World Health Assembly Adopts Global Patient Safety Action Plan 2021–2030

On August 3, 2021, the Seventy-Fourth World Health Assembly adopted the Global Patient Safety Action Plan 2021–2030.[1] The 2021 decision to adopt the action plan followed the May 2019 World Health Assembly's mandate to develop a global patient safety action plan.

The Global Patient Safety Action Plan 2021–2030 was developed by the Integrated Health Services WHO team in consultation with WHO Member States and relevant stakeholders. The aim is to provide strategic direction and an action-oriented framework to facilitate the implementation of strategic patient safety interventions at all levels of health systems globally over the next 10 years (2021–2030).[2]

The action plan includes the following seven strategic objectives:

1. Policies to eliminate avoidable harm in health care: Make zero avoidable harm to patients a state of mind and a rule of engagement in the planning and delivery of health care everywhere
2. High-reliability systems: Build high-reliability health systems and health organizations that protect patients daily from harm
3. Safety of clinical processes: Ensure the safety of every clinical process
4. Patient and family engagement: Engage and empower patients and families to help support the journey to safer health care
5. Health worker education, skill, and safety: Inspire, educate, and protect health workers in order to contribute to the design and delivery of safe care systems
6. Information research and risk management: Ensure a constant flow of information and knowledge to drive the mitigation of risk, reduction in levels of avoidable harm, and improvements in the safety of care
7. Synergy, partnership, and solidarity: Develop and sustain multisectoral and multinational synergy, partnership, and solidarity to improve patient safety and quality of care

To achieve these objectives, 35 specific strategies have been identified. Figure 1 depicts the 7×5 matrix for the action framework. In addition, 10 core indicators to measure and report progress on implementing the global action plan are proposed. Table 1 lists the 10 core indicators for monitoring progress on the seven strategic objectives. The WHO secretariat plans to monitor the achievement of these indicators at the global, regional, and national levels. For each core indicator, the global targets for achievement by 2023, 2025, 2027, and 2030 are specified. Furthermore, advanced indicators for each strategic objective are proposed for countries to monitor as applicable to their context, capacity, and patient safety priorities.

The action plan acknowledges the diversity in structure, funding, and governance of health care systems worldwide and the fact that full implementation at the national level will be a long-term agenda. The following key implementation milestones are suggested:

- Milestone 1: Assess the landscape
- Milestone 2: Secure strong commitment from political and organizational leadership
- Milestone 3: Establish a sustainable mechanism for implementation
- Milestone 4: Align with national context and priorities
- Milestone 5: Decide on and design the model of change for implementation

The World Health Assembly's director-general will report back to the WHO every 2 years on the progress made in implementing the plan, starting in 2023 and continuing until 2031.[1]

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		1	2	3	4	5
1	Policies to eliminate avoidable harm in health care	1.1 Patient safety policy, strategy and implementation framework	1.2 Resource mobilization and allocation	1.3 Protective legislative measures	1.4 Safety standards, regulation and accreditation	1.5 World Patient Safety Day and Global Patient Safety Challenges
2	High-reliability systems	2.1 Transparency, openness and No blame culture	2.2 Good governance for the health care system	2.3 Leadership capacity for clinical and managerial functions	2.4 Human factors/ergonomics for health systems resilience	2.5 Patient safety in emergencies and settings of extreme adversity
3	Safety of clinical processes	3.1 Safety of risk-prone clinical procedures	3.2 Global Patient Safety Challenge: *Medication Without Harm*	3.3 Infection prevention and control & antimicrobial resistance	3.4 Safety of medical devices, medicines, blood and vaccines	3.5 Patient safety in primary care and transitions of care
4	Patient and family engagement	4.1 Co-development of policies and programmes with patients	4.2 Learning from patient experience for safety improvement	4.3 Patient advocates and patient safety champions	4.4 Patient safety incident disclosure to victims	4.5 Information and education to patients and families
5	Health worker education, skills and safety	5.1 Patient safety in professional education and training	5.2 Centres of excellence for patient safety education and training	5.3 Patient safety competencies as regulatory requirements	5.4 Linking patient safety with appraisal system of health workers	5.5 Safe working environment for health workers
6	Information, research and risk management	6.1 Patient safety incident reporting and learning systems	6.2 Patient safety information systems	6.3 Patient safety surveillance systems	6.4 Patient safety research programmes	6.5 Digital technology for patient safety
7	Synergy, partnership and solidarity	7.1 Stakeholders engagement	7.2 Common understanding and shared commitment	7.3 Patient safety networks and collaboration	7.4 Cross geographical and multisectoral initiatives for patient safety	7.5 Alignment with technical programmes and initiatives

Figure 1. 7×5 matrix for the action framework.

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World Health Assembly Adopts Global Patient Safety Action Plan 2021–2030 (continued)

Table 1. Global Patient Safety Action Plan 2021–2030 Strategic Objectives and Core Indicators

Strategic Objective	Core Indicator(s)
Strategic Objective 1. Make zero avoidable harm to patients a state of mind and a rule of engagement in the planning and delivery of health care everywhere	1. Number of countries that have developed a national action plan (or equivalent) for implementing patient safety policy and strategies
Strategic Objective 2. Build high-reliability health systems and health organizations that protect patients daily from harm	2. Number of countries that have implemented a system for reporting never events (or sentinel events)
Strategic Objective 3. Ensure the safety of every clinical process	3. Significant reduction in health care–associated infections 4. Significant reduction in medication-related harm (adverse drug events)
Strategic Objective 4. Engage and empower patients and families to help and support the journey to safer health care	5. Number of countries that have a patient representative on the governing board (or an equivalent mechanism) in 60% or more hospitals
Strategic Objective 5. Inspire, educate, and protect health workers in order to contribute to the design and delivery of safe care systems	6. Number of countries that have incorporated a patient safety curriculum in education programs or courses for health care professionals 7. Number of countries that have signed up for implementation of WHO Health Worker Safety Charter
Strategic Objective 6. Ensure a constant flow of information and knowledge to drive the mitigation of risk, reduction in levels of avoidable harm, and improvements in the safety of care	8. Number of countries that have 60% or more health care facilities participating in a patient safety incident report and learning system 9. Number of countries that publish an annual report on patient safety
Strategic Objective 7. Develop and sustain multisectoral and multinational synergy, partnership, and solidarity to improve patient safety and quality of care	10. Number of countries that have established a national patient safety network

1. World Health Organization (WHO). Seventy-Fourth World Health Assembly. Decision WHA74(13). May 31, 2021. Global Action on Patient Safety. Available at https://apps.who.int/gb/ebwha/pdf_files/WHA74/A74(13)-en.pdf. Accessed August 26, 2021.
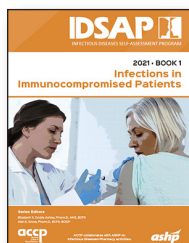
2. World Health Organization (WHO). Global Patient Safety Action Plan 2021–2030: Towards Eliminating Avoidable Harm in Health Care. Geneva: WHO, 2021. License: CC BY-NC-SA 3.0 IGO. Available at www.who.int/publications/i/item/9789240032705. Accessed August 26, 2021.

2021 ACCP Annual Meeting to Be Delivered On-Demand and by Virtual Meetings

2021 ACCP ANNUAL MEETING
October 16–19, 2021
Phoenix Convention Center | Sheraton Phoenix Downtown
Phoenix, Arizona

In view of the resurgence in COVID-19 cases and hospitalization and the spread of the highly contagious Delta variant, ACCP has canceled its in-person 2021 ACCP Annual Meeting, which was to take place in Phoenix, Arizona, October 16–19. In lieu of the in-person assembly, Annual Meeting programming and events will be delivered in on-demand or virtual formats. Information on these will be published at www.accp.com as soon as plans are finalized.

Book Highlights

Infections in Immunocompromised Patients

an accp Publication

Infections in Immunocompromised Patients is the current release in ACCP's Infectious Diseases Self-Assessment Program (IDSAP). Developed and peer reviewed by expert clinicians, the learning activities published in this book provide the most up-to-date evidence and management strategies for complex infections in immunocompromised patients.

The book offers a total of 16.0 continuing pharmacy education (CPE) hours divided into three modules as follows:

- Module I (4.5 CPE hours)
  - Cytomegalovirus
  - Candidemia and Invasive Candidiasis
- Module II (6.0 CPE hours)
  - Invasive Mold Infections
  - Evaluation of Antibiotic Allergies

- The Link Between Stewardship Strategies or Modalities and Antimicrobial Resistance
- Module III (eModule, 5.5 CPE hours)
  - Asymptomatic Bacteriuria (interactive case)
  - Nocardia and Atypical Mycobacteria Infections (interactive case)
  - Immunization in the Immunocompromised Host (interactive case)

Board Certified Infectious Diseases Pharmacists (BCIDPs) interested in completing the learning activities for specialty recertification credit offered in this IDSAP release must successfully complete the web-based test by November 15, 2021. Clinical pharmacists seeking CPE credit must successfully complete the test by May 17, 2024.

A sample chapter titled "Cytomegalovirus" is available at www.accp.com/docs/bookstore/IDSAP/id2021b1_sample.pdf. More information on the IDSAP series and the current release, *Infections in Immunocompromised Patients*, is available at www.accp.com/store/product.aspx?pc=IDSAP_2019-2021.

COVID-19 Treatment Updates

The NIH Coronavirus Disease 2019 (COVID-19) Treatment Guidelines Panel issued several updates to the guidelines in August 2021. Revisions include new recommendations for the therapeutic management of hospitalized adults with COVID-19, a statement on the Emergency Use Authorization of casirivimab plus imdevimab as postexposure prophylaxis for SARS-CoV-2, and information on the use of inhaled corticosteroids in non-hospitalized patients with COVID-19.

More information on the revisions to the COVID-19 treatment guidelines is available at www.covid19treatmentguidelines.nih.gov/about-the-guidelines/whats-new.

Mark Your Calendar

**2021 ACCP Annual Meeting
On-Demand and Virtual Meeting**

**2022 ACCP International Symposium
Antimicrobial Resistance
February 22–23, 2022
Virtual Meeting**

**2022 ACCP Global Conference
on Clinical Pharmacy
October 15–18, 2022
San Francisco, CA**

A Message from the Editor

Dear Colleagues:

The featured article in this issue of *ACCP International Clinical Pharmacist*, "World Health Assembly Adopts Global Patient Safety Action Plan 2021–2030," highlights the WHO action plan, strategic objectives, and core indicators for monitoring progress toward realizing the action plan over the next 10 years. At the practitioner level, the action plan should be viewed with the central role pharmacists assume in medication optimization.

The article titled "2021 ACCP Annual Meeting to Be Delivered On-Demand and by Virtual Meetings" announces the cancellation of the in-person 2021 ACCP Annual Meeting. Alternative plans to deliver meeting content on-demand and by virtual meetings are being developed. Given the risks associated with travel and large-group in-person gatherings, this is an opportunity for expanded reach, and I hope that many international colleagues take advantage of the revised delivery formats to access the high-quality programming that ACCP Annual Meeting attendees are accustomed to.

The title featured in this issue's Book Highlights department is *Infections in Immunocompromised Patients*, the most recent release in ACCP's Infectious Diseases Self-Assessment Program (IDSAP). Although developed for Board Certified Infectious Diseases Pharmacists (BCIDPs), the learning activities are relevant to all clinical pharmacists providing care to immunocompromised patients.

Finally, the article titled "COVID-19 Treatment Updates" presents key revisions released by the NIH COVID-19 Treatment Guidelines Panel.

Sincerely,

Wafa Y. Dahdal, Pharm.D.