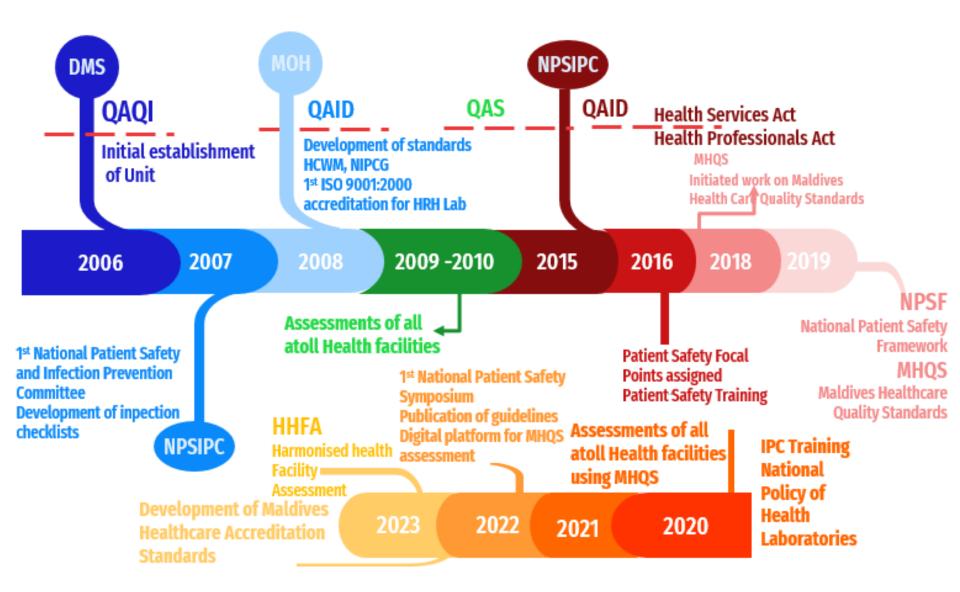
# MALDIVES PATIENT SAFETY JOURNEY

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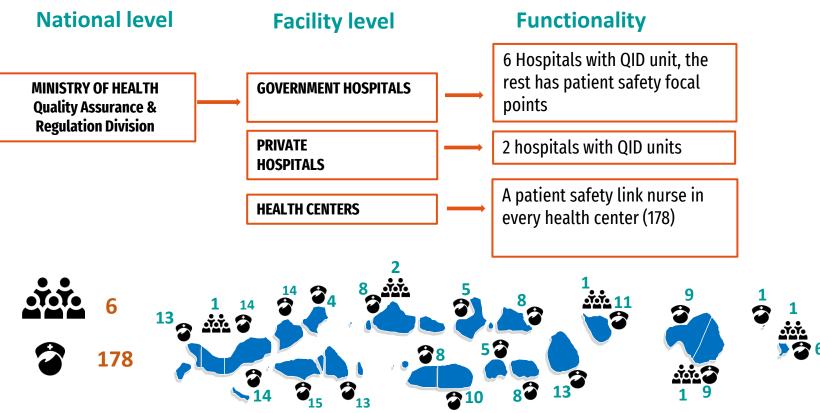
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#### **The Patient Safety Journey**



## NATIONAL PATIENT SAFETY PROGRAM



#### LEGISLATIONS

- Health Services Act, 2015
- Health Services Act (29/2015)
- Health Professional Act
- Public Health Act
- Regulations of drug
- Maldives Health Master plan

#### **REGULATORY SYSTEM**

- Standards: Maldives Healthcare Quality Standards
- National patient safety strategic framework
- Case reviews
- Complain management
- Enforcement: Inspection of health facilities
- Licensing:
- All health facilities are provided an operating license & Registration
- Regulatory boards and Councils

Establish institutional arrangements and strengthen clinical governance to place patient safety at core of national , subnational and facility priorities

### **National Patient Safety Strategic Framework**

Developed in 2019, in collaboration with WHO.





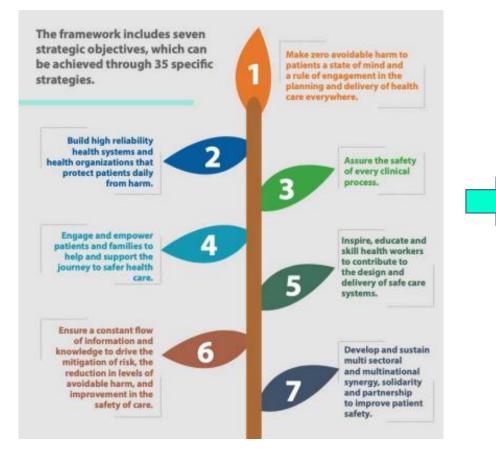
### AIM

• The aim of National Patient Safety framework is to create an institutional framework for delivery of health care which is safe and responsive

### **GUIDING PRINCIPLES**

- Focus on system approach
- Monitoring reporting and learning
- Ensuring sustainability
- Prompting Collaborations
- Instigating patient centered approach
- Engaging of all level of healthcare
- Using evidence-based intervention

#### **WHO FRAMEWORK**



#### NATIONAL

To establish the institutional arrangements and strengthen the clinical governance to place patient safety at core of national, subnational and facility priorities	01	
To ensure competent and capable work force sensitive to patient safety needs	02	<u>\</u> -
To implement patient safety in its all modalities that		
is prevention, diagnosis, treatment and follows up across all levels of care and programs.	03	
To reduce patient harm generated by unsafe	04	
medication practices and errors	04	
To engage the patient and patient groups to improve patient safety and quality	05	
improve patient survey and quanty		
To establish Patient safety event reporting system and promote patient safety research	06	

## Health workers Education, Skills and Safety

### 2011, 2013, 2016, 2019

Sensitization program for patient safety focal points

#### 2021

Point of care Quality Improvement training Maldives Health Care Quality Standard Assessor training

#### 2022

Training on patient safety incident reporting and learning system POCQI Training









## 1<sup>st</sup> National Patient Safety Symposium - 23rd to 27th October 2022







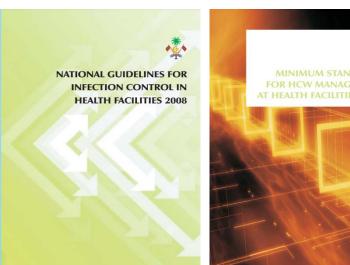


- Point of care quality improvement
- Orientation to Patient safety framework and implementation plan
- patient safety incident reporting and learning system
- Training on Infection
   Prevention and Control
   Manual





Implement patient safety in its all modalities that is prevention, diagnosis, treatment and follow up across all levels of care and programs





Needle prick / sharp injuries can lead to serious or fatal infections. Healthcare workers who use or may be exposed to needles are at increased risk of needle prick injury. All workers who are at risk should take steps to protect themselves from this significant health hazard.

Sharps injuries are primarily associated with occupational transmission of hepatitis B virus (HBV), hepatitis C virus (HCV), and human immi-transmission of multiple pathogens. nodeficiency virus (HIV). They have been associated in the

HBV vaccination is recommended for all health care workers (unless they are immune because of previous exposure). HBV prophylaxis had to be followed for any exposures to which vaccination is not given. However vaccines are not recommended where they are immune due to previous exposures. HBV vaccine has proved highly effective in preventing infection in workers exposed to HBV. However, no vaccine exists to prevent HCV or HIV infection

The aim of formulating a protocol for needle prick injury is in addition doing a surveillance reporting mechanism which will improve staff compliance in avoiding bare julquies leading to transmission of blood bone infections. Morever, it will also help heabtrone cognisation in addressing to occupation heabth safety of transmittable allerly and vaccineing staff in blood bone infections reducing the cost of

According to sources it has been estimated about half or more of sharps injuries go unreported. Most reported sharps injuries involve nursing staff, but laboratory staff, physicians, housekeepers, and other health care workers are also injured.

Aims

- The aim of formulating a protocol is:
- To develop surveillance reporting mechanism within healthcare institutions To prevent sharp injuries by ensuring staff compliance with sharp injury protocol
- Timely prophylaxis for exposure
- To address occupational health and safety in healthcare organization by vaccinating staff to blood borne pathogens, thereby, reducing the cost of delivery

Quality Assurance and Regulation Division, Ministry of Health

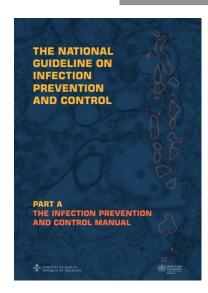




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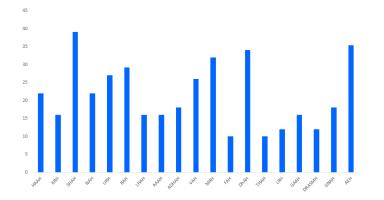


NATIONAL PATIENT QUALITY ASSURANCE AND REGULATION DIVISION, MINISTRY OF HEALTH IN COLLABORATION WITH WHO MALDIVES



## Monitoring and Evaluation MHQS

Mal	Maldives Healthcare Quality Standards						
Name of Facility	G	rade	Atoll				
	Quality Score card						
	The Quality Score						
Structure	Process		Outcome				
	Crite	eria Wise Score					
1.Infrastructre							
2. Human Resource		15. Diagnostic	Processes				
3.Equipment	_	16 D	11 III D.				
4. Drug and Communables		17. Continuity	of care				
5.Patient Safety		18. Governand	e				
6. Infection Control		19. Quality M	inagement				
7. Waste Management		20. Patient Rig	hts				
8. Records and Data Manag	ement	21. Support Se	rvices				
9. General Clinical Protoco	ls	22. Staff Com	oetence				
10. Specific Clinical Protoc	ols	23. Services R	ealization Clinical				
11. RMNCHA Protocols		24.Services Health and Au	Realization Public xillary				
12. Communicable Disease	Protocols	25. Outcome	ndicators				
13. Non-Communicable Protocol	Disease						



Quality Theme- Process				
Criteria 5	Patient Safety			
Standard 5.1	The Health facility ensures Physical Safety of the infrastructure			
Standard 5.2	The Health facility ensures Fire Safety measures being implemented			
Standard 5.3	Healthcare facility ensured safety Medications provided to the patients			
Standard 5.4	Healthcare facility has effective Security System implemented			
Standard 5.5	Health care facility ensures adequate measures to cope with manmade and natural disasters			

	Quality Theme- Process									
Criteria 5 Standard 5.1	Patient Safety The health facility ensures physical safety of the infrastructure									
a	Safety of electrical installations and equipment	OB/RR	Check if electrical installations are secured, and power audit of the facility has been done during last three years or as & when major electrical load has been added		HCG1 & above					
b	Safety features are provided in infrastructure	OB	Check the structural integrity of the infrastructure. There should be no major crack or fault in the infrastructure		HCG1 & above					
с	Infrastructure is safe for the patients	OB	Check if floors are non- slippery, tiles are anti- skid and railings have been provided on ramps		HCG1 & above					
d	Seismic safety	OB	Check if non-structural components such as cupboard, cabinets, X-ray machines, OT lights, etc. at the facility have been secured from seismic activity		HCG1 & above					
e	Safety of lifts	OB/RR	Check if annual inspection of lifts have been done and lifts are fitted with automatic evacuation devices		HG1 & above					

## Monitoring and Evaluation HHFA

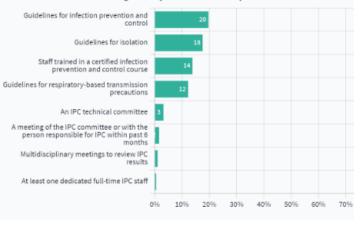
The Harmonized Health Facility Assessment (HHFA) is a comprehensive survey that assess; availability of health facility services and the capacities of facilities to provide services at required standards of quality.

Census of public facilities (188) Modules 1, 2 and 4 includes, Quality module excluded Baseline data collected for all government facilities

Haa Alif Atoll 655 Haa Dhaal Atoli 21% Shaviyani Asoll 14% Noonu Atoli Rea Atoll 20% 17% Lhaviyani Atoli 25% Baa Atoll 43% Kaafu Atoll 22% Male Alif Uthuru Buri 60% 35% Alif Dhekunu Buri 26% Vaavu Atol) 3,256 Faafu Atoll 20% Meernu Atoll 14% Dhaal Atol 33% Thas Atoll 43% Learnu Atoli 34% 100% Gaaf Alif Atoll 80% 17% Gaaf Dhaal Atol 60% 31% 40% 20%6 Gnaviyani Atoli 0% 56% Seenu Atoli. 17%

Standard precautions for infection prevention: Mean proportion of all items at facilities

#### Management systems for infection prevention and control

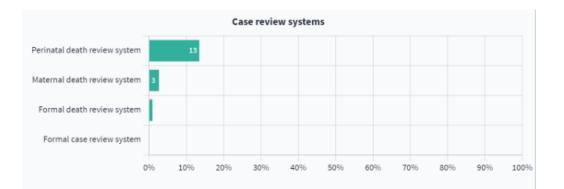


## A routine quality assurance process for any service area

Any quality improvement process with documented actions based on QA/QI findings or a valid description of the improvement A quality assurance committee that met in the past 3 months Dedicated budget line for quality improvement activities Documentation showing that quality assurance information was reviewed System for eliciting and reviewing client opinion on facility services 0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

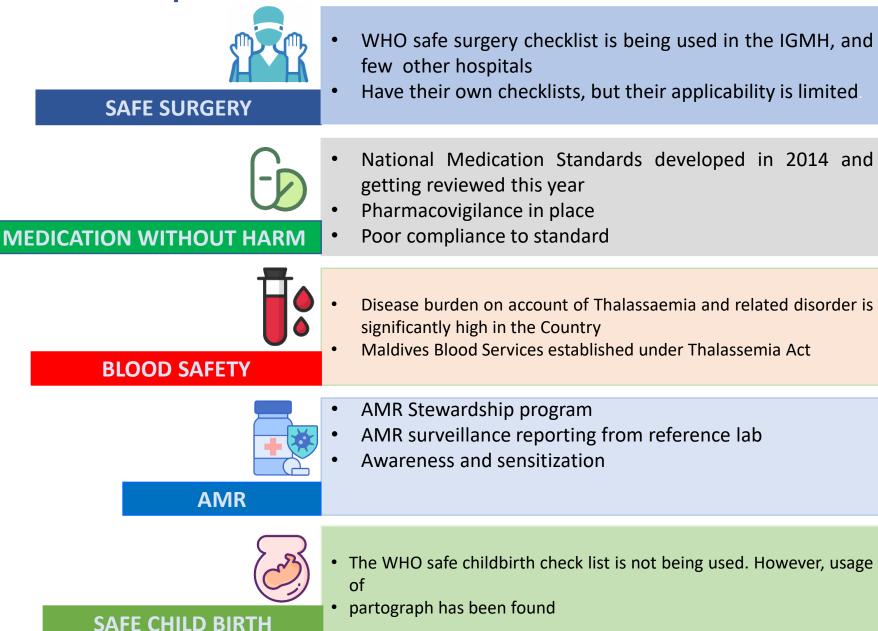
#### External assessment against standards







### Safe clinical processes



#### WORLD PATIENT SAFETY DAY CELEBRATIONS











# **THANK YOU**