

Medication Without Harm



WHO Global Patient Safety Challenge

Practical examples - Addressing medication safety in transitions of care at the organizational level

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Addressing Medication Safety in Transitions of Care at the Organizational Level

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Challenges to ensuring medication safety at the organizational level (LMIC)



Very little or no dialogue on medication safety



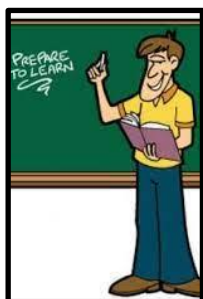
Role of clinical pharmacists restricted to dispensing in the pharmacy store



HCW are scared that if errors are reported it reflects poorly on them



Complacency (no one will ask, so why change?)



Not formally taught in courses



Mere lip service paid to good practices

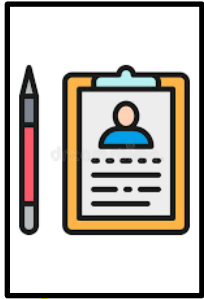
Challenges to patient safety during transitions of care at the organizational level (LMIC)



Short staffed; staff not trained adequately



Use of IT and IT tools are less



Best Possible Medication History mostly never taken



Medication reconciliation almost never happens

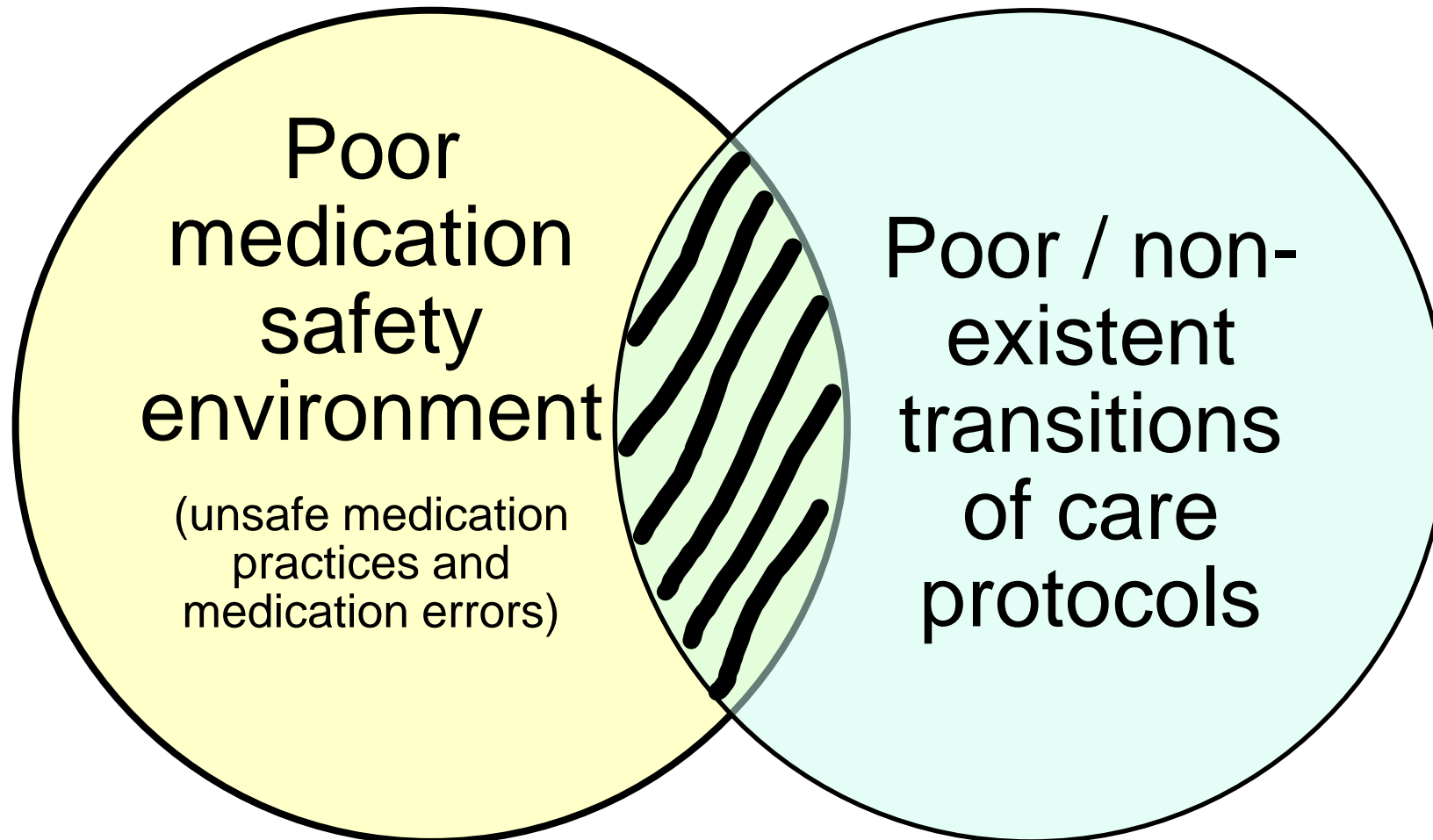


Language issues create confusion



Not recognized; not reported

When the two intersect the situation can be pretty bad



**What can be
done at an
organizational
level?**



Make medication safety visible – create awareness, form a group in the hospital



'Catch them young' – include the topic in all training courses for healthcare workers



Blame free reporting – focus is to learn from mistakes; no naming and shaming

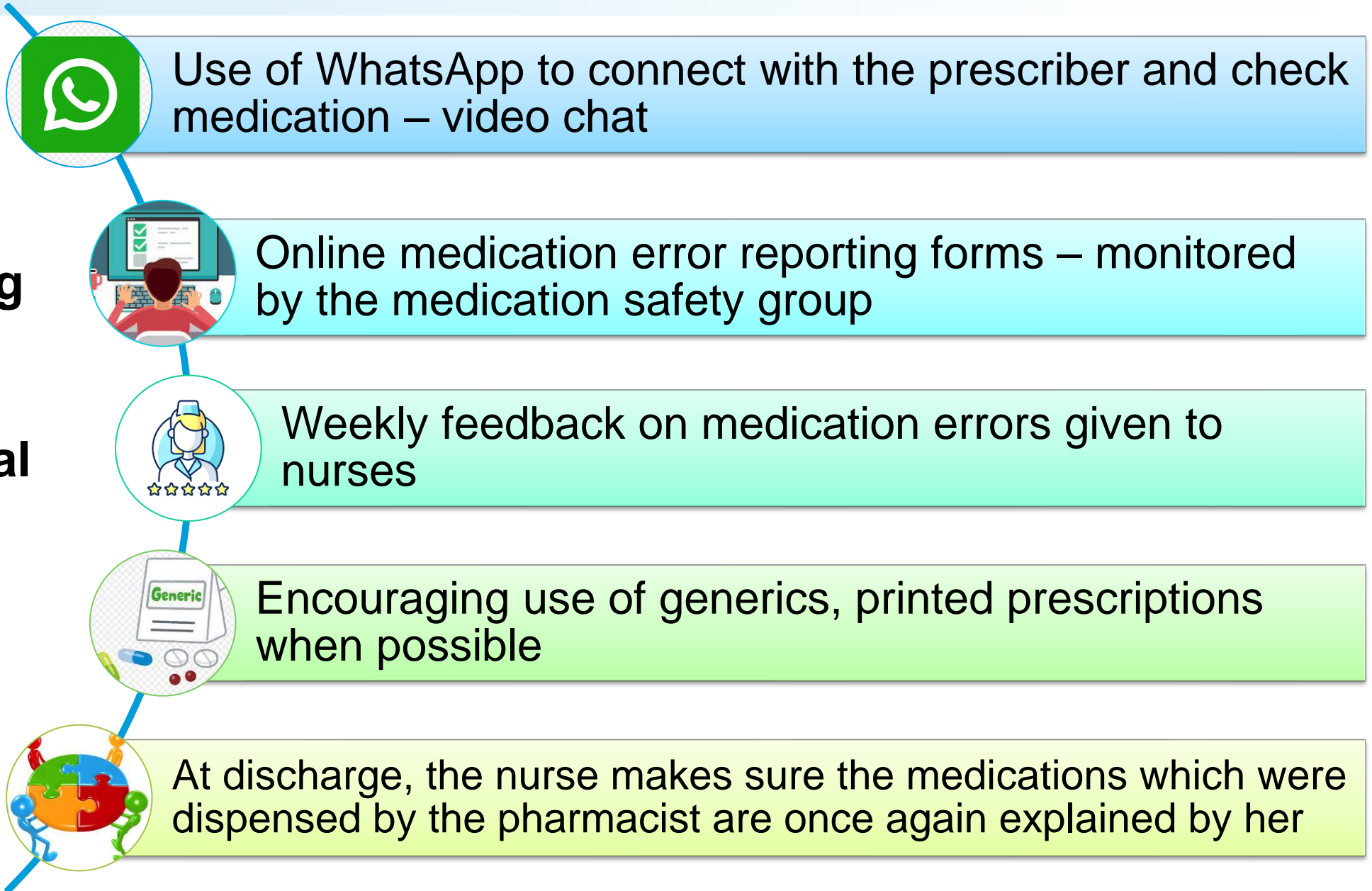


Include med safety issues as a part of the mortality & morbidity meetings



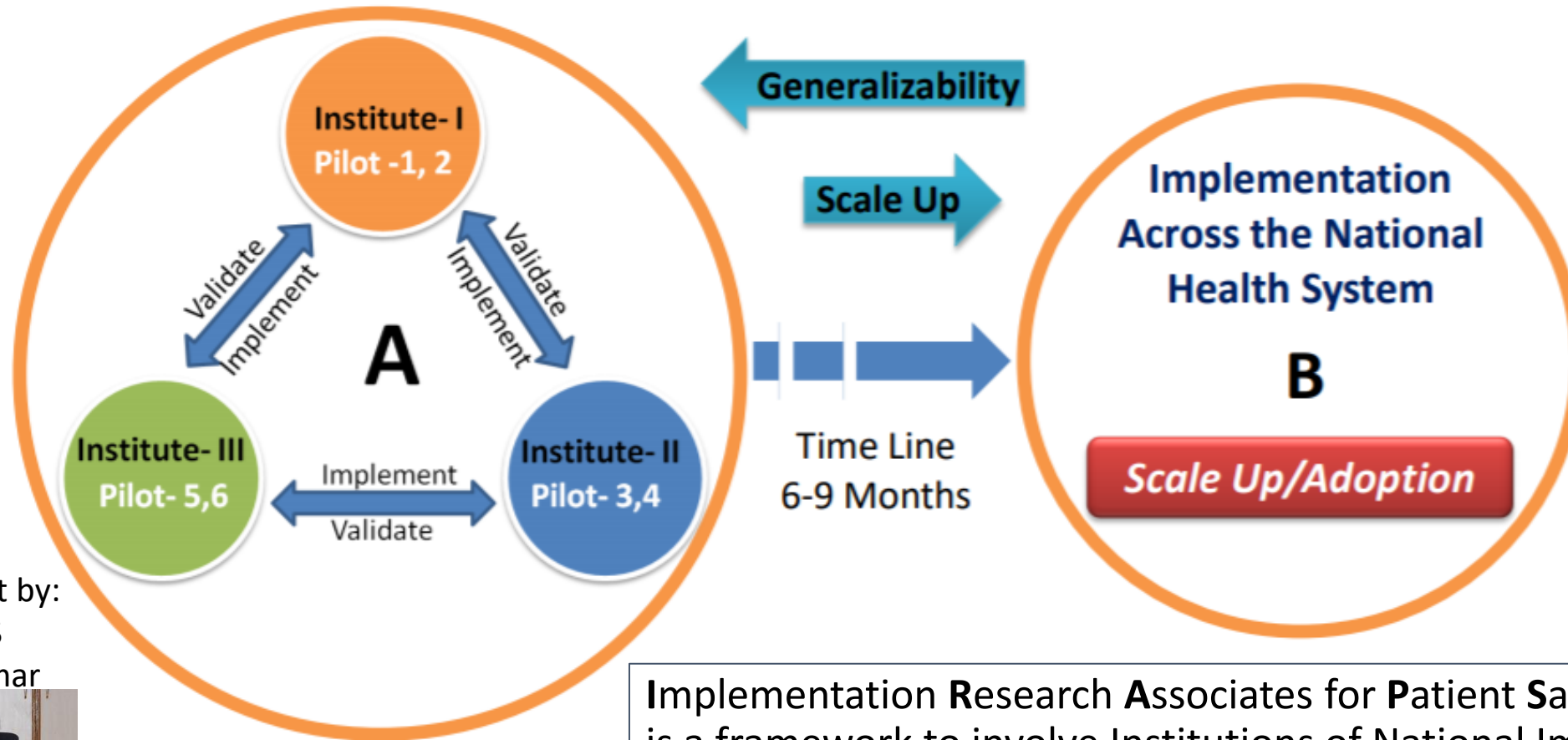
Document change; Encourage research at all levels

**What is being
done at an
organizational
level?**



I- RAPS Design

Implementation Research Associates for Patient Safety



Concept by:
Prof. T.S
Ravikumar



Implementation Research Associates for Patient Safety (i-RAPS) is a framework to involve Institutions of National Importance in India on collaborative, implementation research in patient safety in order to implement evidence based outcomes for betterment of public health delivery in India

Thank you

