

Ministers for Patient Safety





1. Adapt known **best practices in patient safety** to fit the local context.

- 2. Include patient safety in all health professions school curricula, with integrated multidisciplinary (team-based) simulation practices.
- 3. To develop a standardized taxonomy for patient safety (national, regional & /or citywide) and consider the development of an International Classification of Adverse Events in alignment with ICD.



- 4. Develop a robust regulatory process that ensures safe use of Digital Health and Medical Technology.
- 5. Integration of Patient Safety as an essential requirement of Universal Health Coverage Without Harm, at all levels of care (primary, secondary and tertiary).
- 6. Develop patient safety policies that include strategies and interventions adapted to the context of extreme adversity.



- 7. Invest and provide international support to Africa Centre for Disease Prevention and Control (CDC) to improve surveillance, emergency response, and prevention of infectious deadly diseases.
- 8. Implement the WHO IPC core components at the national and facility levels, in synergy with other programs (e.g. AMR, Sepsis, WASH and others).
- 9. Establish national evidence-based healthcare workforce staffing ratios and skill mix (ICN®-SPSC White Paper) to ensure safe provision of care for patients and healthcare professionals (Second Victim Programs).



- 10. Develop national patient safety strategies following effective consultation with citizens, patients and their families, health care staff, system leaders and providers, while promoting health literacy for effective decision-making.
- 11. Integrate practical approaches to safety developed by non-healthcare industries (aviation, oil and gas, nuclear, transportation) into provision of care.
- 12. Develop patient safety policies that include structures and processes specifically designed to the context of Primary Healthcare.



Thank You