| Name of the product o | Title: Tools & Resources Mapped to <u>Strat</u><br>File Name: GKPSLINKA03-20232406 | egic Objective 3 of the WHO Global P  | atient Safety Action Plan  | 2021-2030           |  |  |   |                 |                    |
|--|--|---|--|---------------------|--|--|---|-----------------|--------------------|
| Mathematical   Math   | 3. Safety of Clinical Processes  | Name  | Link   | Type of resource    | Source   | Description  | Language  | Cost            | Interlinking areas |
| Mathematical   Math   | 3.1 Safety of risk-grone clinical procedures                                       | The Joint Commission Guide to Risk Assessment   | https://store.ipintcommissionintee   | Book                | The Joint Commission   | This book includes a list of all Joint Commission standards across all health care settings that specifically require a risk assessment—and<br>then goes on to explain and demonstrate how to comply with those risk assessment requirements. The book offers sample risk  | English   | 139-299 dollars |                    |
| Part   |  |   |  |                     |  | State of the Control  |   |                 |                    |
| Selection of the select | 3.1 Safety of risk-prone clinical procedures                                       | Understanding and managing clinical risk  | https://cdn.who.int/media/docs/d   | Curriculum Module   | WHO  | Topic 6 of the WHO patient safety curriculum about understanding and managing clinical risk  | English   | Free            |                    |
| Part   | 3.1 Fefere of sist access district according                                       |   | https://www.e.ith.per.uk/program   | alesmine            | - leavester for benefitierers and Mark   | The safety standards provide a requirements framework that supports a systematic approach to CRM during the development and use of   | Parallel I  |                 |                    |
| Methodologone of the control of the  | a. Lamely or macy come constant production   | pogania   |  |                     | The state of the s |  | Ligan   | 7166            | 2.2                |
| Part   | 3.1 Safety of risk-prone clinical procedures                                       |   | https://www.hse.gov.uk/healthset   | Guidance            | Health and Safety Executive  | Guidance for care settings about risk assessments. Discusses how to make sensible risk assessments decisions and provides examples of case studies.  | English   | Free            |                    |
| Part   | 3.1 Safety of risk-prone clinical procedures                                       | Assessment and prevention of falls in older people  | https://www.nice.org.uk/guidance   | Guidance            | NICE   | NVCE guidance for Assessment and prevention of fails in older people   | English   | Free            |                    |
| Part   | 3.1 Safety of risk-prone clinical procedures                                       | Conducting a Proactive Risk Assessment  | https://www.jcrinc.com/-/media/c   | Guidance            | The Joint Commission   | The Joint Commission provides strategies and resources for conducting a proactive risk assessment  | English   | Free            |                    |
| Part   |  |   |  |                     |  | The goal of this Challenge is to improve the safety of surgical care around the world by defining a core set of safety standards that can be   |   |                 |                    |
| Procession of the control of                        | 3.1 Safety of risk-prone clinical procedures                                       | Safe Surgery Saves Lives: Second Global Patient<br>Safety Challenge   | https://eggs.who.int/iris/billstread   | Guidance            | WHO  |  | English   | Free            |                    |
| Manufacture      | 1.1 Safety of risk-prone clinical procedures                                       | WHO safe childbirth checklist implementation<br>guide: improving the quality of facility-based<br>delivery for mothers and newborns | https://apps.who.int/iris/handle/  | Guidance            | WHO  |  | English, Arabic, Chinese,<br>Portuguese                             | Free            |                    |
| Note the second  | 3.1 Safety of risk-prone clinical procedures                                       | Integrating stakeholder and community engagement in quality of care initiatives for maternal, newborn and child health              | https://www.who.int/publications   | Guidance            | WHO  | integrating stakeholder and community empagement in quality of one instatives for maternal, newborn and child health was developed to<br>packe policy makers and programme implementation on how stakeholder and community engagement can be incorporated into quality<br>improvement instatives for naternal, readous and odds health, superchally proteides particular against servicing concrete steps and<br>actions on low quality improvement stems at national, distinct and facility level, can ensure calaborative engagement with relevant<br>databolishers and communities durings in all quality improvement insplanmentation.   | English   | Free            | 7.1                |
| Part   | 1.1 Safety of risk-grone clinical procedures                                       | Radiotherapy Risk Profile   | https://cdn.who.int/media/docs/c   | Manual              | WHO  |  | English   | Free            |                    |
| Series of the se | 3.1 Safety of risk-prone clinical procedures                                       | WHO labour care guide: user's manual  | httas://www.wha.ini/publications   | Manual              | WHO  | The WHIO Libour Care Guide is a tool that aims to support good-quality, evidence-based, respectful care during labour and childbirth, irrespective of the setting or level of health care. This manual has been developed to help stilled health personnel to successfully use the   | English   | Free            |                    |
| Part   | 3.1 Safety of risk-prone clinical procedures                                       | human resource strategies to improve newborn<br>care in health facilities in low- and middle-income<br>countries                    | https://www.who.int/gublications   | Manual              | WHO  | To provide a framework and strategies for countries to transform their policies on human resources for health (MBN) and provide their health workers with the knowledge and technical and behavioural skills necessary for high-quality care by 2030, to ensure that all newborns survive and thirty.  | English   | Free            |                    |
| Search Control of Search Contr | 3.1 Safety of risk-prone clinical procedures                                       | Implementation Manual Surgical Safety Checklist   | https://agos.who.int/sis/hitstress   | Manual              | WHO  | The ultimate gal of the WHO Surgical Seley Chedisht — and of this manual — is to help ensure that teams consistently follow a few cotical safety steps and thereby minimizes the most common and avoidable risks endangering the laws and well-being of surgical patients. This manual procedes suggestions for implementing the Obedista, understanding that different practice settings will adapt it to their own circumstances.  | Arabic, Danish, Chinese,<br>English, French, Spanish                | Free            |                    |
| September 1982 programment of the control of the co | 1.1 Safety of risk-prone clinical procedures                                       | Clinical Risk Management  | https://www.bcpft.nhs.uk/docume  | Policy              | NHS  | This policy gives clinical stiff working with patiently/service users' clear guidance on conducting risk assessments and the formulation of risk<br>management plans. This policy provides guidance to clinical staff where there is a perceived or known risk. This includes the use of risk<br>assessment tools, processes and escalation used by practitionens that have been formally approved by the Treat as part of its governance<br>and risk management arrangements.   | English   | Free            |                    |
| Selection of the content of the cont | 3.1 Safety of risk-prone clinical procedures                                       | Clinical Risk Management Policy   | https://www.leicapart.nhs.uk/wo-   | Policy              | NHS (Careden and Islington)  | The purpose of this policy is to promote a thorough, consistent and high standard of practice with regards to dirstoil risk assessment and management. In essence, to ensure that directed risks are effectively managed so that service users, their family and caren, are safe when unique our services.   | English   | Free            |                    |
| Hander des anticological des a | 1.1 Safety of risk-prone clinical procedures                                       | Safer Patient Instative   | https://www.health.org.uk/sites/c  | Report              | The Health Foundation  | key lessons and further issues for exploration. The Safer Patients Initiative was a complex. Jarne-scale intervention and the first major  | English   | Free            | 11,14              |
| Herein des selection and the selection of the selection o | 3.1 Safety of risk-prone clinical procedures                                       | Risk Assessment   | https://www.nhaggc.scot/staff-rec  | Resource webpage    | NHS  | The NRS Greater Glasgow and Clyde provide risk assessment templates.   | English   | Free            |                    |
| Hander descention production of the control of the  | 3.1 Safety of risk-prone clinical procedures                                       | Patient safety Resources  | https://safety.coch.ac.uk/   | Resources           | Royal College of Paediatrics and<br>Child Health   | This report describes what the IKEPCH is doing for patieto safety nad links to their resources and projects.   | English   | Free            |                    |
| Series of the se | 3.1 Safety of risk-prone clinical procedures                                       |   | https://www.alz.ore/help-support   | Resources / Webpage |  |  | English   | Free            |                    |
| Segmentation of the segmen | 3.1 Safety of risk-prone clinical procedures                                       | Radiation Protection and Safety of Radiation<br>Sources: International Basic Safety Standards                                       | https://www-gub.laes.org/MTCD/   | Standards           |  |  | English   | Free            |                    |
| Series of the se | 3.1 Safety of risk-prone clinical procedures                                       | National Safety Standards for Invasive Procedures<br>(NatSSIPs)   | https://www.england.nhs.uk/patie   | Standards           | NHS  |  | English   | Free            |                    |
| Part      | 3.1 Safety of risk-prone clinical procedures                                       | Monitoring risk and improving system safety<br>(MoRISS) checklist   | https://learn.nes.nhs.scot/1033/p  | Tool                | NHS Education for Scotland   | The purpose of this checklis is to help ensure that tasks that are considered to be important from a safety paragecter are actually checked on a moutine basis and action in taken where needed to improve overall complance, it miss to combine some existing checking processes into a single checking system which is undertaken every four resofts to ensure that the necessary desires are completed on a temphy basis.   | English   | Free            | 1.5                |
| 1  | 3.1 Safety of risk-prone clinical procedures                                       | Risk assessment for Venous thromboembolism (Vte)  | https://www.nice.org.uk/guidance   | Tool                | NICE   | A risk assessment tool produced by NICE and approved by department of health   | English   | Free            |                    |
| Registration from the property of the property |  |   |  |                     |  |  |   |                 |                    |
| Marie of the present and parameters   Marie of the present of th   | 3.3 Safety of risk-grone clinical procedures                                       | WHO Surgical Safety Checklist   | https://www.who.int/tearm/integ  | Tool                | WHO  |  | French, Portuguese,<br>Russian, Spanish, Farsi,<br>German, Italian, | Free            |                    |
| Name of the property of the pr | 1.1 Safety of risk-prone clinical procedures                                       | WHO safe Childbirth Checklist   | http://apos.who.int/iris/bitstream   | Tool                | WHO  | The WHO Safe Childborth Checkist was designed as a tool to improve the quality of care provided to women giving birth. The Checkist is an organized flat of evidence based ensential birth practices, which targets the major causes of maternal deaths, intrapurture-related stillbirths and encental deaths that cour in health-ense facilities around the world. Each Checkist item is a critical action that, if missed, can lead to severe harm for the mother, the newborn, or both.   | English   | Free            |                    |
| Marie of the president of the presiden   | 3.1 Safety of risk-prone clinical procedures                                       | Medical Emergency Checklist   | https://cdn.who.int/media/docs/c   | Tool                | WHO  | WHO medical emergency checklist  | English   | Free            |                    |
| Marie  | 3.3 Fefere of sich seems distant assessment  | Fafate Nick Succession Tradition  | httms://www.ahrm.ams/nations.cof   | Toolkit             | Agency of Healthcare Research  |  | Feedorb   |                 |                    |
| Miles  | 3.1 Safety of risk-prone clinical procedures                                       | Safety Risk Assessment Toolkit  | https://www.anrq.gov/patiere-sar   | IOORIT              |  | Tookkit for facility designers. The goal of the toolkit, developed by the Center for Health Design External Link Disclaimer, is to assist in the design of a built environment that supports workflow, procedures, and capability while ensuring the safety of patients and staff.   | English   | Free            |                    |
| Section for the product of the control for the | 3.1 Safety of risk-prone clinical procedures                                       | Transforming Hospitals: Designing for Safety and  | https://www.ahro.gov/patient-saf   | Video / Report      | Agency of Health Researchcare  | A video from the Agency for Healthcare Research and Quality (AHRQ), reviews the case for evidence-based hospital design and how it   | English   | Free            |                    |
| Name of the Charge in Substant (Charge in Subs | 3.2 Global Dation? Safety Challenger Markration Without                            | Northern Ireland Medicines Onlinication Quality   |  |                     |  |  |   |                 |                    |
| The stands of th | Mann   | Framework   | https://www.health-ni.gov.uk/site  | Framework           | (reland)   | safe and optimum use of their medicines. It is split into five main sections.  | English   | Free            |                    |
| And the second s | 3.2 Global Patient Safety Challenge: Medication Without                            | Reporting medicine related incidents  | https://www.cqc.org.uk/guidance-   | Guidance            | Care Quality Commission  | Guidance on how to report medicine related incidents in England.   | English   | Free            |                    |
| And the second s |  |   |  |                     |  |  |   |                 |                    |
| And the second s | 3.2 Global Patient Safety Challenge: Medication Without<br>Harm                    | Good practice in prescribing and managing<br>medicines and devices  | https://www.emc-uk.org/ethical-e   | Guidance            | General Medical Council  | prescribing for yourself or those close to you. And goes through what you need to consider when repeat prescribing, prescribing defined drugs or share the responsibility of your patient with a colleague.  | English   | Free            |                    |
| Statistic Registrating Pathwales and Septiment | 3.2 Global Patient Safety Challenge: Medication Without<br>Hann                    | Medicines adherence: involving patients in<br>decisions about prescribed medicines and<br>supporting adherence                      | https://www.nice.org.uk/guidance   | Guidance            | NICE   | This guideline covers medicines adherence in people aged II and over. It recommends how to encourage adherence to medicines by supporting and involving people in decisions about their prescribed medicines. It aims to ensure that a person's decision to use a medicine is an informed chief.   | English   | Free            | 4.5                |
| 1.2 Golde Planes Marke Univerge Nazional Walland Collaboration in an artificial and international control of the Collaboration in a second collaboration in the Collaboration in  | 3.2 Global Patient Safety Challenge: Medication Without<br>Nam                     | Professional Guidance on the Administration of<br>Medicines in Healthcare Settings  | https://www.roharms.com/Portals  | Guidance            | Royal Pharmaceutical Society &<br>Royal College of Nursing   | provides principles-based guidance to ensure the safe administration of medicines by healthcare professionals. This guidance was<br>developed following an eight-week consultation as part of the project on the Safe and Secure Handling of Medicines and was overseen by a<br>multiducibilizer. Task and   | English   | Free            |                    |
| 1.2 Golde Planes Marke Univerge Nazional Walland Collaboration in an artificial and international control of the Collaboration in a second collaboration in the Collaboration in  | 1.2 Global Patient Safety Challenge: Medication Without<br>Name                    | WHO pharmacovigilance indicators: a practical<br>manual for the assessment of pharmacovigilance<br>systems                          | https://www.who.int/publications   | Manual              | WHO  | This mescul provides a practical method for determining the pharmacoviglance indices. It is designed to be simple and can be understood by any worker in pharmacoviglance without formal training in monitoring and evaluation. This should ensure its routine use in pharmacoviglance and both breasts.   | English, French, Spanish  | Free            |                    |
| Accordance below profession with the contract of contract below profession of the contract below profession of  | 1.2 Global Patient Safety Challenge: Medication Without<br>Mann                    | SPSP Medicines Collaborative  | https://ihub.scot/improvement-or   | Project webpage     | Health Improvement Scotland  |  | English   | Free            |                    |
| 2.5 Glade Flavors Lading Cultings Nationals without States and Sta | 3.2 Global Patient Safety Challenge: Medication Without<br>Marm                    |   | https://www.hosc.govt.nz/our-pro   | Projects webpage    | Health Quality & Safety<br>Commission New Zealand  | CANE.  | English   | Free            |                    |
| 13 Claim of Freeze Lidery Challenge Medication Williams 14 Charges Relations Williams 15 Charges Characteristics 15 Company Chara | 3.2 Global Patient Safety Challenge: Medication Without<br>Marm                    | Choosing Wisely: Ten Things Clinicians and Patients<br>Should Question  | https://www.choosingwisely.org/  | Recommendations     | American Geriatrics Society  |  | English   | Free            |                    |
| 13 Stakes Frame Marks (Maringe Markstans Willes) 15 Stakes Frame Marks (Maringe Markstans Willes) 15 Stakes Frame Maring Charlenge Markstans Willes) 15 Stakes Frame Maring Charlenge Markstans Willes 15 Stakes Frame Maring Charlenge Markstans Will | 1.2 Global Patient Safety Challenge: Medication Without<br>Harm                    | Good Pharmacovigilance Practices for the Americas,<br>2011  | https://www.paho.org/en/docum  | Recommendations     | WHO  |  | English   | Free            |                    |
| 12 Claimed Fallows Marking Challenger Medications Willham And Configuration Challenger | 3.2 Global Patient Safety Challenge: Medication Without<br>Matts                   | Polypharmacy Management by 2030: a patient<br>safety challenge  | https://www.ncbi.nlm.nih.gov/om  | Report              | European Commission  | This report calls for EU countries to work together in a focused way to manage and prevent inappropriate polypharmacy, and improve medicions adherence, through the use of a sharp management approach that is conditioned and collaboration in order to deliver better parties columns through the following is also incrementations. Adjust growth extra conditions will oblig properly control through the collaboration for the WHO global passet safety challenge to improve medication safety, of which polypharmacy is an example dement.   | English   | Free            | 7.4                |
| described in head or providing multiple medications when the transferred may be the appropriate or professional.  It is a providing multiple medications when the transferred may be the appropriate or professional.  It is a providing multiple medication when the transferred may be the appropriate application and provides the appropriate application and the appropriate application and the appropriate application and the application and the appropriate application and the applic | 1.2 Global Patient Safety Challenge: Medication Without<br>Marm                    | Medication without harm WHO Global Patient<br>Safety Challenge: Australia's response  | https://www.safetyandquality.gov   | Report              | The Australian Commission on<br>Safety and Quality<br>in Health Care   | This docurrent presents information on current redication safety programs and initiatives in Australia and recommends priority actions to deliver a positive Response to the Challenge.  | English   | Free            |                    |
| 3.2 Glade Planes Maley Challenge Medicalism Willow North Maley Challenge Medicalism William North Maley Challenge Medical | 1.2 Global Patient Safety Challenge: Medication Without<br>Harm                    | Polypharmacy and medicines optimisation: Making<br>It safe and sound  | https://www.kingsfund.org.uk/site  | Report              | The King's Fund  | This report concentrates on the prescribing of medication. There has been no consensus on whether polypharmacy applies only to<br>simultaneous prescribing of several dougs at a time, or if it applies to short-term as well as long-term medication. This report proposes a<br>dessification based on prescribing multiple medications where the treatment may be either appropriate or problematic.   | English   | Free            |                    |
| 3.2 Glade Planes Maley Challenge Medicalism Willow North Maley Challenge Medicalism William North Maley Challenge Medical | 3.2 Global Patient Safety Challenge: Medication Without<br>Hams                    | The Report of the Short Life Working Group on<br>reducing medication-related harm   | https://assets.publishing.service.g  | Report              | UK Department of Health and<br>Social Care   | To order to crude an endorsoment which best promotes shared learning preferenced regulation and leadership bodies shared entergraphic producting of medication errors. To promote further learning the SEAC has tasked the NRS Specials Thereusey device to bodie on solidar specialson, missingle of searning and sensity practice. Smilling, set of prescribing selling wherein is being developed by NRS Citylar and OSS Susioness Services Authority (SEAS). The purpose of this is to develop indication that quantify prescribing practice that has been appropriated by the Citylar rived of human of this seasonical will be allocations to bodies, due the and prescribing they extractly greater that has not depresed in the prescribing of reduce a memory and prescribed prescribed and the seasonical will be allocations to bodies, due the and prescribing they extractly great development of the seasonical ways to the season to bodies, due the and prescribing they extractly great development of the seasonic and the seasonic of the season to bodies, due the and prescribing they extractly great devices and the seasonic an | English   | Free            |                    |
| Solidar Name Marking Caldings Medication William  The Name Work of C | 3.2 Global Patient Safety Challenge: Medication Without                            | The safety of medicines in public health  |  |                     |  | This document demonstrates that pharmacovigilance can and should be an integral part of every public health programme that uses  |   |                 |                    |
| Section Medical Production Section (Market New York Configuration Config | Harm   | programmes: pharmacovigilance an essential tool   | cr/www.wno.int/publications  |                     |  | why, is the purpose of this report.  |   |                 |                    |
| 13 Claids Favoret Saleiny Challenger Medication Willholds Tension Registerment for a functional Plansman and with out what needs to be done as a minimum free mount that contact for any section of Plansman and with out what needs to be done as a minimum free mount that contact for any section of Plansman and with the section of the contract for any section of Plansman and with the section of the contract for any section of Plansman and with the section of the section  | Harm   | Medication Without Harm   | https://www.who.int/publication  |                     |  | action within countries to improve outlent safety and decrease avoidable harm related to medications.  |   |                 | 1.4                |
| isotem is espected to be sustainable with passanteed funding and with a low focus on patient safety.   | Mares  |   | A CONTRACTOR OF THE PARTY OF TH |                     |  |  |   |                 |                    |
| 32 Schafe Maters Safely Cuallenge Medication Without Softing Subseque Medication Without Softing Subse | 3.2 Global Patient Safety Challenge: Medication Without<br>Name                    | Minimum Requirements for a functional<br>Pharmacovigilance System   | https://who-umc.org/media/1483   | Standards           | WHO  | system is expected to be sustainable with suaranteed funding and with a key focus on gatient safety.   | English   | Free            |                    |
|  | 3.2 Global Patient Safety Challenge: Medication Without<br>Harm                    | ASHP Statement on the Role of the Medication<br>Safety Leader   | https://www.ashp.org/-/media/as  | Strategy            | The American Society of Health-<br>System Pharmacists  | The medication safety leader's not includes responsibility for leadership, medication safety requests, eliminating practice change,<br>measured, and aducation. ASPP believes that because of their training, broadedge of the medication-use process, skills, and abilities,<br>pharmacists are uniquely qualified to fill the roles and meet the responsibilities of the medication safety leader to hospitals and health<br>systems.  | English   | Free            |                    |

| 1.2 Global Patient Safety Challenge: Medication Without<br>Harm   | 3rd Global Patient Safety Challenge 'Medication' Without Harm': Symposium learning summary   | https://www.health-ni.gov.uk/site  | Symposium summary             | Department of Health (Northern<br>Ireland)   | This is a surmary of the outcomes of the Department of Health Symposium that was held to launch the World Health Organization (WHS) 2nd Global Patters Safery Challenge "Medication Without Hern" in Northern Instant and also to help shape our response to the Challenge.  | English                               | Free         |     |
|---|--|--|-------------------------------|--|--|---------------------------------------|--------------|-----|
| 3.2 Global Patient Safety Challenge: Medication Without Harm  | Medicines Safety Group (MSG) - Terms of Reference  | https://www.esht.nhs.uk/medical-   | Terms of Reference            | NHS  | To provide assurance that medicines are used safely in the Trust. To identify, report, advise, minimise and escalate as necessary, areas of risk associated with medicines. To guide and support Clinical Units' quality improvements around medicines   | English                               | Free         |     |
| 3.2 Global Patient Safety Challenge: Medication Without   | Canadian Patient Safety Institute: Five Questions to<br>Ask about your Medications   | https://www.patientusfetyinstilut  | Tool                          | Canadian Patient Safety Institute  | one.  create a list of top questions to help patients and their caregivers have a convenation about medications with their healthcare provider   | English                               | Free         |     |
| 3.2 Global Patient Safety Challenge: Medication Without   | 5 Morrents for Medication Safety   | only available as PDF  |                               |  | The 5 Moments for Medication Safety are the key moments where action by the patient or caregiver can greatly reduce the risk of harm<br>associated with the use of their medications. Each moment includes 5 critical questions. Some are self-effective for the actions and some  |                                       |              |     |
| Nams  3.2 Global Patient Safety Challenge: Medication Without   | 5 Moments for Medication Safety  | anly available as PDF  | Webpage                       | WHO Canadian Patient Safety Institute  | require support from a health professional to be answered and reflected upon correctly.  | English                               | Free         | 4.5 |
| Mann  1.2 Global Patient Safety Challenge: Medication Without Mann  | Pharmacovigilance: Overview  | https://www.ema.europa.eu/en/h   | Webpage                       | European Medicines Agency  | This webpage provides a compliation of patient safety resources and tools.  An overview of pharmaconigliance in the EU   | English<br>English                    | Free         | 4.5 |
| 3.2 Global Patient Safety Challenge: Medication Without<br>Harm   | Yellow Card  | https://yellowcard.mhra.gov.uk   | Webpage                       | Medicines and Healthcare<br>products Regulatory Agency   | The purpose of the wherein is to provide an early sensing that the safety of a medicine or a medical desice may require further exercises on a medical desice and provided provided in the exercise of the medicine or medical devices as these are used to identify insers which might not have been proviously known about. The MOREA will review the issue and if necessary, take action to minimize disk and maximum benefit to the patterns.  | English                               | Free         |     |
| 3.2 Global Patient Safety Challenge: Medication Without Harm  | Medicines Management   | https://www.co.org.uk/library/Su   | Webpage                       | Royal College of Nursing   | This webpage is a resource intended to provide guidance and clinical support for nurses and other healthcare professionals on medicines matters in relation to preceding and administration of medicines by non-medical healthcare professionals. This resource will continue to develop and we will continue to be developed and well incontinue to the pages as new resources become available.  | English                               | Free         |     |
| 3.2 Global Patient Safety Challenge: Medication Without<br>Name   | MedWatch: The FDA Safety Information and<br>Adverse Event Reporting Program  | https://www.fda.gos/safety/medy  | Webpage                       | US Food & Drug Administration  | develop and we will commiss to uppose the pages as new resources decome avaisable.  MedWatch, the FDA's medical product safety reporting program for health professionals, patients and consumers.   | English                               | Free         |     |
| 3.2 Global Patient Safety Challenge: Medication Without<br>Harm   | Medication Without Harm  | https://www.who.int/initiatives/g  | Webpage                       | WHO  | This webpage provides all of the resources produced by the WHO for the medication without harm global patient safety challenge.  | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Global action plan on antimicrobial resistance<br>(2015)   | https://ipps.who.int/iris/rest/bits                                      | Action Plan                   | WHO  | e goal of the Global action plan on antinicrobial resistance is to ensure, for as long as possible, continuity of successful treatment and prevention of infectious diseases with effective and safe medicines that are quality-assured, used in a responsible way and accessible to all who need them.  | English, French,<br>Estonian, Russian | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Framework of actions to contain carbapenemase-<br>producing Enterobacterales   | https://www.epv.uk/epvenment/  | Framework                     | UK Government  | This framework focuses on carbopenessa-producing Enterobactersian (CPE), these organisms spread rapidly in healthcare settings and least its poor chinal outcomes because of limited thereprents options. The increased incidence of CPE has significant cost and operatorial implications for healthcare providers. The framework sets out a range of measures, that if implemented well, will help health and social care providers minimize the impact of CPE.  | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Guidelines on Core Components of Infection<br>Prevention and Control Programmes at the<br>National and Acute Health Care Tacility Level  | https://spps.who.int/iris/hitstreau                                      | Guidance                      | WHO  | providers minimise the inspect of CPC.  These new goldelines on the core components of PC programmes form a key part of WIOL stategies to prevent current and future threats, strengthen health review resilience and ledge contact ARM. They are intended also to apport countries in the development of their consistency protected by the CPC and ARM action places and to support health constitutions as they develop or trienglish mit have comparable to a provide and constitutions as they develop or trienglish mit have comparable to a provide a constitution and the provider providers and the constitution and the providers are constituted and the constitution and the providers are constituted as a constitution of the constitution and the constitution are constituted as a constitution and the constitution and the constitution are constituted as a constitution are constituted as a constitution and the constitution are constituted as a constitution are constituted as a constitution and the constitution are constituted as a constitution and constitution are constituted as a constitution are constituted as a constitution are constituted as a constitution and constitution are constituted as a constitution are constitution.  | English                               | Free         |     |
|   | Hand hygiene in outpatient and home-based care<br>and long-term care facilities: a guide to the<br>application of the WHO multimodal hand hygiene  |  |                               |  | The demonstrate desired in the last series continued.  |                                       |              |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | application of the WHO multimodal hand hygene<br>improvement strategy and the "My Five Moments<br>For Hand Hygiene" approach   | https://apps.whp.int/iris/bilatnear                                      | Guidance                      | WHO  | 13 a consophul part similed at providing the background widenes and the theoretical principles related to the "My five moments for hand higherine" approach and MWID Middleroids that Ord Highges in prevention Storage, 22 a practical part with examples of the application of hand hygeney principles in subsations occurring frequently in outpatient care settings.   | English, Spanish,<br>Japanese         | Free         |     |
| 2.3 Infection prevention and control & antimicrobtal resistance   | Advanced Infection Prevention and<br>Control Training  | https://cdn.who.int/media/docs/c   | Guidance                      | WHO  | The "INC to combat AMI in health care setting," advanced training module is past of a broader EV training peckage targeting individuals and teams in EV who work or intend to such as INC fical point in pertuals, this module is designed to support implementation of the action of the pertual training in the programment after bending and such level has settled year of the programment of the other load and such level has excluded and published to the subject of the programment of the other load and such level has excluded and published to the subject of the programment of the progr         | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Water and Sanitation for Health Facility<br>improvement Tool (WASH FIT): a practical guide for<br>improving quality of care through water, sanitation<br>and hygiene in health care facilities | https://apps.who.int/iris/handle/  | Guidance                      | WHO  | The WASH FIT golde contains practical step-by-step directions and tools for assessing and improving services. It is<br>adapted from the water suffery plan (WOF) approach recommended in the WIND Guidelines for directing-saster quality<br>(WINC, 2011) and go she beyond water safety to include santation and hygiene, health care waste, management and<br>sta empowement.  | English, Arabic                       | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Essential environmental health standards in health care  | https://www.who.int/oublications   | Guidance                      | WHO  | This document provides galdinor on essential environmental health standards required for health care in medium- and low-resource countries and support the development and implementation of national policies. These galdines have been written for use by health managers and planner, nothercu, violan planners, water and sandation staff, circuit and nursing staff, cares and other health-care providers, and health premoters.   | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Safe management of wastes from health-care activities  | https://www.euro.who.int/data  | Guidance                      | WHO  | The new this Book is designed to continue to be a source of impartial health-care information and guidance on safe waste-management practices. The editor's intention has been to keep the best of the original publication and supplement it with the latest relevant information.  | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Water, Sanitation and Pygiene in Health Care<br>Facilities: Practical Steps to Achieve Universal<br>Access to Quality Care   | https://www.unicef.org/media/52  | Guidance                      | WHO, UNICEF  | The purpose of this document is two-fold. The first is to present eight practical steps that Member States can take at the national and sub-<br>national lived to improve WASH in health care facilities. The second aim is to summarize the global response to the UN Secretary-General's<br>Call to Action.  | English                               | Free         | -   |
| 3.3 Infection prevention and control & antimicrobial resistance   | Core questions and indicators for monitoring WASH<br>in health care facilities in the Sustainable<br>Development Goals   | https://www.who.int/publications   | Guidance                      | WHO and UNICEF   | WHO and UNICEF, working with the Global Task Team for monitoring WADV in health care fucilities (NLT), have developed a set of core questions and indicators for WADV in HCJ, in support of monitoring WADV in the 2002 Agenda for Sostainable Development. The indicators include definitions for basic water, sentiation, hard hygiere, health care waste management, and environmental cleaning services.   | English                               | Free         |     |
| 3.3 infection prevention and control & antimicrobial resistance   | AMR: A Manual for Developing National Action<br>Plans  | https://apps.who.int/iris/handle/  | Manual                        | WHO  | The purpose of this manual is to provide goldance to countries in preparing NAPs that are aligned with the global action plan, thereby contributing to combating AMR worldwide. This manual is intended primarily for national policy-makers, programme managers and partners responsible for strategic planning, development and implementation of national plans and AMR activities in all relevant section.   | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Water, sanitation, hygiene and health: A primer for<br>health professionals  | https://www.who.int/publications   | Primer                        | CHW  | This primer aims to guide health professionals on engaging with WAXH-related issues. It gives an overview of WAXH interventions and the status of WAXH services globally and outlines law principes with health. It provides examples of key actions that health actors can take to ensure WAXH efforts effectively protect public health and highlights World Health Organization (WYC) exhibits to support those actions.  | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial revistance   | Antimicrobial Resistance and Infections programme  | https://www.e-lfh.org.uk/program   | Programme                     | Health Education England   | The Antimicrobial Resistance (AMR) and infections programme has been designed to support health and care staff – both clisical and non-<br>clinical – in a variety of settings to understand the streams passed by interiorablal resistance, and the ways they can help to stadie this<br>major health loss. This programme has been developed by Weish Education England (EEE) in Calibrations with Polici Ereabh England<br>(PR), ME England and the Emperement, Came south Commission and Status alteriable for least on Leaf Englance.   | English                               | Free         | 5.1 |
| 3.3 Infection prevention and control & antimicrobial resistance   | Wash in Health Care Facilities - Global Baseline<br>Report 2019  | https://www.unicel.org/media/52  | Report                        | WHO, UNICEF  | This World Nash Organization (NYO) and the United Nations Children's hard (UNICE), through the WHO/ UNICE! Joint Membering<br>Programme for Vieter Supply, Josephicon and Hygerin (JMF), lower produced regular updates on water, unrelation and Ingenie (WACI) shows<br>1900. Targether, they are responsible for membering<br>the Child Child Conference of the Child Dispers 6.2 and 6.2 and supporting global monitoring of other WASH-related 50C targets and<br>Machine Child Ch | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | SYMPOSIUM: Water, Sanitation and Hygiene in All<br>Healthcare Facilities "An Urgent Action"  | https://www.youtube.com/watch;   | Symposium Video               | WHO  | The purpose of this symposium was to methysise IAC countries to advance toward access and svatainable management of WARI in all IHCP<br>or a partnership between the leakin and water/junctation sector under the guidar guidar of the right to mipy the highest distribution<br>standard of health, such junk health, Than-Arten solidarity, untrivially, and social including.   | Spanish                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Technical brief on water, sanitation, hygiene (WASH) and wastewater management to prevent infections and reduce the spread of antimicrobial resistance (AMRI)                                  | https://www.who.int/publications   | Technical Brief               | WHO  | This WHO/IAQ/QIS technical brief on WASH and wastewater management to reduce the spread of AMR provides a summary of evidence and rationals for WASH and wastewater actions within AMR MAPs and sector specific policy to combat AMR. Evidence and actions are presented in the domains of commission of commissions, health care facilities, animal and plant production, manifesting of artimitotists, an investibles and research.  | English                               | Free         |     |
| 1.3 Infection prevention and control & antimicrobial relistance   | Surveillance of healthcare-associated infections and<br>prevention indicators in European intensive care<br>units  | https://www.endc.europa.eu/sites   | Technical Report              | European Centre for Disease<br>Prevention and Control  | The main objective of this protocol is to ensure standardisation of definitions, data collection and reporting procedures for hospitals<br>participating in the assional/legional surveillance of MAIs in CNs across torops, in order to contribute to the EU surveillance of MAIs, and to<br>improve the quality of care is the EU is a multicontrive setting. The protocol aims and describing methods for the participating EUs and the<br>national coordisating orders for the surveillance of MAIs.   | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Minimum requirements for infection prevention<br>and control programmes  | https://www.who.int/publications   | Technical Report              | WHO  | The purpose of this document is to present and promote the minimum requirements for IFC programmas at the national and health care facility level, identified by assent consensus according to available evidence and in the contact of the WFO core composents.   | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Infection Control Assessment Tools   | https://www.cdc.gos/hai/prevent/   | Tool                          | Center for Disease Control and<br>Prevention   | The Infection Control Assessment Tools were developed by CDC to assist health departments in assessing infection prevention practices and guide quality improvement activities (e.g., by addressing identified gaps). These tools may also be used by healthcare facilities to conduct internal quality improvement audits.  | English, Spanish                      | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Global Monitoring of Country Progress on<br>Antimicrobial Resistance (AMR): Country self-<br>assessment questionnaire (version one)  | https://apps.who.int/iris/billstrear                                     | Tool                          | WHO  | This questionnaire collects information on country progress on ANM for inclusion in the report to the World Health Assembly and for other propriatations' global reporting. The country responses will also be used to guide follow up actions and provision of assistance and support. The intention is an or pract the following enrousing, to show progress over time and dentity areas for action.   | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | TARGET Antibiotics Toolkit   | https://www.rcep.org.uk/targetan   | Toolkit                       | Royal College of General<br>Practitioners  | The toolkin helps influence prescribers' and patients' personal attitudes, toolal norms and perceived barriers to optimal attitudes prescribing, it includes a range of recurrens that can each be used to support prescribers' and patients' responsible antibistic use, helping to fulfill OP and revolutation requirements.   | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Antimicrobial stewardship: Start smart - then focus  | https://www.gov.uk/government/   | Toolkit                       | UK Government  | to train to the our lane reversables in representation.  This is solid provides an outline of evidence-based antimicrobial stowardship in the secondary healthcare setting. These activities will form part of the quality improvement storatogy for patient safety and help to reduce inappropriate prescribing and optimities entitletic case.   | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | Antimicrobial stewardship programmes in health-<br>care facilities in lose- and middle-income countries:<br>a WHO practical toolkit  | https://apps.whp.int/iris/handle/  | Toolkit                       | WHO  | This toolks aims to support countries in implementing Objective 4 of the Clobal Action Plan — "optimize the use of animizrobial medicines" — by providing practical guidance on how to implement antimicrobial streamfolies (AMS) programmes in the human health sector at the national and health care facility level in the vail and infection and medicines are facility level in the vail and infection and medicines are facility level in the vail and infection and the section of the control and the section of the section and medicines are supported by the section of the section o         | English, Arabic, Russian              | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance   | NAI surveillance   | https://www.safetyandouality.gos   | Webpage                       | Australian Commission on Safety<br>and Quality in Healthcare   | is page provides a range of information on surveillance of a number of HAb by the Australian Commission on Safety and Quality in<br>Healthcare   | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial resistance 3.3 Infection prevention and control & antimicrobial            | Mealthcare-Associated Infections Data  | https://www.cdc.eos/hai/data/hs  | Webpage                       | Center for Disease Control and<br>Prevention   | CDC's webpage details their PM-surveillance system. CDC publishes data regords to help track progress and target areas that need assistance. The data come from two complementary MN surveillance systems, the Nacional Healthcare Safety Network (NeCO) and the American Infectional Presents Institutes Associated Infections - Commonitive Infection (ID PMCI).   | English                               | Free         |     |
| resistance 3.3 Infection prevention and control & antimicrobial   | Infection prevention and control  Royal College of Nursing - Antimicrobial Resistance  | https://www.rcn.org.uk/clinical-to<br>https://www.rcn.org.uk/clinical-to | Webpage<br>Webpage            | Royal College of Nursing  Royal College of Nursing   | They RCN webpage with all resources regarding infection prevention control  The Royal College of Nursing Webpage on Antimicrobial resistance   | English<br>English                    | Free         |     |
| resistance 3.3 Infection prevention and control & antimicrobial posistance  | Infection Prevention and Control   | https://www.who.int/health-topic   |                               | WHO  | The WHO webpgs with all resources available for infection prevention and control.  | English                               | Free         |     |
| 3.3 Infection prevention and control & antimicrobial revistance 3.3 Infection prevention and control & antimicrobial revistance | Global Antimicrobial Resistance and Use<br>Surveillance System (GLASS)<br>Pan American Health Organization - Antmicrobial<br>Besistance  | https://www.who.int/initiatives/g  | Webpage<br>Webpage            | WHO PAHO   | WHO webpage of Global Antimicrobial Resistance and Use Surveillance System (GLASS), where all resources and publications can be found. The Pan American Health Organization World Health Organization Regional Office website of antimicrobial resistance. Lists all relevant  | English<br>English                    | Free<br>Free |     |
| resistance 3.3 Infection prevention and control & antimicrobial resistance  | Resistance Infection Prevention - National Guidance across the UK  | https://www.ips.uk.net/national-g  | Webpage with resources        | Infection Prevention Society   | Presources and oublications  Guidance is produced and published in the UK and Ireland to assist managers, practitioners and chricians, among others, on infection prevention strategies. Here are some key locks to rational publications.   | English                               | Free         |     |
| 1.4 Safety of medical devices, medicines, blood and vaccines  | Medical Device Safety Action Plan: Protecting<br>Patients, Promoting Public Health   | https://www.fda.gos/media/1320   | Action plan                   | FDA  | The Medical Device Selloy Action Place Protecting Polises is, Promoting Public Italials outline a vision for how PDA, an continue to enhance are programs and processes to assure the selloy of medical devices throughout the STC, is provide for the tonely communication and resolution of rew or trovessed forces selecting visuae, and to advance innovative technologies that we safer, more effective and address sumset needs.   | English                               | Free         |     |
| 3.4 Safety of medical devices, medicines, blood and vectores  | A Model Regulatory Program For Medical Devices:<br>An International Guide  | https://iris.paho.org/handle/1066  | Framework                     | WHO  | This document provides a framework to avait Member States in establishing regulatory programs for meltical devices. Resease of the differences in subconcentric conditions that exist a more countries that may provide drive impostancy programs and their infrastructural consistency of the contribution of the state o         | English                               | Free         |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines 3.4 Safety of medical devices, medicines, blood and vaccines       | Blood Transfusion  Managing Medical Devices: Guidance for health and   | https://www.nice.org.uk/guidance   | Guidance                      | NICE<br>UK Government  | This guideline covers the assessment for and management of blood transfusions in adults, young people and children over 1 year old. It covers the ensured unicolate of Blood transfusions, but does not make recommendations relating to secrific conditions. The purpose of the document is to self-se systematic approach to the acquisition, deployment, mathematical properties maintenance proventies maintenance.  | English<br>English                    | Free         |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines 3.4 Safety of medical devices, medicines, blood and vaccines       | social care oneanisations A Guide to Establishing a National Haemovigilance System   | apps who int/ins/rest/bitstreams   | Guidance                      | UK Government<br>WHO   | real personner in a southerin er in a could'en great affect payable en experience in experience in a southerin en experience in a southerin en experience in a southerin exper         | English                               | Free         |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines  | WHO guideline on the use of safety-engineered<br>syringes for intramuscular, intradermal and<br>subcutaneous injections in health care settings  | https://apps.who.int/iris/handle/  | Guidance                      | weo  | NICD has developed the policy recommendations in this document using the procedures from the NICD handbook for guideline development. The steps in this process include [i] identification of promity questions and outcomes [ii) retrieval of the endence; [iii) assessment and synthesis of the evidence, [iv] immunification reformmentation, including reservation protestics, and of planning for discernization, implementation, impact evaluations and updating of the guideline when new evidence is available.  | English                               | Free         |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines  | Medical Device Regulations: Global Overview and<br>Guiding Principles  | https://apps.who.int/iris/bitstreas                                      | Guidance and Framework        | WHO  | The Curio begins by explaining between the second s         | English                               | Free         |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines  | Injection Safety Guidelines  | http://www.shnj.org/shnetweb/s   | Guidelines                    | Center for Disease Control and<br>Presention<br>Joint United Kingdom Blood<br>Transfusion and Tissue | One page guideline on injection safety   | English                               | Free         | _   |
| 3.4 Safety of medical devices, medicines, blood and vectores  | Transfusion Handbook   | https://www.tramfusiongsideling  | Mandbook                      | Transfusion and Tissue<br>Transplantation Services<br>Professional Advisory Committee                | The purpose of this healthcok is to help the many stell involved in providing and using blood products to make sure that the right blood product is given to the right patient at the right time.  This advanced model is part of a broader infection prevention and control (IPC) training package targeting individuals and teams in IPC   | English                               | Free         |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines  | Advanced Infection Prevention and Control Training   | https://cdn.who.int/media/docs/c   | Handbook                      | WHO  | This advanced module is part of a broader infection prevention and control (PC) training package targeting individuals and teams in PC who work in viteral to such as PC food points. This designed to support implementation of the WTO guidation on the use of adelynational residenced systems for inframenously, includes and subsolutionaries injection in health are settings 1 at the national and health care facility levels, a part of a multifactorist approach to capacity-building.   | English                               | Free         |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines 3.4 Safety of medical devices, medicines, blood and vaccines       | Quality assurance of pharmaceuticals: meeting a<br>major rublic health challenge<br>Blood Safety   | https://www.odc.gos/nhsn/biovigi   | Handbook / Guidance<br>Module | WHO Center for Disease Control and Prevention  | This booked provides an overview of guidalness on phemaceutical quality assurance as adopted by the Eugert Committee on Specifications for Paramatonian Favorations in record vasar.  The Hemonoglance Modulul developed a set of standardized national surveillance procedures used in the moritoring of translational associated adverse reactions, which are made at Improving patients affect, microling modelity of translation encipients,   | English<br>English                    | Free         |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines  | Vaccine Safety Basics  | https://vaccine-safety-training.org                                      | Online Course                 | Prevention<br>WHO  | Les Deutemoniques Prescriptions in roots vanci. The Teamoniques Deutemonium Prescription and vanci. The Teamoniques Deutemonium Prescription and the Teamonium Prescription of Standardsed autisonal surveillance procedures used in the monitoring of translation associated advisors are reported.  Secondary of the Teamonium Prescription of         | English                               | Free         |     |

| As define of medical devices, medicione, blood and accident  as define of medical devices, medicione, blood and accident  as define of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medicione, blood and accident  3.5 Safety of medical devices, medical devices, accident  3.5 Safety of medical devices, accident  3.5 S | https://www.e-ifh.org.uk/program<br>https://iris.paho.org/handle/1066 | Online learning     | Health Education England                                       | Learnbloodtramfunion is a suite of e-learning courses that have been developed by the UK Blood Services and are reviewed regularly by a<br>UK-wide editorial board. It has been developed to ensure that all healthcare workers can participate safely in the transfusion process   | English | Free    | 5.1 |
|--|---|---------------------|--|---|---------|---------|-----|
| 3.4 Safety of medical devices, medicines, blood and vaccines Transfusion Today   | https://iris.paho.org/handle/1066                                     |                     |  |   |         |         |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines Transfusion Today   |   | Report              | WHO  | This document follows up the publication "Supply of Blood for Transfusion in Latin American and Caribbean Countries 2012 and 2013" and presents indicators on the availability, safety, and use of blood and blood components, as well as the organization of national blood  | English | Freee   |     |
|  |   |                     |  | systems.  Transfusion Today is the society's magazine that is distributed every quarterly within the membership. There are six useful articles related  | -       |         |     |
| ISD 11485:3016 Medical devices — Quality   | Transfusion Today   The Internati                                     | Society magazine    | International Society of Blood<br>Transfusion                  | to different aspects of Haemovigilance in the focus section of this issue of  | English | Free    |     |
|  | hard forms in an experience of the                                    | Standards           | International Organization for                                 | Transfusion Today.  150 1348:2026 specifies requirements for a quality management system where an organization needs to demonstrate its ability to provide medical devices and related services that consistently meet customer and applicable regulatory requirements.   | English | 158 CHF |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines<br>management systems — Requirements for<br>regulatory purposes   | https://www.so.org/ssindard/ss  | Scandards           | Standardization  |   | English | 158 CHF |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines Management and Safe Use of Medical Devices  | https://www.who.int/teams/heal  | Technical series    | WHO  | One of WHO's strategic objectives is to "ensure improved access, quality and use of medical products and technologies." To meet these objectives, WHO and partners have been working towards densing an agenda, an action plan, tooks and guidelines to increase access to appropriate medical devices.   | English | Free    |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines web rar. January 2021   | https://www.youtube.com/watch   | Video               | Getting It Right First Time                                    | A clinically-led partnership will see the Getting It Right First Time (GIRTT) programme working with other NHG organisations to enable better use of technology to improve eatlent safety in the use of medical devices.  | English | Free    |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines Injection Safety  | https://www.odc.gos/injectionsul/                                     | Webpage             | Center for Disease Control and                                 | This is the CDC website providing information, guidance and resources about injection safety.   | English | Free    |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines Vaccine Administration  | https://www.odc.gos/vaccines/hcj                                      | Webpage             | Center for Disease Control and                                 | Guidance produced by the CDC on vaccine administration  | English | Free    |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines Blood, tissues, cells and organs  | https://ec.europa.eu/health/bloo                                      | Webpage             | European Commission  | The webpage of the European Commission about blood, tissues, cells and organs. It describes and provides the resources for EU legislation, EU coordination and EU-Funded actions.   | English | Free    |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines administration  | https://www.rcn.org.uk/clinical-to                                    | Webpage             | Royal College of Nursing                                       | The Royal College of Nursing Webpage on vaccine safety  | English | Free    |     |
| 3.4 Safety of medical devices, medicines, blood and vaccines Scan 4 Safety   | https://scan4safety.nhs.sk/   | Webpage             | Scan-4Safety   | Scan-Kafety is a government funded program that uses GS1 standards for product, location and patient identification to track products and their usage from the point of manufacture to the point of care.   | English | Free    | 6.5 |
| 3.4 Safety of medical devices, medicines, blood and vaccines Vaccine Safety Net  | https://www.vaccinesafetynet.org                                      | Webpage             | Vaccine Safety Net (WHD)                                       | The Vaccine Safety Net is a global network of websites, established by the World Health Organization, that provides reliable information on vaccine safety.   | English | Free    | 4.5 |
| 3.4 Safety of medical devices, medicines, blood and vaccines Blood Products  | https://www.who.int/health-topis                                      | Webpage             | WHO  | The WHO webpage on blood products   | English | Free    |     |
| 3.4 Safety of medical devices, medicines, blood and vectores. Blood Transfusion Safety   | https://www.who.int/health-topis                                      | Webpage             | WHO  | The WHO webpage on safe blood transfusions with all relevant documents  | English | Free    |     |
|  |   |                     |  |   |         |         |     |
| 3.5 Patient safety in primary care and transitions of care Safety issues at Transitions of Care  | https://www.safetyandquality.go                                       | Consultation Report | Australian Commission on Safety<br>and Quality in Healthcare   | This document presents a summary of the outcomes of consultations undertaken by the Australian Commission on Safety and Quality in<br>Health Care (the Commission) on safety issues and "pain points" relating to clinical information systems at transitions of care. It is<br>accompanied by a summary of the literature.   | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care improve Safety to Primary Care  | https://www.health.org.uk/gublic                                      | Evidence Scan       | The Health Foundation  | This endotes star colless remplical endors that address the following spentions:  - White installants whe beam implemented increase size in privacy one and what are the impacts of these lesitatives?  - Now have patients, professionals, researchers and funders been incolved?  - Are there origing includes or medial started is best bits topic?  | English | Free    |     |
| The Guide to Improving Patient Safety in Primary  Care Settings by Engaging Patients and Families  | https://www.ahrq.gov/sites/defau                                      | Guidance            | Agency of Health Researchcare                                  | a resource to help primary care practices partner with patients and their families to improve patient safety. The Guide includes materials and resources to help primary care practices implement patient and family engagement to improve patient safety.  | English | Free    |     |
| Care Settings by Engaging Patients and Families  3.5 Patient safety in primary care and transitions of care handover for circicians and managers  and managers   | https://www.rosene.ar.id/b/   | Guidance            | and Quality  British Medical Association & NHS                 | and resource to help primary care practices implement publish and family engagement to improve patient safety.  - provides guidance to disctors on best practice in handover  - provides examples of good models of handover that disctors and hospital managers can learn from   |         | Free    |     |
|  | THE PARTY NAME AND ADDRESS OF THE PARTY.                              |                     | www.sn medical Association & NHS                               | yearness enemyers of good modes or namover that occors and nospital managers can learn from     aims to drive further developments in standardising handover arrangements in UK hospitals.  | English | Free    |     |
| 1.5 Patient safety in primary care and transitions of care  Chapter 32 Structured patient handovers:  Emergency and acute medical care in over 16s: service delivery and organisation  | https://www.nice.org.uk/guidance                                      | Guidance            | National Institute for Health and<br>Care Excellence           | Guidance and Template for effective handovers   | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care<br>Reporting and Learning from Patient Safety<br>Incidents in General Practice  | https://www.rcgp.org.uk/-/media                                       | Guidance            | Royal College of General<br>Practitioners                      | The purpose of this guide is to maximise opportunities to learn from patient safety incidents in the GP practice, and to share learning via organisational or national reporting systems. In outlines a process for learning from patient safety incidents in primary care. Where appropriate, this public will suppose until the well-settle resources.  | English | Free    | 6.1 |
| 3.5 Patient safety in primary care and transitions of care<br>Circuitve working party  | https://www.rcseng.ac.uk/library-                                     | Guidance            | Royal College of Surgeons                                      | appropriate, this gote area to long tegether, in a succisc, manner, the main features of a successful handover. There innot a "one-size-fits-oil" guide area to bring tegether, in a succisc, manner, the main features of a successful handover. There innot a "one-size-fits-oil" guide to the effective handing over of pastent, but there are good practices principles that surgeons should be aware of. This guide is intended for surgeon, and other members of the surgeol team. It will also be relevant to hospital administrators who are responsible for designing register and other members of the surgeol team. It will also be relevant to hospital administrators who are responsible for designing register of the surgeol team.  | English | Free    |     |
| Lifective working parry  |   |                     |  |   |         |         |     |
| 3.5 Patient safety in primary care and transitions of care Patient Safety Solutions  | https://www.who.int/teams/inte  | Guidance            | WHO  | The Patient Safety Solutions (2007) are standardized tools for health care professionals to prevent potential emon from reaching the<br>patient. These interventions have demonstrated the ability to prevent or mitigate patient harm. For each storp, the Solution include<br>background information on the propieter and irganized, regarder actions, applicability, opportunities for patient and family involvement,<br>strength of the evidence, potential barriers to implementation and risks for certain unintended consequences.  | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care  Reference  Methods and Measures used in Primary Care Patient Safety Research: Results of a Literature Environ  | https://www.who.int/gatientsafe                                       | Literature review   | WHO  | As most patient safety research to date has focused on hospital-related issues, we aimed to determine the methods used in patient safety research conducted in primary care, their storegibs and weaknesses, the measures they produced, and research gaps  | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care Patient Safety Issues   | https://www.patientusfetyinstitus                                     | Module              | Canadian Patient Safety Institute                              | The knowledge requirements to understand include:  * the gaps in patient safety immestable leaths from a systems perspective;  * the system collectual issues, such as stagent can affect patients safety;  * different models of one delivery that can promote patients safety, and  * one to integrate a remain leath safety leading processment framework for supporting patient safety,  * the system of the system   | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care Patient Safety in Primary Care (CPS)  | https://www.patientsafetyinstitus                                     | Report              | Canadian Patient Safety Institute                              | This report builds upon what is known about patient safety in primary care. The report offers suggestions and outlines opportunities that, it is hoped, will provide momentum to those in both leadership and delivery roles to strengthen the infrastructures and supports necessary for a greater focious on patient safety in primary care.  | English | Free    |     |
| Safety in Home Care: Broadening the Patient Safety Agends to Include Home Care Services  | https://www.patientsefetylmstitut                                     | Report              | Canadian Patient Safety Institute                              | This report on patient safety is home case was prepared at the required of this Considera Patient Safety institute and the Victorius Order of Microsco Control of Micr  | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care  Mental health patient safety: A rapid literature   | https://www.cec.health.nsw.gov.a                                      | Report              | New South Wales Government &<br>Agency for Clinical Innovation | This document describes the findings of a rapid literature review that sought to locate, collaise and summariae recently published evidence about the interactions and correspondence of potential safety issues in metal-health, as an expect who the NOV Merical health fostions Lafety Registers within the lange developed by the Circuit Installina Commission and Collaboration of Installing of Installing Collaboration and Collab  | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care   | http://www.ininternation.com  | Paramata .          | The Joint Commission   | Program which is being developed by the Clinical Excellence Commission and NSW Ministry of Health.  This educates readers on the safety issues in end-of-life care and provides strategies on how organisations can overcome these.   | English | Free    |     |
| a.5 rement lanety in primary care and transmions of care   Ero-on-ine care: A patient lanety is the  | mpt//www.pmtcommunic.com  | nepart              | The Joint Commission   |   | English | Free    |     |
| 2.5 Patient safety in primary care and transitions of care Co-ordinated care for people with complex chronic conditions  | https://www.kingsfund.org.uk/pu                                       | Report              | The King's Fund  | This project involved an in-depth exercisation of approaches to care on-ordination undertaken in primary care settings in different parts of<br>the U.V.W worked with the case shotly stave who have developed innovative primary such such east parameter in care co-ordination for<br>people with complex observed conditions. Each final case study includes an organizary shawing the care planning for ordination process,<br>partiest stories and active flogistication would not of the team.  | English | Free    | 4.1 |
| 3.5 Patient safety in primary care and transitions of care Quality in Primary Care   | https://www.who.int/docs/defaul                                       | Report              | WHO  | This paper groundes governments and policy-malem with an overview of the key issues of quality in primary health care and its importance to activate give be based policits health gains withour surveral health coverage. It makes the case for quality improvement as a core function of primary health care and openiod the perspectives to different lower of the surveyboarts have present quality in primary health care and quality in primary health care. Admired greating in quality of care is complien endoscore which regions an autitorized approach that receptions the specific challenges of individual workings, or devian volution, privations and country specimens.   | English | Free    |     |
| Tallent safety in primary care and transitions of care  Patient safety in primary care and transitions of care  Callenges, and Opportunities   | http://www.bi.org/resources/Pag                                       | Review              | Institute of Healthcare<br>Improvement                         | he institute for healthcare improvement / fusional failent failing froundation, with support from the Cordon and Setty Motore Faundation, contracted with Wilstaft to evaluate the comment date of research in patient solely in the form on a setting and identify gap in the contract of the form on a setting and identify gap in the contract of the form of t  | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care Medication Safety in Transitions of Care  | https://app.who.int/iris/rest/bits                                    | Technical Report    | WHO  | This report - Medication safety in transitions of care - outlines the problem, current situation and key strategies to reduce medication-<br>related bare in transitions of care. It should be considered along with the companion technical reports on Medication safety in high-risk<br>situations and Medications safety in polyharmacy.   | English | Free    | 1.2 |
| 3.5 Patient safety in primary care and transitions of care Technical Series on Safer Primary Care  | https://www.who.int/beams/integ                                       | Technical Series    | WHO  | The pelvious Series on Safer Primary Care applies different agents of safety is primary care services and describes similarly and<br>the safety of the safety | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care  Taking Care of Myself: A Guide for When I Leave the Hospital   | https://www.ahro.eov/questions/                                       | Tool                | Agency of Health Researchcare<br>and Quality                   | Using this easy-to-read guide with patients during discharge can help them care for themselves when they leave the hospital to track their medication schedules, upcoming medical appointments, and important phone numbers.  | English | Free    |     |
| 3.5 Pablent safety in primary care and transitions of care Tileary fool Tileary fool   | https://ikub.scot/improvement.g                                       | Tool                | Health Improvement Scotland                                    | A trigger tool is a simple checklist for a number of selected clinical 'triggers'. A reviewer looks for these triggers when screening medical rescords for patients who may have been surintentionally harmed. The trigger tool facilitates the structured, focused review of a sample of medical records by private year chickness.  | English | Free    |     |
| Trigger tool   |   |                     |  | medical records by primary care clinicians.   |         |         |     |
| 3.5 Patients safety in primary care and transitions of care  General Practice Safety Climate Tool  | https://ibub.scot/improvement.g                                       | Tool / Guidance     | Healthcare Improvement Scotland                                | The survey given you comparisons between chicola and non-clinical staff, and management and non-management within your practices. The<br>report shot brotish the practice results. Lock times the survey is completed, you can see whether there has been a change in the perception<br>of underly culture within portation. The report has discussed at a team entiting proceeding a focus for discussing patient safety. This<br>contributes to developing the safety dimute in your practice and improving case for patients.  | English | Free    |     |
| 1.5 Patient safety in primary care and transitions of care Re-Engineered Discharge (RED) Toolks  | https://www.ahrq.gov/patient-sal                                      | Toolkit / Webpage   | Agency of Health Researchcare<br>and Quality                   | searchers at the Sozion University Medical Center SUAMC) developed and reside the Ri-Engineered Sucharpy (ESD), Research showed that<br>the SED was effective at reducing redeminisors and postbogotal invespency department (IEI) visits. The Agency for Nealthcore Research and<br>Coulting contracted with BLMC to develop this toolkist to savid hospitals, particularly those that serve diverse populations, to replicate the<br>ESD.   | English | Free    |     |
| 3.5 Patient safety in primary care and transitions of care — "Passing the boton of care — the patient relay  | https://www.safetyandouality.go:                                      | Workshop report     | Australian Commission on Safety<br>and Quality in Healthcane   | In hosting the Workshop, the Council hoped participants could develop a set of draft national operational principles to assist in improving clinical handover practices.  | English | Free    |     |
| The economics of patient safety Part IE: Long-term care: Valuing safety for the long hast  | https://www.oeal-library.org/do-                                      | Working Paper       | Organisation for Economic Co-<br>Operation and Development     | This report offers actionable recommendations to inform improvement efforts—including the need for appropriate quality standards and standards for staffing lowers and competencies to match the needs of LTC residents, better linkages with acute care, and improving organizational learning and select puttine in LTC.  | English | Free    | 1.2 |