The WHO Patients for Patient Safety Programme:
a WHO approach for patient engagement
Patients for Patient Safety

Partnerships for safer care

A global network

Telling “stories” to catalyse improvements and organizational learning.

Encourage partnership, empowerment and inspire action on patient safety worldwide.

A WHO programme

Aims to incorporate the patient voice in all levels of healthcare.

Empowers and facilitates patients and their families to advocate for change collaboratively.
An Innovative approach

• Believes that by sharing experiences and expertise, each individual and organization can learn and improve
• For patients - by patients, with patients
• Places patients and community at the center of the efforts for **changes with lasting impact**
• Uses the patient experience "stories" as a learning tool
• *"Champions"* for patient engagement, empowerment
• Promotes patient leadership and involvement in health
• Facilitates positive, constructive and meaningful engagement
Role WHO PFPS

- Provide **technical support** - for local ownership and local capacity
- Raise **awareness** at global and national levels
- Collaborate in the **implementation of local, regional and global initiatives**
- **Convene** experts and harness contributions from different actors
- **Empower patients** and promote patient leadership
- Produce **evidence-based** tools, guidance and interventions
- Promote **connections and partnerships** among stakeholders
2005
WHO funded & organized workshops

2010-12
WHO organized workshops
Patients for Patient Safety Malaysia

11 February 2014

DR. KADAR MARIKAR
CEO, MSQH.
* Population of over 29 million people.
* Multi-cultural and multi-racial population consists of Malays, Chinese, Indians and numerous natives.
* Ethnic Groups: 59% Malay and other indigenous, 32% Chinese and 9% Indian.
* Malay is the official language but English is widely spoken, especially in business.
* Official religion is Islam, but its people are free to observe any religion of their choice. It is common to see temples, mosques and churches located in close proximity.
* Languages: Malay, English, Chinese, Tamil and other tribal languages.
* Religion: Muslim (primarily Malays), Buddhism (Chinese), Hindu (Indian), Christianity.
VISION and MISSION FOR HEALTH

Vision:
A nation working together for better health.

Mission:
The mission of the Ministry is to lead and work in partnership:
i) to facilitate and support the people to;
   • attain fully their potential in health
   • appreciate health as a valuable asset
   • take individual responsibility and positive action for
     their health.

ii) To ensure high quality health system that is;
   Customer centred
   equitable
Mission cont.

- Affordable
- Efficient
- Technologically appropriate
- Environmentally adaptable
- Innovative

III) with emphasis on;
- professionalism, caring and teamwork
- respect for human dignity
- community participation
We, Patients for Patient Safety, envision a different world in which healthcare errors are not harming people. We are partners in the effort to prevent all avoidable harm in healthcare. Risk and uncertainty are constant companions. So we come together in dialogue, participating in care with providers. We unite our strength as advocates for care without harm in the developing as well as the developed world.

We are committed to spread the word from person to person, town to town, country to country. There is a right to safe healthcare and we will not let the current culture of error and denial continue. We call for honesty, openness and transparency. We will make the reduction of healthcare errors a basic human right that preserves life around the world.

We, Patients for Patient Safety, will be the voice for all people, but especially those who are now unheard. Together as partners, we will collaborate in:

- Devising and promoting programs for patient safety and patient empowerment.
- Developing and driving a constructive dialogue with all partners concerned with patient safety.
- Establishing systems for reporting and dealing with healthcare harm on a worldwide basis.
- Defining best practices in dealing with healthcare harm of all kinds and promoting those practices throughout the world.

In honor of those who have died, those left disabled, our loved ones today and the world’s children yet to be born, we will strive for excellence, so that all those involved in health care are as safe as possible as soon as possible. This is our pledge of partnership.

March 29, 2006
IN MALAYSIA

Emerged from two initiatives:

1. Stewardship of MSQH Committee: commitment to actively engage patients/consumers in the Healthcare Facilities and Services Accreditation Program, since 2008, with the introduction of Patients and Family Rights Standards in the 3rd Edition of the MSQH Hospital Accreditation Standards.

RATIONAL

- Users of healthcare; patients, consumers and their families – are an under utilized resource in patient safety work.

- The workshop engage consumers as partners and apply their ideas, experience and perspective to improve and enhance patient safety initiatives nationwide.

METHODOLOGY

Adapted a group process methodology known as Appreciative Inquiry, designed to tap participants’ personal and professional successes in addressing challenges and creating inspired, positive change.
ENGAGING PATIENTS/CONSUMERS IN MALAYSIAN HEALTHCARE SERVICES

Employ positive and constructive engagement

Informed, empowered patients & community
Aware, competent, committed professionals
Visionary, passionate, supportive leadership
Supportive policy and regulations

Safe, high quality, integrated, people and patient-centered health care

Work collaboratively and in partnerships

MSQH/MOH
STANDARDS FOR PATIENTS AND FAMILY RIGHTS

* Implemented since 2009 in the 3rd Edition of MSQH Hospital Accreditation Standards
* Continued in the 4th Edition since 2013
* Creation of an awareness and developing a culture of acknowledging that consumers (patients and families) as partners and they need to be part of the care process.
* Changing the mind sets of providers that the care is about the patients interest and not the providers.
* **2012 AGM: Amendment of MSQH Constitution**

* To give place to a member of the consumer to be part of the MSQH Board member.

* Approved by the Registrar of Societies in December 2013.

* Effective 2014, A consumer representative will be a member of the MSQH Committee.
Published in the national media and MSQH web page for public participation

Specific criteria's (from WHO) to be met

Selection and interviews by MSQH Secretariat

Country Workshop conducted 5& 6 September 2013 jointly with MOH and in collaboration with WHO Geneva and WHO WPRO Manila at Everly Hotel Putrajaya.

13 Participants were trained to be Patients advocates.
WORKSHOP OBJECTIVES

1. Introducing participants to the local healthcare system, patient or consumer networks and or local resources relevant to healthcare quality and patient safety initiatives.

2. Introducing individuals to the concept of collective action and empowerment and engagement to achieve healthcare improvements.

3. Raising awareness about patient safety and the importance of patient and community engagement in healthcare services and quality and safety initiatives.

4. Training and orienting individuals in advocacy skills for patient safety and to promote positive engagement and partnerships between patients, healthcare professionals, policy makers and healthcare leaders.

5. Facilitation of sharing of ideas, experiences and network locally, nationally and globally.

6. Providing a forum for discussion and means to turn feelings of frustration and anger into positive action. (Post experience Medical errors)
Patients:
- An independent, patient-led network – PFPS Malaysia
- Agreed structure, governance and work plan
- On-going education programme
- Provide services and creating products
- Patients as: presenters, educators, enablers, advisors, consultants and partners

Health care providers and organizations:
- Awareness of WHO programmes and initiatives
- Assessing readiness and capacity
- Promote environments for positive patient safety culture
- Creating opportunities for patient engagement and partnership
- Embrace patients as: presenters, educators, enablers, advisors, consultants and partners
• Be well-informed patient advocates and be the voice for all people
• Commit to positive and constructive engagement
• Work collaboratively as partners with professionals and policymakers
• Promote patient empowerment and patient safety culture
• Raising awareness of health care quality and patient safety
• Facilitate systems for patient safety reporting and organizational learning
• Define and promote best practices in dealing with healthcare harm
Roles of MOH/MSQH for Patient and Community Empowerment and Engagement in Malaysia

WHO:
- Country, Regional, HQ
- Patient Safety Programme
- Patients for Patient Safety (PFPS) Global Network

Patients, Consumers
- Community
- Civil Society

MOH/MSQH

Professionals:
- Health-care providers
- Professional associations
- Academic and research institutions

Government
- National bodies
- Organizational management
- Institutional leaderships
First meeting on 1st October 2013
- Formalized the team members and appointed a chair person
- Discussed at length various options on the organizational structure of PFPSM
- Activities to move forward.
- In the interim phase MSQH will provide secretarial and logistic support for the group to function.
- Launching nation-wide; PATIENT FOR PATIENT SAFETY MALAYSIA MOVEMENT on 29 April 2014 at Marriott Hotel Putrajaya.
Second meeting on 5\textsuperscript{th} December 2013

* Vision, Mission, Values, Objectives of PFPSM and Terms of Reference finalized

* Organizational Structure – PFPSM to be a sub-committee under the main MSQH Committee (Board) and approved as an interim measure at the MSQH Board meeting on 20\textsuperscript{th} December 2013.

* Confidentiality of matters discussed at PFPSM meetings and signing of Code of Conduct by members

* Patient Safety Council Malaysia to be briefed on the establishment and organizational structure of PFPSM at its meeting on 13\textsuperscript{th} January 2014

* National Healthcare Leaders Summit: Date- 29\textsuperscript{th} April 2014 & National launching of PFPSM
**PROGRAMME**

0815 Registration
0830 Welcome & Opening Remarks by Chairman Organising Committee
0830 Quality and Safety in the “Patients’ Eyes”
   Mr J. Marmur, Chairman PFPSSM
0900 Malaysian Patient Safety Council
   Dr Noor Aishah Abu Bakar
   Acting Deputy Director, Quality in Medical Care Section,
   Ministry of Health, Malaysia
0900 Technical Coordinator Patient Safety Council Malaysia
0930 WHO Patient Safety Program & PFPSSM Global Network
   Dr Ken-ichiro Taneda,
   Technical Officer (Patient Safety) WHO Western Pacific Regional Office, Manila
1000 Official Opening and Launching of Patients for Patient Safety Malaysia (PFPSSM) by the
   YB Datuk Seri Dr S. Subramaniam
   Minister of Health, Malaysia
1030 Tea Break
1100 Patients for Patient Safety Malaysia Framework
   Dr Khairil Marikan,
   Chief Executive Officer,
   Malaysian Society for Quality in Health
1130 Communicate, Care & Cure: “The Banglore Baptist Hospital, India Experience”
   Dr Alexander Thomas
   Consultant Orthopaedic Surgeon,
   Medical Director Banglore Baptist Hospital, India
1230 Lunch Break & Prayers
1300 Hospital “on Trial”
1330 Closing Remarks by
   Datuk Dr Noor Hazlan Abdullah
   Director General,
   Ministry of Health, Malaysia
1600 Tea / Registration for AGM
1700 MSQH 16th Annual General Meeting
1830 Refreshment & End

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**DISCLAIMER**

MSQH reserves the right to alter the programme schedule and details without prior notification.

Change of training date or venue

MSQH reserves the right to make alternative arrangements to the above without prior notice to participants. However, every effort will be made to inform the participants of the changes.

Additional expenses

MSQH shall not be responsible for any additional expenses incurred by any participant(s) in the course of attending the training.

CANCELLATION

Cancellation of registration by participant is subject to the following:

- Up to 30 working days prior to commencement: 10% of registration fee will be charged
- Less than 30 days (7 working days) prior to commencement: 50% of registration fee will be charged
- If no notification is received by the commencement date, the full registration fee will be charged.

Non-Attendance

If participants fail to attend the training, a full registration fee will be charged and substitute is allowed.

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**REGISTRATION FORM**

Please complete the following. The organiser shall decline the incomplete application form.

Please use separate sheet for additional participants.

Organisation/Institution:
Address:
City: State:
Post Code: Country:
Phone: Fax:
Email:

Meal preferences: Please []
   - Vegetarian (no. of Pax(s): )
   - Non-Vegetarian (no. of Pax(s): )

Participant(s) information
Participant(s) Name Email
(1)
(2)
(3)
(4)
(5)

Payment Details
(All payment are in Ringgit Malaysia (RM)**

Cheque No/LPO: should be crossed and made payable to:
Company: Malaysian Society for Quality in Health
Bank Account No: 14392 - 000253-850
Bank Address: CIMB Bank, Jl. Tunku Abdul Rahman, KL

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COMPANY STAMP & SIGNATURE

I, the undersigned, have read and understood the Registration Policy and accept the terms contained therein.

[Signature]

Company Rubber Stamp

Authorised Signature:
Name of authorised person:
Designation:

FAX TO (603) 2681 3199
CHALLENGES

* Malaysia wide diversity: getting the right consumer/patients to represent the right committee.

* Building consumers capacity to fit in the various needs of the healthcare industry.

* Changing the mindsets of the Healthcare providers to accept and acknowledge the contributions of consumer group as partners in the delivery of healthcare.

* Resource support and organisation structure to sustain the consumer groups/PFPS Malaysia.
A new horizon in the healthcare industry
Work in progress
Unsure what is ahead,
However it is a risk to be managed.
Patients For Patient Safety In-Country Workshop:
5 & 6 September 2013
ACKNOWLEDGMENT

Ms. Nittita Prasopa Plaizier WHO, Geneva
Dr. Ken-ichiro Tanedak WHO-WPRO, Manila
Ms. Stephanie Newell, WHO Patient Safety Champion, Australia.
Ministry of Health Malaysia
Malaysian Society for Quality in Health
Patients For Patient Safety Malaysia

Thank you
For your attention

www.msqh.com.my
msqh@msqh.com.my