

## Questions and Answers

### What is GPSC?

World Health Organization (WHO) and the Government of the United Kingdom of Great Britain and Northern Ireland enter into new strategic collaboration towards establishment of the *Global Patient Safety Collaborative* (GPSC). This innovative collaborative model has been developed jointly by the Patient Safety and Risk Management Unit, WHO headquarters (HQ) and the Quality, Patient Safety, and Investigations Branch, at the UK Department of Health and Social Care.

### What is the objective of the GPSC?

GPSC has been established in view of the importance of patient safety as one of the most important components of health care delivery, essential to achieving UHC and moving towards UN SDGs, and the need for strategic approach and collaborative action at all levels: global, regional and country. The main objective of GPSC is to secure and scale up global action on patient safety as well as to work in close collaboration with selected low- and middle- income countries (LMICs) in their quest to reduce the risk of avoidable harm and improve the safety of their national health care systems.

### Which technical areas will the GPSC address?

The overall work of GPSC will be organized around three technical areas:

- **Leadership** to prioritize patient safety, promote patient safety culture and engage patients and families
- **Education and Training** to build competent, skilled and compassionate health workforce through inter-professional education and training in patient safety
- **Research** to enhance research capacities and evidence-based policy processes in patient safety.

### How the GPSC will work?

GPSC would consist of a central, ever-evolving, knowledge resource that will be managed by WHO HQ, with input from WHO Member States (MSs), WHO Regional and Country Offices, academic and research institutions, national and international professional organizations, civil society organizations and WHO Collaborating Centers. GPSC will operate at global and regional levels on a sustainable basis, as well as directly at country level in a time-bound manner. Information sharing mechanisms will be established and knowledge resources developed to support and encourage sustainable improvements in patient safety at all levels.

### Who will benefit from the GPSC?

All MSs will be eligible to access the generic support offered at global and regional levels as part of the GPSC.

Direct support will be provided to a number of LMICs through technical assistance and capacity building across three key technical areas. The mix of beneficiary countries will be identified through the robust selection process that will be performed in a phased manner. All LMICs that meet the defined criteria outlined in different phases of the selection process will have an opportunity to participate in the *Collaborative*, and can apply to receive the bespoke support. Considering the envisaged level of GPSC funding in the first years of implementation, direct cooperation will be possible with no more than four countries.

### **What kind of support will be provided within the frame of GPSC?**

Generic support consisting of advocacy advice, online technical resources, including educational materials, guidance materials and implementation tools will be open to all MSs. The proposed activities include, but are not limited to the following:

- Sustainable platforms for patient safety for sharing international experiences, best practices, tools, ideas, and approaches for improving patient safety;
- International E-academy and E-library with key resources to support patient safety education and training;
- Resources for building leadership competencies as well as for inter- and multi-professional education and training in patient safety;
- Tools and resources for conducting patient safety research and strengthening research capacities;
- Literature reviews and policy briefs to support development and implementation of evidence-based policies and impactful interventions;
- Meetings, scientific conferences, workshops and other expert exchanges at global and regional level.

The generic support will be supplemented by direct support that will include development of country specific policy and strategy documents, advocacy materials, strengthening capacities of institutions as well as generating evidence to support impactful interventions at country level. The emphasis will be on the development of sustainable national systems to address patient safety, based on specific country needs and health system capacities. The proposed activities include, but are not limited to the following:

- Policy dialogues and development on national policies, strategies and plans for strengthening patient safety within broader health system strengthening context;
- Establishment/strengthening of the national platforms for patient safety for sharing experiences, best practices, tools, ideas, and approaches for improving patient safety;
- Adopted to the country specific contexts resources for education and training in patient safety as well as on strengthening leadership and research capacities;
- Capacity building of different categories of health care professionals on different aspects of patient safety, leadership competencies and research capacities, tailored to specific needs;
- Targeted research, including estimation of burden of harm and impact of initiatives at country level;
- Meetings, scientific conferences, workshops and other expert exchanges at national level.

### **Who will coordinate the implementation of GPSC?**

The work of the GPSC will be coordinated by WHO headquarters, Patient Safety and Risk Management Unit in the Service Delivery and Safety Department with involvement of WHO Regional and Country Offices, with input

and support from academic institutions. Strategic and technical coordination mechanisms will be established to ensure coordinated approach for implementation across all technical areas at global, regional and country levels.

### **What is the role of other stakeholders in GPSC?**

During the course of GPSC implementation WHO Headquarters will closely cooperate with an academic institution, with the technical capability to provide all-inclusive support in implementation of GPSC activities across three key thematic areas. The academic institution will be selected through WHO standard rules and procedures.

National governments, namely Ministries of Health of selected beneficiary countries, will be responsible for implementation of country level activities in collaboration with WHO and the academic institution, and other key stakeholders at country level as applicable.

Other governmental agencies as well as academic and research institutions, national and international professional organizations, WHO Collaborating Centres, and civil society organizations working at global, regional and country levels will be involved in the continual development of the GPSC. They will provide knowledge and expertise through existing platforms and will play a critical role in knowledge sharing, promotion of patient safety core principles and values, and advocating for the development and implementation of policies and strategies aimed at improvement of patient safety.

### **How long the GPSC will work and what are sustainability considerations?**

Initial GPSC funding will ensure provision of indirect generic support to all interested countries and direct, bespoke support to no more than four beneficiary countries within two-and-a-half years.

As GPSC progresses and secures ongoing funding, resources will be scaled up to directly support additional MSs, and provide more diverse generic materials. It is important to ensure three key elements of sustainability during the implementation of GPSC:

- programmatic sustainability/systems development
- financial sustainability for beneficiary countries
- financial sustainability for GPSC

Building institutional capacities and investing in structures and systems to strengthen them in a way that they are able to operate on a continuous basis without additional resources will help secure programmatic sustainability and the long-term viability of the GPSC.

Extensive efforts will be undertaken from the beginning of GPSC implementation to secure funding for the continuation, sustainability and scaling up. This would include working together with the existing countries and also extend this collaborative model to include additional countries. A multi-pronged strategy, involving strategic resource mobilization through foundations; research and academic opportunities; and multi-lateral and bilateral mechanisms will be pursued with clearly defined roles and responsibilities of all stakeholders involved in the implementation of GPSC.