

5. Global action on patient safety

Statement:

This MMI statement is supported by PHM. We believe that quality of care and patient safety are interlinked. And, to achieve it, public health systems need to be strengthened, adequately financed by public resources, and provide decent working conditions to its workforce. The private health sector has to be adequately regulated and controlled.

However, the global patient safety action plan 2021–2030 misses out these important aspects and separates patient safety from wider issues of quality, resource allocation, regulation and decent work. The draft action plan also remains silent on some issues that threaten the quality of care such as:

- Overuse and inappropriate use of medication, including overuse driven by rampant unregulated marketing.
- Lack of access to medicines and vaccines because of high prices or failure to invest in research.
- Unregulated and unaccountable private medical practice including private primary care and private hospitals, including procedural over-servicing as well as under-servicing.
- Distributional inefficiencies such as clustering of private providers in wealthy or urban areas.
- Lack of system wide coordination of facilities and resources resulting in chaotic and fragmented care journeys for patients.
- Inadequate working conditions, including lack of regulation of staff workload. Binding nurse-to-patient ratios have shown to improve health outcomes and save lives. Adequate, binding standards are required across the health workforce.

We urge WHO to develop a comprehensive document and consider the intersection of patient safety and quality of care before adopting the global patient safety action plan.

We are concerned about the risk for conflicts of interest resulting from funding to this plan from private actors or private sector fronts, and we hope these risks will be assessed and addressed.