



WORLD PATIENT SAFETY DAY ACTIVITY REPORT

2021



Theme: “Safe maternal and newborn care”

slogan: “Act now for safe and respectful childbirth”

Introduction

Community Health and Information Network (CHAIN) joined the rest of the world to commemorate World Patient Safety Day (WPSD) 2021, whose theme was “Safe maternal and newborn care” and the slogan “Act now for safe and respectful childbirth.”

CHAIN was part of the WPSD organising committee set up by the Ministry of Health in Uganda. The committee organised several activities which were led by MoH and supported by the World Health Organisation (WHO) country office, UNFPA and JICA.

CHAIN also organized community-level events which brought together health workers, Village Health Teams (VHTs), pregnant women and their husbands. These activities were endorsed by MoH and supported by the National Drug Authority (NDA) and the World Patient Alliance (WPA). The activities were in line with the WPSD 2021 theme and objectives: raising national awareness on the issues of maternal and newborn safety, particularly during childbirth; engaging multiple stakeholders to adopt effective and innovative strategies to improve maternal and newborn safety; and advocating for adoption of best practices at the point of care.

The Activities

Prior to WPSD

- Awareness campaigns done in the community including radio talk shows.
- An online AFRO webinar which brought together speakers from the Ministry of Health, WHO, the World Patient Alliance, international and regional speakers from Nigeria, Ghana, Ethiopia and the USA. Discussed critical issues around patient safety as related to maternal, newborn and child health (MNCH) in different aspects.
- Printing and distribution of T-shirts, caps, masks and hand sanitizers.
- Lighting of the New Jinja Bridge as a signature mark.
- Lighting up of the new women’s and neonatal hospital, Mulago.

On the 17th September 2021

- Press release in the local press (New-vision and Daily Monitor) by WHO Regional Director/Ministry of Health.
- Scientific national program at MoH grounds.
- Technical presentation about accomplishments in quality of care in maternal, newborn and child health (MNCH).
- Talk shows on current state of maternal health and safety interventions on CBS and NTV television, supported by WHO.

Achievements

- Increased awareness of world patient safety through virtual and physical displays like the lighting of the New Jinja Bridge and the new women’s and neonatal hospital, Mulago.
- Successful AFRO webinar meeting.
- Provision of platform for interaction and exchange of views on provision of safe health care to patients.
- Awareness of different activities in the country to provide safe maternal and neonatal care.

Raising awareness on medication safety to improve maternal and newborn care at Komamboga and Namulonge Health Center IIIs in Uganda.

On 7th and 8th September 2021, CHAIN with the Uganda Alliance of Patient Organisations (UAPO) with support from National Drug Authority (NDA) conducted sessions at two government health facilities. The two-day activity attracted 85 participants who included 40 health workers (doctors, nurses, midwives, lab technicians), 20 pregnant women/mothers, 5 men (husbands), and 20 Village Health Teams (VHTs) from Namulonge and Komamboga Health Center IIIs. The sessions were facilitated by Mrs. Regina Kamoga, a patient safety champion and executive director of CHAIN, and Dr. Victoria Nambasa, manager of the pharmacovigilance department at NDA. Dr. Helen Byomire Ndagije, the director of product safety at NDA officiated the events.

Regina welcomed the participants and briefed them about WPSD 2021 and its objectives. She emphasized the fact that patient safety is a global concern that requires everyone's participation to ensure no one suffers from preventable harm. She informed them about the WHO's efforts on patient safety including the 2021-2030 Global Patient Safety Action Plan, which provides strategic policy and implementation direction for key patient safety stakeholders.

She highlighted the seven strategic objectives in the action plan:

1. Policies to eliminate avoidable harm
2. High – reliability systems
3. Safety of clinical processes
4. Patient and family engagement
5. Health worker education, skills, and safety
6. Information, research, and risk management
7. Synergy, partnership, and solidarity

She encouraged the health workers to take every opportunity to gain knowledge and skills on patient safety. The mothers were also advised to always seek medical care early and get medication at recognized health facilities or pharmacies/drug stores.



Dr. Dr. Helen Ndagije Byomire – Director of product safety, NDA



Dr. Victoria Nambasa – NDA Pharmacovigilance Department

Helen explained the role of NDA in ensuring safe and efficacious medicines through registration of medicines (check, assess and verify), monitoring and inspecting factories where the medicines are made and ensuring the drugs are of good quality and safe. NDA also monitors drug use and effect through its pharmacovigilance department. A Med Safety Mobile App has been designed to improve reporting of side effects of drugs.

Victoria facilitated a session on medication safety in maternal and newborn care and the role of health workers and VHTs. She highlighted the risk of taking poor quality drugs and of self-

medication, and their effects on the foetus. She explained how some medications can cause harm to the unborn baby including deformities, miscarriages and failure of organs to fully develop. She further explained why it is important to inform the doctor about the pregnancy to avoid prescriptions that could be harmful to the pregnant mother and her unborn baby.



Regina and Victoria having a discussion with the VHTs who attended the session at Namulonge Health center III

Community dialogue on maternal and newborn care

On 10th September 2021, CHAIN with support from World Patients Alliance (WPA) conducted a dialogue to commemorate WPSD at the CHAIN offices in Kiwenda. Twenty participants including 8 VHTs and 12 midwives from private and government health facilities in Busukuma sub-county, Wakiso District in Uganda, attended the dialogue.



Regina briefing participants about WPSD

Nathan Muyinda, director of EDCO facilitated a session on the role of midwives and VHTs in ensuring safe maternal & newborn care. The session focused on the prenatal to postnatal period. He explained how a mother should take care of herself during this period, emphasizing the

importance of a healthy diet and good antenatal and postnatal care. He talked about common diseases affecting mothers and newborn babies, including bacterial infection/septicemia, neonatal conjunctivitis, malaria, pneumonia, diarrhea, common cold, flu and cough; and how they can be prevented, managed and treated. He highlighted medicines that are safe to use during pregnancy and those that are dangerous for the pregnant mother and babies and should be avoided. The dangers of self-medication and use of herbal medicines were also discussed.



Nathan Muyinda facilitating a session

AFRO Webinar: Commemoration of World Patient Safety Day

On the 14TH September the Ministry of Health in partnership with the WHO, World Patient Alliance and CHAIN organized the AFRO region webinar. The event was a scientific meeting of 20 people at Golden Tulip hotel, Kampala with 100 online participants who included officials from MoH, JICA head office, WHO, international and regional participants, regional referral hospitals and other facilities. It was moderated by the DHS GR, Dr. Joseph Okware.

Speakers at the event included Dr. Ernest Konadu Asiedu, Helen Haskell, Dr. Hema Magge, Dr. Joseph Ana, Regina Kamoga, Dr. Olive Ssentumbwe and Dr. Ivan Kamya, who discussed various topics as outlined below.

Speaker	Topic	Learning points
Dr. Ernest Konadu Asiedu, MoH, Ghana	Patient Safety Interventions: Strategies, Achievements and Challenges: the Ghana Experience	Practical examples which can be used for bench marking
Helen Haskell, USA	Global Patient Safety Perspectives	Global patient safety plan and the 7 strategic objectives for patient safety
Dr. Hema Magge, BMGF-USA	The Global Quality Chasm: What is the Role of Quality Improvement in Advancing Global Maternal and Newborn Health Equity at Scale?	Example of Ethiopia Health Care quality initiative and how it improved the quality of maternal and newborn care.

Dr. Joseph Ana, Nigeria	Whole Health System Change for Quality and Safety: 12 Pillars Clinical Governance	Practical example of a multi-stakeholder intervention driven by evidence and context (12 Pillars clinical governance programme) that improved the health system and reduced maternal and child death in Nigeria
Regina Mariam N. Kamoga, CHAIN Uganda	Community Engagement and Empowerment in Patient Safety Practice	What has been done to empower communities to demand better health care services.
Dr. Olive Ssentumbwe, WHO	WHO Standards for Patient Safety Practice for Maternal Newborn and Child Health (MNCH) Services	Enlightenment on the different standards which are a key factor to improve maternal and newborn outcomes.
Dr. Ivan Kamyia, DHO Kiruhura Hospital	Leadership as a Key Factor in Advancing Patient Safety in the National Health System	Practical experience of one of the districts, Kiruhura

National event to commemorate World Patient Safety Day: 17TH September 2021 at MoH compound

The event was attended by 20 participants physically and 68 participants virtually. It was the final celebration of WPSD and was officiated by the Honourable Minister of Health for General Duties Hon. Hanifa Kawooya Bangirana. She welcomed the participants and thanked the partners who supported the WPSD activities and encouraged them to continue working with the ministry to promote patient safety in Uganda. She applauded efforts made to improve maternal, newborn and child health (MNCH) through innovations such as the portable MSCAN which can be used to detect foetal condition for earlier intervention and prevention of prenatal deaths. She committed to continued support to patient safety initiatives.



Hon. Hanifa Kawooya Bangirana- Minister of Health for General Duties

The event was attended by senior officials from MoH including Dr. Henry Mwebesa, Director General of Health Services, and Dr. Charles Olaro, DHS Curative Services, and was moderated by Dr. Aggrey Batesaaki (ACHS-SCAPP-D).

An update on Country Status of Patient Safety Practice in Uganda was presented by Dr. Martin Ssendyona, Acting Commissioner of the Standards, Compliance, Accreditation and Patient Protection Department (SCAPP), along with remarks by WHO on prioritizing Patient Safety in MNCH Services delivery. Regina Kamoga also made a presentation on Patient, Family Engagement and Empowerment in Patient Safety.



Regina making her presentation

Other presentations included:

- Demonstration of the portable MSCAN which can be used to detect foetal condition for earlier intervention and prevention of prenatal deaths.

- Presentations on activities of the PPH committee, which are geared towards reduction of maternal deaths due to postpartum haemorrhage, the leading cause of maternal deaths in Uganda.

Key issues

During the various sessions and dialogues, health workers, VHTs and pregnant women shared their views, concerns and challenges. These included:

Lack of essential items like gloves, mosquito nets and *mama kits* (kits containing gloves, cotton wool, plastic sheets, etc.).

Drug stock out. Due to lack of essential medicines at health facilities, pregnant women are requested to purchase from pharmacies and drug stores, yet many cannot do so due to poverty.

Poor quality packaging of drugs. This causes deterioration of drug quality and efficiency before and during drug use. For example, the papers/envelopes in which tablets are put may be unfit for drug storage, leading to easy contamination and erasing of the prescription details when they get into contact with liquids. The health workers requested proper packaging of drugs.

Limited knowledge on safe use of drugs. Some health workers lack adequate information about various prescription drugs, particularly about appropriate dosing for pregnant women, newborn babies and infants. Health workers also lack up to date information on MNCH medication and treatment guidelines. They were encouraged to seek up-to-date information and to make use of the NDA website and resources. It was noted that some drugs may be recalled, so it is important that health workers remain well informed about medicines.

Self-medication by pregnant women. Pregnant women are not well informed about drug safety and often self-medicate, which could lead to drug misuse and harm.

Use of unapproved herbal medicines. The use of herbal medicines together with conventional medicines was an issue of concern. Many pregnant women who use these medicines are not aware that herbal medicines have active ingredients that if taken together with conventional medicines can affect pregnant women and their unborn babies.

Drug side effects. Pregnant women complained about side effects caused by some medications given during pregnancy. They cited examples of medicines that had a bad smell while others caused nausea and vomiting. They were advised to consult their health workers to establish the cause of the problem, which may not necessarily result from the medication but could be a pregnancy symptom.

Provision of incorrect information to health workers. Some women give incorrect information to health workers while others withhold important information, a situation that could lead to wrong diagnosis and treatment as well as limiting the health workers' support. Such information includes age of the mother, number of children, C-sections one has had, and use of herbal medicines, among others.

Poor referral and transportation system. Sometimes when there is need to refer a patient to higher level facility or hospital there is no ambulance or other transport to transfer the mother, who may also lack the funds to pay for transportation. Most of these cases are emergencies. Mothers and babies may lose their lives under such circumstances.

Disrespect of the VHTs. Some pregnant women do not have trust and respect for the VHTs and nurses and do not follow their instructions.

Failure to access health centres. Pregnant women lack transportation to and from the hospital, leading to delayed hospital visits and inconsistent antenatal appointments. Transport services were further restricted due to the pandemic.

Long distance to the health centres. Pregnant women said, “At times I do not have transport to go for antenatal care due to the long distance.”

Myths and Misconceptions. Culturally, a pregnant woman is not required to reveal her pregnancy until after a certain period. This prevents women from obtaining the necessary care, support and medication in the crucial early stages of pregnancy.

Late detection of pregnancies. Expectant mothers often detect their pregnancies late and meanwhile may be taking medicines which may be harmful for both mother and developing baby.

The COVID-19 pandemic escalated the challenges faced by the mothers and health workers. These include:

- **Health workers got infected with COVID-19** which led to fewer HW working at the health centres. This resulted in work overload, long queues and waiting hours, greatly impacting productivity and increasing the risk of medical errors.
- **Disruption of health services.** All efforts were focused on COVID-19 response and other services received minimal attention.
- **Fear of contracting COVID-19 at health facilities.** Pregnant women feared to come to the facility for fear of contracting the infection, thus missing their antenatal appointments.
- **Loss of jobs.** Many people lost their jobs and men could not support their pregnant wives to attend antenatal care.
- **Gender-based violence** became more common during lockdown. It particularly affected pregnant women, some of whom lost their babies as a result of being badly battered by their husbands.

Recommendations from the dialogue to the various groups were as follows:

NDA

- Increase public awareness and education on medication safety and involve all key healthcare stakeholders including doctors, nurses, midwives, pregnant mothers/women, and VHTs. NDA should carry out community level sensitization on drugs.
- Involve patients as active participants in pharmacovigilance and ensure that pregnant mothers share feedback on the effects of their drugs.
- Organise more regular trainings for health workers to provide them with more information on drugs and medication safety in order to reduce avoidable medication errors.
- Increase sharing of updated information on drugs to the public and community and disseminate widely, using approaches such as social media, radio, TV, public hearings, community dialogues and outreaches.
- Increase awareness on proper drug storage, vigilance on expiry dates and the risks of self-medication, among others.

- Increase visibility on the ground through collaboration with patient organizations and support of medication safety initiatives.
- Work with professional medical associations/councils and schools to promote medication safety.
- Build the capacity of patient organizations, Community Based Organisations (CBOs) and VHTs at the grassroots level on medication safety to enable them raise awareness in the communities.
- Crack down on people selling poor-quality, substandard and counterfeit medicines, a practice rampant in the community.
- Ensure enforcement of laws on drug quality and safety.
- Develop a peer mentorship programme for medication safety advocates.

Health workers and VHTs

- Be equipped with up-to-date information on drugs, and prescribe medicines with which they are familiar in terms of side effects, particularly when dealing with vulnerable patients like pregnant mothers, children and people with chronic diseases.
- Improve communication skills for a better patient/doctor relationship.
- Be respectful and encouraging of socio-cultural aspects that help in improving safe MNCH. However, they should also demystify myths and misconceptions through provision of adequate information and appreciative inquiry.
- VHTs were encouraged to take advantage of any opportunities to gain more knowledge on medication safety and MNCH, so that they are better able to raise awareness in the community. This will also enhance their confidence and gain trust from the community.
- Provide youth-friendly services on sexual reproductive health and MNCH.
- Postnatal care: VHTs and midwives should raise awareness about the importance of postnatal care and should support mothers in this regard. VHTs can also make home visits to ensure both mother and newborn are in good condition, particularly those who may have gone through a difficult experience.
- It is a common practice for women who have been referred by VHTs from the community to a government health facility to instead go to a clinic or traditional birth attendant who may not be able to handle their condition. Some women also discharge themselves from the health facility and go to clinics or TBAs in the community. These practices have resulted in the loss of lives. VHTs were requested to follow up with mothers who have been referred to ensure they have reached the facility.

Pregnant Women

- Pregnant women were cautioned about the dangers of delaying antenatal care and of purchasing drugs from unauthorized drug outlets in their communities. They should always seek care from recognized health facilities.
- Be vigilant about their health and report any drug side effects and any other concerns to the health worker.

- The men were urged to support their wives and make necessary preparations for safe pregnancy and childbirth. They should provide money for transport to antenatal visits, escort their wives to visits, and purchase necessities such as *mama kits*. They are also encouraged to be prepared for emergency situations.
- The men were cautioned against battering their wives.
- A toll-free number to report drug side effects to NDA was provided: 080010999 or USSD CODE *284*99.

CHAIN should:

- Increase awareness in the community on MNCH.
- Advocate for increased access to MNCH services and promote youth-friendly services in health centres to entice young mothers and pregnant women to attend antenatal services.

Pictorial





Mulago Specialised Women and Neonatal Hospital





Komamboga Health center III



Group photo: Participants of the community dialogue on maternal and newborn care at CHAIN offices Kiwenda



Lighting of the New Jinja Bridge