

## **Project Title**

Enhancing Capability and Competency of Patient Safety Leadership in the Asia-Pacific

## **Project Lead and Members**

- Jacob AHN
- Mabel Sim
- Zann FOO
- Vijaya RAO
- Kok Hian TAN

## **Organisation(s) Involved**

SingHealth Duke-NUS

## **Healthcare Family Group(s) Involved in this Project**

Quality and Patient Safety

## **Aim(s)**

To establish an Asia-Pacific programme for enhancing capability and competency of patient safety leadership in sharing and improving patient safety practices within the framework of the WHO GPSAP.

## **Background**

See poster appended/ below

## **Methods**

See poster appended/ below

## **Results**

See poster appended/ below

## **Conclusion**

See poster appended/ below

## **Project Category**

Organisational Leadership

Organisation Development, Leadership Development, Tools and Strategies

Training & Education

Learning Culture, Tools and Strategies,

## **Keywords**

Capability Building, Competency Enhancement, Patient Safety Practices

## **Name and Email of Project Contact Person(s)**

Name: Jacob AHN

Email: [singaporehealthcaremanagement@singhealth.com.sg](mailto:singaporehealthcaremanagement@singhealth.com.sg)



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# Enhancing Capability and Competency of Patient Safety Leadership in the Asia-Pacific



Institute for Patient Safety & Quality

Jacob AHN<sup>1</sup>, Mabel Sim<sup>1</sup>, Zann FOO<sup>1</sup>, Vijaya RAO<sup>2</sup>, Kok Hian TAN<sup>1</sup>

<sup>1</sup>SingHealth Duke-NUS Institute for Patient Safety & Quality, <sup>2</sup>SingHealth International Collaboration Office

## 1 Introduction

The 72<sup>nd</sup> World Health Assembly (WHA) adopted resolution WHA 72.6 'Global Action on Patient Safety' in 2019 and a 10-year global patient safety action plan (WHO GPSAP) was launched by World Health Organization. The resolution recognizes patient safety as global health priority and call for global solidarity and concerted action by all countries and international partners.

The Global Action for Leaders and Learning Organizations on Patient Safety (GALLOPS) is developed by SingHealth Duke-NUS Institute for Patient Safety & Quality (IPSQ). It's curriculum is built on the impetus of the resolution to create a high-level platform for patient safety leaders in Asia Pacific to connect and develop leadership capabilities for patient safety.

## 2 Aim

To establish an Asia-Pacific programme for enhancing capability and competency of patient safety leadership in sharing and improving patient safety practices within the framework of the WHO GPSAP.

## 3 Methodology

The GALLOPS curriculum and assessment tools were developed by mapping it to the WHO GPSAP Framework for Action, and the implementation guided by the Logic Model where resources, activities, outputs in achieving the short, medium, and long-term goals carefully examined (Figure 1). The collaborative effort between IPSQ, SingHealth International Collaboration Office as well as partners of the programme was also adopted as a critical practice in the design and implementation of the programme.

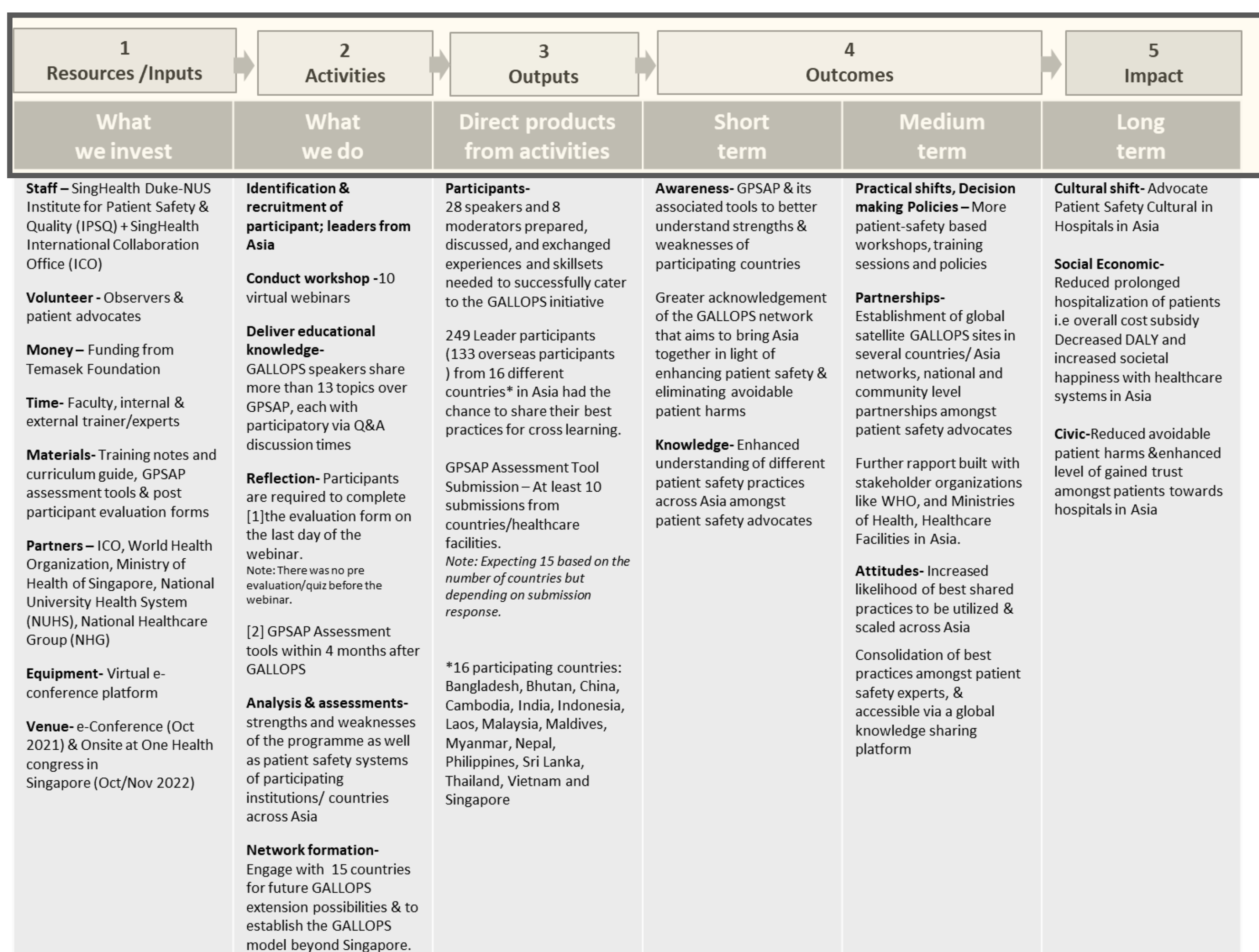


Figure 1: GALLOPS Implementation Approach guided by the Logic Model

## 4 Results

This initiative was supported by Temasek Foundation, and speakers from the WHO Patient Safety Flagship Unit, Singapore Ministry of Health, National University Health System, National Healthcare Group and healthcare facilities from the region. Over 250 patient safety leaders from 16 countries attended the 4-day GALLOPS programme held in October 2021, and completed the GPSAP assessment tools as a requirement of the programme (Figure 2).

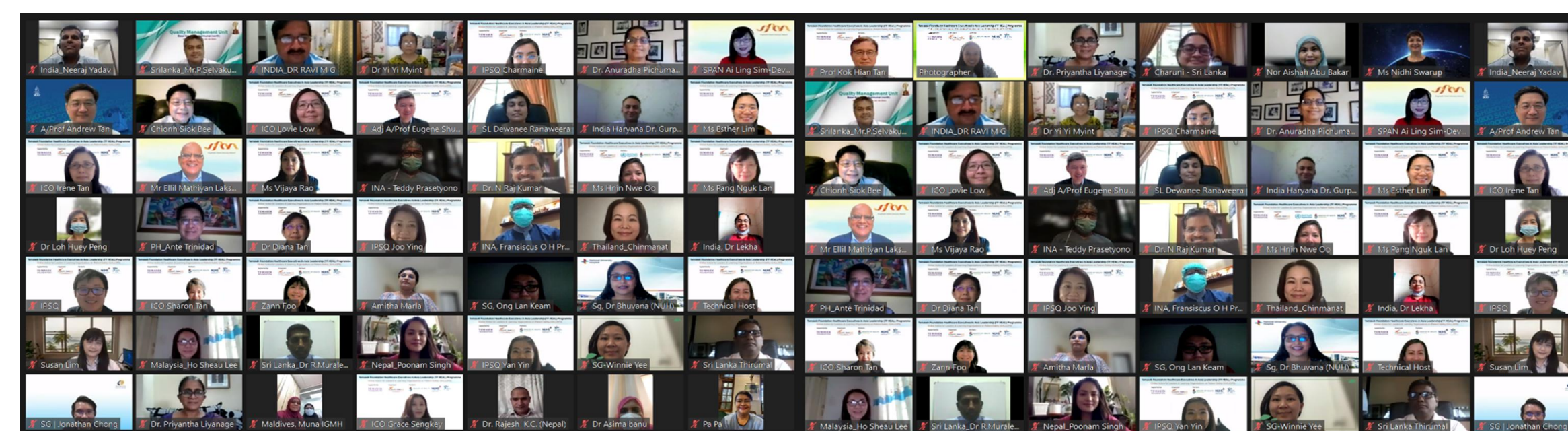


Figure 2: Participants of GALLOPS

The programme evaluation (n=125) was positive. 124 (99.2%) participants agreed that the programme had achieved its stated objectives, 122 (97.6%) had gained improved knowledge, and 121 (96.8%) of them would recommend GALLOPS to others.

The GALLOPS Ambassador Network was formed where leaders shared good practices and areas of improvement through the use of the GPSAP assessment tool. The tool was developed from the GPSAP 7 strategy objectives (SO) and stratified into 35 strategies of patient safety (PS) strategies. The scale from 1 to 5, with 1 being "not established" to 5 being "strongly established with good practices" for each of the 35 strategies.

The initial responses from centres from 7 countries of the 16 countries in March 2022 were analysed (Figure 3). The overall mean scores of all self-assessed SOs for Countries A (4.30), B (3.66), C (3.20), D (3.09), E (2.48), F (2.12), and G (1.94). SO3 (Safety of clinical processes) had the highest mean of 3.53, while SO6 (Information, research and risk management) and 4 (Patient and family engagement) had the lowest average of 2.88 and 2.67 respectively. Best practices and suboptimal practices were shared at a webinar for the international network held in May 2022. At the session, the need to appoint a PS Champion & Advocate for improving their practices in some countries were recommended.

This forms the baseline of self-assessed PS landscape in Asia Pacific. It revealed not only differences in PS practices across Asia-Pacific countries, but also across the SOs.

The assessment tool has presented opportunities for improving PS and reducing harm and risks in patient care.

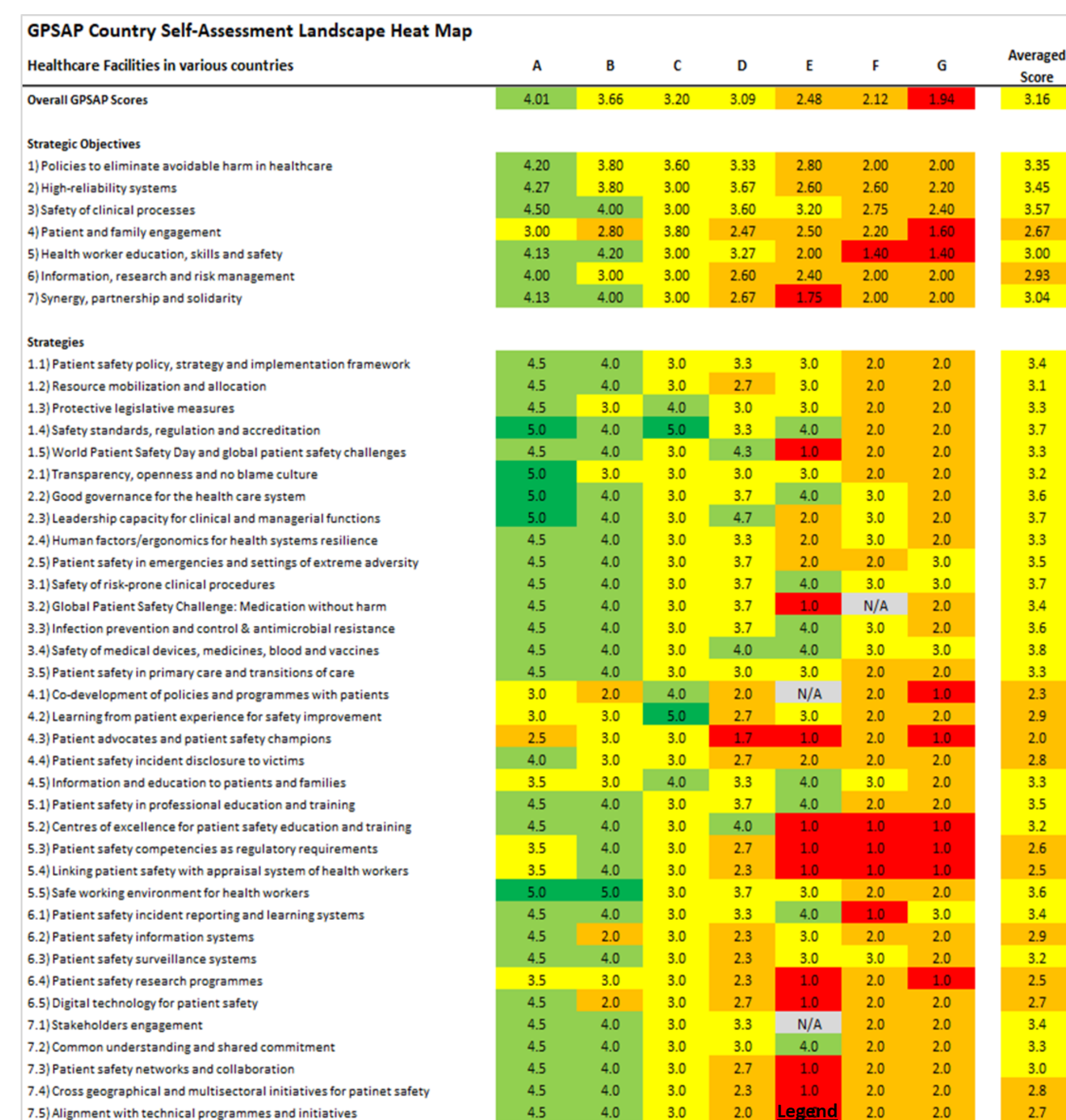
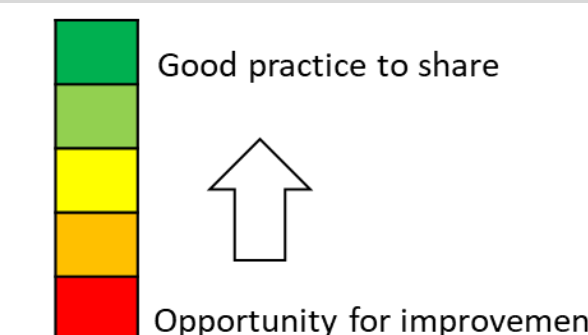


Figure 3: GPSAP Country Self-Assessment Landscape Heat Map



## 5 Conclusion

GALLOPS has brought together patient safety leaders in Asia Pacific to promote awareness of GPSAP and enhanced the capability of patient safety leaders in Asia-Pacific with sharing of patient safety practices for improvement.

The GALLOPS network fosters active communication and encourages mutual support to facilitate sharing of best practices and learnings for patient safety in Asia-Pacific.