

Medication Without Harm



WHO Global Patient Safety Challenge

**MEDICATION
WITHOUT HARM**
Global Patient Safety Challenge



World Health
Organization

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Developing programmes for patient and family engagement - Canadian experience

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 World Health Organization	Medication Safety Webinar Series (Virtual)
 World Patient Safety Day 17 September 2022	WHO Global Patient Safety Challenge: <i>Medication Without Harm</i>
	Webinar 2: Engaging patients and families for medication safety
	Tuesday 08 March 2022, 13:00-14:30 hours CET, Geneva, Switzerland

Developing programmes for patient and family engagement - Canadian experience

Maryann Murray – Co-Chair, Patients for Patient Safety Canada

Ioana Popescu – Director, Safety Strategies & Programs, Healthcare Excellence Canada

Coming Together



GAIA ORION

Our Journey | Notre voyage

- Over a few years evolved from a group of people that shared a vision, to a community united by the London Declaration, to Patients for Patient Safety Canada
- Pan-Canadian organization, committed to patient engagement, facilitates and provides initial and ongoing support

[HeART of HealthCARE \(healthcareexcellence.ca\)](http://healthcareexcellence.ca)

2005

WHO London Declaration

2006

Vancouver In-country Meeting


2007

Winnipeg In-country Meeting

Every patient safe La sécurité pour tous les patients

www.patientsforpatientsafety.ca | www.securitepatients.ca

United by a vision and pledge for partnership

**World Health Organization**

Patient Safety
A World Alliance for Safer Health Care

LONDON DECLARATION**Patients for Patient Safety
WHO Patient Safety**

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 involved in healthcare are as safe as possible as soon as possible. This is our pledge of partnership.

March 28, 2006

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Working Together



MARIÈVE BONIN

Pearls of Wisdom | Perles de sagesse

HeART of HealthCARE
(healthcareexcellence.ca)

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How our partnership works

- We focus on improving patient safety at all system levels
- Patient-led internal structures and processes for membership recruitment, orientation and engagement
- Strategic goal development based on what matters to patients and aligning them with the organization

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Achieving Through Partnership



RITA HISAR

Beads of Hope | Billes d'espoir

[HeART of HealthCARE](http://healthcareexcellence.ca)
(healthcareexcellence.ca)

Demonstrating value = sustainability

- **Results** - evaluate & communicate to internal and external stakeholders via reports, awards, publications, conferences, events.
- **Reputation** – recognized as the trusted community of patient partners.
 - Repeat and new requests to engage
 - Relationships – strengthen and build new
- **Recognition** - by WHO, PFPS Global Network, Canadian (Federal), Provincial and Territorial leaders, other partners.

Rates of harm still unacceptable high!

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Engaging with government

- Our asks:
 - Do no harm (prevention and learning through reporting)
 - Prevent further harm (disclosure and support after harm)
 - Engagement of patients
- Our reach:
 - Ottawa – Members of Parliament
 - Provincial roundtables
 - Individual 1:1 conversations as constituents
 - Successes

[Patients Engaging Government; A guide for patient partners to advance patient safety \(patientsafetyinstitute.ca\)](https://patientsafetyinstitute.ca)



Medication safety projects - examples

- At the point of care
 - [5 questions](#) to ask
 - [Oxytocin safety](#)
- At system level
 - [Vanessa's law](#) (protecting Canadians from unsafe drugs act)
 - [Mederror.ca](#) – consumer reporting system
 - [Improving Labelling](#) of non-prescription medications
- Partnerships
 - Medication Safety Coalition
 - CMIRPS Coordinating Group
 - Patient Alliance for Patient Safety

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5 QUESTIONS TO ASK ABOUT YOUR MEDICATIONS
when you see your doctor, nurse, or pharmacist.

- 1. CHANGES?**
Have any medications been added, stopped or changed, and why?
- 2. CONTINUE?**
What medications do I need to keep taking, and why?
- 3. PROPER USE?**
How do I take my medications, and for how long?
- 4. MONITOR?**
How will I know if my medication is working, and what side effects do I watch for?

Keep your medication record up to date.

Remember to include:

- ✓ drug allergies
- ✓ vitamins and minerals
- ✓ herbal/natural products
- ✓ all medications including non-prescription products

Ask your doctor, nurse or pharmacist to review all your medications to see if any can be stopped or reduced.

Oxytocin to Start or Advance Labour: 5 Questions to Ask

medicationuse.ca for more information.

- 1. What is oxytocin?**
 - Oxytocin is a hormone that is produced naturally in pregnancy to make the uterus contract. When the uterus contracts, it is called labour.
 - Oxytocin is also a medicine that is given during labour if the natural supply is not enough.
- 2. Why is it used and what are the benefits?**
 - To help start labour (induction), or
 - To help advance labour (augmentation) when the time between contractions is too long, the length of contractions is too short, or contractions are too weak.
 - Oxytocin helps the uterus contract. The contractions open the cervix and help your baby move down into the birth canal.
 - Oxytocin should only be used when the benefits of delivery outweigh the risks of continuing the pregnancy.
 - Benefits may include being able to have a vaginal birth and not requiring a Caesarean delivery (C-section).
 - In Canada, 8 out of 10 patients who received oxytocin to start or advance labour gave birth vaginally.
- 3. Proper Use: How is it given?**
 - Oxytocin to start or advance labour is given intravenously using a pump to control the amount of medicine you receive.
 - The medicine will start at a low dose and then will be increased gradually to get the right contraction pattern for you.
 - In some cases, if the contractions are affecting the baby's heart rate or if the contractions are too close together, your health care provider may reduce or stop the oxytocin.

Logos: IRMP, Health Canada, Canadian Council of Ministers of Health, CMIRPS, HIROC, and others.

w.securitepatients.ca



PATIENTS FOR PATIENTS POUR LA
PATIENT SAFETY SÉCURITÉ DES PATIENTS
CANADA DU CANADA

Thank you

Contact patients4safety@hec-esc.ca
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