



Report

Inaugural meeting for Patient's for patient safety network (PFPSN) -India 16 February/11:00 am to 12:45pm IST

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1: PFPSN-India

The Patient's for Patient Safety Network India, a project led by DakshamA Health, is in harmony with WHO's flagship Patient for Patient Safety initiative. It involves a broad spectrum of stakeholders, ranging from patients and caregivers to patient advocates, civil society organizations, and NGOs. PFPSN India endeavours to empower and educate patients and families toward a healthcare system that prioritizes patient-centeredness and safety.

The importance of patient safety has garnered worldwide acknowledgment, exemplified by the adoption of resolution WHA 72.6 'Global action on patient safety' during the 72nd World Health Assembly (WHA) on May 25, 2019. This resolution recognized patient safety as a primary global health concern and urged collaborative efforts among nations and international partners.

1.1: Introduction

Dr. Ratna Devi from Dakshayani and Amaravati Health Education welcomed everyone to the inaugural meeting of the Patient's for Patient Safety Network India (PFPSN-India). She highlighted key points from the National Patient Day summit in December, where strategies to improve patient safety in India were discussed. Dr. Ratna devi also outlined the agenda for the meeting and sought consensus on it. Additionally, she sought permission to chair this meeting, and informed that the advisory board could decide the future formats for the meeting. Upon receiving permission she initiated the proceedings with an introduction of the members present for the meeting. She formally welcomed WHO India team leader Dr. Hilde de greave and Dr Parminder Singh.

The vision of PFPSN-India is to ensure healthcare is safe and of the highest quality for everyone, with the mission to be the patient-led advocacy network contributing to patient safety initiatives in India. Furthermore, It also aligns with the objectives of the WHO's Global Patient Safety Action Plan (GPSAP) 2021–30, particularly Strategic Objective 4, which emphasizes patient and family engagement. The GPSAP outlines a framework for action through seven strategic objectives, further elaborated by 35 strategies, with five under each strategic objective, creating a seven-by-five matrix. This framework serves as a guiding structure to address and enhance patient safety on a global scale.

1.2: Strategies for Patient's for patient safety network India (PFPSN-India)

- > Formation of the founding members network for PFPSN India
- > Capacity Building of Patient safety advocates and champions
- Strengthen awareness on WHO Global patient safety action plan 2021-2030 (GPSAP)
- Raise awareness on patient safety amongst stakeholders.

1.3: Methodology

The inaugural meeting of the Patient Safety Network India was held via Zoom at the DakshamA health board room, bringing together six founding members with diverse healthcare backgrounds (Annex 1 names and designation below). This meeting focused mainly on introducing ideas and brainstorming. It was anticipated that consensus could be reached in the next meeting on how to move forward. A need was identified for better geographical representation, particularly from the northeast and





eastern regions, to ensure a variety of perspectives. Additionally, the importance of including vulnerable populations, such as transgender individuals, to provide unique insights was recognized. Potential partnerships with entities such as NAT Health, hospital associations, nursing home federations, and pharmaceutical manufacturers were identified. Fig 1: Depicts the governance structure of PFPSN-India.

Founding members for PFPSN-India

- Ravdeep Singh Anand (Founder President Dystrophy Annihilation Research Trust) [DART]
- Manoj kumar Pardeshi (Founding member of the National Coalition of PLHIV in India and the Network of Maharashtra by PLHIV/AIDS)
- > Dr. Divya Rani singh (Manager Monitoring, Evaluation and Reporting Yuvraj Singh Foundation)
- Smriti Rana (Head Strategic Programs and Partnerships Pallium India).
- Chandra Rekha Gulabani (Director Resource, Jagriti Indian cancer society and breast cancer survivor, Secretary & Vice President Cancer Sahyog).
- Sairekha Suresh (living with type 1 diabetes since 1996)

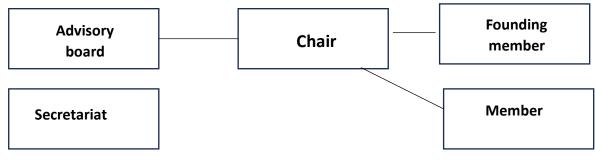


Fig1: Governance Structure for PFPSN-India

1.4: Proposed yearly plan for strategic objectives

Objective – 1	Yr 1	Yr 2	Yr 3
Formation of the network for PFPSN India			
Advisory board	×		
State level representatives		×	×
National network of member organisations	×	×	×
Website and platform development for Network	×		
Social media assets for network	×		
Pledge on Patient safety and Call to Action	×	×	×





Objective – 2	Yr 1	Yr 2	Yr 3
Capacity Building of Patient Safety advocates and champions			
Patient stories in audio and video format	×	×	×
	×		
Virtual training for patient safety champions in Patient groups	×	×	×
Physical workshops in regions	×	×	×

Objective – 3	Yr 1	Yr 2	Yr 3
Strengthen awareness on WHO GPSAP			
Commemorate World Patient safety day on thematic areas	×	×	×
Patient Safety Course	×	×	×
Partnership with MOH and WHO and other likeminded institutions	×	×	×
Contribute to technical briefings, advisory groups and policy forums representing the patient voice	×	×	×

Raise awareness on Patient safety amongst stakeholders	Yr 1	Yr 2	Yr 3
Webinars on thematic areas	×	×	×
Educational materials on Patient Safety	×	×	×
Baseline survey on KAP on Patient safety	×		r
Paper presentation and publications on patient safety		×	×
Integration into MOH initiatives on patient safety	×	×	×





2.1 Discussion on the agenda

Discussion from the meeting				
Agenda	Comment	Response	Participants	
Strategic Vision and Mission (Discussion)	"Advocacy as a broader framework, it may differ or same for both public and private sector?" "Does insurance fall under safety?"	Advocacy strategies will differ for the private and public sectors. Indirectly, insurance can be a part, especially in terms of covering costs related to procedures that may cause harm	Members Manoj kumar Pardeshi ChandraRekha Gulabani Ravdeep Singh Anand Smriti rana	
	"Are patients adequately informed about their rights, and are these rights consistently upheld in healthcare settings, aligning with the principles of patient safety?" "Does the entitlement of patients waiting over 6 months in government hospitals to free treatment in private hospitals, despite doctors'	Both yes and no. There are patient charters in existence which uphold most of the rights, however patients and families are ignorant of their rights and often do not invoke them when there is harm Patient safety isn't solely about rights; it involves issues like incorrect medication or patients facing harm due to delayed treatment.	Sai Rekha Suresh Dr. Divya Rani Invited guests. Dr Hilde de Greave Dr. Parminder Gautam Secretariat	
	reluctance to refer them, relate to patient safety?"		Dr. Ratna Devi Dr. Riya Agrawal Keshav Singh	
envision with people h verses professional orga "Do we need any for	"What is ratio of advisory board do you envision with people having lived experience verses professional organization?"	At present the Advisory committee comprises entirely of individuals with extensive lived experience. In future the board can decide the size and scope for inclusion of professionals etc	Mugdha Barik	
		Members need to sign a declaration of interest detailing any conflicts before they can join the group or be invited to contribute.		
Discussion on Draft patient	"Given significant regulatory gaps and low standards in drug and medical device	Medication safety, drug safety, and device safety are daily challenges patients encounter.		





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safety consensus document	manufacturing, do you see potential for improving patient safety in this realm?"	The board and group need to deliberate on what is achievable and doable and prioritise issues for address. To determine our course of action to address these issues we will have to understand our own capacity and ability to handle the wider scope of regulation. Where appropriate we could consider on a need basis consultants or experts to guide us.	
Discussion on World Patient Safety Day 2024- planning	"Should our focus for healthcare outreach prioritize remote areas or limit efforts to tier 1 and tier 2 cities, considering many individuals in these regions are unaware of health issues and safety concerns?"	Our aim to establish representatives in each state to advocate for these rights.	
	"There are specific indicators and quality officers in various states. How can we collaborate with them effectively?"	Emphasized the importance of patient engagement in healthcare to prioritize patient concerns. Recommended for advocating the advisory board to influence policymakers and decision- makers.	
		Suggested leveraging existing structures like Village Health Nutrition Committees for patient engagement.	
		Highlighted the role of national and state-level committees in setting standards and monitoring grievance redressal.	
		Discussed the involvement of quality assurance units and patient safety secretariats in overseeing healthcare quality.	





Proposed engaging private hospitals through the National Health Authority and ensuring patient representation on their boards.	
Recommended influencing medical colleges through the National Medical Commission for capacity-building initiatives.	





2.2 Conclusion

- PFPSN-India is committed to fostering a comprehensive and inclusive network to advance patient safety through collaboration and the inclusion of vulnerable populations.
- The identified strategies target several aspects of patient safety, such as ensuring representation on private hospital boards, influencing medical colleges and hospitals, and raising awareness of end-of-life care guidelines.
- Engagement with various stakeholders, including healthcare professionals, legal experts, and community participation platforms, is a key aspect of PFPSN-India's approach.
- Collaboration with national and international organizations, governmental bodies, and patient advocacy groups further demonstrates PFPSN-India's dedication to leveraging resources for collective impact.
- Suggested dates for quarterly meetings

2.3 Way Forward

National Workshop on Patient Safety Network:

- Plan and organize a national workshop to establish a comprehensive and representative national network on patient safety.
- Invite representatives from each state to ensure diverse geographical representation and perspectives.

Strengthening Partnerships and Collaborations:

- Explore engagement with public and private hospitals through the National Health Authority (NHA) through existing platforms like the ABY and influence medical colleges and empanelled hospitals through the National Medical Commission (NMC).
- Explore collaboration opportunities with organizations like NAT Health, hospital associations, and pharmaceutical producer organizations to further patient safety initiatives.

Capacity Building and Advocacy:

- Expand online advocacy programs to engage individuals with lived experiences and foster collaboration with healthcare professionals, lawyers, and bankers dedicated to patient safety.
- Organize workshops and raise awareness with governmental bodies, such as the Ministry of Health, to address hospital-related issues and implement concrete actions for patient safety improvement.

Utilizing Expertise and Activism:

Utilize the expertise and advocacy efforts of individuals such as Dr. Santosh for TB and HIV patients to strengthen patient advocacy and bolster patient safety initiatives.

Focus on Aspirational Districts:

Direct attention towards aspirational districts and explore collaboration opportunities with NITI Aayog to address specific patient safety challenges in underserved regions.







