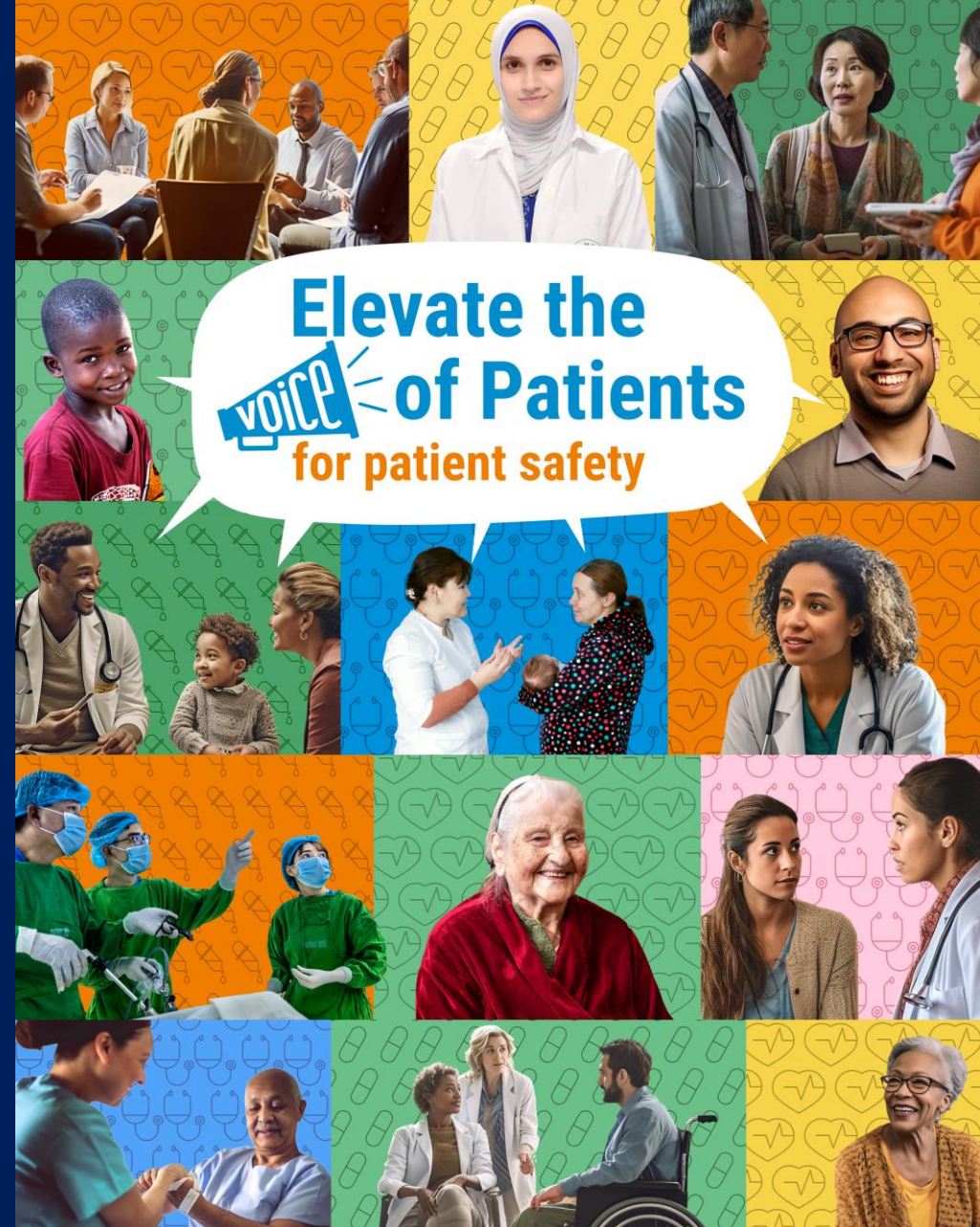


Global Patient Safety Webinar

Patient Engagement for Patient Safety

12:00-13:30 CEST

[WHO Integrated Health Service Hub](#)



Welcome

Dr Blerta Maliqi

Unit Head

Patient Safety and Quality of Care

WHO Headquarters



Housekeeping announcement

 **Language:** English, no interpretation.

Microphones

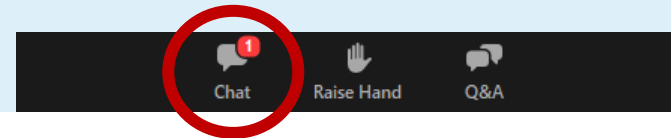
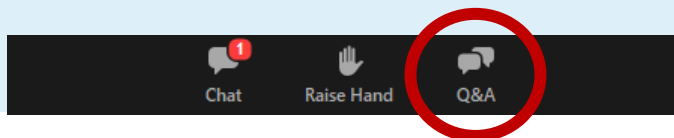
Please keep your microphone muted unless speaking.  Use the microphone icon on the bottom-left of your Zoom screen to mute/unmute.

Chat & ? Q&A

Use the Chat function to introduce yourself and raise any technical issues.
Submit your questions through the Q&A panel.  Click the "Chat" or "Q&A" buttons on your Zoom toolbar.

Reminders

This session is being recorded. Your attendance is consent to be recorded.
Webinar recording and background material will be shared on the WHO website after the event.



Patients for Patient Safety Video

Setting the Scene

Sir Liam Donaldson

WHO Special Envoy for Patient Safety



Bringing patient voices to the policy table

Professor Daphne Kaitelidou

University of Athens

President, Agency for Quality Assurance in Health S.A.

Greece



Empowering patients in day-to-day care: Lessons from the frontlines

Ms Mecciya Majrashi
Senior Specialist
Patient Empowerment
Saudi Patient Safety Center





Global Patient Safety Webinar Series 2025

Patient Engagement for Patient Safety

9 May 2025, 12:00-13:30 CEST

Mecciya Majrashi
Saudi Patient Safety Center





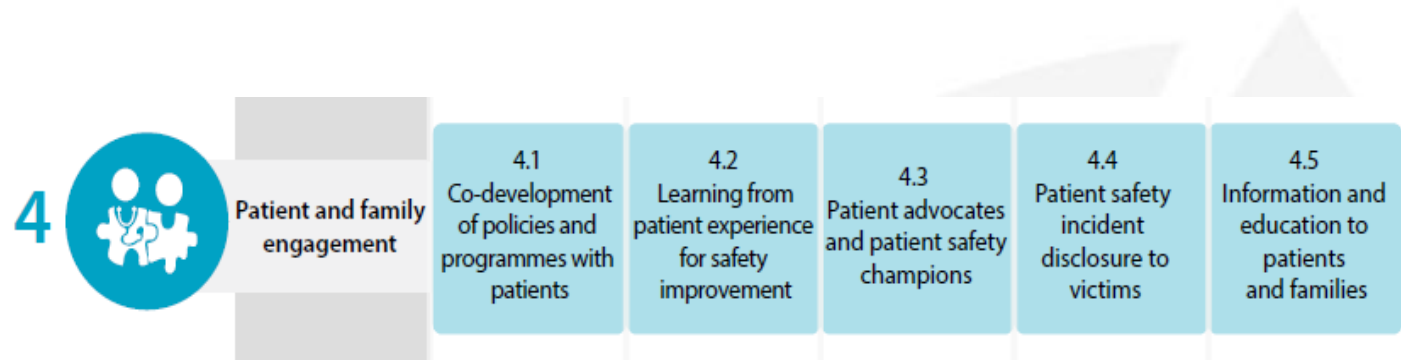
Empowering patients in day-to-day care: Lessons from the frontlines

Mecciya Majrashi

Senior Specialits, Patient Empowerment

Saudi Patient Safety Center





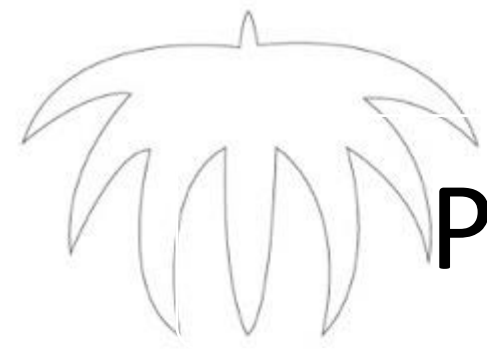
Strategic objective 4:

Engage and empower patients and families to help and support the journey to safer health care

STRATEGY 4.5:

Provide information and education to patients and families for their involvement in self-care and empower them for shared decision-making





Patient Empowerment Initiatives

For Patients & Families

- Patient Empowerment Campaign
- **Patient Safety Caravan**
- Salamah Friends Project:
Empowering Children
- Patient & Family Advisory Council
for Patient Safety

For Healthcare Providers

- Patient Empowerment Course
- Saudi Patient Empowerment
Framework

Patient Empowerment Campaign

2021

70 Hospitals

2022

250 Hospitals



عزيزي المراجع

قم بتحضير ما لديك من معلومات
عن حالتك الصحية قبل موعدك
بوقتٍ كافٍ



معلومات عن تاريخك المرضي ○
العمليات الجراحية التي أجريتها سابقاً ○
أسماء الأدوية التي تتناولها ○
الحساسية التي لديك ○



in f t @SAUDIPSC

المركز السعودي لسلامة المرضى
SAUDI PATIENT SAFETY CENTER

Dear patient

Speak up

- When you feel something is wrong
- Ask your doctor if you do not understand
- Communicate with the medical staff when you see any medical error





SAUDI PATIENT SAFETY CENTER

Dear patient

Tell your doctor about the symptoms you've experienced

- When did it start?
- What makes it worse or better?
- How long did it last?
- What did you take to relieve it?



SAUDI PATIENT SAFETY CENTER

Salamah Friends Project: Empowering Children

2022

12 Motion Graphics in Arabic (English Subtitles)

2023

900 Schools In Riyadh City

136,305 Students

2024/2025

03.000.000 Million



Patient & Family Advisory Council for Patient Safety

2023

8 Members

Riyadh City, Hafr Albaten,
Alqasim



Patient Empowerment Course for Healthcare Providers

2018

6 conducted

2019

6 conducted

2023

Patient Empowerment Course New
version



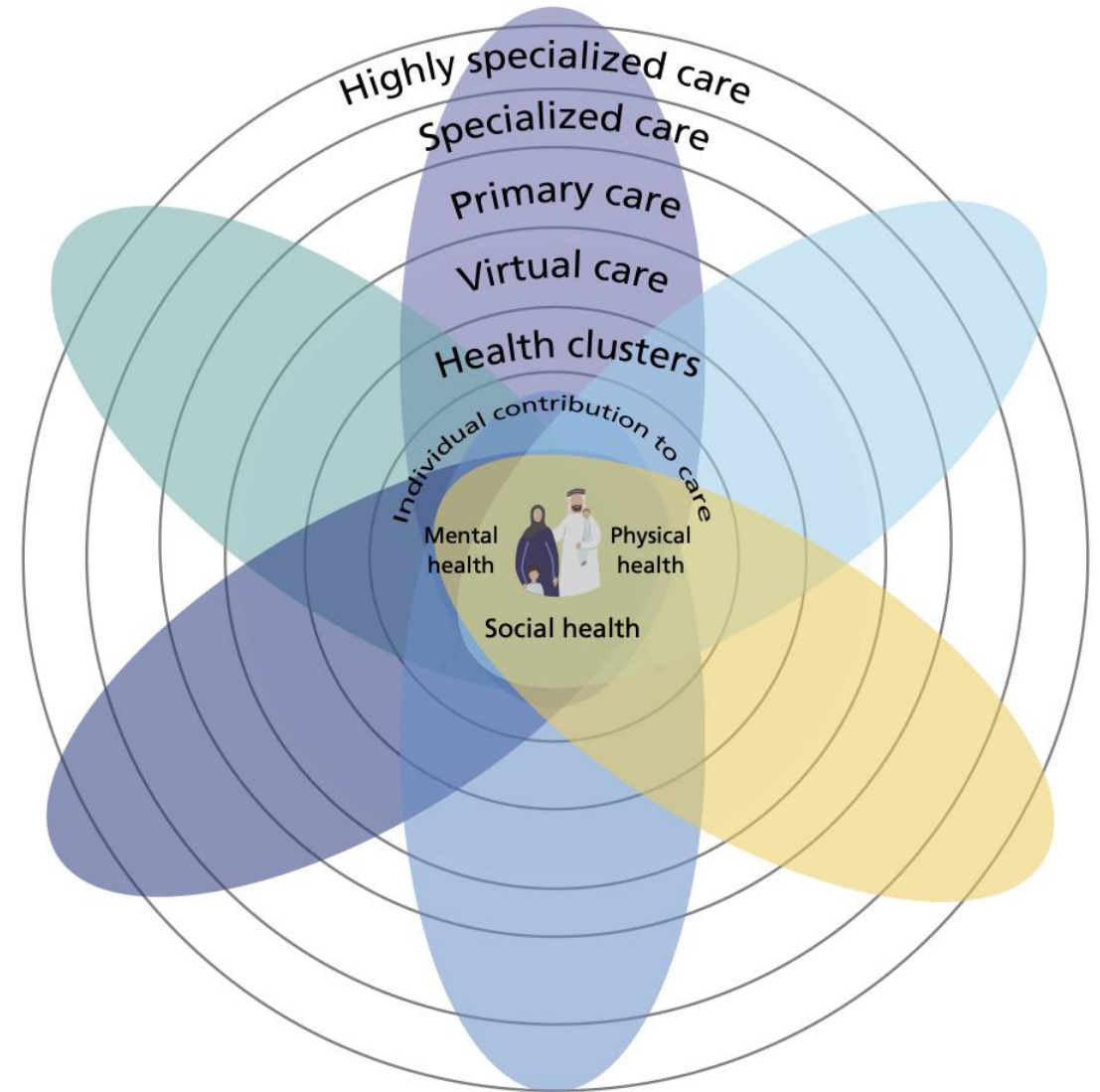


Empowering patients in day-to-day care: Lessons from the frontlines



Health Sector Transformation Strategy

The new model of care ensures safe, swift, beneficiary-centred care is provided efficiently and effectively.



We cannot Do it ALONE



The Role of Patients, Family Members & the General Public in Patient Safety







Empowerment



Paternalistic



Patient Care Partnerships

Integrating or offboarding care team members should be done in a timely manner and with respect and clear communication that prioritizes the needs and preferences of the patient and family.



Patient family Centeredness includes the following :

- **Ask** what matters **most to** the **patient** and the **family**

While **each patient** is **unique**, we do know there are **common priorities** in **care partnerships**, reported by **healthcare consumer** studies and framed by **patient and family-centered principles**.

- Patients and families want to be heard, responded to, and taken seriously.
- They want to be communicated in a way they can ***understand and feel safe and empowered to ask questions.***
- They want to be treated with courtesy, respect, and compassion.
- They want information transparency – to be given full information, along with explanations for treatment recommendations.



What is a patient safety Caravan?

What is a patient safety Caravan?

It is a patient empowerment tool to reach out to the largest possible number of patients and their families while receiving healthcare by visiting the healthcare facility, talking to them, conveying the message of patient empowerment, and providing information that helps them to be effective and empowered members of health care through the Patient Safety Caravan.

It is a hypothetical Caravan that consists of a group of volunteers and specialists who visit patients and their families in hospital departments (inpatient wards, outpatient clinics, emergency, and others) to raise awareness of patient safety by empowering, educating, and supporting them.



Objectives

- Reaching the largest possible number of patients and their families to empower them to improve their safe care.
- Developing and improving patient safety in hospitals and ensuring that patients and companions share the treatment plan with the medical staff.
- Increase volunteers' awareness to learn about patient safety and share it with patients and their families. Partnering with quality & patient safety/patient experience departments within healthcare facilities to activate the concept of patient empowerment within their daily work tasks.

Target Group :

- The patient (health care recipient) or his companion.
- Volunteers (participants) in carrying out the Caravan.
- Quality & patient safety /patient experience departments as (supporters for the implementation of the Caravan.



Advantages of a Patient Safety Caravan

Familiarizing patients and companions with channels to communicate their voice and their role in the treatment plan regarding the health services provided to them through implementing and sharing the toolkit of the Patient Safety Caravan. Moreover, to spread the correct practices of **international patient safety goals** : (correct patient identification, effective communication, infection control, medication safety, ensuring correct site, correct procedure, correct patient surgery, and prevention of falls).



How to do it ?



Patient Safety Caravan steps:



Patient Safety Caravan Toolkit



Before the field visit

- Scheduling the Caravan: determining the date, time, and location (hospital or primary healthcare center).
- Communicating with officials at the facility to obtain approval.
- Requesting local volunteers.
- A remote meeting (online) for the nominated volunteers for a period of one to two hours to explain the Caravan.
- Print the Patient Safety Caravan Toolkit flyers to be distributed to patients or made them available electronically.



During: The day of the field visit

- Proceed to the healthcare facility that has been selected to implement the Patient Safety Caravan.
- Preparing volunteers and distributing tasks among them.
 - Volunteer leader.
 - Volunteer photographer after taking patient's approval.
 - Volunteer speakers.
- Meeting with the responsible person in the facility (facility manager, patient experience manager, or quality and patient safety).
- The start of the tour, where volunteers head with a member of the facility through admission departments, outpatient clinics, emergency departments, and waiting areas.



During

When entering the patient's room:

- Greeting the patient, then introducing themselves.
- Introducing the Caravan and its aim.
- Asking about the patient's name and his/her condition.
- Asking the patients about the extent of/her knowledge of the details of their condition and the doctor in charge.
- Then start a dialogue with the patient according to the questions stated in each brochure and distribute them matching the patient's needs.



During

Distribute brochures to patients:

- **“Be an empowered patient”** brochure is distributed in all sections during the tour.
- **“Be an empowered patient during your hospital stay”** brochure is distributed in hospital admission wards.
- **“Be an empowered patient in the Emergency Department”** brochure is distributed in the emergency department and waiting areas.
- **“Be an empowered patient during your hospital visit”** brochure is distributed in the outpatient department and waiting areas.
- **“Be an empowered patient before and after surgery”** brochure is distributed in the inpatient surgery wards and outpatient surgery clinics.
- **Medication Safety**: list of posters to focus on the theme of **World Patient Safety Day 2022, “Medication without harm”** then 2023,2024, and 2025

This content is to highlight the key action areas are transitions of care and polypharmacy.



After

Share a questionnaire: about the effectiveness of the patient safety caravan by asking the suggested questions below:

1. How satisfied are you with the visit of the “Patient Safety Caravan” team?

Very satisfied - Satisfied - Neutral - Unsatisfied - Very unsatisfied

2. How satisfied are you with the information or patient empowerment brochure?

Very satisfied - Satisfied - Neutral - Unsatisfied - Very unsatisfied

- Kindly, provide us with any suggestions or comments for improvement.



Patient Safety Caravan 2018 – 2020



International Participation
Pakistan

06 Cities around the
Kingdom
Jeddah, Makkah, Qurryat
. Riyadh, Qassim , Jazzan

In collaboration

Execution
06 Months



Patient Safety Caravan

- 2019 **26** Caravans By SPSC
- 2021 **6** Caravans in Pakistan
800 patients
- 2022 **4** Caravan TOT KSA
- 2023 **6** Caravan TOT KSA
- 2024 Ongoing efforts by
healthcare organizations



Patient Safety Caravan Dashboard (Detailed)

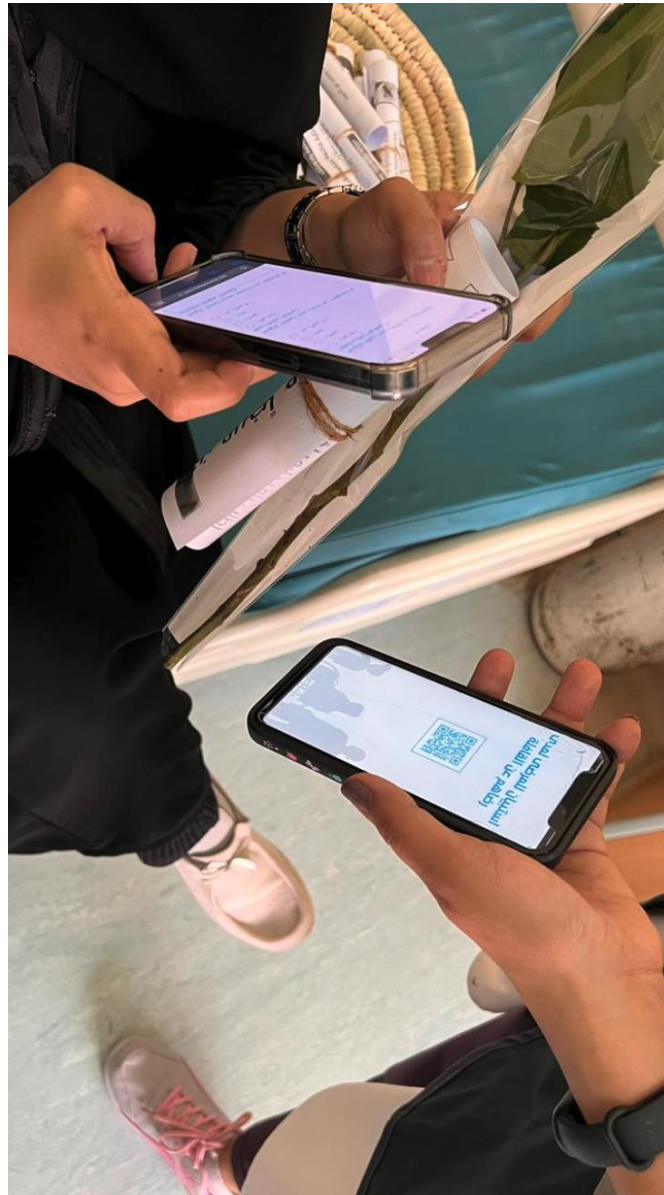
Row Label	Number Of patient	No. Volunteers	Total Volunteering Hours	Return on Investment (ROI)
City Name				
Alqaseem	460	13	52	SAR2,600.00
Jazan	800	116	464	SAR23,200.00
Jeddah	200	7	28	SAR1,400.00
Makkah	785	58	232	SAR11,600.00
Qurayyat	425	36	144	SAR7,200.00
Riyadh	535	14	56	SAR2,800.00
Grand Total	3205	244	976	SAR48,800.00



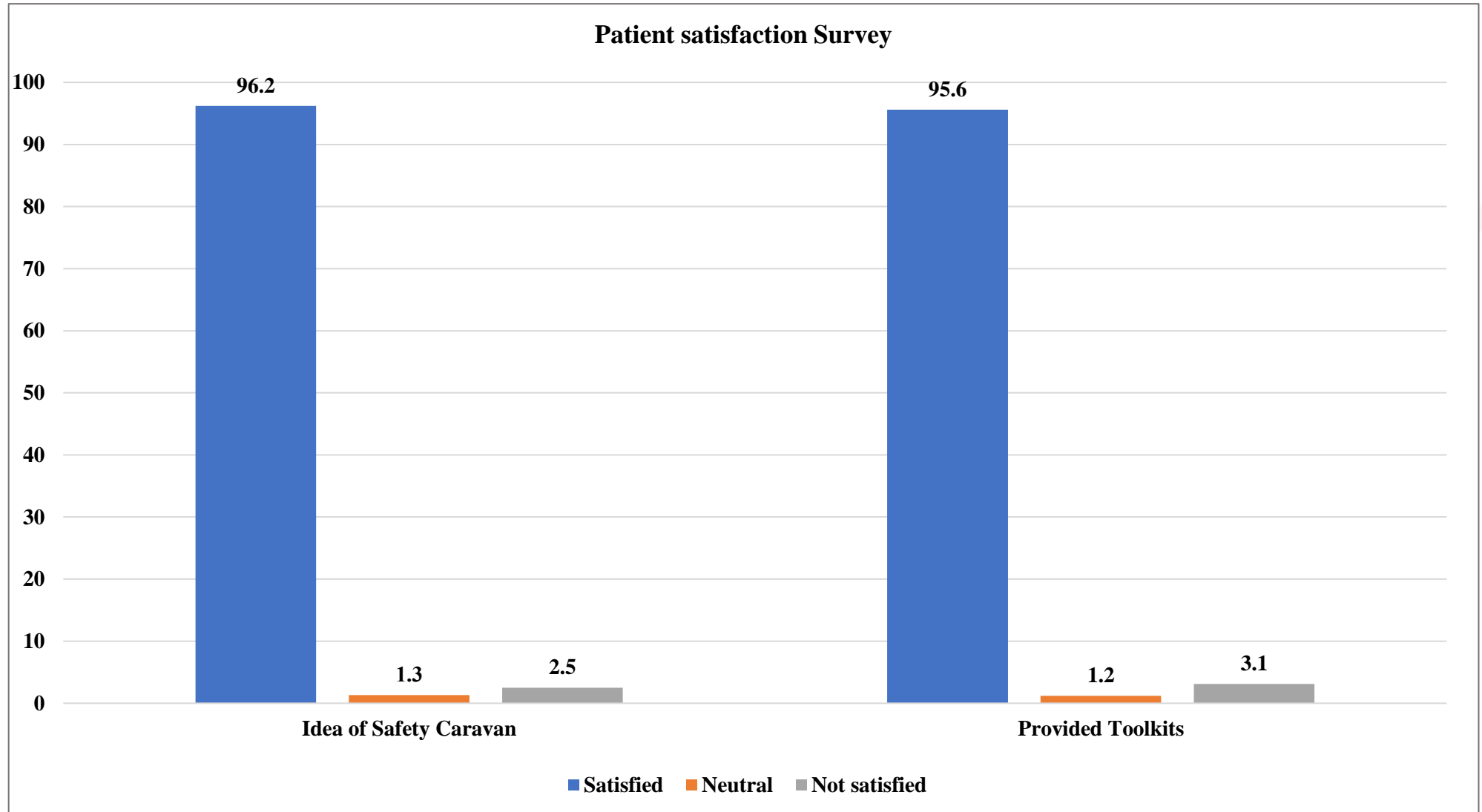
Table 2: Patient reach and volunteer involvement

Hospital	No. of Patients	No. of Volunteers	Volunteering Hours
KFMC*	500	30	30
Al Majama'ah Hospital	440	11	30
Al Yamamah	451	25	30
PMAH*	365	12	30
Hotat Sudair Hospital	300	12	30
Al Artawiyah Hospital	300	13	30
Tumair Hospital	200	14	30
Rumah Hospital	200	12	30
Al Ghat Hospital	200	13	30
King Salam Kidney Disease Center	158	11	30
Az Zulfı Hospital	130	15	30
Total	3244	168	300





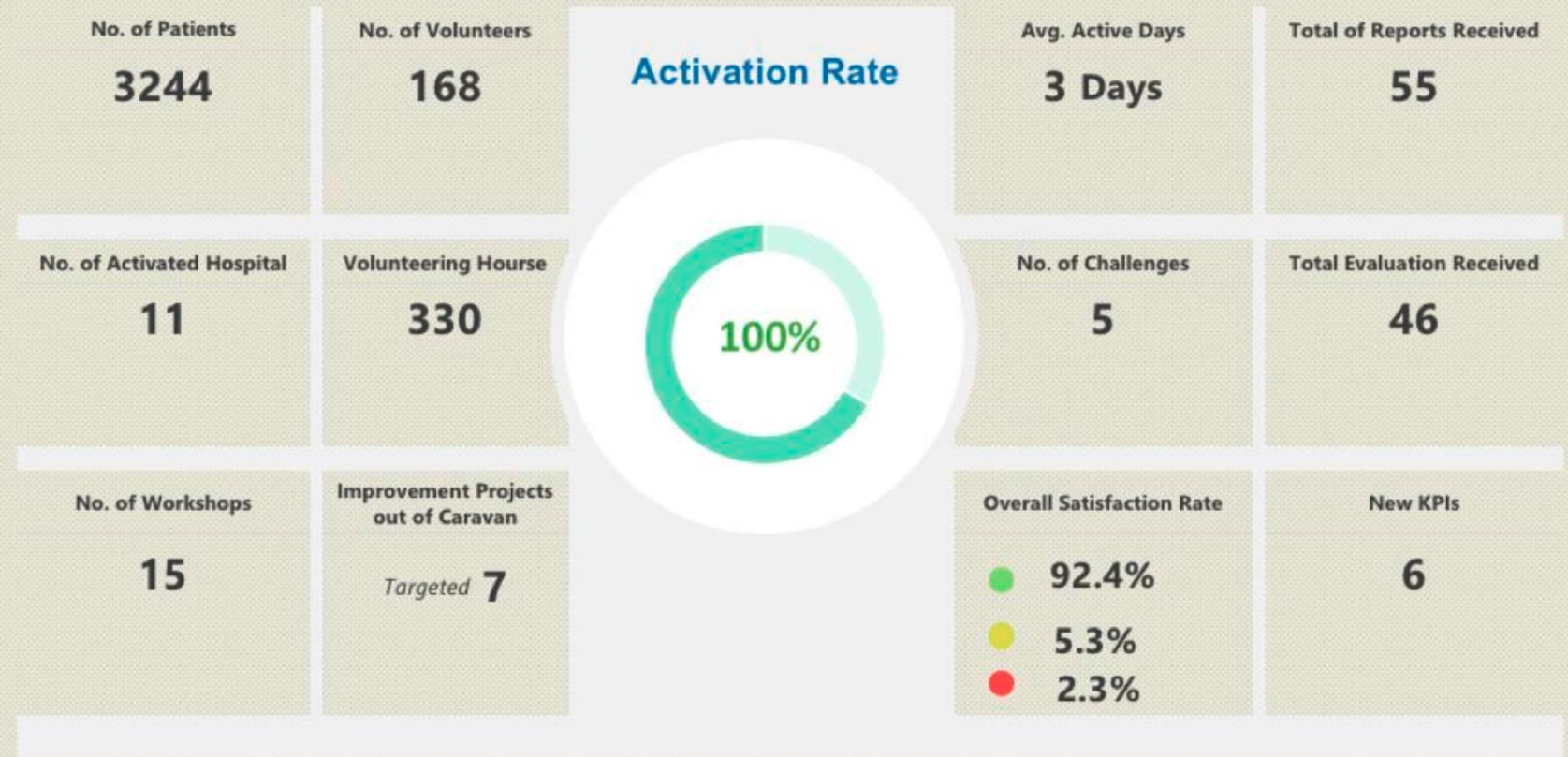




Graph 1: Patient satisfaction on the idea of patient safety caravan and provided toolkits

Patient Safety Caravan Dashboard

Riyadh Second Health Cluster.



WHO Global Conference: Engaging patients for patient safety 13 -14 Sep 2023

Best practices

- Patient safety **caravan**
- Patient safety organisations **implementing** global patient safety action plan
- **Community education** on patient safety empowers their proactive participation in their care – Uganda CHAIN initiative
- Patients' and families - enacting **legislation** to prevent patient harm
- **Co-producing** patient safety initiatives with patients

Thank you



Patient and community-led change

Ms Ruth Nankanja
Founding Director
Sickle Cell Association
Uganda



Patient and community-led change

Presented by Mrs. Ruth Nankanja Mukiibi, BA Educ MUK
Executive Director Sickle Cell Association of Uganda

Introduction

- Patient and family engagement at point of care and community is an activity of setting conditions where patients, family members, clinicians, and hospital staff are all working together as partners to improve the quality and safety of care.
- I will give my experience in two ways, one as a counsellor working with Sickle Cell Association of Uganda and two as a person who is surviving with SCD for the past 51 years.

My experience as a person who has worked in Patient and family engagement

Effective patient engagement requires mutual understanding and respect for all parties involved namely clinicians, patients/families and all partners like patient support groups like Sickle cell Association of Uganda in my case. In cases where patients/families think it's medicines and new discoveries will solve their medical issues, they will not value or even implement what is being taught to them so their clinical course might be worse off as compared to the ones that take advise seriously.

As an organization we do education, psycho-social, genetic and premarital counselling for SCD regarding the daily dos and don'ts for home care management of patients.

Patient/Family Attitude

- Most families with Sickle Cell patients do not want to share information about themselves freely and in most cases they do not take advice, they think they have seen it all and they know it all which does not help them in the long run. An example is we often advise them to always look out for any tiny wound that catches them on the patients ankles and treat it thoroughly in the shortest time possible, most of them do not take this advise and they will remember to look for you after they have developed a serious leg ulcer which is so hard and sometimes impossible to treat.

Clinicians/hospital staff attitude towards patient engagement at point of care.

- Majority of health workers have a feeling that they know it all and are in better position to deliver services so they don't value other stakeholders since they have not been to medical schools this leads to direct insults, abuse and misunderstandings. In my case as a SCD counsellor who has lived with SCD for 51 years, I believe I know the right path any child born with SCD will take, here I am, counselling a couple with a 6 months baby with SCD and I am telling them how I was also diagnosed at 6 months and telling them the likely road map for the baby and the daily routines for that baby to survive . When the doctor hears me advising them, he confronts me and asks me why I am giving this couple so much information yet I am not a trained health worker, then he adds that some of us go to SCD clinics to look for money. This left me perplexed because while doing our work as an organization we never ask for money and everything we do is pro bono

My take home

- Patient /community engagement helps in advocacy for policy and strategic planning at all levels because you get to pick the real issues that are affecting the target population. This has helped us as an organization to even involve patients and families in other districts /regions in the country and are also doing advocacy for improved service delivery in their localities.
- Through engagement at community level, my experience is that even the social well being of patients and families will come in. for example you will find issues of family break ups due to the disease, school drop outs, stigma and discrimination, poverty to mention but a few at this level you bring in community sensitization, dialogues, music dance and drama educating communities on how to accommodate the affected individual/family.

Continued

- We even go to the extent of imparting livelihood skills to improve their well being and this restores hope to them to the extent that some make village saving groups and start small businesses to be able to cater for their medical fares and nutrition.
- It is important to include patient and family engagement t both point of care and community level for better clinical and social outcomes

From caregiver to advocate: A story of empowerment

Ms Josie Liow

Co-Chair

SingHealth Patient Advocacy Network (SPAN)

Singapore



At the Singapore Kindness Movement, we aim to
promote care harmony and elevate the experience for
patients through community kindness.

**MAY
KINDNESS
BE WITH YOU**



FROM CAREGIVER TO ADVOCATE

-

A STORY OF EMPOWERMENT

JOSIE LIOW

CO-CHAIR, SINGHEALTH PATIENT ADVOCACY NETWORK

SINGAPORE

Josie care journey

Lianhe Zaobao – Chinese Newspaper Dec 18, 2013

THE STRAITS TIMES

Saturday Feb 10, 2024



Heart transplant recipient Kong Xiang Hui (third from left) with (from left) Assistant Professor Tan Teing Ek, head of National Heart Centre Singapore's (NHCS) department of cardiothoracic surgery and director of its Heart Transplant & Mechanical Assist Device Programme, Ms Kong's mother, Josie Low, and Mr Joel Tay, principal clinical coordinator at NHCS Heart and Lung Transplant Unit. ST PHOTO: JASON QUINN

Woman can finally discard 9kg of pump devices after heart transplant

But donors are hard to come by and number on waiting list for organ could rise

Heart donors are hard to come by, but the use of artificial heart pumps, known as ventricular assist devices, has helped to keep patients alive while they await a heart transplant.

In the past, at least one patient on the waiting list would die each year while waiting for a heart, but this number has dropped to an average of one in three years with the use of artificial heart pumps, according to data from the National Heart Centre Singapore (NHCS).

I feel sad about having heart failure, but I am glad that I got a new lease of life," Ms Kong, who has two older brothers, told The Straits Times in a recent interview.

Singapore's first heart transplant was performed in July 1990. 38 more have been carried out here. All of them were at NHCS, which handles close to 3,000 organ donation cases, but healthy hearts are usually found in the younger population while brain death donors tend to be older individuals who may have multiple health conditions, he said.

Patients cannot be above 65 to get on the waiting list, but suitable patients for heart transplants tend to be younger than 60 years old,



Left ventricular assist device, which pumps blood from the lower left heart chamber, the main pumping chamber of the heart, to the rest of the body.

Ms Kong was like any healthy teenager until late 2002, when she came down with a "long-lasting flu". When she showed no improvement and became very weak one night, her parents took her to the emergency department.

"It was fortunate that we took her to the hospital then, before her body started to collapse. If she had collapsed at home, maybe it would have been too late for the same reason," said her mother, Ms Josie Low, 66, who has been the Singapore-based director of global operations with an American multinational company before she decided to retire to take care of her daughter in early 2008.

The next day, she and her husband, now 71, were told that their daughter could be discharged in a day or two. However, not long afterwards, Ms Kong's body started to shut down.

She was transferred to NHCS, where she was put on an extracorporeal membrane oxygenation machine that took over her heart and lungs temporarily, oxygenating her blood outside her body. After about 60 days, she had the battery-operated pump implanted in her chest to help her weakened left ventricle pump blood.

Ms Kong's ingrained health insurance plan, her mother's Medi-Save, and subsidies covered a big part of the medical bills, which have amounted to more than \$100,000 so far. The bill includes her medication and medical supplies for the heart pump.

With the implant, Ms Kong did not think about getting a heart transplant until 2008, when her condition deteriorated and a second device had to be implanted to buy her time to wait for a heart.

Ms Kong is now on medications that decrease the activity of her immune system and prevent it from attacking her new heart. She wears a mask every time she is out of the house.

Prof Tan said the median survival rate for a heart transplant patient is 10 years, though the longest surviving patient lived 29 years.

Ms Kong is no longer weighed down by devices everywhere she goes, and six months after the transplant, she got into a swimming pool for the first time as an adult.

"After the transplant, I feel very free. I can eat all kinds of nonmeat except raw food," she said.

The diploma holder in tourism and hospitality management has a busy life. She tries not to dwell on the fact that her transplant heart may fail one day. "I take it one day at a time," she said.

pyetv@nhp.com.sg

小型心泵让女生迎新

18岁最年轻“换”者

小型人工心泵Heartware只有高尔夫球般大小，能完全嵌入心尖下方的心包内，适合体型小的患者。至今，本地已有10个病人安装这款小型心泵。

杨晴 报道
yangm@nhp.com.sg

去年圣诞节前一场的感冒没什么大碍的小感冒，却导致18岁女生黄祥惠的心脏严重衰竭，得植入人工心泵来代替心脏泵血。

植入的人工心泵Heartware当时刚引进本地不久，黄祥惠成为安装这种小型心泵的最年轻患者。

今年18岁的黄祥惠在去年11月间，怀疑被哥哥传染患上感冒，看了四次家庭医生都无法恢复，而且身体越来越虚弱，还出现气短、腹部不舒服、脸色苍白等状况。她的

父母于是将她紧急送院。

在做了电脑断层扫描(CT Scan)后，医生发现她的心脏肿大并有血块，而且肺部积水，左心室无法泵血，心脏功能只剩15%，远低于正常人的60%至80%。这种扩张性心脏病(dilated cardiomyopathy)导致心脏无法收缩而松懈放大，不过造成黄祥惠心脏衰竭的原因不明。

医院先为她植入主动转气球装置(Cath-Aortic Balloon Pump)，协助左心室泵血到动脉。然后由加拿大国家心脏中心派人到坡进行体外膜肺氧合(extracorporeal

membrane oxygenation, 简称ECMO)急救，以机器暂时取代心脏，为身体提供血供。10天后，ECMO系统移除，但主动球气泵和药物仍无法恢复黄祥惠的心脏功能。加拿大心脏中心决定为她植入Heartware心泵。

心脏中心心胸外科部门顾问医生孙嘉庆说，黄祥惠体型小，只有38公斤，之前较大的心泵得在腹部开口植入胸侧，不适合她。相比之下，Heartware只有高尔夫球般大小，能完全嵌入心尖下方的心包(心腔膜腔)内。

这款迷你心泵重160克，由钛合金制成，利用磁悬浮技术制造律动装置，将左心室的血液泵到动脉。不过病人使用时需插电连在心泵充电。由于需要服用抗凝血药，病人血液被泵到胸腔，因此必须避免剧烈运动和性行为。

至今，本地已有10个病人安装Heartware，黄祥惠的年纪最小。初期，安装其他款式的心泵辅助器的病人中，还有年纪比她较小的。

去年，黄祥惠在去医院度过圣诞节、除夕夜手术。今年1月她在医院庆祝19岁生日。

等待合适心脏移植手术

心泵不能一安永逸。虽然少数病人在安装心泵后心脏功能恢复过来，但多数还是得换心。在加拿大心脏中心每年进行的约2起心脏移植手术，目前等候名单上有20多人，平均等候期为一年半。之前无病时，也没有家养心脏病狗的黄祥惠现在在名单上。

黄祥惠的母亲廖秋莹(37岁，跨国公司区域总监)回忆起一年前这场令人煎熬的战役时，还是心有不舍。她说：“我们可以...”



黄祥惠身高约1.64米，体重不到40公斤。她体型小，不适合植入胸腔的较大人造心泵。她植入小型心泵后，现在是不方便的装置变得轻巧如玩具，避免伤口和电池包漏水。(杨晴摄)

Small heart assist gives girl a new life

18 years old girl, the youngest patient with the device implant

... after many hours of checks, doctors found that her organs are shutting down especially her heart was swollen with a blood clot...

... 10 days later, the EMCO was removed but the balloon pump and medication was unable to restore her heart back to normal...NHCS Doctor decided with Xiang Hui's parent to implant the HeartWare LVAD for her.

The Daily Reality as a Caregiver at Point of Care

- Managing Medications
- Understanding medical terms
- Hospital Appointment
- School Arrangements
- Emotional Support
- Financial Planning

***"I had to become more than
just a mom"***



From Personal to Purpose – support a bigger community

- Joined SingHealth Patient Advocacy Network (SPAN) as co-chair, Year 2022
- Driving patient advocacy within the healthcare system
- Building partnerships, fostering a relationship-focused care

“Our challenges become my calling to partner with healthcare teams for a safer systems & experience”

HUMAN helping HUMAN



Patient-led leadership & support from domain leaders

Mentors



Ai Ling Sim-Devadas



Ellil Mathiyan

Co-Chairs



Chew Kim Soon



Josie Liow

Core Team Members



James Kwok



K Prabu Naidu



Lim Peck Seah



Nicholas Sim

Advisors from SingHealth (domain leaders)



Prof Tan Kok Hian
Group Director & Senior Associate Dean
Institute for Patient Safety & Quality



Dr Tracy Carol Ayre
Group Chief Nurse



Ms Audrey Lau
Group Chief Communications Officer

Creating change at Healthcare cluster level (policy & structure)

Guided by Mission, Vision, Core Values & Strategic Thrusts



SingHealth Patient Advocacy Network

MISSION

To advocate partnership-in-care between healthcare professionals and patients to enhance experience.

VISION

Empowered patients. At the heart of quality healthcare.

CORE VALUES

Compassion. Integrity. Collaboration.

STRATEGIC THRUSTS

Empowered patients. Engaged professionals. Enhanced care.

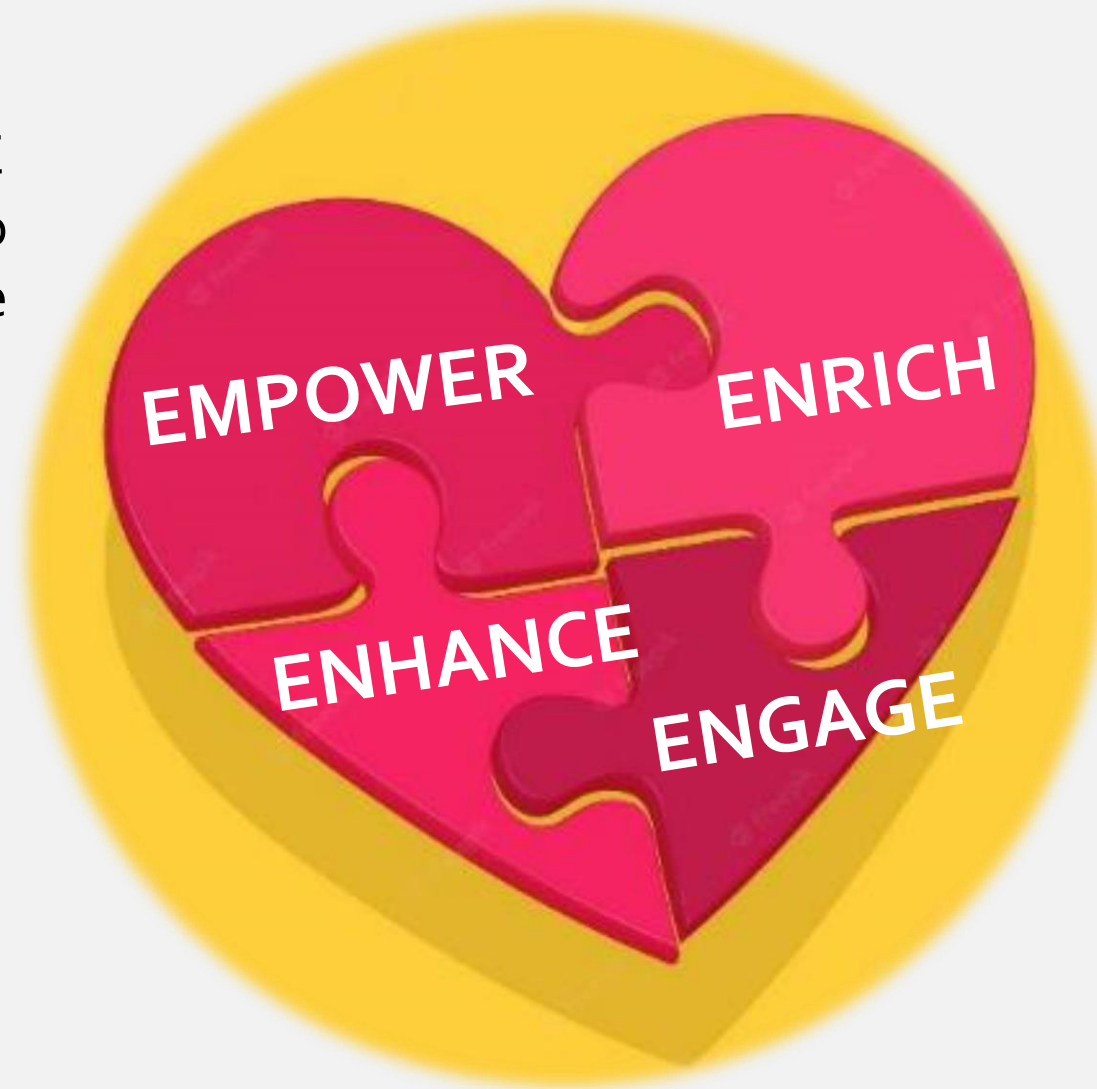
A Patient-led Structure and Approach

How Patient Advocates can be part of the Healthcare journey

The SPAN 4Es Steps to becoming an effective patient advocate

EMPOWER self to TAKE CHARGE. Stay Positive to represent the perspective of the patient/family respectfully.

ENHANCE with collaboration to IMPROVE HEALTHCARE & SAFETY OUTCOMES for patients and the healthcare system.



ENRICH self with relevant KNOWLEDGE & SKILLS to be an impactful Patient Advocate.

ENGAGE and be involved. PARTNER & PARTICIPATE to be part of the patient's healthcare solution.

Enriching & Enagaging advocates and healthcare teams to empower thought leaders

SingHealth Patient Advocacy Network (SPAN) - Patient Advocate Communication Training (PACT) -SPAN-PACT™

A Programme for Effective Communication of Patients' Perspective

- **9** workshops since launched in 2020
- **61** new SPAN advocates attended (as of July 2024).
- **100%** of learners felt that content relevant to advocacy work and satisfied with the programme.



Six new SPAN Advocates attended the PACT training workshop on 10 July 2024.

" I learnt a lot from everyone's contribution and experiences. The session was very helpful, and I am thankful that we were given the tools to prep us for this journey." ~ Cindy ~

SingHealth Patient Advocacy Network (SPAN) - Creating the Best Patient Experience (BPeX) – SPAN-BPeX™

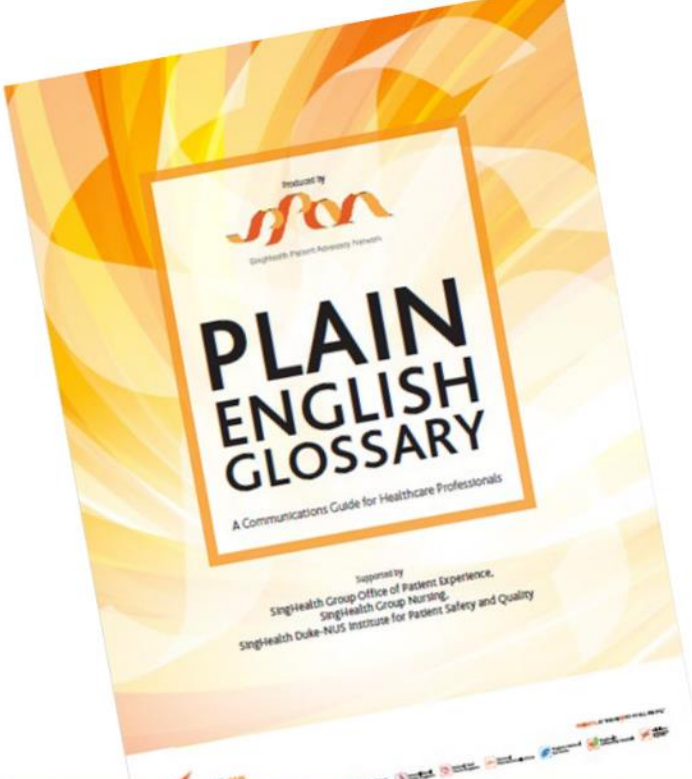
- **5** workshops since launched in 2022
- **186** nursing leaders attended (as of Aug 2024).
- **92.7%** of learners were satisfied with the programme.

"Hearing perspectives from others especially through patients & caregivers themselves who may be our blind spots. Helped me understand better about what matters to them." ~ Learner , Nursing ~



Led and partnered healthcare professionals to co-develop the Plain English Glossary

To strengthen communications for enhanced patient safety & experience



The cover of the 'Plain English Glossary' is orange and white. It features the Singapore Patient Agency Network logo at the top. The title 'PLAIN ENGLISH GLOSSARY' is prominently displayed in the center, with the subtitle 'A Communications Guide for Healthcare Professionals' below it. At the bottom, it lists sponsors: SingHealth Group Office of Patient Experience, SingHealth Group Nursing, and SingHealth Duke-NUS Institute for Patient Safety and Quality.

PLAIN ENGLISH GLOSSARY


A

Abscess
Layman's explanation: Bump on skin or a painful swelling.
Used in a sentence: If you see a bump on your skin or a painful swelling, please tell your doctor or nurse.

Acute
Layman's explanation: Sudden.
Used in a sentence: If you feel a sudden loss of hearing in the next few weeks after your discharge, please go to the nearest A&E immediately.

Acute Retention of Urine (ARU)
Layman's explanation: Cannot pass urine properly.
Used in a sentence: If you cannot pass urine properly, please see the doctor.

Advance Care Planning (ACP)
Layman's explanation: How you would like to be cared for should you become unable to speak for yourself.
Used in a sentence: We would like to discuss and write down how you would like to be cared for should you become unable to speak for yourself.




Ambulant
Layman's explanation: Able to move around by himself.
Used in a sentence: Mr Tan is able to move around by himself.

Ambulate
Layman's explanation: Moving around.
Used in a sentence: Your father needs help with moving around.

Asymptomatic Microscopic Haematuria (AMH)
Layman's explanation: Found blood in your urine during the test without you having any urine symptoms.
Used in a sentence: We found blood in your urine during the test without you having any urine symptoms.

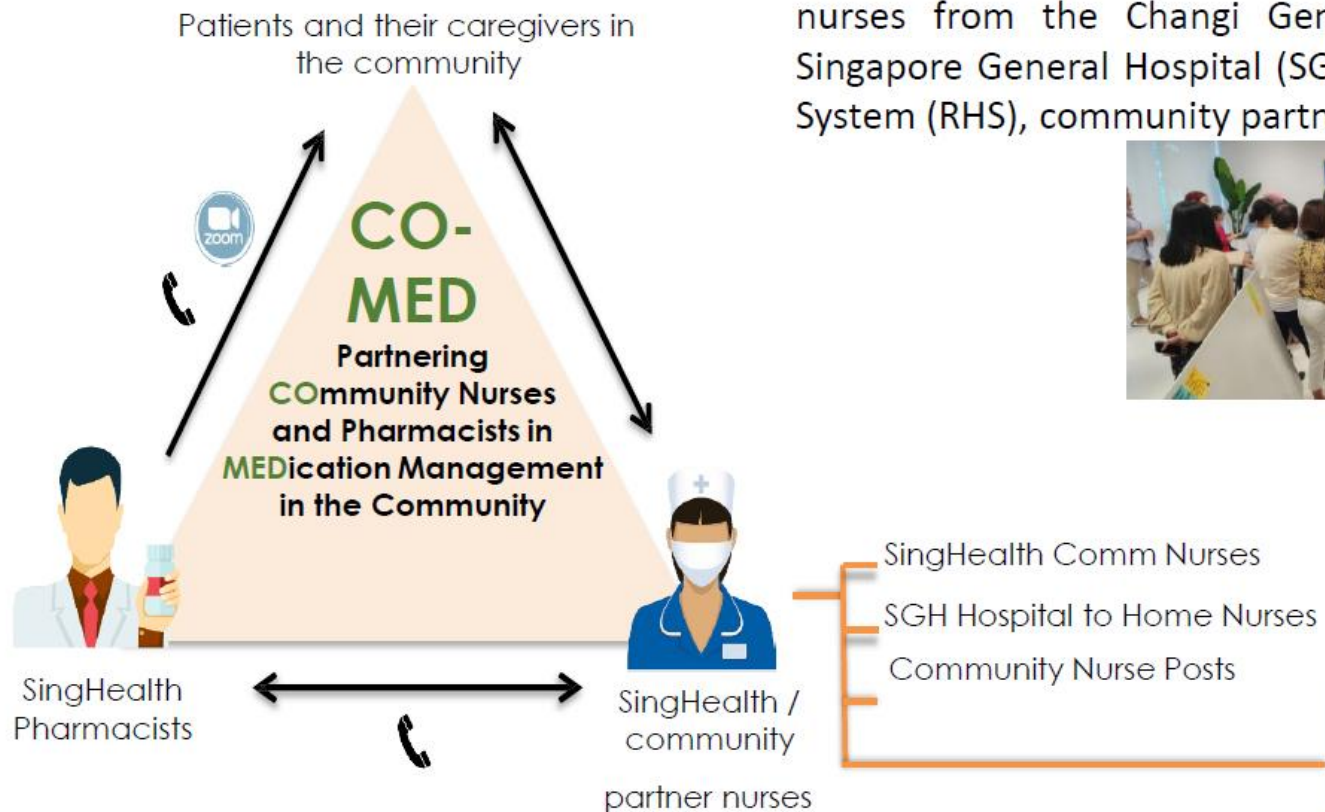
Please scan the QR Code for a copy of the Plain English Glossary



*CO-management of **MED**ication in the community *Ground Up Reach Up to Scale (COMED GURUS)*

- Elderly
- Living alone
- Cognitive / mental conditions
- Require assistance to manage meds

- The COMED GURUS is a SingHealth Cluster improvement project with following goals:
 - ✓ Main goal: Improve the **Medication Adherence** of the *patients in community*
 - ✓ **Sub-goal:** Improve the **Medication Literacy** of the *patients in community*
- A multi-disciplinary project team. which comprises doctors, pharmacists, community nurses from the Changi General Hospital (CGH), Sengkang General Hospital (SKH), Singapore General Hospital (SGH), SingHealth Polyclinic (SHP), SingHealth Regional Health System (RHS), community partners and SPAN patient advocates.



Collaborate with healthcare facility to co-create the future patient journey

Building SingHealth's New Hospital The Eastern General Hospital's (EGH) Future Patient Journey :

- provided patient/caregiver perspectives into the EGH's digital hospital planning



Collaborate with MOH to provide patient's perspectives on digital healthcare

MOH Digital Master Plan (FY 2025 – FY 2029) Consultation

- provided ground-up perspectives on digital healthcare priorities.
- **SPAN's Key Recommendations:**
 - Implemented tiered data access for healthcare providers
 - Created personalised health dashboards for patient data management
 - Developed condition-specific, research-backed health advisories
 - Built single unified health app for streamlined processes

Collaborate with MOH-Consumers Engagement & Education Workgroup to provide patient's perspectives on education material for the patient

Example : Patient education aids on Spirometry for lung conditions and Bronchodilator inhalers for chronic obstructive pulmonary disease (COPD)

Stakeholder comments

- 1) Use More Engaging Design Elements: Implementing a more vibrant design with color-coded sections or **bolded key points** could help.
- 2) The aids could benefit from **more visuals**, such as diagrams showing how spirometry works or illustrations of how to properly use inhalers. These would make the aids more engaging and help patients better understand the information.
- 3) These patient education aids might not be as helpful as intended because they **rely heavily on text without sufficient visual aids or diagrams**, which can be a challenge for patients or carers who are **more visual learners or have lower health literacy**. Features: Including links to **demonstration videos or online resources for correct inhaler usage** would enhance learning and provide further clarification.

ACE's comments

- 1) We have reviewed the **bolding of words for appropriateness and changes were made throughout the document.**
- 2) We have added a **weblink using colourful visual elements** that directs readers to videos that explain the correct way to use different inhalers. **As patient education aids are designed to be concise, we have imposed a length of no more than one-to-two pages.**
- 3) We have added a **weblink using colourful visual elements** that directs readers to videos that explain the correct way to use different inhalers: <https://www.ace-hta.gov.sg/healthcare-professionals/cues/topic/inhaler-technique-videos>

~ MOH CEE Team 27 Nov 2024 ~

Updated factsheets can be viewed on ACE website:
<https://www.ace-hta.gov.sg/Patients-And-Community/Educational-Resources>

In summary, 285 engagement/projects since 2017

Speaking engagement, project judging and improvement projects related to patient safety & patient experience, with sharing of experiences through publications:

Focus Group Discussion :

e.g., Redesigning Fall-Risk Pamphlet (NCCS)



Provide User experience input as a patient/caregiver



Speaking Engagement :

Education Conference 2024, Transition to Care (TTC, Nursing), Patient-centred Telehealth, Singapore Healthcare Management Conference 2024 and so on.



Publication

Journal of Patient Safety and Healthcare Quality
2023; 2(2): 113 - 120
<https://doi.org/10.59439/V02N02A07>

The Patient and Healthcare Team CARE PLEDGE™

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ABSTRACT

The Patient and Healthcare Team CARE PLEDGE™, encapsulated by the acronym SCRIPT, consists of six fundamental actions (Safeguard, Communicate, Respect, Inform, Partner, and Trust). This collaborative initiative, known in short, as the CARE PLEDGE™, was initiated through a partnership between the SingHealth Patient Advocacy Network and SingHealth leadership and has garnered strong support from various patient care organizations. Developed collectively by patients, caregivers, and healthcare professionals, the pledge seeks to foster a secure and mutually respectful healthcare environment for both patients and staff. It is anticipated that the widespread adoption and adaptation of this pledge will contribute to the enhancement of patient safety, the improvement of patient experiences, and the prevention of healthcare worker abuse.

Conference Award Judging

- Singapore Healthcare Management Conference 2024
- Singapore Health Quality Service Awards 2022 to 2024
- Singapore Health Inspirational Patient & Caregiver Awards 2022 to 2025

SPAN in Advisory Panel, Commissioning Committee, Research Projects, Cluster Improvement Project

- Member of SingHealth Population Health Academic Advisory Panel
- Member of Research Projects - Centre for Population Health Research and Implementation (CPHRI)
- Emergency Medicine Building (EMD) Commissioning Committee
- Elective Care Center & National Dental Centre Singapore (ECC & NDCS) Commissioning Committee
- CO-MED GURUS

Bring together patient organizations & healthcare teams to bring about greater awareness and partnership

Annual Singapore Health Patient Advocate Connection (SPACe)

Organized by SingHealth Patient Advocacy Network

Committee members: SPAN advocates & healthcare professionals

1. To **grow patient advocacy** in Singapore
2. To **raise awareness** on the importance of **partnering patients** to improve care quality
3. To provide a platform for **collaboration opportunities** between patients/caregivers and healthcare providers



3rd edition of Singapore Health Patient Advocate Connection (SPACe) Sep 2024

Patients and/or caregivers get acquainted with new ideas, share lived experiences, best practices, and become enabled to play active roles in improving care.

The Patient & Healthcare Team Care Pledge

Co-created with staff, patients and caregivers



The Singapore Care Partnership Survey (CAPS)

To measure where we are in terms of care partnership and to identify areas of improvement



Recognizing patient partnership

Recognised SPAN Advocates who actively contributed to healthcare improvement by partnering healthcare teams

SPAN-IMPACT Learning Award – 9 awardees

SPAN-IMPACT Excellence Award – 2 awardees

SPAN Long Service Award - 10 awardees

YouShine Award - SPACe 2023 & 2024



Embed patient & family engagement in patient safety & improvement platforms to strengthen high reliability systems





None of us

is as good as

ALL OF US

Connecting the dots

Ms Sue Sheridan

Founding Member

Patients for Patient Safety US



Poll




Panel discussion





Scan me!

Communities of Practice (3)

<p>Private</p> 		<p>Private</p> 
<p>Global Patient Safety Network</p>	<p>IPC Global Community of Practice</p>	<p>Global Learning Laboratory for Quality of Care</p>
<p>2469 members</p>	<p>1637 members</p>	<p>1974 members</p>
<p>Joined</p>	<p>Joined</p>	<p>Joined</p>
<p>Go to Community of practices</p>	<p>Go to Community of practices</p>	<p>Go to Community of practices</p>

Thank you

For more information, please contact:
patientsafety@who.int

[WHO Integrated Health Service Hub](#)

