fig. 26, 27). Since then, they have continued to expand their network and vision across the country.

PFPS Thailand is supported by the Healthcare Accreditation Institute in Thailand (HA Thailand), which has the mission to encourage, support and drive quality improvement and a safety culture within Thailand’s healthcare system. With this mission, HA Thailand uses hospital self-assessment, external survey, recognition and accreditation and knowledge-sharing as leverage mechanisms. Collaboration with various stakeholders is also important for the quality and safety movement.

In the area of patient and consumer involvement, the PFPS Thailand group hosted their first workshop in 2014, supported by HA Thailand. A total of 48 participants joined the workshop. This was a collaboration of patients and families, with technical support from WHO Service Delivery and Safety Department through the PFPS programme. Recruitment of workshop participants was done as per guidance from the WHO PFPS Programme and was advertised through Facebook, email, websites and letters to patient’s organizations across the country. Many participants were empowered within the workshop by increased knowledge about patient engagement around the world and by being part of an engagement initiative being developed in Thailand.

PFPS Thailand is building a patient-led, national network of patients and patient organizations to lead initiatives on patient safety. The PFPS Thailand vision is for public participation in the health-care system’s development for safety and equity, with an evidence-based and common understanding between all partners involved. The mission is to encourage collaboration between health-care providers, patients, families and the general public in the development of a safe, equitable and people-centred health-care system. The three strategic objectives of PFPS Thailand are:

- To bring patient engagement to the national agenda.
- To create a sustainable, formal structure by creating a working group.
- To encourage formal recognition from existing systems.
Malaysia

Manvir Jesudasan attended the Expert Consultation on the WHO Framework on Patient and Family Engagement and the meeting of the Patients for Patient Safety Advisory Group at WHO headquarters in Geneva on 26-30 October 2014 (Fig. 28).

Manvir reports:

“At the Expert Consultation on the WHO Framework on Patient and Family Engagement for the first two days, it was great to sit next to the legendary Dr Angela Coulter from the UK. Needless to say, the views from the people in the room were rife with experience. Along with Sir Liam Donaldson, they have been blazing the trail on patient safety for years.

One of the key elements that I learnt that we lack in Malaysia, is the metrics and measurement data. This would enable us to ascertain where exactly we are in the thick of things and exactly where our resources should be deployed for maximum effect.

The PFPS Advisory Group meeting the following day and a half was primarily to tighten the already effective mechanism that is Patients for Patient Safety and put plans and systems in place to help advance the cause globally. Needless to say, this visit to Geneva has opened my eyes to how important our work is in our respective countries. We see the consistencies of what we are applying throughout the world. From Africa, India, Europe, America and Canada, we see what we can learn from and how we can innovate to advance the cause of patient and family engagement”.

Manvir was interviewed by the Malaysian Insider Journal on 30 November about his experience and motivation to advocate for patient safety. You would be interested to read the interview!


May

The International Congress of Radiation Research (ICRR2015) will be held in Kyoto, Japan at the end of May.

Our colleagues from the National Institute of Radiological Sciences (NIRS), a WHO Collaborating Center, are involved in the organization of ICRR2015.

They include in the ICRR2015 programme a session on Risk/Benefit dialogue and they would like to have a patient advocate/champion from PFPS as one of the speakers in this session. A PFPS Champion from Malaysia (Rosmani Omar) will attend and deliver a lecture on the patients’ view within the radiation benefit/risk dialogue.

Side event:

“Imaging for Saving Kids - the Inside Story About Patient Safety in Paediatric Imaging” has been scheduled to take place on 26 May 2015, between 12:30-14:00, in Room 24 of the Palais des Nations” during the upcoming World Health Assembly. Margaret Murphy will bring the patients’ voice to this event.

Future PFPS News

Share your news with us!

PFPS News: Contributions for the next PFPS News are invited. The deadline for submissions is 10 July 2015.

PFPS Community of Practice: You can also continue to ask questions, share experiences and learning on the PFPS platform at: http://pfps-communities.net. If you have problems accessing the CoP, please contact Kathyyana Aparicio at pfps@who.int.

PFPS Skype: If you wish to speak to us interactively, our Skype name is pfps.geneva.


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