

## WHA78 Saudi Patient Safety Center Official Side Event

Titled: “From Plan to Impact: Accelerating the Global Patient Safety Action Plan in a Risk-Prone World

### Report



### Summary

The WHA78 official side event titled “From Plan to Impact: Accelerating the Global Patient Safety Action Plan in a Risk-Prone World” took place on 19 May 2025 at Palais des Nations, Geneva. Organized by the Saudi Patient Safety Center (SPSC), the session brought together ministers, global experts, and national representatives to highlight progress, challenges, and strategies in implementing the Global Patient Safety Action Plan (GPSAP) 2021–2030. The event served as a collaborative platform to share lessons, align actions, and reaffirm high-level commitment toward reducing avoidable harm in healthcare systems worldwide.

### Event Details

<b>Event Title</b>	From Plan to Impact: Accelerating the Global Patient Safety Action Plan in a Risk-Prone World
<b>Date</b>	19 May 2025
<b>Time</b>	19:30–20:50 CEST
<b>Location</b>	Room VII, 3rd Floor, Building A, Palais des Nations, Geneva
<b>Organized by</b>	Saudi Patient Safety Center (SPSC)
<b>Co-Sponsors</b>	<ul style="list-style-type: none"> <li>• Republic of Maldives – Ministry of Health</li> <li>• Republic of the Philippines – Department of Health</li> <li>• Sultanate of Oman – Ministry of Health</li> <li>• United Arab Emirates – Ministry of Health and Prevention</li> <li>• State of Qatar – Ministry of Public Health</li> <li>• International Society for Quality in Health Care (ISQua)</li> <li>• Organisation for Economic Co-operation and Development (OECD)</li> <li>• Global Patient Safety Leaders Group (GPSLG)</li> </ul>
<b>Format</b>	In-person side event during the 78th World Health Assembly (WHA78)

## Session Agenda

<b>Opening Remarks</b>	Dr. Abdulelah Alhawsawi, Senior Advisor, Saudi Patient Safety Center
<b>Ministerial Address – Maldives</b>	H.E. Mr. Abdulla Nazim Ibrahim, Minister of Health, Republic of Maldives
<b>Global GPSAP Progress Update</b>	Dr. Rudi Eggers, Director, Integrated Health Services, WHO HQ
<b>ISQua Presentation: Safe Care is the Right Care</b>	Dr. Anthony Staines & Dr. Christina Von-Plessen, ISQua
<b>The Economics of Patient Safety</b>	Dr. Kerri Elgar, OECD
<b>G20 Global Patient Safety Leaders Group Perspective</b>	Dr. Abdulelah Alhawsawi, Member, GPSLG
<b>Panel Discussion – Member States</b>	Oman, Saudi Arabia, UAE, Qatar
<b>Closing Summary and Reflections</b>	Dr. Abdulelah Alhawsawi

## Speaker-by-Speaker Highlights

### Dr. Abdulelah Alhawsawi – Opening

Dr. Alhawsawi emphasized the importance of moving from discussions to implementation. In his GPSLG remarks, he underscored patient safety as a global political priority and argued for embedding safety into health reforms and economic justifications. He also called for innovation, practical implementation tools, and stronger return-on-investment messaging to convince Ministries of Health and Finance alike.



## H.E. Mr. Abdulla Nazim Ibrahim – Minister of Health, Maldives

Minister Ibrahim announced the upcoming launch of a national patient safety reporting and learning system in Maldives. He described how the country is embedding GPSAP pillars into its health reforms despite its unique geographic and resource limitations. He emphasized the need for international collaboration and the inclusion of patient voices in system reforms, stressing that safety is a shared moral responsibility.



- **Geographic Context & Health Coverage**
  - The Maldives consists of 1,192 islands with a population of about 514,000 spreads across 187 inhabited islands.
  - Despite these logistical challenges, every island has a government health facility and universal access to care through the national health insurance system (Aasandha).
- **Alignment with GPSAP:** Maldives has aligned its national patient safety strategy with the Global Patient Safety Action Plan (GPSAP) and embedded its pillars into national health system reforms.
- **Three Foundational Areas of Work:** The country's patient safety strategy is anchored in:
  1. Infection prevention and control.
  2. Health workforce training and capacity-building.
  3. Promoting a culture of patient safety.
- **Governance Structure**
  - Oversight at the national level includes participation from the presidency, the Ministry of Finance, technical experts, and patient representatives.
  - Patient safety focal points have been appointed in every hospital to coordinate efforts.
- **Notable Milestones:** In 2024, Maldives launched a national complaints and concerns platform that allows patients to raise safety or quality concerns. It

- functions both as a redress mechanism and a way to understand systemic gaps.
- **Key Announcement:** The Minister announced the upcoming launch of a national patient safety reporting and learning system, emphasizing the importance of data-driven learning.
  - **Ongoing Challenges:** Major limitations include health workforce shortages and the lack of technical expertise in patient safety methodologies and improvement sciences.
  - **Progress Despite Constraints:** Maldives was selected as a demonstration country for the WHO's Joint Pathway on Patient Safety, a partnership aiming to address system-level safety gaps.
  - **Capacity Building & Education:** Developed national patient safety education standards and embedded patient safety into institutional curricula.
  - **Call for Support:** The Minister emphasized the need for international collaboration to build robust measurement systems, improve data analysis, and support human resource development in patient safety.
  - **Closing Sentiment:** Reinforced the moral and national obligation to embed patient safety into healthcare as a fundamental principle, not an option.

#### Dr. Rudi Eggers – WHO

Dr. Eggers from WHO highlighted the global burden of unsafe care, estimating over 3 million deaths and more than \$1 trillion in annual economic costs. He warned that only 29% of countries currently have national patient safety action plans. His remarks focused on the need for political will, real-time measurement, stronger national strategies, and the importance of co-producing safety policies with patients.



Presentation: Global Patient Safety Action Plan – Progress & Priorities

- Dr. Eggers emphasized the urgency of advancing the GPSAP implementation in light of new global risks and systemic vulnerabilities.
- He presented alarming statistics: over 3 million deaths annually due to unsafe care, with economic losses exceeding \$1 trillion globally.
- Notably, only 29% of countries have developed national patient safety action plans.

- Key obstacles included lack of real-time safety data, limited integration of safety into health education, and low reporting coverage (only 31% of countries have incident reporting in more than 60% of their health facilities).
- He highlighted the need for:
  - Political leadership and sustainable financing for patient safety.
  - Integration of patient safety into broader health system reforms (including UHC and emergency preparedness).
  - Real-time measurement and transparency through digital tools.
  - Patient and family engagement, co-producing safety strategies.
  - Emphasizing safety as a cost-effective, measurable investment.

### Dr. Anthony Staines & Dr. Christina Von-Plessen – ISQua

The ISQua team introduced their White Paper: 'Safe Care is the Right Care.' They emphasized implementation challenges and proposed four foundational pillars: governance, workforce safety, patient partnership, and evidence-based improvement processes. They advocated for a system-wide transformation grounded in culture, behavior change, and strategic alignment from policy to practice.



Presentation: "Safe Care is the Right Care" – ISQua's White Paper on the GPSAP

- ISQua introduced their White Paper aimed at bridging global policy and facility-level practice.
- The White Paper's framework is based on four foundational pillars:
  1. Leadership and Governance: Embedding safety into organizational culture and accountability mechanisms.
  2. Workforce Safety & Training: Investing in continuous education and staff well-being to promote safe care delivery.
  3. Patient and Family Engagement: Promoting transparency, trust, and co-design of care models.
  4. Improvement Science: Encouraging standardization where needed, using human factors engineering, and adopting implementation science principles.

- They emphasized the importance of shifting from strategic aspiration to operational reality, using practical tools and engaging with health professionals directly.
- Their call to action included:
  1. Aligning institutional leadership with GPSAP goals.
  2. Measuring progress via shared indicators.
  3. Encouraging local innovation to meet global standards.

### Dr. Kerri Elgar – OECD

Dr. Elgar focused on the economics of patient safety, revealing that diagnostic errors alone may cost 5–7% of total health spending in OECD countries. She highlighted the economic rationale for investment, noting that preventing harm saves costs, improves outcomes, and enhances efficiency. She called for multi-stakeholder collaboration to reduce diagnostic error and expand learning systems.



#### Presentation: The Economics of Patient Safety – Why Investment Matters

- Dr. Elgar presented compelling evidence on the financial burden of unsafe care, especially diagnostic errors, which alone account for 5–7% of total health expenditure in OECD countries.
- She advocated for embedding patient safety into national economic and budgetary planning as a cost-saving strategy.
- Key points included:
  - Diagnostic errors are the most expensive type of safety issue, especially in primary care.
  - Reducing diagnostic errors by just 50% could save hundreds of millions annually.
  - Investing in diagnostic workforce skills, AI-based tools, and national monitoring systems are proven interventions.
  - Patient harm leads to not only direct costs but also broader social costs, including loss of trust in the system.
- She urged stakeholders to use health economic data to advocate for increased funding, better regulations, and strategic alignment of safety with efficiency and quality agendas.

## Member States Panel

The panel featured representatives from Oman, Saudi Arabia, UAE, and Qatar. Oman highlighted its governance reforms and capacity building. Saudi Arabia described nationwide integration of patient safety education, reporting systems, and national campaigns. UAE showcased its digital infrastructure for real-time monitoring and its national strategy for safety. Qatar discussed challenges related to fragmentation and called for strengthening coordination, regulation, and leadership across all levels.

### Sultanate of Oman – H.E. Dr. Ahmed bin Salim Al-Mandhari



- Reflected on Oman's long-standing engagement with patient safety, beginning with early workshops and national programs in 2005 and beyond.
- Highlighted achievements like the national safety framework, strategic roadmaps, and increased hospital participation in quality improvement.
- Acknowledged implementation challenges such as financing, human resources, and harmonizing fragmented safety efforts.
- Called for regional collaboration and sustainable investment in patient safety infrastructure and systems.

### Saudi Arabia – Ms. Alia Albaharnah



- Saudi Arabia Launched the Saudi Patient Safety Center and National Strategy aligned with GPSAP.

- Created a National Safety Assembly and a Reporting & Learning System.
- Integrated safety into health professional education and introduced public awareness programs like Salama Friends.
- Strengthened international collaboration, serving as G20 Secretariat for Patient Safety.
- Faced overlapping roles among regulators and unclear ownership.
- Encountered data fragmentation and uneven implementation across regions.
- Plans to mandate safety standards nationwide.
- Aims to secure funding, enhance digital integration, and enforce mandatory training.
- Will launch national KPIs and promote a just culture to support open reporting.
- Closing message: "Safety is not optional—it's a shared responsibility."

#### United Arab Emirates – Ms. Moza Obaid AlKetbi



- Shared that UAE's strategy aligns with GPSAP objectives, integrating safety policies across public and private sectors.
- Emphasized advancements in incident reporting, use of AI for real-time data, and building a culture of transparency.
- Announced future plans to establish a National Center for Patient Safety Excellence.
- Called for international partnerships to reinforce emergency preparedness and workforce training.

### State of Qatar – Ms. Huda Amer A S Al-Khatheeri

- Highlighted the integration of patient safety in Qatar’s national health strategy 2024–2030.
- Shared successes such as a digital incident reporting platform, national safety taxonomy, and core safety committees.
- Emphasized strong collaboration with WHO and regional bodies.
- Identified gaps in workforce availability, culture change, and data-sharing, proposing expanded training, transparency policies, and leadership engagement as solutions.

### Summary by Dr. Abdulelah Alhawsawi

Dr. Alhawsawi closed the structured portion of the session with a thoughtful recap. He emphasized:

- Key themes such as culture, leadership, political will, and financing emerging from the speakers.
- The need to elevate patient safety on the same global scale as climate change.
- Recognition of patient harm as a cross-cutting issue that requires universal solidarity and collective action.

### Other Interventions

Dr. Neelam from JCI, Vice President and Chief Patient Safety Officer for Joint Commission International (JCI), reiterated the need to embed safety into broader health architecture, aligning it with digital health, emergency response, and health security strategies.

## Thematic Summary

### Political Commitment

High-level representation and ministerial engagement affirmed that patient safety must remain a political priority globally and nationally.

### System-Wide Implementation

Speakers stressed the importance of translating plans into measurable actions through national strategies, legislation, and reporting infrastructure.

### Economic Justification

Investing in safety is cost-effective. OECD presented data supporting the return on investment for safety interventions.

### Patient & Family Engagement

Multiple speakers reinforced the principle that safety must be co-produced with patients and families to drive cultural change.

### Equity and Adaptability

Tailoring GPSAP implementation to the context of small states, fragile systems, and resource-limited settings was emphasized.

### Global Cooperation

The session called for cross-border learning, multi-stakeholder partnerships, and stronger regional safety networks.

## Recommendations

- Governments should prioritize developing and funding national patient safety action plans aligned with the GPSAP.
- Establish robust adverse event reporting and learning systems to inform policy and practice.
- Invest in healthcare workforce training on patient safety, particularly in diagnostics and human factors.
- Promote patient and family engagement at all levels of system design and evaluation.
- Use economic data to advocate for safety investment in national budget processes.
- Foster regional and global collaboration to share best practices and innovation in safety implementation.
- Measure and report progress transparently, using real-time tools and indicators.
- Ensure patient safety is embedded in digital health strategies and emergency preparedness frameworks.

## Conclusion

This official WHA78 side event demonstrated the growing global recognition that patient safety is not only a health priority, but a moral and economic imperative. Across regions, stakeholders affirmed their commitment to moving from vision to action through national strategies, better governance, smarter investments, and stronger partnerships. From island states like the Maldives to regional influencers like the GCC countries, the message was clear: collaboration, co-production with patients, and system-wide learning are essential to achieving the goal of zero avoidable harm. The Saudi Patient Safety Center is proud to have facilitated this dialogue and remains committed to advancing the Global Patient Safety Action Plan through leadership, innovation, and shared action.

Co-Sponsors



Event photos:



