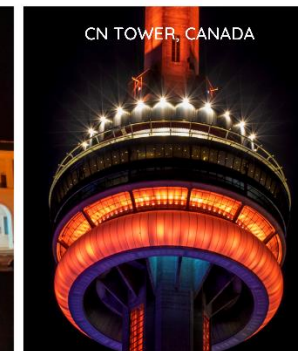
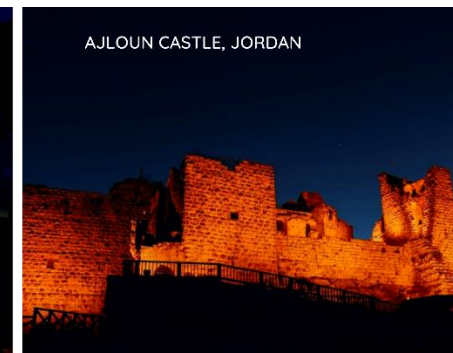


Global Celebrations of World Patient Safety Day, 17 September 2022



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World Patient Safety Day

World Patient Safety Day (WPSD) is an official [World Health Organization \(WHO\) global public health day](#). It brings together patients, families, caregivers, communities, health workers, health care leaders and policy-makers across the world to:

- 💊 increase public awareness and enhance global understanding of patient safety;
- 💊 engage relevant stakeholders and work towards global solidarity and required action; and
- 💊 share simple and proven strategies and tools to improve the safety of health care services.

The journey of World Patient Safety Day

- 💊 May 2019: The Seventy-second World Health Assembly adopted [resolution WHA72.6 on “Global action on patient safety”](#) and established a WPSD to be observed annually on 17 September.
- 💊 17 September 2019: The first-ever WPSD's theme was “Patient Safety: A global health priority”, and the slogan was “Speak up for patient safety!”. It was aimed at establishing the day's legacy and highlighting the need for identifying patient safety as a strategic priority in countries' efforts towards universal health coverage.
- 💊 17 September 2020: “Health worker safety: a priority for patient safety” was selected as the theme of WPSD 2020, with the slogan “Safe health workers, safe patients”. The day highlighted the challenges faced by health workers during the COVID-19 pandemic, and interlinkages of health worker safety with patient safety.
- 💊 17 September 2021: Through the theme “Safe maternal and newborn care” and slogan “Act now for safe and respectful childbirth!”, WPSD 2021 was devoted to prioritizing and addressing safety in maternal and newborn care, particularly around the time of childbirth, when most harm occurs.
- 💊 17 September 2022: “Medication Safety” was chosen as the focus for WPSD 2022 due to the substantial burden of medication-related harm at all levels of care, warranting global action.

World Patient Safety Day 2022

Medications are the most commonly used medical products in health care. Every person around the world will, at some point in their life, take medications to prevent or treat illness. However, medications sometimes cause serious harm if incorrectly stored, prescribed, dispensed, or administered, or if monitored insufficiently.

Medication errors are a main cause of patient harm, which, in severe circumstances, can lead to disability and death. They occur when weak medication systems and human factors such as fatigue, poor environmental conditions or staff shortages affect the safety of the medication use process. The ongoing COVID-19 pandemic has significantly increased the risk of medication errors and associated medication-related harm.

In response, “**Medication Safety**” was selected as the theme for WPSD 2022. The theme builds on the ongoing efforts of the [WHO Global Patient Safety Challenge: Medication Without Harm](#). It also provides much-needed impetus to take urgent action for reducing medication-related harm through strengthening systems and practices of medication use. The slogan of WPSD 2022 – “**Medication Without Harm**” – aims to focus attention on making the process of medication use safer and free from harm, and to galvanize action on the third WHO Global Patient Safety Challenge: *Medication Without Harm* by calling on all stakeholders to prioritize medication safety and address unsafe practices and system weaknesses, with a special focus on the three main causes of avoidable medication-related harm: high-risk situations, transitions of care and polypharmacy.

Theme
Medication Safety

Slogan
Medication Without Harm

World Patient Safety Day 2022 objectives

- 🔗 Raise global awareness of the high burden of medication-related harm due to medication errors and unsafe practices and advocate urgent action to improve medication safety.
- 🔗 Engage key stakeholders and partners in the efforts to prevent medication errors and reduce medication-related harm.
- 🔗 Empower patients and families to be actively involved in the safe use of medication.
- 🔗 Scale up implementation of the third WHO Global Patient Safety Challenge: *Medication Without Harm*, which aims to reduce severe, medication-related harm by 50%, globally.

World Patient Safety Day 2022 supports the implementation of the medication safety-related actions in the [Global Patient Safety Action Plan 2021–2030](#).

WHO headquarters, regional and country events

WHO headquarters

On 14 September, the World Health Organization headquarters held a media briefing on COVID-19 and other global health issues. At this media briefing, Dr Tedros Adhanom Ghebreyesus, Director-General of WHO, [promoted the upcoming World Patient Safety Day](#) (video time: 10:47–12:35). Dr Tedros turned a spotlight on the fact that medicines are powerful tools for protecting health – but medicines that are wrongly prescribed, taken incorrectly or are of poor quality can cause serious harm and even death.

The WHO headquarters Patient Safety Flagship organized a [Global virtual event: “Medication Without Harm”](#) on 15 September 2022 to bring the world together to commemorate WPSD. A total of 5191 persons from 165 countries registered for the event, and 1508 participants from 122 countries attended the global event.

The opening remarks were provided by the two co-chairs of the WHO World Patient Safety Day Steering Committee: Dr Zsuzsanna Jakab, WHO Deputy Director-General, and Rt Hon Mr Jeremy Hunt, chair of the Health and Social Care Select Committee, United Kingdom of Great Britain and Northern Ireland, who currently serves as the United Kingdom Chancellor of the Exchequer. The keynote address *Medication safety: a global strategic imperative* was delivered by Sir Liam Donaldson, WHO Envoy for Patient Safety. Following that, *WHO’s approach to medication safety* was presented by Dr Neelam Dhingra, Unit Head, Patient Safety Flagship, WHO headquarters.

The agenda of the event was structured around the strategic framework of the third WHO Global Patient Safety Challenge: *Medication Without Harm*. The first session was on the engagement of patients, families and communities for safe medication use; the second session was on health and care workers’ role in ensuring medication safety; the third session was on medicines as products; and the last session was on systems and practices of medication. After the informative presentations, there was a panel discussion on addressing medication safety in high-risk situations, transitions of care and polypharmacy. In the closing session, Dr Tedros Adhanom Ghebreyesus provided his message for the participants in support of the theme.

The presentations and recordings of the global event in eight languages (Arabic, Chinese, English, French, Hindi, Portuguese, Russian and Spanish) are available [here](#).

On 16 September, WHO issued a [news release](#) to call for urgent action by countries for achieving Medication Without Harm.

WHO headquarters also launched pledges for [individuals](#), [ministries](#) and [institutions](#) with an interest in medication safety to showcase their support for the cause. The pledges can also be downloaded from the [WPSD 2022 campaign website](#).

On 20 September, WHO headquarters organized a [medication safety webinar for the nursing and midwifery global community of practice](#). The webinar focused on issues such as accountability, responsibility and blame. Solutions to reduce medication errors were discussed and ideas for creating a patient safety culture were proposed.

WHO regional offices

All WHO regional offices also played an active role in WPSD while bringing the content to their respective regional contexts. The [WHO Regional Director for Africa](#), WHO Regional Director for the Eastern Mediterranean, WHO Regional Director for Europe, Director of the Pan American Health

Organization, and [WHO Regional Director for South-East Asia](#) produced video messages for raising awareness of the day.

To mark WPSD 2022, the WHO Regional Office for the Eastern Mediterranean organized [a virtual press conference](#) led by the WHO Regional Director for the Eastern Mediterranean. The press conference highlighted the urgent need to tackle medication-related harm to reduce avoidable harm in the region. The press conference also stressed the need for building resilient health systems that considered patients and families as partners, not just recipients of services. While many countries in the region are experiencing crises or conflicts, there are also many success stories. To raise awareness of WPSD, the Regional Office also produced [a WPSD video](#) with Arabic, English and French subtitles.

Bringing together relevant stakeholders, the WHO Regional Office for Africa organized a technical webinar to commemorate WPSD on 20 September with the title “Medication safety in Africa health systems: perspectives from stakeholders and actions”. The key objectives of the webinar were to brief WHO Member States in the African Region on the global and regional patient safety landscape, raise awareness of the high burden of medication-related harm, and provide an overview of key initiatives, strategic approaches and technical resources for addressing medication safety and patient safety. The webinar also offered space for sharing of country experiences and good practices and advocating urgent actions to improve medication safety. The event was organized in collaboration with the Africa Centres for Disease Control and Prevention and African Medicines Agency. The Regional Office was also lit up in orange in celebration.

The WHO Regional Office for the Americas/Pan American Health Organization commemorated the day through [a webinar](#) on medication safety challenges from a quality of care perspective. The webinar was based on the existing regional [Strategy and Plan of Action to Improve Quality of Care in Health Service Delivery 2020–2025](#). The webinar included country experiences, sharing of medication safety challenges, regional perspectives on the impact of the use of medicines without evidence, and finally presentations and a discussion on the challenge of navigating the available resources in quality and safety.

WHO senior leadership tweeted about the day, including the Director-General, [Dr Tedros Adhanom Ghebreyesus](#); the WHO Regional Director for Africa, [Dr Matshidiso Moeti](#); and the Chief Scientist at the time, [Dr Soumya Swaminathan](#).

WHO country offices

WHO country offices worked closely with ministries of health in respective countries, national and local partners and entities to observe the day.

To name a few, the WHO country office in [India](#) created a [video](#). In [Nepal](#), the WHO representative raised awareness from his [personal account](#) to amplify the day’s messages and call for commitment by stakeholders. The WHO representative in [Timor-Leste](#) called [for eliminating unsafe medication practices and errors](#) and encouraged adherence to [appropriate infection prevention and control practices](#).

Global celebrations

Most of the WPSD global celebrations spanned from one day up to two weeks. Existing Patient Safety Weeks were observed by countries, including [Jordan](#) and [Qatar](#), coinciding with the date of the global celebration.

In [Mozambique](#), under the umbrella of Medication Without Harm, a number of awareness-raising events were organized throughout the year, including lectures on medication safety and meetings with professional associations, religious organizations and academia. Some hospitals (for example in [Finland](#)) and several organizations, such as the Spanish Society of Hospital Pharmacy, declared 2022 as a theme year to improve medication safety and raise awareness of its members on Medication Without Harm.

Orange colour: signature mark of the day

Since the establishment of WPSD, iconic buildings, landmarks and monuments across the globe have been lit up in orange as a show of global solidarity and commitment to improve patient safety in relation to the specific annual theme. In 2022 the aspiration was to make the world shine in orange brighter than ever.

Lighting up monuments in orange colour

In 2022 around 400 monuments, buildings and iconic places, across all WHO regions, were lit up in orange colour to commemorate WPSD. These included prominent bridges and statues, such as the Christ the Redeemer monument in Rio de Janeiro, [Brazil](#), and the Dubai Frame in the [United Arab Emirates](#), among many others. In addition to iconic places, more than 250 hospitals and clinics across the world were lit up in orange. There was an [initiative](#) to turn the whole of [Malaysia](#) orange.

Other innovative buildings and places that were lit up included electric powerhouses in [Maldives](#) and the Kusatsu Hot Spring Yubatake in [Japan](#). Grass-roots initiatives included lighting up a balcony in [Nigeria](#) and a hospital helipad in [Germany](#). In [Timor-Leste](#), the Governance Palace was lit up, amid [cheers from the audience](#). Videos were created in [Iraq](#), [Malaysia](#) and [Saudi Arabia](#) to showcase the monuments that were lit up in orange for WPSD.

In [Ethiopia](#) and [India](#), some hospitals organized candle enlightenment ceremonies instead of lighting up monuments. The International Pharmaceutical Students' Federation changed its logo for a period of time to "light it up".

Many hospitals in [India](#) were lit up with oil lamps (diyas) as part of the WPSD celebration.

Other gestures in orange colour

Clothes

People from various countries wore orange clothing to commemorate the day, including orange backpacks ([Austria](#)), caps ([Colombia](#), [Uganda](#)), hair ties and headbands ([Nicaragua](#), [Scotland](#)), hijabs ([Brunei Darussalam](#), [Egypt](#), [Sudan](#)), hula skirts ([Scotland](#)), masks ([Botswana](#), [Brazil](#), [Brunei Darussalam](#), [Colombia](#), [Germany](#), [Italy](#), [Japan](#), [Malaysia](#), [Mexico](#), [Nicaragua](#), [Panama](#), [Philippines](#)), ribbons ([Argentina](#), [Colombia](#), [Ecuador](#), [Jordan](#), [Mexico](#), [Philippines](#), [Sudan](#), [United Arab Emirates](#)), scarves ([Finland](#), [Jordan](#), [Mexico](#), [Mongolia](#)), T-shirts and shirts ([Austria](#), [Botswana](#), [Brazil](#), [Brunei Darussalam](#), [Costa Rica](#), [Ecuador](#), [England](#), [Haiti](#), [Indonesia](#), [Ireland](#), [Japan](#), [Mexico](#), [Nicaragua](#), [Nigeria](#), [Panama](#), [Portugal](#), [Republic of Korea](#), [South Africa](#), [Uganda](#), [United Republic of Tanzania](#), [United States of](#)

America, Zambia), neck ties (Jordan), paper ties (Ecuador), tote bags (Japan) and wrist bands (Colombia, Romania, Saudi Arabia, Spain).

Flowers and fruits

Orange flowers were displayed at the entrance of buildings (Argentina and Japan). In Saudi Arabia, orange roses were handed out to patients in a hospital as well as to the general public, along with WPSD awareness cards. In Ecuador and Ireland, orange fruits were handed out in patient safety booths.

Decoration of hospitals and health facilities

Orange balloons were a popular decoration to celebrate WPSD in hospitals around the world (for example, Belgium, Ecuador, Egypt, Estonia, Ireland, Malaysia, Oman, Saudi Arabia, Scotland, South Africa and Sudan). Orange mini T-shirts (Japan), ribbons (Spain), lanterns (Switzerland), and bunting (Oman and South Africa) were also used to decorate hospitals.

Flags

In Germany, orange flags with the World Patient Safety Day logo were raised to celebrate the day. A similar activity was carried out in the United States of America, where orange hand-held flags were used.

Conferences and commemoration events

National events, conferences and webinars

In Afghanistan, a national WPSD seminar brought together hospital directors and health officials from the Ministry of Public Health. Speakers included representatives from the Ministry of Public Health, pharmaceutical services, the Afghanistan Food and Drug Authority, and the WHO country office in Afghanistan. The event highlighted the importance of standardization, adherence to medication “rights”, and reporting and learning from medication-related safety incidents. The event ended with a panel discussion.

In Australia, the Australian Institute of Health Innovation organized a one-day [National Medication Safety Symposium](#).

In Bahrain, a two-day national event was organized by the Ministry of Health and was attended by representatives from health care facilities across the country.

The Directorate-General of Drug Administration of Bangladesh, in technical collaboration with the USAID Medicines, Technologies, and Pharmaceutical Services Program, organized [a round-table discussion](#) on safe and rational use of medicines.

The [national events](#) organized by the Ministry of Health and Wellness of Botswana included a speech from the Minister of Health and dance, music and cultural performances. Further speeches are available [here](#).

The Ministry of Public Health in Burundi organized a [national WPSD event](#) in collaboration with the WHO country office. A fundraising event was organized and donations were given to the hospital hosting the event. In addition, the ministry organized a dedicated patient safety event for health workers.

The National Institute of Public Health of Cabo Verde organized a workshop on Medication Without Harm. The objective of the event was to strengthen the national capacity to prevent and respond to medication errors and to raise awareness of medication safety as part of work to improve national health security in the coming year. The workshop also highlighted hygiene, sanitation and appropriate

hospital waste management as an important part of safe care for patients, especially to avoid future pandemics.

In **Chile**, the Ministry of Health organized a national WPSD webinar, and in **Denmark**, the Patient Safety Authority organized a [webinar](#) that attracted around 1600 participants.

[The week for observing WPSD](#) in **Ecuador** started with a “fair” – a public event that brought together public health institutions across the country to engage the general public in safe use of medicines. The national celebration culminated in a round-table discussion on medication safety organized by the Ministry of Public Health of Ecuador.

The General Authority for Healthcare Accreditation and Regulation in **Egypt** organized a major event with participants coming from all around the country. The event brought together the highest health authorities in the country, with the ultimate goal of unifying the vision towards patient safety.

The Ministry of Health in **Ethiopia** organized [an event](#) opened by the State Minister of Health, Dr Dereje Duguma.

A [national webinar](#) in **Finland** was opened by the Minister of Social Affairs and Health and included a speaker from the Finnish Medicines Agency, a representative from the Finnish Institute for Health and Welfare, and other stakeholders. The event concluded with a panel discussion.

The German Coalition for Patient Safety, with the support of the Federal Ministry of Health, organized [a national event](#) in **Germany**. At the event the Federal Health Minister, who is also the patron of the German Coalition for Patient Safety, delivered the opening address. The highlight of the event was the launch of [The economics of medication safety](#) report by the Organisation for Economic Co-operation and Development in collaboration with the Ministry of Health.

In **Ghana**, a three-day national patient safety and health care quality conference was organized by the Ministry of Health, the Ghana Health Service and partners. The conference focused on advancing patient safety and health care quality during emergencies. One of the themes of the event was integration of appropriate water, hygiene and sanitation in health care facilities.

A [national conference](#) was organized in **Hungary** in collaboration with the Semmelweis University Health Services Management Training Centre, NEVES Association for Patient Safety, Hungarian Healthcare Management Association and the WHO country office in Hungary. The national Chief Medical Officer spoke at the event.

World Patient Safety Day celebrations took place in **India** at national, state, district, and facility levels over a period of two weeks. A week-long campaign – Rogi Suraksha Saptah (Patient Safety Week) – was organized with emphasis on medication safety during 12–17 September 2022, followed by the National Pharmacovigilance Week, 17–23 September. A national WPSD event was organized by the Ministry of Health and Family Welfare, which was attended by many eminent guests. Dr Rajesh Bhushan, Union Health Secretary, released a self-assessment tool, SaQushal. The launch was followed by a patient safety pledge and a webinar that was attended by more than 850 participants. The Pharmacovigilance Week highlighted the importance of pharmacovigilance activities in over 500 adverse drug reaction monitoring centres located at medical colleges and hospitals within the ambit of the Indian Pharmacopoeia Commission. In addition, the Indian Navy organized a series of patient safety lectures for health workers, and the Indian Army doctors provided health education in remote villages.

In **Indonesia**, the national Health Service Quality Department released a [WPSD webinar series](#) that included five medication safety videos, most of which have had more than 15 000 views.

The [National Patient Safety Conference](#) in **Iraq** focused on the reduction of medication-related harm and medication errors. The event was organized under the patronage of His Excellency the Minister of Health, who spoke at the event.

A “Medication Without Harm” online [symposium](#) was organized in [Ireland](#) by the National Quality and Patient Safety Directorate and National Treasury Management Agency.

In [Italy](#), the Clinical Risk Management and Patient Safety Centre organized a seminar with national and international experts to highlight the burden of medication-related harm.

In [Japan](#), Gunma University [organized the annual Patient Safety Conference](#) in collaboration with the Ministry of Health, Labour and Welfare, Gunma Prefecture, Gunma Medical Association, and Takasaki University. The Director of the Patient Safety Promotion Office at the Ministry of Health, Labour and Welfare joined as the guest speaker. All conference participants wore orange polo-shirts for the event.

The Ministry of Health of Kenya launched the National Patient Safety, Health Worker Safety and Quality of Care [Policy](#) and [Action Plan](#) at a [national event](#) in [Kenya](#). The acting director of Health Standards and Quality Assurance highlighted the need to prioritize patient safety.

The Accreditation Center for Quality in Healthcare and the Institute for Innovative Patient Safety Solutions organized a patient safety [forum](#) in Astana, [Kazakhstan](#). The deputy chair of the Medical and Pharmaceutical Supervision Committee of the Ministry of Health Care spoke at the event.

A [round-table discussion](#) on medication safety was organized in [Latvia](#) by the Centre for Disease Prevention and Control.

A WPSD conference was organized in [Lithuania](#) and consisted of two parts. The first part highlighted safe use and administration of medications and the second part focused on the psychological safety and well-being of health workers. The Ministry of Health, together with its partners, organized [several seminars](#) in October for the general public on rational use of medicines, medication adherence and actions to be undertaken in case of adverse drug events.

The Patient Safety Unit, together with the Pharmaceutical Services Programme at the Ministry of Health of [Malaysia](#), organized [a full-day webinar](#) which involved 11 597 health workers from across the country. The Director-General of Health of Malaysia delivered the keynote address.

During the [national event](#), the Ministry of Health of [Maldives](#) launched the National Infection Prevention and Control Guidelines, National Guidelines on Antenatal and Postnatal Care, National Standards for Clinical Laboratories and a Health Care Quality Standard Digital Platform.

A [national public event](#) in [Mongolia](#) was organized in the capital city of Mongolia, Ulaanbaatar, to raise public awareness. The Ministry of Health organized a medication safety webinar that was attended by around 1000 health workers.

The Health Facility Monitoring and Accreditation Agency (HEFAMAA) organized [a hybrid WPSD event](#) in Lagos, [Nigeria](#). The Federal Ministry of Health, Nigeria Centre for Disease Control, DRASA Health Trust and Patient Safety Africa organized [a joint webinar](#) on WPSD. A press conference was organized by the Ministry of Health and a [Walk for Patient Safety](#) was organized by the ministry and DRASA Health Trust.

In [Norway](#), the Norwegian Directorate of Health organized [a webinar](#) that put the spotlight on high-risk situations, transitions of care and polypharmacy.

In [Oman](#), to observe the fourth WPSD and the fifth National Patient Safety Day, the Ministry of Health organized a [national conference](#) to raise awareness of medication-related harm and reduction of medication errors. The Ministry of Health was represented by the director of the General Directorate of the Quality Assurance Center.

In [Pakistan](#), a [one-day seminar](#) on medication safety was organized in collaboration with the Organization of Islamic Co-operation, the Standing Committee on Scientific and Technological Cooperation (COMSTECH), and the WHO country office. This event was attended by the ambassadors of Afghanistan, Azerbaijan, Cyprus, Indonesia, Lebanon, Morocco, Somalia, and Sudan, Ministry of Health representatives, hospital directors and other key stakeholders.

In **Paraguay**, the Ministry of Health and Social Welfare organized a [four-part series of webinars](#) on medication safety in September.

The Ministry of Health of **Peru** organized a national [teleconference](#) with national and international speakers. The event was attended by more than 800 participants that work in primary and hospital care. Seguro Social de Salud del Perú, EsSalud, the social health insurance provider in **Peru**, held an international [conference](#) bringing together prominent national and international speakers.

In the **Philippines**, the University of the Philippines in Manila organized the third National Patient Safety Congress under the theme “Synergized approach to patient and health worker safety”.

In the **Congo**, a WPSD event was organized and attended by local and national government officials, which focused on highlighting harm caused by medication. The Ministry of Health and Population representative, on behalf of the supervising minister, [donated 20 intensive care beds and 40 hospital beds](#) to the local hospital. The event included speakers from the ministry, the WHO Regional Office for Africa and the WHO country office.

In the **Republic of Korea**, the Ministry of Health and Welfare organized a [family-friendly national event](#) together with the Central Patient Safety Centre and Korea Institute for Healthcare Accreditation. The Korean Medical Association, Korean Nurses Association, Korean Pharmaceutical Association, and Korea Alliance of Patients Organization contributed to the event. The second Vice-Minister of Health and Welfare contributed through a video message.

In the **Russian Federation**, the Russian Medical Academy of Continuous Professional Education organized a national [WPSD conference](#), which was attended by more than 800 participants representing various specialties and entities across the country. Specialists from **Belarus** and **Kazakhstan** also took part in the event.

In **Saudi Arabia**, the Saudi Patient Safety Center and Saudi Food and Drug Authority organized a [joint symposium](#) titled “KSA health care entities achievement in medication error prevention”. The symposium included national and international expert speakers and the topics focused on various challenges and solutions for medication safety. In addition, the Saudi Patient Safety Center hosted a series of webinars at national level that were attended by nearly 12 500 persons.

In **Somalia**, the Ministry of Health and Human Services held [a national WPSD event](#) to raise awareness of medication-related harm.

A national webinar was organized in **South Africa** by the Department of Health. The Minister of Health delivered the opening remarks and highlighted themes such as reporting of adverse drug events, patient safety incidents, safety culture, and prioritization of medication safety at all levels. The minister also signed the WHO pledge to improve medication safety on behalf of the National Department of Health.

The Ministry of Health, Consumer Affairs and Social Welfare in **Spain** organized [a scientific conference](#) in collaboration with the Spanish Society for Healthcare Quality (SECA) to raise awareness of medication safety among all stakeholders. The presentations of the event are available [here](#).

In **Sri Lanka**, a [national event](#) was organized with participation of officials from the Ministry of Health of Sri Lanka, the WHO country office, hospital administrators, academia and other stakeholders. The Minister of Health of Sri Lanka was the chief guest at the event.

In **Sudan**, the Federal Ministry of Health organized two events targeting several hospitals. The first event focused on training intensive care personnel on medication safety, pressure ulcers, patient safety, and infection prevention and control. The second event was a workshop to operationalize and implement a set of national medication safety policies.

The National Board of Health and Welfare event in **Sweden** brought together patient safety champions across the country.

In **Thailand**, the Deputy Prime Minister and Minister of Public Health opened the [national event](#), which was attended by 350 participants in person and by 1300 hospitals virtually.

In **Timor-Leste**, a [Walk the Talk for WPSD event](#) was organized jointly by the Ministry of Health, a local hospital and the WHO country office. The event included a soccer tournament between Ministry of Health officials and the local hospital.

In **Tunisia**, a patient safety seminar with five lectures was conducted in collaboration with the Ministry of Public Health, Drug Regulatory Authority, WHO country office and 12 hospitals.

The Ministry of Health of **Uganda** organized several events to observe WPSD, including a webinar and an [in-person event](#). His Excellency the Minister of Health spoke at the webinar.

The Healthcare Safety Investigation Branch organized a [conference](#) in the **United Kingdom** with more than 1300 attendees participating in the webinar. In **Northern Ireland**, the health minister formally [launched](#) the Know. Check. Ask campaign across the Health and Social Care groups. [A national webinar](#) was organized to introduce the campaign and its relevance to Northern Ireland's Medication Safety Strategy.

The State Health Services Administration organized a [national patient safety conference](#) on Medication Without Harm in **Uruguay**. The Ministry of Health in **Viet Nam** organized a [WPSD meeting](#) on 16 September.

In **Zambia**, in collaboration with the Ministry of Health of Zambia, the Chongwe District Health Office organized a WPSD event with the Minister of Health as the guest of honour. Please click [here](#) to see the highlights of the celebration, which included musical and cultural performances.

National medicines agencies (in **Botswana, Denmark, Ecuador, Egypt, Finland, Germany, Nigeria, Pakistan, Poland, Portugal, Sweden, Tunisia, Uganda, Zambia, and Zimbabwe**) raised awareness at national level through events, exhibition booths, social media, videos, workshops, and webinars.

National seminars and events by nongovernmental organizations

Not-for-profit and professional organizations also held WPSD webinars and symposiums at national level, for example in **Brazil, Canada, Germany, Japan, Kenya, Mexico, Nigeria, Oman, Poland and Thailand**. The Institute for Safe Medication Practices Canada organized a [webinar](#) to discuss its role in reducing medication errors in the country and to share stories of organizations across **Canada** partnering with patients and families to improve medication safety locally.

Patient organizations held their own in-person events in **India, Indonesia, Ireland, Uganda and Zimbabwe**. In the Pan-American region, members of the Pan-American Network of Patients for Patient Safety were very active and spoke at local (**Colombia, Mexico**), national (**Mexico**) and regional WPSD events.

Women in Global Health Kenya organized a webinar titled "Medication safety – building a patient-centred approach". A civil society in **Ghana**, the Youth Arise Organization, organized a webinar to increase public awareness of pharmacovigilance. Civil society organizations in **Kuwait** also organized an event that looked into the role of civil society and the community in reducing harm in health care, as well as the importance of patient safety culture.

Members of the International Alliance of Patients' Organizations raised awareness of the upcoming WPSD at the 75th session of the WHO Regional Committee for South-East Asia in **Bhutan** by wearing [orange T-shirts with World Patient Safety Day logos](#).

Local celebrations, conferences, webinars and exhibitions

Local celebrations

In several countries (for example, in [Japan](#) and [Kuwait](#)), in addition to organizing national events, the Ministry of Health gave multiple presentations on medical safety and WPSD in local events and webinars.

Health care facilities were decorated in various ways to increase awareness of patient safety and WPSD. Self-made and printed posters were a very popular method of raising awareness and educating health care providers as well as patients. In [Italy](#) and [Tunisia](#), hospitals hung posters and banners outside to sensitize the public about WPSD.

The WPSD logo was visible everywhere, for example, on caps ([Sudan](#)), electronic displays and visuals ([China](#), [Islamic Republic of Iran](#), [Sudan](#)), hand sanitizer bottles ([Scotland](#)), hospital vending machines ([Japan](#)), in-pocket manual covers ([Japan](#)), lanyards ([Costa Rica](#)), masks ([Botswana](#), [Ethiopia](#), [Malaysia](#)), pins ([Bahrain](#), [Ecuador](#), [Jordan](#), [Saudi Arabia](#)) and sashes ([Islamic Republic of Iran](#)).

People wore “Medication Without Harm” T-shirts across the world ([Bangladesh](#), [Colombia](#), [Egypt](#), [Kenya](#), [Nigeria](#) and [Portugal](#)). A [Spanish](#) hospital also distributed “patient safety expert” pins to its staff while recognizing and thanking their commitment to patient safety in their routine work. Other hospitals and entities used patient safety or medication safety photo frames ([Bahrain](#), [Bangladesh](#), [Brazil](#), [Ecuador](#), [England](#), [India](#), [Indonesia](#), [Kuwait](#), [Mexico](#), [Mongolia](#), [Oman](#), [Peru](#), [Portugal](#), [Sudan](#), [United Arab Emirates](#)) in their local celebrations.

In [Kuwait](#), [Oman](#) and [Saudi Arabia](#), local events and exhibitions included child-friendly activities such as giant bubble making, colouring pictures, drawing, and face painting. Hospital clowns ([Brazil](#), [Colombia](#) and [Finland](#)) and the hospital mascot ([Japan](#)) joined the local WPSD celebrations. The Brazilian hospital clown engaged patients to KNOW. CHECK. ASK. through signs and traffic lights made of balloons. The pharmacy mascot was part of the [public event](#) organized at the Symphony Lake at Kuala Lumpur, [Malaysia](#).

In [Qatar](#), one of the hospitals had huge capsules and a massive pill bottle to attract attention to its ongoing patient safety event. A hospital in [England](#) [decorated its medication safety awareness booth](#) with knitted mascots (including capsules, a pill, a bone and a blood cell) that were linked to the specific medications they were highlighting. The medication safety theme was also visible in the goodies that hospitals gave patients and staff; for example, a hospital in Spain gave patients pocket-sized, orange pill boxes. Some hospitals distributed tiny bottles with sweets, labelled with medication safety messages ([Brazil](#) and [Colombia](#)).

Governments in [Japan](#) and [Portugal](#) created web pages to showcase and promote the planned activities and materials created locally for WPSD. Several national patient safety entities ([Austria](#), [Finland](#) and [Germany](#)) listed all the activities that had been planned across the country.

The [Royal Oman Police Service](#) celebrated the day by attending a medication safety seminar. Also, in the [United States](#) a police department participated at a local WPSD seminar.

Universities around the world ([Argentina](#), [Brazil](#), [Canada](#), [Egypt](#), [England](#), [Germany](#), [Hungary](#), [India](#), [Indonesia](#), [Japan](#), [Libya](#), [Malawi](#), [Malta](#), [Mongolia](#), [Pakistan](#), [Panama](#), [Philippines](#), [Portugal](#), [Qatar](#), [Russian Federation](#), [Saudi Arabia](#), [South Africa](#), [Spain](#), [Türkiye](#), [United Arab Emirates](#), [Uruguay](#), [Venezuela \(Bolivarian Republic of\)](#)) joined in raising awareness about WPSD through various communication channels, including social media, workshops, and competitions, or by organizing events. Several universities and university hospitals in [Germany](#) organized a conference together with the German Society of Surgery under the slogan “Medication safety improved! Measurable success?”. The Centre for Investigation and Information on Medicines and Toxics under the University of Panama played an active role in social media to raise public awareness by creating various communication

materials. The Barinas State College of Pharmacists at the University of Los Andes, in the **Bolivarian Republic of Venezuela**, created a social media campaign to promote safer use of medicines. They used a dedicated hashtag to draw attention to the need for prioritizing patient safety in the country. Ain Shams University and Cairo University, in **Egypt**, raised awareness through distributing advocacy materials and holding community engagement workshops. Furthermore, universities organized medication safety webinars in the **Philippines** and the **Bolivarian Republic of Venezuela**. A university in **Brazil** disseminated liquid soap bottles to patients and health workers to encourage continuity of good hand hygiene practices.

Student societies raised awareness through social media (**Egypt, Libya, Philippines, Rwanda**), a video (**Iraq**), skits (**India**) and local events (**Saudi Arabia**).

Exhibitions

Hospitals set up patient safety exhibitions in **Austria, Bahrain, Colombia, Egypt, India, Ireland, Italy, Luxembourg, Oman, Pakistan, Saudi Arabia, Spain, Sweden** and the **United Republic of Tanzania**. Hospitals organized several day exhibitions showcasing different areas of safety, such as pharmacy, nursing, radiology, laboratory, health worker safety, infection prevention and control, surgical safety, blood safety and housekeeping. Based on the WPSD 2022 theme, there was a special focus on medication safety. Health care facilities in **Chile** and **Ecuador** organized patient safety fairs outside hospitals for hospital staff and the public.

In the **United Republic of Tanzania**, pharmacy students had a stall at the WPSD exhibition of the local hospital to promote rational use of medicines and to guide patients on using their medications safely.

A hospital in **Colombia** took a creative approach in its [WPSD exhibition](#), where each booth had an imaginative theme. For example, infection prevention and control was highlighted by a booth that followed classical Greek culture.

Scientific events and conferences

Local patient safety conferences were also organized in several countries (**Brazil, China, Ethiopia, Germany, Ireland, Nigeria, Pakistan, Philippines, Portugal, Spain**). A conference organized by a **Spanish** hospital focused on safe medication practices, including safe use of insulin in patients with hyperglycaemia at hospital discharge, and on special considerations and practices when treating paediatric patients. Furthermore, a scientific health forum was organized in Lagos, **Nigeria**. In addition, a three-day hybrid conference was organized by SESARAM Patient Safety and Risk Management Commission with involvement of local universities in Madeira, **Portugal**. The Nursing Quality and Safety Management Forum in **China** focused on medication safety. Several conferences were organized at local and regional levels across **Italy**.

The Secretariat of Health of Mexico City, **Mexico**, organized [an academic week](#) titled “Together for safe and quality care”. A virtual event was organized focusing on themes such as occupational safety, hygiene and medication safety. The Ministry of Health of Khartoum state, **Sudan**, held a patient safety symposium that was attended by all patient safety focal points of the government hospitals in Khartoum.

Webinars and meetings

Private and public hospitals in **India, Indonesia, Malaysia, Maldives, Nigeria, Peru, Portugal, Qatar** and **Saudi Arabia** held webinars for health workers and patients to provide guidance on how to reduce risks of medication errors and medication-related harm.

The Arab Institute for Continuing Professional Development organized a joint webinar with the Pan Arab Patient Safety Association highlighting items such as the strategic framework for Medication Without Harm and medication literature. A patient safety society in **Ecuador** organized a webinar that focused on access to essential medicines and patient safety. The Indian Association of Palliative Care organized a WPSD webinar that focused on making palliative care safer. A patient group in **Singapore** organized a medication safety webinar.

Health Education and Improvement Wales organized a webinar “Medication Without Harm: Are you ready for World Patient Safety Day 2022?”, which was designed particularly for pharmacy professionals.

A **Qatari** hospital organized a grand round session to discuss medication safety incidents. The session was attended by physicians, nurses and allied health professionals. In a **Japanese** hospital, the local commemoration of WPSD included discussions on the key considerations of the recently launched WHO report [Implications of the COVID-19 pandemic for patient safety: a rapid review](#).

A hospital in **Myanmar** organized a hospital-wide WPSD ceremony that focused on the International Patient Safety Goals.

International commemoration

Cross-national events

Cross-national commemoration events were organized in the African Region first by the Kenyan Ministry of Health, which organized a technical webinar on “Pharmacovigilance: key to medication safety monitoring”. The webinar had participants from **Kenya** as well as some other African nations. This was followed by a joint WPSD webinar organized by the Africa Institute of Healthcare Quality Safety and Accreditation based in **Ghana**, C-Care (an international hospital in **Uganda**) and the Council for Health Service Accreditation of Southern Africa, based in **South Africa**.

In **India**, the Medication Safety Conference (MediSafeCon) 2022 provided a national platform for multidisciplinary discussion on medication safety issues in paediatrics, geriatrics, oncology, critical care and many other specialties. The event was attended by around 450 people (in person and online) from **India** and neighbouring countries.

Conferences and webinars by international organizations

Several international organizations organized webinars on patient safety and medication safety, including the following.

- 🔗 The International Society for Quality in Health Care, together with the American Academy of Pediatrics, organized a [webinar](#) on medication errors in children; and organized webinars in French in collaboration with the Platform for Continuous Improvement of Quality of Care and Patient Safety [on Integration of electronic prescribing on chemotherapy](#) and [digitalization of COVID-19 vaccine adverse drug reaction management](#).
- 🔗 A [Patient Safety Conference](#) was organized by the European Patient Safety Foundation and FOKUS Patient.
- 🔗 The International Pharmaceutical Federation, International Council of Nurses, International Alliance of Patients’ Organizations, International Federation of Pharmaceutical Manufacturers and Associations, and World Medical Association organized a joint [webinar](#) titled “Making medicines safe and reliable for all”.
- 🔗 The International Organization for Medical Physics organized a [joint webinar](#) with the WHO Radiation and Health Unit.

- 🔗 The International Alliance of Patients' Organizations and European Health Management Association organized a joint webinar on "[Medication Without Harm: fostering medication safety in hospitals](#)".
- 🔗 The International Society of Blood Transfusion and Transfusion Evidence Library organized live journal clubs to identify [high-quality evidence](#) about the WPSD theme relevant to the field of transfusion medicine.
- 🔗 The International Society of Radiographers and Radiological Technologists and International Society of Radiology organized a [WPSD webinar](#) on "WHO Global Patient Safety Challenge: Medication Without Harm".
- 🔗 The International Society of Pharmacovigilance organized regional webinars targeting pharmacovigilance experts in [Africa](#), [Europe](#), [Latin America](#), the [Middle East](#) and [Oceania](#).
- 🔗 The Institute for Healthcare Improvement organized a webinar on "[What we're getting wrong about the 'five rights of medication use' and other safety myths](#)".
- 🔗 The Patient Academy for Innovation and Research, together with its partners, created a webinar series.
- 🔗 The European Alliance for Access to Safe Medicines organized a webinar titled "Medication errors: the most common adverse event in hospitals. It's time to act!".
- 🔗 The Society of African and Caribbean Midwives and Caribbean Nurses & Midwives Association highlighted patient safety through a human factors webinar.
- 🔗 The Global Association of Physicians of Indian Origin organized a webinar on safe medication practices, which was attended by more than 1000 participants from seven countries.
- 🔗 The World Patients Alliance organized the [World Patients Conference](#) for the first time.

WHO staff participated in many of these international conferences.

Activities

Raising public awareness

Press releases and information dissemination

The ministries of health (or governments) published press and news releases on WPSD in [Australia](#) (subnational), [Bahrain](#), [Botswana](#), [Bulgaria](#), [Burundi](#), [Finland](#), [Germany](#), [India](#), [Luxembourg](#), [Monaco](#), [Mongolia](#), [Paraguay](#), [Republic of Korea](#), [Romania](#), [Spain](#) and [Sri Lanka](#). In Ireland the [press release](#) expressed the commitment of the Minister for Health and the Chief Nursing Officer (among other prominent government figures) to medication safety. The Medicines Surveillance section at the Center for the State Control of Medicines, Equipment and Medical Devices, in [Cuba](#), also issued a [news release](#). The Directorate-General of Health [website](#) in [Portugal](#) highlighted WPSD and disseminated medication safety materials.

At local and national levels, press releases and news releases were issued by hospitals ([Japan](#)), universities ([Germany](#)), national professional associations ([Australia](#), [Israel](#), [Slovenia](#), [Spain](#)) and patient organizations ([Cyprus](#)). Institutions ([Centre for Disease Prevention and Control](#) in [Latvia](#) and [National Cancer Institute](#) in [Mexico](#)), international organizations ([European Alliance for Access to Safe Medicines](#), [International Council of Nurses](#), [World Organization of Family Doctors](#)) and [Patients for Safer Nuclear Medicine](#) released press releases as well.

As part of their events, ministries of health ([Egypt](#), [Indonesia](#), [Nigeria](#), [Thailand](#) and [Sri Lanka](#)), nongovernmental entities ([Germany](#) and [Lithuania](#)) and the Taiwan Alliance of Patients' Organizations organized press conferences.

In **Croatia**, on the occasion of WPSD, 17 patients' associations and the Croatian Medical Association issued a joint statement on the importance of protecting immunocompromised and immunosuppressed persons amid the pandemic.

The International Society for Quality in Health Care, European Health Management Association, International Hospital Federation, European Association of Hospital Pharmacists and GS1 launched a joint social media campaign along with a [press release](#).

Ministries of health dispatched information about WPSD and guidance for governmental hospitals (**Viet Nam**) and private hospitals (**Kuwait**) on how to join the campaign. Additionally, the General Office of the National Health and Health Commission in **China** [encouraged all the health committees to actively participate in the campaign](#). The Costa Rican Social Security Fund recommended the day be observed by national health facilities in **Costa Rica**.

To raise public awareness in the country, the National Center for Disease Control in **Libya** disseminated WPSD brochures and pamphlets. The Ministry of Health and Population, together with the WHO country office in **Nepal**, raised public awareness about the issue in **Nepal** through [banners](#).









During the daily COVID-19 update, the Minister of Health in **Guyana** reflected on WPSD and emphasized how patients should be able to trust that the care they seek will not harm them. The minister highlighted how medical errors could be reduced through proper guidelines and safety culture in facilities where health workers are not afraid to speak up for patient safety.

Research promotion

Academic entities in **Australia**, **Canada**, and the **United Kingdom** highlighted recent work that can help to facilitate medication safety. The September issue of [Patient Safety](#) recognized WPSD with articles focused on the slogan Medication Without Harm. *Frontiers in Health Service* set up [a call for research submissions](#) that identified patient safety risks and solutions.

Awareness-raising marches

Awareness-raising marches and rides were organized in several WHO regions.

-  In **Bangladesh**, the walk was part of the national event.
-  In **India**, several colleges and hospitals raised awareness through walks.
-  In **Kenya**, a motorcycle ride was organized with orange vests to raise awareness that no patient should be lost due to medication errors.
-  In **Nigeria**, the walk was part of the national event.
-  In **Pakistan**, several awareness walks were organized in different regions of Pakistan. The health ministers of Punjab and Azad Jammu and Kashmir joined the WPSD awareness walks organized in their respective provinces.
-  In **South Africa**, a hospital organized an awareness walk.
-  In **Timor-Leste**, the national event started with an awareness-raising walk where participants wore yellow T-shirts.
-  In the **United States**, Patients for Patient Safety US, National Patient Safety Board Coalition, Patient Safety Movement Foundation, Leapfrog Group and MedStar Institute for Quality and Safety organized [a patient safety march](#). The march was also attended by entities such as Ariadne Labs. The march culminated in planting small orange flags on the grass near the White House, in Washington, DC. Each flag had the name of a person who had been harmed by unsafe care.

Advocacy videos about World Patient Safety Day

Patient safety advocacy videos were created by nongovernmental entities ([Argentinian Patient Safety Observatory](#)), governmental entities (Danish Patient Safety Authority) and international organizations ([European Society of Anaesthesiology and Intensive Care](#)). In addition, hospitals made videos to address patient safety and medication safety in [Chile](#), [India](#), [Malaysia](#), [Mexico](#), [Pakistan](#), [Qatar](#), [Saudi Arabia](#), [Sweden](#) and [United Republic of Tanzania](#). For example, in [this video](#), a director of nursing at an [Indian](#) hospital talks about the WPSD 2022 theme and how the standards for medication safety are globally the same. In [Iceland](#), the university hospital created an awareness-raising video on documenting medication history, why it is important and how the hospital had been able to improve its medication history documentation process. A hospital in [Spain](#) made a video to explain the importance of patient identification wristbands.

A humanitarian aid organization in [Syrian Arab Republic](#) (Hand in Hand for Aid and Development), civil societies ([United States](#)), professional societies ([Portugal](#)), patient organizations ([Argentina](#), [Europe](#)) and the [WHO country office in Nigeria](#) raised awareness of medication safety through videos. For example, the National Quality Forum created a series of videos with patient safety champions sharing their WPSD messages. TikTok videos were used in [Argentina](#), [Ecuador](#), [Indonesia](#), [Jordan](#), [Malaysia](#) and [United States](#) to promote the day.

The [Institute for Safe Medication Practices](#), [Patient Safety Movement Foundation](#), universities ([Türkiye](#)) and scientific publishers (Karger Publishers: [an interview with Professor Sir Liam Donaldson](#)) published advocacy videos to raise awareness of what can be done to improve medication safety. Ministries of health made WPSD videos in collaboration with WHO country offices in [Comoros](#) and [Timor-Leste](#).

In some countries, WPSD was used as an opportunity to talk about national action on patient safety. The government of [Portugal](#) created a [video](#) to explain the National Plan for Patient Safety 2021–2026 and disseminated the video among national health service institutions. In addition, the National Quality and Patient Safety Directorate in [Ireland](#) created a [video](#) about national patient safety work.

In several countries, hospitals made videos showcasing their celebrations of the day ([Austria](#), [Germany](#), [India](#), [Islamic Republic of Iran](#), [Italy](#), [Kuwait](#), [Oman](#)). For example, in [Nicaragua](#), a hospital made a [video](#) where staff and patients were interviewed on their thoughts about the theme of WPSD 2022. TikTok videos were utilized in the ministry of health in [Brunei Darussalam](#), [Colombia](#), [Jordan](#), [Malaysia](#), [Mexico](#), [Peru](#) and the [Philippines](#) to illustrate their WPSD celebrations. The WHO country office in the [Congo](#) captured some of the national events in a [video](#).

Blogs and podcasts

Several blogs were written for and promoted WPSD (in [England](#), [Germany](#), [Nepal](#), [Northern Ireland](#), [Panama](#), [Scotland](#), [Spain](#), [Sweden](#), [United Republic of Tanzania](#), [United States](#)). Some examples include the following.

- 🔗 AcademyHealth published a blog: "[Finally, progress on patient safety – thanks to health services research. We need more.](#)"
- 🔗 The Federal Institute for Drugs and Medical Devices ([Germany](#)) [blog](#) (in English) provided a pharmacovigilance perspective on prevention of medication errors.
- 🔗 The USAID Medicines, Technologies, and Pharmaceutical Services Program created a [blog](#) on implementing pharmacovigilance.
- 🔗 Patient Safety Learning published a [blog](#) and a [spotlight interview](#) on how medication safety has been addressed in [Northern Ireland](#).
- 🔗 A [blog post](#) by the Foundation of African Medicines and Education featured medication safety in rural areas of the [United Republic of Tanzania](#).

Podcasts were recorded in [England](#), [Estonia](#), [France](#), [Ireland](#), [Italy](#), [Nigeria](#) and [United States](#). Some examples include the following.

- 🔗 When patient safety is discussed, the focus is often on “what goes wrong”. However, in many places, things go right too. With this in mind, the National Quality and Patient Safety Directorate in [Ireland](#) chose the topic of [“Thinking positively: approaches to patient safety”](#) for the podcast that they launched for WPSD.
- 🔗 Medical errors were discussed in a French-speaking [podcast](#).
- 🔗 A patients for patient safety champion in the [United States](#) talked [in this podcast](#) about medication-related harm that happened in her family and how the events inspired her to become a pharmacist. She underlined how harm can be avoided through better cultural competence, patient education and engagement.
- 🔗 The [podcast](#) of the National Patient Safety Board Coalition in the [United States](#) discussed the threat of medical errors being accentuated by departure of experienced clinicians from the workforce.
- 🔗 The [podcast](#) of the American Society of Anesthesiologists featured the past president of the World Federation of Societies of Anaesthesiologists. She reflected on her personal story, which inspired her to work in patient safety, as well as the role of anaesthesiologists in medication safety.
- 🔗 A health service partnership in [England](#) created several podcasts around medication safety, including a podcast on [medicines compliance aids](#) and, from the patients’ perspective, [how people can become more involved in the effective and safe use of medications](#).

Publications

The Organisation for Economic Co-operation and Development (OECD), with the support of the Federal Ministry of Health of Germany, launched a report [The economics of medication safety: improving medication safety through collective, real-time learning](#). The report provides (a) estimates on the impact of medication safety events in OECD Member States; (b) ideas on how to improve prescribing practices; (c) analysis of existing systems and policies for improving medication safety; and (d) recommendations for national-level medication safety improvement.

Public displays and social media frames

Public awareness-raising was conducted at a large scale in [Malaysia](#) and [Oman](#) though featuring WPSD and Medication Without Harm on billboards. Saudi Transport had all its road screens promoting WPSD.

Various types of WPSD social media frames highlighting the theme of WPSD 2022 were especially popular in [India](#) and [Indonesia](#).

Competitions

A national competition was organized by the Ministry of Health in [Sri Lanka](#) to select the best medication safety practices carried out by public hospitals. Out of the 53 entries received, six had an opportunity to present their best practices at the national WPSD event. These six were praised and presented with awards.

The National Quality and Patient Safety Directorate of [Ireland](#) set up a national challenge whereby everyone who sent their certification for the Medication Without Harm online course by the end of September was included in a draw to win the *Oxford professional practice: handbook of patient safety*.

Poster and essay competitions were organized in [India](#), [Indonesia](#), [Maldives](#), [Mongolia](#), [United Arab Emirates](#) and [Viet Nam](#). The Asian Society for Quality in Health Care set up an international e-poster competition on medication safety and received 84 posters. The Chinese Hospital Association held several medication safety-related competitions for hospitals in [China](#). In [Egypt](#), hospitals arranged competitions that tested the compliance and knowledge of health workers in various areas of patient safety. Hospital units also competed on compliance with patient safety practices, which were measured through an audit ([Ireland](#) and [Pakistan](#)). In addition, hospitals in [Saudi Arabia](#) set up competitions around medication safety.

Quizzes were used in health care facilities in [Australia](#), [Austria](#), [Brazil](#), [Egypt](#), [England](#), [Ireland](#), [Malaysia](#), [Pakistan](#), [Saudi Arabia](#) and [Sudan](#). Similarly, in [India](#) a national-level patient safety quiz was organized by the Consortium of Accredited Healthcare Organizations.

In [Thailand](#), the Healthcare Accreditation Institute held a technology innovation competition with four categories: Best of Care Award, Rising Star Award, Best of Change Award and Best of Collaboration Award.

Hospitals organized various competitions that required creativity, such as a medication safety drawing competition ([Philippines](#), [Saudi Arabia](#) and [Spain](#)), photo competition ([Mexico](#), [Spain](#)) and video competition ([Mexico](#), [Philippines](#)). A hospital in the [Islamic Republic of Iran](#) awarded best patient safety poems and paintings as part of its local observation. Additionally, in [Panama](#) a hospital organized a competition on the most innovative patient safety education materials that included a category for murals. Hospitals organized TikTok video competitions in [Peru](#) and [Saint Lucia](#). A hospital in the [Philippines](#) had a cheerleading and yells competition. Other innovative competitions organized in [India](#) included mimes, debates, rangoli, and skit.

A hospital in [Saudi Arabia](#) posed a question in its social media channels to the public on correct storage of medicines; by replying, someone could win an iPhone 14. The post received around 11 500 re-tweets.

Award ceremonies

At the [Spanish](#) national WPSD conference, hospitals and primary care providers were awarded for their medication safety improvement work. The Ministry of Health and Welfare in the [Republic of Korea](#) gave awards to 10 persons for their contributions to patient safety.

World Patient Safety Day was as an opportunity to recognize good patient safety initiatives and award teams and individuals who have brought about positive change in hospitals and health services ([Canada](#), [Colombia](#), [Egypt](#), [Finland](#), [Islamic Republic of Iran](#), [Maldives](#), [Oman](#), [Pakistan](#), [Saudi Arabia](#), [Sudan](#), [United Arab Emirates](#)). In some hospitals in [Egypt](#) and [India](#), departments that were the most patient safety compliant were recognized. For example, the Best Medication Storage was awarded to a New Delhi-based hospital in [India](#). A hospital in [United Arab Emirates](#) gave awards to the best performers in pharmacovigilance and antimicrobial stewardship.

Organizations also gave awards to initiatives that had contributed to medication safety or that had significantly improved their medication safety practices in the past one year ([Denmark](#), [Italy](#)).

Initiatives promoting medication safety

The Ministry of Health in [Sri Lanka](#) launched the [National Plan on Medication Safety](#) on 17 September 2021, and has continued to implement the plan in alignment with WPSD 2022. In [Sudan](#), during an

official visit, the Regional Director for the Eastern Mediterranean met with the Minister of Health and discussed the implementation of the National Medication Safety Action Plan.

In the [United States](#), the Institute for Safe Medication Practice and Emergency Care Research Institute created a [joint resource centre](#) to share useful resources dedicated to the prevention of medication errors globally. The French National Authority for Health (Haute Autorité de Santé) created a [WPSD web page](#) to share information and resources on medication safety. Furthermore, the Oregon Patient Safety Commission shared [tools and best practices](#) for health workers, patients and families in the [United States](#).

Patients and the public

Using the [5 Moments for Medication Safety](#) and other patient education materials, health care facilities engaged and empowered inpatients and people in waiting rooms by explaining how they can play an active role in medication safety – for example, how patients and family members can avoid medication errors, how to keep an up-to-date medication list, and how to use medication rationally and safely.

The governments of [Australia](#), [Finland](#), [Ireland](#), [New Zealand](#), [Portugal](#) and [Spain](#) promoted the use of medication lists. In [New Zealand](#), the Health Quality and Safety Commission recommended download of the WHO MedSafe application. In alignment with WPSD, a national [medication list](#) was developed and launched in [Luxembourg](#) in the week of 17 September. During the Patient Safety Week, [Luxembourg](#) health facilities made special efforts to introduce the list to their patients, explaining how to complete it and keep it up to date. In [Austria](#), the Austrian Network for Patient Safety also promoted the use of [medication lists](#).

The 5 Moments for Medication Safety was translated into local languages in [Finland](#) ([Finnish and Swedish](#)), [Japan](#) (the leaflet in [Japanese](#)), [Mongolia](#) ([Mongolian](#)), [Spain](#) ([Spanish](#), [Catalan](#) and [another version in Catalan](#)) and [Switzerland](#) ([French](#), [German](#), [Italian](#)). It was also recreated in [Belgium](#) ([French](#)), [Colombia](#) (in Spanish by a [local hospital](#)), [Mexico](#) (as [social media](#) tiles by the Secretary of Health of Mexico City and by a hospital in a [poster](#)), [Portugal](#) ([Portuguese](#)), [Qatar](#) ([Arabic](#)) and [Russian Federation](#) ([Russian](#)). In Switzerland the French version of the [5 questions to ask about your medications](#) was also promoted to engage the patients. In [Sri Lanka](#), trilingual video clips were developed to explain the 5 Moments. In [Italy](#) and [Spain](#), instead of the 5 Moments, a document with 10 moments (in [Italian](#), in [Spanish](#)) was created. The Ministry of Health of [Ecuador](#) produced videos to explain key moments for safe use of medications ([1](#) and [2](#)). Some hospitals (in [Colombia](#) and [Mexico](#)) also made videos where they explained the 5 Moments.

In [India](#), a skit on 5 Moments for Medication Safety was performed in community settings to explain how patients, families and caregivers can play an active role in their own care to reduce medication-related harm. In [Mongolia](#), the key messages on medication safety were showcased to the public through music, dance and drama by a local university. Hospitals in [Chile](#) and [Estonia](#) had social media campaigns to provide practical tips and information on safe and correct use of medication for patients. A hospital in [China](#) organized an event to deliver lectures to the general public on topics such as rational use of medicines for chronic diseases.

In [Saudi Arabia](#), campaigns targeting patients and the public highlighted the importance of knowing the expiry date and appropriate storage of medicines in terms of temperature, exposure to sunlight and original packaging. The importance of patients knowing how to appropriately store their medicines was also highlighted in a public event in [Namibia](#) and in a social media campaign in [Colombia](#).

In [Slovenia](#), the public was advised by the Slovene Chamber of Pharmacy to be careful when buying medicines online as these might be counterfeit medicines that could cause harm. Several newspapers in [Slovenia](#) highlighted messages on medication safety in their WPSD news pieces.

The dangers of self-medication, and the use of prescription medicines without a prescription, were highlighted by governments, hospitals and institutes in [Burundi](#), [Cabo Verde](#), [Ecuador](#), [India](#), [Mexico](#), [Nigeria](#) and [Uganda](#). The local event organized by the Directorate of Health and Social Services in the Kavango West Region, [Namibia](#), drew attention to the dangers of sharing medications and improper storage, particularly in the presence of children. In [Zambia](#), the local event emphasized that medications should not be bought from undesignated places, such as on the streets.

In [Czechia](#), the National Institute of Public Health, State Institute for Drug Control, Czech Pharmaceutical Chamber and Czech Chamber of Pharmaceutical Assistants jointly created a national campaign on inappropriate use of commonly used medicines. [The orange campaign platform](#) listed six examples of over-the-counter medicines that could cause harm when not used properly and explained the risks of each medication. As part of this initiative, [nine videos](#) (English subtitles are available) were created, where the risks of excessive or long-term use of paracetamol, ibuprofen and diclofenac, emergency contraception, nasal sprays, antacids and laxatives were explained by experts. The Ministry of Health of [Czechia](#) actively promoted the campaign on its social media platforms.

In [Oman](#), health workers visited several schools to teach safe and rational use of medicines and organized a medication safety exhibition. In [Argentina](#), around 400 pupils aged between 6 and 11 years attended medication safety lectures. In [Uganda](#), the Community Health and Information Network organized educational events to raise awareness of medication safety through dance, arts, drama and music. A total of 237 guardians and teachers and more than 1600 children attended the activities. In [India](#), students were taught about safe use of medicines, including ill effects of self-medication and dangers of inappropriate use of antibiotics.

In [Nigeria](#), a WPSD commemoration event was organized for community elders to create a space where they could discuss their experiences and ask questions related to their medications. Medication safety-related games and quizzes were offered for patients and the public in [Monaco](#) around 17 September. In [Belgium](#), a hospital created a multilingual [website](#) to guide people on how to use different medications correctly.

In [Kuwait](#), the Quality and Accreditation Directorate at the Ministry of Health created [several medication safety-related videos and a social media campaign for the general public](#). In [Ireland](#), the government launched a Medication Without Harm [video](#) to raise public awareness of medication safety. The Patient Safety Authority in the [United States](#) made question-and-answer type videos to address [safe use of antibiotics](#) and [disposing unused medications](#). The Korea Institute for Healthcare Accreditation created [an educational video](#) on correct dosing of medications for the general public.

Hospitals ([Cambodia](#), [Colombia](#), [Finland](#), [Kuwait](#), [Qatar](#), [Saudi Arabia](#), [Switzerland](#)) created videos to raise awareness of medication safety and to teach patients how to use their medications safely. For example, in [Switzerland](#) the University Hospital of Geneva [created a series of educational videos](#) (in French) to answer common questions that the general public might have on medications.

The General Council of Official Nursing Colleges of Spain created a video on safe use of medicines, including considerations for using high-risk medications ([in Spanish](#)).

The World Patients Alliance created an introduction to medication safety video in [English](#) and [Spanish](#) to educate patients on how they can reduce the risk of medication-related harm.

Our Patient Voices collected questions from patients related to safe use of medications, which were answered by pharmacists. The various topics included medication storage, medication use during breastfeeding, use of vitamins and supplements along with prescription medicines, and response to overdosing. The Farah Social Foundation, based in [Lebanon](#), created [a video](#) for the general public to

make them more aware of the potential of medications to cause harm and the avoidance measures in this regard.

TikTok videos were used in [Argentina](#), [Ecuador](#), [Indonesia](#), [Ireland](#), [Malaysia](#), [Maldives](#), [Mexico](#), [Peru](#), [Philippines](#), [Spain](#), and [United Kingdom](#) to engage patients and the public about medication safety. The videos also provided education on safe medication practices and how health workers could reduce risk of medication errors.

Health workers

The General Council of Official Nursing Colleges of Spain published [an infographic](#) for nurses on how to handle toxic medicines safely, and how to reduce the risk of exposure to toxic substances. The infographic described which equipment was needed and provided guidance for preparation and administration, amongst additional recommendations.

Hospitals provided lectures and workshops on adverse drug events ([Croatia](#)), reduction of medication-related harm ([Kuwait](#), [Myanmar](#)), look-alike, sound-alike medicines ([Mexico](#), [Spain](#)) and risk of interruptions when managing medicines ([Belgium](#)). Between July and September, a hospital in [Ghana](#) organized a weekly medication safety education session for health workers. Multidisciplinary trainings on medication safety were provided in [Sudan](#). In [Uganda](#), two trainings were provided for health workers on promoting medication safety during prescribing and dispensing at primary care level.

A university in the [Russian Federation](#) held a dedicated session to make health care students more aware of the risks of errors and highlight that providing medical care should be safe for both the patient and for the health worker. In [Argentina](#), a university held a meeting to discuss the integration of patient safety in the educational curriculum of health science students. Interactive sessions on medication safety were also conducted in [Pakistan](#) and [Saudi Arabia](#) for university students. Nursing students in [Spain](#) and [Uruguay](#) had lectures on prevention of medical errors and correct medication administration techniques through simulation.

In [France](#), SRA Occitanie and the Regional and Territorial Organizations for the Improvement of Health Practices set up [a challenge](#) for health care facilities and health workers to report on adverse events. The objective was to enhance reporting and learning and to support the development of safety culture.

The Swedish Medical Products Agency and National Board of Health and Welfare in [Sweden](#) created a [video](#) targeting health workers to raise awareness on medication-related harm and to encourage health workers to KNOW. CHECK. ASK. In [Côte d'Ivoire](#), the National Drug Regulatory Agency made a [video](#) to encourage the public and health professionals to report adverse drug events. The video provided information on pharmacovigilance and highlighted the principle of “first, do no harm”.

Medicines as products

Patient groups ([England](#)), professional organizations ([United Kingdom](#)), hospitals ([Colombia](#), [England](#), [Germany](#), [Jordan](#), [Pakistan](#), [United States](#)), Centres of Disease Control ([Canada](#)) and institutions ([France](#)) across the world highlighted the dangers of antimicrobial resistance (AMR). The World Dental Federation (FDI) created a [video](#) to highlight the important role dental teams play in the fight against antimicrobial resistance. The Department of Health in [Ireland](#) created a [video](#) to give prominence to antimicrobial stewardship as an important part of medication safety, and to remind that antibiotics should be prescribed and used in a way that they cause the least amount of harm.

SESARAM Patient Safety and Risk Management Commission in [Portugal](#) highlighted different aspects of medicines as products, including look-alike, sound-alike products, pharmacovigilance, antimicrobial resistance and adverse drug reaction reporting.

In **Australia**, the Chief Medical Officer of the Australian Commission on Safety and Quality in Health Care promoted rational, safe use of opioids and the need for stewardship in acute pain in a [video](#).

In **Brazil**, the Brazilian Network for Nursing and Patient Safety held a webinar on preparedness for situations where patient safety would be at risk due to a local or national medication shortage.

In **Kuwait**, a hospital created practical instructions on the guidelines for expiration of medicines to increase awareness of patients and professionals.

The Ministry of Health and Population in the **Congo** dedicated a special session in its event to discuss measures taken against counterfeit medicines in the country. The Ministry of Health of **Burundi** highlighted in its press release the priority of fighting against substandard and falsified medicines through regulatory action and ensuring everyone had access to safe, effective, quality medicines.

The General Pharmaceutical Council of Spain focused its campaign on preventing falsified medicines entering the legal supply chain and highlighting the role of pharmacists at different levels of the supply chain, namely industry, wholesale distribution and dispensing (hospital and community pharmacies). The University of Panama raised awareness of the fight against falsified medicines. Fight the Fakes Alliance spoke at the “Making medicines safe and reliable for all” webinar and highlighted the commitment and collaboration of all stakeholders in addressing substandard and falsified medicines.

A health care facility in the **United States** had a poster made in collaboration with pharmacists and clinical dietitians to raise awareness on food–drug interactions. The poster highlighted which types of food might have an interaction with commonly used medicines. Food–drug interactions were also highlighted in exhibitions (**India, Oman**) and during lectures (**Oman**). A government agency in **Mexico** raised awareness on social media of how medicines might interact with alcohol, food and other medicines.

In **Sweden**, the WHO Collaborating Centre for International Drug Monitoring promoted [identification of medicinal products \(IDMP\) standards](#) to improve the safe use of medication.

Systems and practices of medication

In **Spain**, the Ministry of Health, Consumer Affairs and Social Welfare together with its partners collected best practices for medication safety from the field and summarized them in a [report](#) to encourage wider learning.

The number of “rights” of medication administration that hospitals and entities endorsed was most commonly 10; however, the number varied between countries and facilities from five up to 15. The 15 “rights” that were promoted in **Colombia** took into consideration elements such as hand hygiene and patient and family engagement. Hospitals and health workers promoted the “rights” in creative ways, for example through a social media video (**Chile**), street play (**India**), a large photo opportunity backdrop wall (**Viet Nam**) and creation of TikTok videos (**Indonesia, Philippines**). There was even a competition on the knowledge of the “rights of medication administration” with an air fryer as the main prize in **Colombia**. A hospital in **Argentina** made a video on safe administration of medicines. A hospital in England created pocket-sized cards on the “rights” of medication administration.

A “No distraction” campaign was launched in **Spain** that aimed to reduce disruptions to nursing staff while preparing or administering medicines. Actions that were implemented included warning vests and posters that reminded people not to distract the nurse while handling medicines. A similar campaign was also carried out in **China**, where a nursing department distributed orange vests with a “Do not disturb during administration” message and displayed awareness-raising posters at the nursing stations. Nurses also received an educational letter to engage them in safe medication practices. The Danish Society for Patient Safety highlighted on its social media a [special housing facility](#)

that had managed to eliminate serious medication errors by defining the roles of health workers clearly.

In **Saudi Arabia**, a hospital organized a lecture titled “Essential safety requirements” that focused on the standards of medication management.

Safe prescribing, dispensing and administration were highlighted in trainings and webinars at all levels across the world. For example, a training at an NHS hospital in **Scotland** pointed out how certain medicines increased the risk of falls, which needed to be taken into consideration when prescribing. In **India**, a hospital group held lectures on safe procurement of medicines.

Polypharmacy, high-risk situations and transitions of care

The Australian Commission on Safety and Quality in Health Care gave a national call for [posters](#) that highlighted the three key priority areas of the third WHO Global Patient Safety Challenge: *Medication Without Harm*.

Action on the three key action areas of Medication Without Harm varied across the world. Some examples included the following.

- 🔗 Polypharmacy was given prominence through [a blog](#) and dedicated meetings in the **United Kingdom**. In **Japan**, several hospitals focused on polypharmacy through disseminating handouts to patients and organizing a workshop on polypharmacy. The Australian Commission on Safety and Quality in Health Care produced a [video](#) bringing attention to inappropriate polypharmacy. In **Poland**, a [TV episode](#) focused on polypharmacy. BC (British Columbia) Patient Safety and Quality Council showed how storytelling had been used as a tool to raise awareness on polypharmacy among indigenous elders in **Canada**.
- 🔗 High-risk situations were pointed out in **Spain** by a [video](#) showcasing the top 10 medication errors with major risks based on data from the Institute for Safe Medication Practices – Spain. Some events and lectures highlighted specific high-risk/high-alert medications, such as insulin (**Japan, Lebanon, Northern Ireland**) and chemotherapy agents (**Brazil, India, Italy**). Patient Safety Learning elaborated on the safety concerns of insulin in its [blog](#). In the **Philippines**, a forum on medication safety in high-risk areas was attended by hospital staff, students and faculty. In addition, workshops and symposiums (**India, Italy, Maldives**) focused on medication safety among older persons. The WHO Collaborating Centre for Strengthening Pharmacovigilance Practices, based in **Morocco**, provided a presentation on addressing high-risk/high-alert medications. A hospital in **New Zealand** focused its WPSD activities on highlighting independent double-checking. In **Scotland**, the local NHS Drug and Therapeutics Committee posted a blog on safe prescribing of direct oral anticoagulants. In **Ireland**, a hospital pharmacy disseminated a credit card-sized oral anticoagulant dosing guide among health workers.
- 🔗 Transitions of care was highlighted through events and talks in **Ghana, India, Ireland, Italy** and **Spain**. In **Italy**, an award ceremony recognized selected hospitals for their work in transitions of care in the past one year, including use of multimodal approaches in transitions and use of medication reconciliation processes. Webinars on transitions of care were organized, for example by [Saudi Patient Safety Centre](#) and [Patient Academy for Innovation and Research](#).

Initiatives addressing other areas of patient safety

International Patient Safety Goals and use of other standards and indicators

Many hospitals adopted the six International Patient Safety Goals, developed by Joint Commission International, as a framework to address different areas of patient safety, to train their staff and to design their exhibition areas. Hospitals in **Pakistan** produced a video series where health workers created realistic scenarios that showed how harm can be avoided by following Goal 1: [Identify patients](#)

[correctly](#), Goal 2: [Improve effective communication](#), Goal 3: [Improve the safety of high-alert medications](#), Goal 4: [Ensure safe surgery](#), Goal 5: [Reduce the risk of health care-associated infections](#), and Goal 6: [Reduce the risk of patient harm resulting from falls](#) (the videos are in Urdu). A hospital in India produced similar [videos](#) related to the International Patient Safety Goals.

Through lectures and workshops, several hospitals in the Eastern Mediterranean Region focused on promoting patient safety standards ([Egypt](#), [Sudan](#)) and indicators ([Egypt](#)). A [Norwegian](#) hospital observed WPSD with a focus on patient safety measurement and indicators.

Safety culture and health worker safety

A hospital in [Sweden](#) highlighted in its WPSD celebration that safety culture is one of the most crucial elements in making health care safer. They emphasized that only if errors and adverse events are reported can learning happen and can harm be prevented.

The Saudi Patient Safety Center in collaboration with a [Saudi](#) hospital organized an event with several activities, including lectures that promoted building of a just culture and creation of a national platform for reporting adverse drug events.

The need for safety culture was also emphasized in [Egypt](#), [El Salvador](#), [Kuwait](#), and [Qatar](#). A hospital in [Belgium](#) utilized 17 September as an opportunity to emphasize the importance of reporting medication errors and near misses to its hospital staff. Healthcare Excellence Canada focused its WPSD celebration on promoting safety culture and organized a webinar [Safe-to-say: learning from patient safety incidents to create safer care for everyone involved](#). Healthcare Excellence Canada and Patients for Patient Safety Canada also organized a Canadian Patient Safety Week with the theme “Press play on safety conversations” and disseminated educational materials for [health workers](#), [patients](#) and [caregivers](#).

Patient safety culture was also highlighted by the German Coalition for Patient Safety in its press conference. The Japan International Cooperation Agency, Uganda Office, promoted the ongoing work that is being done in collaboration with the Ministry of Health of Uganda to enhance safety culture in [Uganda](#).

It was underlined by professional associations and civil society that reaching Medication Without Harm may be unattainable until the work environment and the work conditions, including staff shortages, are improved. Just culture and the linkages to improper working environment and staff shortages were also highlighted in [Ireland](#) and the [United Kingdom](#). [Action against Medical Accidents and Doctors’ Association UK](#) and the [International Council of Nurses](#) issued statements on how errors should be managed in a genuine “just culture”.

In the [Philippines](#), a hospital highlighted the importance of cultivating safety in all aspects of practice – in other words, providing safe care for patients while also providing a physically and psychologically safe environment for staff. The Singapore Psychological Society created a social media post to enhance the mindfulness of health workers of the risks of medication errors as well as the risks of burnout. Health care facilities in [Austria](#) raised awareness of the second-victim phenomenon among health workers.

Infection prevention and control

The importance of hand hygiene was emphasized by hospitals in [Austria](#), [Brazil](#), [Colombia](#), [Ecuador](#), [Egypt](#), [El Salvador](#), [Germany](#) and [Malaysia](#). Hand hygiene was highlighted in [Hungary](#) at the national event, including emphasis that wearing gloves should not be seen as a substitute for good hand hygiene practices. Proper hand hygiene was demonstrated to patients in several health facilities across the world, for example in [Mexico](#). Mercy Ships highlighted the pivotal role of infection and prevention

experts in safe care in its social media campaign. *La Gazette de l'Infectiologie* published [an article](#) (in French) on WPSD, highlighting the importance of reducing health care-associated infections.

Hospital staff posed with hand hygiene photo frames in several countries, including [Colombia](#), [Ecuador](#), [Mexico](#) and [Sudan](#). TikTok videos from [Colombia](#) and [Ecuador](#) highlighted the correct hand hygiene techniques.

Safe and respectful childbirth

Nongovernmental organizations in [Somalia](#) and [Madagascar](#) showed how timely access to safe and quality obstetric care can prevent obstetric fistulas. A [Colombian](#) hospital carried out a local campaign that focused on safe practices during pregnancy, childbirth and postpartum. A hospital in [Spain](#) organized an awareness campaign to engage and involve parents in providing safe care to their newborns.

The Division of Reproductive Health of the United States Centers for Disease Control and Prevention produced a WPSD [video](#) to advocate safe, respectful childbirth in more at-risk populations. The International Confederation of Midwives launched a social campaign that called for demedicalization of childbirth. Its campaign highlighted that medication administration should be based on informed consent, whereby the person giving birth is also given choices.

The International Federation of Gynecology and Obstetrics (FIGO) launched a campaign focused on medication safety for the prevention and treatment of postpartum haemorrhage. The campaign included a [video](#).

The Partnership for Maternal, Newborn and Child Health advocated safe and respectful care for women, children and adolescents in every care setting. They also created [a list of resources](#) across organizations that are useful in supporting safe and respectful maternity care.

Addressing the weaknesses in the systems and practices at hospital level

A hospital in [Egypt](#) utilized the opportunity of WPSD 2022 to initiate concrete action on preventing pressure ulcers, a major source of patient harm in hospital settings, particularly in the intensive care unit. Pressure ulcers were also identified as a problem in a hospital in [Spain](#) and was incorporated as a topic in a workshop organized to observe WPSD.

Two hospitals in [Comoros](#) took WPSD as an opportunity to set up meetings with senior staff to look into ways of making their services safer, focusing especially on standardization of procedures. One of the concrete actions taken was the implementation of emergency medicine carts in paediatric departments.

On 17 September, the Minister of Health in [Mauritius](#) launched a health service [decentralization initiative](#) to improve access to care. The initiative aimed to decongest the waiting times at regional hospitals and improve access to specialist care.

Role of technology in advancing patient safety

Several hospitals in [Austria](#) organized events related to patients' data protection and cybersecurity as part of patient safety. Patient safety experts in [Türkiye](#) highlighted how medical data protection was an area that should not be ignored, and that required adequate investment.

The Australian Digital Health Agency discussed [the impact of electronic health records on improving medication safety outcomes](#). The New South Wales Government in [Australia](#) created [a video](#) to describe the benefits of its e-prescription system.

The [September editorial](#) of *Nature* called for wider societal discussion on patient safety in the context of artificial intelligence and other medical innovations.

Oaths and pledges

Patient safety oaths were especially popular in [India](#). A national campaign to pledge for medication safety was taken up by almost 70 000 people in [India](#). Oaths were also used as part of WPSD campaigns in [Indonesia](#) and the [Philippines](#). WPSD pledges were used in [Belgium](#), [Kuwait](#), [Lebanon](#), [Nigeria](#), [Philippines](#), [Saudi Arabia](#), [Sri Lanka](#), [Sudan](#) and [United Kingdom](#). Handwritten pledges were utilized in [Colombia](#), [Malaysia](#), and [Mexico](#). The Health Care Accreditation Council urged national health care leaders to take a pledge on how they will make health care safer in [Jordan](#).

Free medical consultations

The national WPSD commemoration in [Timor-Leste](#) included a free medical camp that provided eye tests and blood group identification. Several hospitals in [China](#) set up free clinics for patients to have their medications reviewed, to receive guidance and to have their blood pressure checked. A hospital in [Myanmar](#) offered a free medication review and medication counselling service at its WPSD event. Nursing students measured patients' blood pressure and pharmacy students offered advice on safe use of medication at the national public event in [Mongolia](#).

Participants of the event “Engaging patient, family and community to promote medication safety” in [Uganda](#) had an opportunity to receive different public health interventions and treatment support free of charge, including COVID-19 vaccination, testing (blood glucose, blood pressure, HIV, malaria), cancer screening, eye check-ups and mental health support.

Together with its partners, the Italian Network for Safety in Healthcare encouraged all health care facilities (including community pharmacies) in [Italy](#) to offer free medication reviews on 17 September.

Creative celebrations

Medication safety booths in health care facilities organized fun games linked to medication safety, such as board games ([Brazil](#), [Malaysia](#) and [Mexico](#)), games related to knowing the brand and generic names of medicines ([Germany](#), [India](#)), a memory game ([Germany](#)), roulette ([Brazil](#)) and trivia ([United States](#)). In [Austria](#), several health care facilities created a “room of horrors”, which was a simulation room that included a large number of potential medication errors. The errors were incorporated in the scenario with different levels of risk. The objective was to enhance critical thinking and situational awareness and promote interprofessional cooperation. A similar activity was carried out in other countries ([Germany](#), [India](#) and [Philippines](#)). A hospital organized an escape room to help the health workers revise medication safety practices ([Luxembourg](#) and [Monaco](#)).

A hospital in [Malaysia](#) organized a Zumba event as part of its combined WPSD and World Pharmacist Day celebration.

In [Bhutan](#), patient organizations [added World Patient Safety Day stamps on wind horse flags](#) to pray that patients remain free from medication errors, and to wish health workers well.

Hospital staff held dance performances in [India](#), [Indonesia](#) and [Malaysia](#). Health workers made dance videos on TikTok in [Ecuador](#), [Malaysia](#) and [South Africa](#). Flash mobs were organized in [India](#) and [Malaysia](#).

World Patient Safety Day inspired people to create and share their arts in social media, for example, mandala art and art with garden flowers. In [Denmark](#) a cartoon artist, who draws about the life of a nurse, created a series of medication safety-related cartoons for 17 September. The International

Alliance of Patients' Organizations launched a campaign where [cartoons](#) were also used to raise awareness in a fun way.

In the last four years, baked goods that are orange in colour or promote WPSD have become a tradition. In the 2022 edition, creative baked goods included the following.

- 🍩 Cupcakes and muffins: in some countries cupcakes were decorated with little warning signs (Malaysia), pills and capsules made of fondant (England), or patient safety logos (Saudi Arabia).
- 🍰 Cakes: these included carrot cake ([Switzerland](#)), cake with capsules ([Kenya](#)), cake with a Medication Without Harm capsule map (International Alliance of Patients' Organizations), cakes with the WPSD logo ([Brazil](#), [Denmark](#), [Islamic Republic of Iran](#), [Saudi Arabia](#)) and 5 Moments for Medication Safety cake ([United Arab Emirates](#)).

Media coverage

Conventional media coverage

World Patient Safety Day messages were published in newspapers, journals and magazines in at least 55 countries. *UN News* launched a news piece of the WPSD celebrations in [Egypt](#) in an [audio format](#) (in Arabic).

During the week of WPSD, local news in [Zimbabwe](#) published [an article](#) explaining adverse drug event reporting, causality assessment and why assessing each report individually is important. The article also called upon patients and the public to report adverse drug events.

[A news piece](#) from [Panama](#) included an interview of the WHO patient safety and quality focal point in the Pan American Health Organization; and the global virtual event organized by WHO headquarters was reported by [Health Policy Watch](#).

An [article](#) in *Forbes* elaborated on how health care systems can and must do better when taking care of patients. This can happen through patient empowerment as to err is human, but the lessons need to be learned.

The *Economic Times* of India published an article and produced a [video](#) to raise awareness on rational, safe use of medicines, especially over-the-counter painkillers.

Professional societies and nongovernmental organizations featured WPSD in their newsletters and journals and launched special editions, for example in [Australia](#), [Canada](#) and [Japan](#).

WPSD was featured in TV news in [Botswana](#), [Colombia](#), [India](#), [Islamic Republic of Iran](#), [Kuwait](#), [Monaco](#), [Mongolia](#), [Nigeria](#), [Oman](#), [Pakistan](#), [Poland](#) and [Uganda](#). It was also discussed in talk shows and morning shows in [Ethiopia](#), [Mauritius](#), [Namibia](#), [Nigeria](#), [Oman](#), [Pakistan](#), [Uganda](#) and [United States](#). In [Nigeria](#) the day received the attention of the media and was discussed by different TV channels over a period of several days. Some examples of these are an [interview of a patient safety and rights advocate](#) and a [public health physician talking about how patients can avoid medication-related harm](#).

Patient safety was promoted and the slogan "Medication Without Harm" was discussed on radio in [Brazil](#), [Chile](#), [Ecuador](#), [India](#), [Mauritius](#), [Panama](#), [Peru](#), [Philippines](#), [Spain](#), [Uganda](#), and [Uruguay](#). A Beninese expert explained briefly for [Radio Afrique Santé](#) some of the strategies that can prevent vaccination errors.

Social media coverage

World Patient Safety Day had a great deal of social media presence, especially in [India](#), where #WorldPatientSafetyDay was at some point on 17 September [the third most popular hashtag](#). Governments and prominent persons highlighted the day in social media.

- 🔗 The Minister of Health and Family Welfare, [Dr Mansukh Mandaviya](#), and several politicians in [India](#) tweeted about the day.
- 🔗 The Director-General of Health, [Malaysia](#), Dr Noor Hisham Abdullah, expressed his support for WPSD through his personal [social media](#) accounts by posting about lighting up monuments in orange and sharing [collages of the illuminated monuments](#).
- 🔗 The Swiss Minister of Health, Alain Berset, [tweeted](#) in support of WPSD and announced the upcoming Global Patient Safety Ministerial Summit that will be held in Montreux in February 2023.
- 🔗 The Chief Medical Officer for [Luxembourg](#), Dr Jean-Claude Schmit, promoted WPSD [in different social media platforms](#).
- 🔗 The Executive Director of the European Medicines Agency, Emer Cooke, promoted WPSD on [LinkedIn](#).
- 🔗 The Aged Care Commissioner of [New Zealand](#), Carolyn Cooper, gave a [statement](#) calling on all stakeholders to pay special attention to medication safety in elderly populations.
- 🔗 Chiquita Brooks-LaSure, Administrator for the Centers for Medicare and Medicaid Services in the [United States](#), [tweeted](#) about the day.

National and subnational ministries of health and governments, including social security and medicine agencies, promoted the day on social media in [Australia](#), [Bahrain](#), [Barbados](#), [Botswana](#), [Burundi](#), [Brunei Darussalam](#), [Bolivia \(Plurinational State of\)](#), [Botswana](#), [Chile](#), [Colombia](#), [Côte d'Ivoire](#), [Czechia](#), [Denmark](#), [Dominican Republic](#), [Ecuador](#), [Estonia](#), [Ethiopia](#), [Fiji](#), [Finland](#), [Germany](#), [Honduras](#), [Indonesia](#), [Iraq](#), [Ireland](#), [Kuwait](#), [Luxembourg](#), [Maldives](#), [Mexico](#), [Monaco](#), [New Zealand](#), [Oman](#), [Paraguay](#), [Peru](#), [Portugal](#), [Qatar](#), [South Africa](#), [Somalia](#), [Spain](#), [Sweden](#), [Switzerland](#), [Togo](#), [Uganda](#), [Uruguay](#), [Zambia](#) and [Zimbabwe](#).

Ministers of health urged action on medication safety and cultivation of Know.Check.Ask. ([Indonesia](#)), and expressed their support for the campaign ([Northern Ireland](#)).

[Joint Commission International](#) and various regional (Africa), national and local accreditation entities in [Egypt](#), [India](#), [Jordan](#), [Kazakhstan](#), [Nigeria](#), [Republic of Korea](#), [Thailand](#) and [Tunisia](#) joined the global celebrations. The [Office of Health Standards Compliance](#) in [South Africa](#) used the opportunity to highlight the importance of compliance with national norms and standards. A regional pharmaceutical inspection entity in [Brazil](#) also promoted the day.

The United Nations posted about WPSD in several languages. The [International Atomic Energy Agency](#), [International Organization for Migration Country Office in Ecuador](#), [United Nations Children's Fund in South Sudan](#) and [United Nations Population Fund East and Southern Africa](#) raised awareness in social media. The [United Nations Office for Project Services Somalia](#) promoted the ongoing work to build the first national blood bank in [Somalia](#). Along with United Nations organizations, many international organizations, including [EngenderHealth](#), [European Cancer Organisation](#), [European Medicines Agency](#), [International Pediatric Association](#), [International Society on Thrombosis and Haemostasis](#), [Médecins Sans Frontières](#), [Management Sciences for Health](#), [Thalassaemia International Federation](#) and [World Federation of Societies of Anaesthesiologists](#), joined the campaign by featuring information on their websites and raising awareness through social media. Development agencies such as the [African Union Development Agency – New Partnership for Africa's Development \(NEPAD\)](#) and the [United States Agency for International Development \(USAID\)](#) were also active in social media.

International not-for-profit organizations posted on social media at national level, including Cochrane ([New Zealand](#)), Médecins Sans Frontières ([Germany](#)), WaterAid ([West Africa](#), [United States](#)), and Red Cross ([Colombia](#), [Ecuador](#) and [Germany](#)). In several countries patient organizations launched social media campaigns on medication safety or promoted WPSD on their websites ([Bosnia and Herzegovina](#), [England](#), [Germany](#), [Greece](#), [Ireland](#), [Israel](#), [North Macedonia](#), [Singapore](#)). For example, in [Algeria](#), the patient organization shared several posts on what pharmacovigilance is and how patients can report adverse drug events. The Consumers' Union of Finland raised awareness about [consumers' rights to be protected when interacting with health care](#). The European Consumer Organisation highlighted the [risk to patient safety caused by inaccessibility to medicines](#).

Academic institutions ([Argentina](#)), not-for-profit organizations ([Dominican Republic](#), [France](#), [Honduras](#), [Mexico](#) and [Spain](#)), public health institutes ([Belarus](#), [France](#), [Italy](#), [Mexico](#), [Peru](#), [Serbia](#), [Singapore](#), [Tunisia](#)) and civil societies linked to empowering citizens, human rights, right for care and patient law ([Brazil](#), [Cameroon](#), [Democratic Republic of the Congo](#), [Rwanda](#)) promoted WPSD on their websites and social media. The Health Development Initiative organized a [social media campaign](#) in [Rwanda](#), which raised awareness on patient safety and dignity in health care as a legal right. The campaign had several social media influencers involved.

Professional associations representing medical doctors and surgeons actively promoted WPSD through various media platforms in [Chile](#), [Costa Rica](#), [Finland](#), [Greece](#), [Kenya](#), [Maldives](#), [Nigeria](#), [Philippines](#), [Oman](#) and [Scotland](#). For example, the European Junior Doctors Association organized a WPSD webinar, and anaesthesiology organizations in [Colombia](#), [Costa Rica](#) and [Zambia](#) raised awareness on patient safety and medication safety through social media posts. A hospital in [China](#) focused its online communication to showcase medication safety practices they have in place in anaesthesiology and how they have been able to reduce risk of medication errors.

Nursing and midwifery associations ([Australia](#), [Finland](#), [Lebanon](#), [Türkiye](#), [United Kingdom](#)) also expressed their support. The Spanish Association of Nursing in Otorhinolaryngology and Head and Neck provided technical recommendations on social media that nurses might need to provide safe care in areas of their work, for example [removing ear wax](#) and use of [tracheal cannula](#).

National pharmacy associations ([Algeria](#), [Australia](#), [Brazil](#), [Chile](#), [Colombia](#), [Estonia](#), [Ghana](#), [Indonesia](#), [Kenya](#), [South Africa](#), [Spain](#), [Uganda](#), [United Kingdom](#), [United States](#)), communities for sharing pharmacy information ([Benin](#), [Nepal](#)) and individual community pharmacies ([Cambodia](#), [Finland](#), [Nigeria](#), [North Macedonia](#), [United Arab Emirates](#)) amplified WPSD messages. Hospital pharmacies in central [Norway](#) [raised awareness on medication-related harm](#). Umbrella organizations for national pharmaceutical industry also spread messages on the call to action KNOW.CHECK.ASK. ([Australia](#), [Finland](#), [Germany](#), [India](#), [Sweden](#), [Uruguay](#)). Different pharmaceutical companies raised awareness on medication safety through national and international campaigns.

Health services, clinics, hospitals ([Bahrain](#), [Barbados](#), [Belarus](#), [Brunei Darussalam](#), [Croatia](#), [Cuba](#), [Finland](#), [Germany](#), [Greece](#), [Honduras](#), [India](#), [Indonesia](#), [Kazakhstan](#), [Lebanon](#), [Libya](#), [Myanmar](#), [Poland](#), [Romania](#), [Rwanda](#), [Slovakia](#), [Slovenia](#), [Somalia](#), [Sri Lanka](#), [Sweden](#), [Thailand](#), [Tunisia](#), [Türkiye](#), [United Arab Emirates](#), [United States](#)) and laboratories ([Albania](#), [Canada](#), [Germany](#), [North Macedonia](#), [Sri Lanka](#)) made social media posts to support the day. A hospital in [Bosnia and Herzegovina](#) showcased people who take care of the equipment to ensure the provision of safe care. Different health insurance providers in [Germany](#) also raised awareness on patient safety and organized events. Mutuelle Générale des Postes et Télécommunications, health insurance provider in [Morocco](#), [promoted WPSD](#). Dentistry clinics ([Croatia](#), [England](#), [Finland](#), [India](#), [Italy](#), [Qatar](#), [United States](#)) joined the celebrations through social media. Several TikTok videos in [Peru](#) highlighted the importance of timely visits to dentists and avoidance of unnecessary use of medications such as antimicrobials. Several other types of health care facilities joined the global call on social media, including eye clinics, assisted living

providers, rehabilitation centres, chiropractors, osteopaths, traditional medicine providers, homeopathy providers, dietitians, physiotherapists and blood donation centres. Entities involved in hospital maintenance and housekeeping created posts on proper cleaning, best laundry practices and overall maintenance (Finland and Italy). Training and simulation entities participated in observing 17 September on social media as well. The word even reached a veterinary clinic in the United States, where 17 September was used to showcase how themes such as safety culture and reporting and learning applied also to animals. Fire and emergency rescue services, including ambulance services, used social media in England, Finland, France and United States to communicate about the importance of the day and what patients can do.

Mottos and slogans

- 🔗 “Aim to be a master of medicine”, by Yokohama City University Hospital and Yokohama City University General Medical Centre, Japan
- 🔗 “Identifying patients is everyone’s responsibility”, by Hospital Universitario Germans Trias i Pujol, Spain
- 🔗 “Stand strong for patient safety: safe medication” was widely used in Germany
- 🔗 “Lights on for patient safety: let’s set an example”, by some of the hospitals within the Austrian Coalition for Patient Safety)
- 🔗 “Medication in safe hands” was the national slogan for Finland
- 🔗 “Act for safe care” was amplified in Sweden

Countries that observed World Patient Safety Day 2022

There were at least 136 WHO Member States that observed WPSD 2022, as listed below.

African Region 27/47

Algeria
Benin
Botswana
Burundi
Cabo Verde
Cameroon
Comoros
Congo
Côte d'Ivoire
Democratic Republic of the Congo
Ethiopia
Ghana
Kenya
Madagascar
Malawi
Mauritius
Mozambique
Namibia
Nigeria
Rwanda
Senegal
South Africa
Togo
Uganda
United Republic of Tanzania
Zambia
Zimbabwe

Region of the Americas (26/35)

Argentina
Barbados
Bolivia (Plurinational State of)
Brazil
Canada
Chile
Colombia
Costa Rica
Cuba
Dominican Republic
Ecuador
El Salvador
Guyana
Haiti
Honduras
Jamaica
Mexico
Nicaragua
Panama
Paraguay

Peru
Saint Lucia
Trinidad and Tobago
United States of America
Uruguay
Venezuela (Bolivarian Republic of)

South-East Asia Region (10/11)

Bangladesh
Bhutan
India
Indonesia
Maldives
Myanmar
Nepal
Sri Lanka
Thailand
Timor-Leste

European Region (40/53)

Albania
Austria
Belarus
Belgium
Bosnia and Herzegovina
Bulgaria
Croatia
Cyprus
Czechia
Denmark
Estonia
Finland
France
Germany
Greece
Hungary
Iceland
Israel
Italy
Kazakhstan
Latvia
Lithuania
Luxembourg
Malta
Monaco
Netherlands (Kingdom of the)
North Macedonia
Norway
Poland

Portugal
Romania
Russian Federation
Serbia
Slovakia
Slovenia
Spain
Sweden
Switzerland
Türkiye
United Kingdom of Great Britain and Northern Ireland

Eastern Mediterranean Region (20/22)

Afghanistan
Bahrain
Egypt
Iraq
Islamic Republic of Iran
Jordan
Kuwait
Lebanon
Libya
Morocco
Oman
Pakistan
Qatar
Saudi Arabia
Somalia
Sudan
Syrian Arab Republic
Tunisia
United Arab Emirates
Yemen

Western Pacific Region (13/27)

Australia
Brunei
Cambodia
China
Fiji
Japan
Malaysia
Mongolia
New Zealand
Philippines
Republic of Korea
Singapore
Viet Nam

Key stakeholders and partners

Academic institutions

1. Ain Shams University, Egypt
2. Al-Azhar University, Egypt
3. Alexandria University, Egypt
4. Almaarefa University, Saudi Arabia
5. Ariadne Labs, United States of America
6. Australian Institute of Health Innovation, Australia
7. B K Roy Research Centre, India
8. Batterjee Medical College, Saudi Arabia
9. Cairo University, Egypt
10. Care College of Pharmacy, India
11. Center for Patient Safety Research, Indonesia
12. Université de Sherbrooke, Canada
13. Far Eastern University – Dr Nicanor Reyes Medical Foundation, Philippines
14. Fatima Jinnah Medical University, Pakistan
15. Government Medical College Omandurar Government Estate, India
16. Hamdard Institute of Medical Science and Research, India
17. Hannover Medical School, Germany
18. Health Education and Improvement Wales, United Kingdom of Great Britain and Northern Ireland
19. Health Services Academy, Pakistan
20. I.M. Sechenov First Moscow State Medical University, Russian Federation
21. Imperial College London, United Kingdom of Great Britain and Northern Ireland
22. Institute for Health Transformation, Australia
23. Institute of Pharmaceutical Sciences, Bhabha Ropar, India
24. Institute of Public Health, Serbia
25. Istituto Superiore di Sanità, Italy
26. Kamuzu University of Health Sciences, Malawi
27. King George's Medical University, India
28. Lady Hardinge Medical College, India
29. Madras Christian College, India
30. Malla Reddy Institute of Pharmaceutical Science, India
31. Medical Teaching Institution Swabi, Pakistan
32. MedStar Institute for Quality and Safety, United States of America
33. Mexican Academy of Surgery, Mexico
34. Mongolian National University of Medical Sciences, Mongolia
35. National Cancer Institute (All India Institute of Medical Sciences, New Delhi), India
36. National Cancer Institute, Mexico
37. National Health Innovation Centre, Viet Nam
38. National Institute of Mental Health and Neurosciences, India
39. National Institute of Nutrition and Food Technology, Tunisia
40. National Mental Health Institute, Peru
41. National School of Public Health, Brazil
42. Nirmala College of Pharmacy, India
43. NRI Academy of Medical Sciences, India

44. Nursing School of St José de Cluny, Portugal
45. Omar Al-Mukhtar University, Libya
46. Pushpawati Singhanian Hospital and Research Institute, India
47. Qatar University, Qatar
48. Rai Medical College Sargodha, Pakistan
49. Réseau de Prévention des Infections associées aux Soins, France
50. Riphah Institute of Healthcare Improvement and Safety, Pakistan
51. Russian Medical Academy of Continuous Professional Education, Russian Federation
52. Sagar Institute of Research and Technology, India
53. Santa Paula University, Costa Rica
54. Semmelweis University, Hungary
55. St. Peter's Institute of Pharmaceutical Sciences, India
56. Takasaki University of Health and Welfare, Japan
57. Universidad del Salvador, Argentina
58. Universidad ISALUD, Argentina
59. University of Almeria, Spain
60. University Medical Center of the Johannes Gutenberg University Mainz, Germany
61. University of Bradford, United Kingdom of Great Britain and Northern Ireland
62. University of Los Andes, Bolivarian Republic of Venezuela
63. University of Madeira, Portugal
64. University of Malta, Malta
65. University of Panama, Panama
66. University of Pretoria, South Africa
67. University of Reading, United Kingdom of Great Britain and Northern Ireland
68. University of the Philippines Manila, Philippines
69. University of the Republic, Uruguay
70. Vardhman Mahavir Medical College and Safdarjung Hospital, India
71. Yeditepe Üniversitesi Hastaneleri, Türkiye

Accreditation agencies

72. Accreditation Center for Quality in Healthcare, Kazakhstan
73. Africa Institute of Healthcare Quality Safety and Accreditation
74. Consortium of Accredited Healthcare Organizations, India
75. Council for Health Service Accreditation of Southern Africa
76. General Authority for Healthcare Accreditation and Regulation, Egypt
77. Health Care Accreditation Council, Jordan
78. Healthcare Accreditation Institute, Thailand
79. Health Facility Monitoring and Accreditation Agency, Nigeria
80. Joint Commission International
81. Instance Nationale de l'Évaluation et de l'Accréditation en Santé, Tunisia
82. Japan Council for Quality Health Care, Japan
83. Korea Institute for Healthcare Accreditation, Republic of Korea
84. Quality and Accreditation Institute, India
85. Quality Council of India, India

Associations of Pharmaceutical Industry

86. German Association of Research-based Pharmaceutical Companies, Germany
87. Läkemedelsindustriföreningen, Sweden
88. Medicines Australia, Australia
89. Chamber of Pharmaceutical and Related Specialties, Uruguay
90. Organisation of Pharmaceutical Producers of India, India
91. Pharma Industry Finland, Finland

Governmental agencies

92. Antibiotic Wise, Canada
93. Australian Commission on Safety and Quality in Health Care, Australia
94. Australian Digital Health Agency, Australia
95. Autorité Ivoirienne de Regulation Pharmaceutique, Côte d'Ivoire
96. Center for Health Development, Mongolia
97. Center for the State Control of Medicines, Equipment and Medical Devices, Cuba
98. Centers for Disease Control and Prevention, United States
99. Centre for Disease Prevention and Control, Latvia
100. Costa Rican Social Security Fund, Costa Rica
101. Danish Medicines Agency, Denmark
102. Danish Patient Safety Authority, Denmark
103. Drug Regulatory Authority, Tunisia
104. Drug Regulatory Authority of Pakistan, Pakistan
105. Egyptian Drug Authority, Egypt
106. Estonian Health Insurance, Estonia
107. FSBI "National Institute of Quality" of Roszdravnadzor, Russian Federation
108. Federal Institute for Drugs and Medical Devices, Germany
109. Federal Service for Supervision of Healthcare, Russian Federation
110. Fédération des Organismes Régionaux et territoriaux pour l'Amélioration des Pratiques en santé, France
111. Finnish Medicines Agency, Finland
112. Gajraj Corps, Indian Army, India
113. Ghana Health Service, Ghana
114. Haute Autorité de Santé, France
115. Health and Disability Commissioner, New Zealand
116. Health Information and Quality Authority, Ireland
117. Health Quality and Safety Commission, New Zealand
118. Health Service Executive, Ireland
119. Healthcare Safety Investigation Branch, United Kingdom of Great Britain and Northern Ireland
120. Indian Council of Medical Research – Centre for Ageing and Mental Health, India
121. Indian Navy, India
122. Infarmed, Portugal
123. Institut Català de la Salut a les Terres de l'Ebre, Spain
124. Instituto de Previsión Social, Paraguay
125. Instituto de Seguridad Social del Estado de México y Municipios (ISSEMYM), Mexico
126. Instituto de Seguridad y Servicios Sociales de los Trabajadores del Estado (ISSSTE), Mexico
127. Japan International Cooperation Agency (JICA) Uganda Office, Uganda

128. Medicines Control Authority of Zimbabwe, Zimbabwe
129. National Agency for Food and Drug Administration and Control, Nigeria
130. National Board of Health and Welfare, Sweden
131. National Center for Disease Control, Libya
132. National Drug Authority, Uganda
133. National Health Systems Resource Centre, India
134. National Institute of Public Health, Czechia
135. National Medical Arbitration Commission, Mexico
136. National Quality and Patient Safety Directorate, Ireland
137. National Supervisory Authority for Welfare and Health, Finland
138. National Treasury Management Agency, Ireland
139. Nigeria Centre for Disease Control, Nigeria
140. Norwegian Directorate of Health, Norway
141. Office for Registration of Medicinal Products, Medical Devices and Biocidal Products, Poland
142. Office of Health Standards Compliance, South Africa
143. Oregon Patient Safety Commission, United States of America
144. Patient Safety Authority, United States of America
145. Punjab Health Care Commission, Pakistan
146. Quality and Accreditation Directorate, Kuwait
147. Regional Council of Pharmacy of the State of São Paulo, Brazil
148. Regional Healthcare System of Madeira Island, Portugal
149. Saudi Food and Drug Authority, Saudi Arabia
150. Secretaria Municipal de Saúde – Rio de Janeiro, Brazil
151. Seguro Social de Salud del Perú, EsSalud, Peru
152. Sindh Health Care Commission, Pakistan
153. State Health Services Administration, Uruguay
154. State Institute for Drug Control, Czechia
155. State Institution “Svetlogorsk Zonal Center for Hygiene and Epidemiology”, Belarus
156. Swedish Medical Products Agency, Sweden
157. United States Agency for International Development, United States of America

Health care facilities

158. 15th of May Hospital, Egypt
159. 32nd City Clinical Polyclinic, Belarus
160. Abdali Hospital, Jordan
161. Addu Equatorial Hospital, Maldives
162. Adeed, Saudi Arabia
163. ADK Hospital, Maldives
164. Aga Khan Hospital Dar es Salaam, United Republic of Tanzania
165. Agami Specialized Hospital, Egypt
166. AIG Hospitals, India
167. Ain Shams University Hospitals, Egypt
168. Al Amal Hospital, Jordan
169. Al Haram Hospital, Egypt
170. Al Noor Specialist Hospital, Saudi Arabia
171. Al Sabah Hospital, Kuwait
172. Al Zahra Hospital Dubai, United Arab Emirates

173. Al-Badri Polyclinic, Saudi Arabia
174. Al-Futtaim Health, United Arab Emirates
175. Aliaa Specialist Hospital, Sudan
176. Al-Rafiah General Hospital, Saudi Arabia
177. All India Institute of Medical Science Rishikesh, India
178. American Ambulance, United States of America
179. Apollo Hospitals Group, India
180. Ar Yu International Hospital, Myanmar
181. Aster Mims Hospital, India
182. Aster Hospital, Qatar
183. Ayushman Bharat – Health and Wellness Centre Bihar, India
184. Azienda Ospedaliero-Universitaria di Parma, Italy
185. Bahawal Victoria Hospital, Pakistan
186. Bandar Mas Health Clinic, Malaysia
187. Beni Suef Specialised Hospital, Egypt
188. Barts Health NHS Trust, United Kingdom of Great Britain and Northern Ireland
189. Base Hospital Kalmunai North, Sri Lanka
190. Beijing Hospital, China
191. Beijing Tsinghua Changgung Hospital, China
192. Bellevue Medical Center, Lebanon
193. Beru Clinic, Ethiopia
194. Bhatia Hospital, India
195. Bispebjerg Hospital, Denmark
196. Blackrock Health Hermitage Clinic, Ireland
197. Breach Candy Hospital Trust Mumbai, India
198. Bridge Clinic, Nigeria
199. C-Care IHK, Uganda
200. Central Norway Pharmaceutical Trust, Norway
201. Centre Hospitalier de Luxembourg, Luxembourg
202. Centre Hospitalier Emile Mayrisch, Luxembourg
203. Centre Hospitalier Neuro-Psychiatrique, Luxembourg
204. Centro Hospitalar Universitario de Lisboa Central, Portugal
205. Centro Oncológico Estatal "Dr José Luis Barrera Franco" del ISSEMyM, Mexico
206. Centro Regional de Alta Especialidad de Chiapas, Mexico
207. Centrul Medical Sanconfind, Romania
208. CESFAM Carlos Trupp Wanner, Chile
209. Charité – Universitätsmedizin, Germany
210. Chengalpattu Medical College Hospital, India
211. Children's Hospital and Institute of Child Health, Pakistan
212. Citizens General Medical Center, Japan
213. Civil Hospital Sanwer Indore, India
214. Clínica Anglo Americana, Peru
215. Clínica Regional Ixtapan de la Sal, Mexico
216. Clinica Shaio, Colombia
217. Clínica del Country, Colombia
218. Clínica La Colina, Colombia
219. Clinical Medical Center Osijek, Croatia
220. Clinique Notre-Dame de Grâce, Belgium

221. Clinique Saint-Jean, Belgium
222. Complejo Asistencial Padre Las Casas, Chile
223. Confa Salud, Colombia
224. Connolly Hospital Blanchardstown, Ireland
225. Continental Hospitals, India
226. Cooperman Barnabas Medical Center, United States of America
227. Damanhour Oncology Center, Egypt
228. Dar Al Shifa Hospital, Kuwait
229. District Headquarters Hospital Kotli, Pakistan
230. Distrito Sanitario de Atención Primaria Córdoba y Guadalquivir, Spain
231. Doha Clinic Hospital, Qatar
232. Dollow Referral Health Centre, Somalia
233. Don Emilio Del Valle Memorial Hospital, Philippines
234. Dr Essa Laboratory and Diagnostic Centre, Pakistan
235. Dr Bakhsh Hospital, Saudi Arabia
236. Dr Ziauddin Hospital, Pakistan
237. Dube and Pottas, South Africa
238. Dublin Midlands Hospital Group, Ireland
239. E.S.E. Hospital Departamental San Vicente de Paul, Colombia
240. EHA Clinics, Nigeria
241. Ehime University Hospital, Japan
242. Eka Hospitals, Indonesia
243. El Sheikh Zayed Al Nahyan Hospital, Egypt
244. El-Shabhab Primary Healthcare Unit, Egypt
245. EpiCURA, Belgium
246. Essen University Hospital, Germany
247. Eti-Osa Maternal and Child Centre, Nigeria
248. Fedail Hospital, Sudan
249. Fernandez Hospitals, India
250. Focos Orthopedic Hospital, Ghana
251. Fortis Hospital Mohali, India
252. Frankfurt Red Cross Clinics, Germany
253. Frankfurt University Hospital, Germany
254. Frimley Health NHS Foundation Trust, United Kingdom of Great Britain and Northern Ireland
255. Fundación Favaloro, Argentina
256. FV Hospital, Viet Nam
257. Geetanjali Hospital Udaipur, India
258. General Hospital Ikorodu, Nigeria
259. General Network of Healthcare Providers, Saudi Arabia
260. Geriatric Health Centers of the City of Graz, Austria
261. Hakim Hospital, Islamic Republic of Iran
262. Hammoud Hospital University Medical Center, Lebanon
263. Hayatabad Medical Complex, Pakistan
264. Hazm Mebaireek General Hospital, Qatar
265. Helsinki Rescue Department, Finland
266. Helsinki University Hospital, Finland
267. Hera General Hospital, Saudi Arabia

268. Hohenloher Krankenhaus gGmbH, Germany
269. Hospital Alma Máter de Antioquia, Colombia
270. Hospital Albino, Brazil
271. Hospital Beira Mar, Brazil
272. Hospital Civil de Ipiales, Colombia
273. Hospital Clínico de la Universidad de Chile, Chile
274. Hospital Clínico FUSAT, Chile
275. Hospital da Prelada, Portugal
276. Hospital de Braga, Portugal
277. Hospital de São Camilo, Portugal
278. Hospital do Câncer de Rio Verde, Brazil
279. Hospital Doctor Arnulfo Arias Madrid, Panama
280. Hospital General Ajusco Medio, Mexico
281. Hospital General Dr Napoleón Dávila Córdova, Colombia
282. Hospital General Francisco de Orellana, Ecuador
283. Hospital General Macas, Ecuador
284. Hospital General Regional 200, Mexico
285. Hospital Infantil Sabara, Brazil
286. Hospital Juárez de México, Mexico
287. Hospital México, Costa Rica
288. Hospital Militar Escuela Dr Alejandro Dávila Bolaños, Nicaragua
289. Hospital Nacional Guido Valadares, Timor-Leste
290. Hospital Nacional Rosales, El Salvador
291. Hospital Pablo Tobón Uribe, Colombia
292. Hospital Regional Tlalnepantla ISSEMyM, Mexico
293. Hospital Regional Veracruz, Mexico
294. Hospital Río Hortega, Spain
295. Hospital San Juan de Dios, Costa Rica
296. Hospital San Juan de Sahagun, Colombia
297. Hospital Tengku Ampuan Rahimah, Malaysia
298. Hospital Universitari d'Igualada, Spain
299. Hospital Universitario De Puebla, Mexico
300. Hospital Universitario Germans Trias i Pujol, Spain
301. Hospital Universitario Príncipe de Asturias, Spain
302. Hospital Universitario Poniente, Spain
303. Hospital Universitario Virgen del Rocío, Spain
304. Imperial College Healthcare NHS Trust, United Kingdom of Great Britain and Northern Ireland
305. Indira Gandhi Memorial Hospital, Maldives
306. Indus Hospital and Health Network, Pakistan
307. Instituto Alexander Fleming, Argentina
308. IQRAA Hospital and Research Centre, India
309. ISSEMYM Hospital Regional Atlacomulco, Mexico
310. Ireland East Hospital Group, Ireland
311. Jahra Hospital, Kuwait
312. Jerudong Park Medical Centre, Brunei Darussalam
313. Johns Hopkins Aramco Healthcare, Saudi Arabia
314. Jolimont Hospital, Belgium

315. Karolinska University Hospital, Sweden
316. Keski-Uudenmaan sote, Finland
317. Khoula Hospital, Oman
318. Kims Alshifa, India
319. Kalinga Institute of Medical Sciences, Bhubaneswar, India
320. King Abdulaziz Hospital, Saudi Arabia
321. King Abdulaziz Hospital Makkah, Saudi Arabia
322. King Dinuzulu Hospital Complex, South Africa
323. King Fahd Specialist Hospital, Saudi Arabia
324. King George's Medical University, India
325. King Salman bin Abdulaziz Hospital, Saudi Arabia
326. Klinikum Bremerhaven Reinkenheide, Germany
327. Krankenhaus Barmherzige Schwestern Ried, Austria
328. Krankenhaus der Barmherzigen Brüder St. Veit/Glan, Austria
329. Krankenhaus der Barmherzigen Brüder Wien, Austria
330. Krankenhaus der Elisabethinen, Austria
331. Kumamoto University Hospital, Japan
332. Kuopio University Hospital, Finland
333. Kuwait Cancer Control Center, Kuwait
334. Kyushu University Hospital, Japan
335. La Clínica Regional Santiago Tianguistenco, Mexico
336. La Maddalena S.p.A., Italy
337. La Paz University Hospital, Spain
338. Landeskrankenhaus Hochegg, Austria
339. Landeskrankenhaus Scheibbs, Austria
340. Landspítali University Hospital, Iceland
341. Lanka Hospitals, Sri Lanka
342. London North West University Healthcare NHS Trust, United Kingdom of Great Britain and Northern Ireland
343. Lu An Fourth People's Hospital, China
344. Magdi Yacoub Heart Foundation, Egypt
345. Manawan Hospital Lahore, Pakistan
346. Manipal Hospitals Salem, India
347. Marien Apotheke, Germany
348. Medical Rehabilitation Hospital, Saudi Arabia
349. Medway NHS Trust, United Kingdom of Great Britain and Northern Ireland
350. Meet Ghamr Oncology Center, Egypt
351. Mercy Hospital, New Zealand
352. Middle East Medical Center, Bahrain
353. Mubarak Al-Kabeer Hospital, Kuwait
354. Münster University Hospital, Germany
355. Muqniyat Health Center, Oman
356. Nagoya University Hospital, Japan
357. Nasser Specialized Hospital, Egypt
358. National Bank of Kuwait Specialized Hospital for Children, Kuwait
359. National Cancer Institute, Malaysia
360. National Children's Hospital, Costa Rica
361. National Ear Care Centre, Nigeria

362. National Orthopaedic Hospital Cappagh, Ireland
363. National Rehabilitation Hospital, Ireland
364. Nazeran Hospital, Islamic Republic of Iran
365. Ndola Teaching Hospital, Zambia
366. NHS England: East of England Regional Maternity Team, United Kingdom of Great Britain and Northern Ireland
367. NHS Greater Glasgow and Clyde, United Kingdom of Great Britain and Northern Ireland
368. NHS Lanarkshire, United Kingdom of Great Britain and Northern Ireland
369. Nizwa Hospital, Oman
370. NNPC Medical Services Limited, Nigeria
371. Northwest General Hospital, Pakistan
372. Nyarugenge District Hospital, Rwanda
373. Osaka Medical and Pharmaceutical University Hospital, Japan
374. Oslo University Hospital, Norway
375. Oulu University Hospital, Finland
376. P.D. Hinduja Hospital, India
377. Pakistan AirForce (PAF) Hospital Islamabad, Pakistan
378. Panimalar Medical College Hospital and Research Institute, India
379. Pantai Hospital Ampang, Malaysia
380. Pärnu Hospital, Estonia
381. Peerless Hospital, India
382. Peking Union Medical College Hospital, China
383. Peking University, China
384. Peking University Shougang Hospital, China
385. Police Health Services Hospitals, Sudan
386. Policentro de Salud Dr Juan A. Núñez, Panama
387. Prince Sultan Armed Forces Hospital, Saudi Arabia
388. Prince Sultan Military Hospital, Saudi Arabia
389. Princess Grace Hospital, Monaco
390. Providence Newberg Medical Center, United States of America
391. Psychiatric Hospital Centre of Lisbon, Portugal
392. Pun Hlaing Hospitals, Myanmar
393. Qallin Specialized Hospital, Egypt
394. Qasr Al Ainy Hospital, Egypt
395. Quirónsalud Hospital Group, Spain
396. Quriyat Hospital, Oman
397. Rai Medical College Teaching Hospital, Pakistan
398. Rainbow Hospitals, India
399. Razi Hospital, Islamic Republic of Iran
400. Red Salud Casanare, Colombia
401. Regional Hospital Mullingar, Ireland
402. Robert Wood Johnson University Hospital Somerset, United States of America
403. Rocket Health, Uganda
404. Rotkreuzklinik Lindenberg, Germany
405. Royal Papworth Hospital, United Kingdom of Great Britain and Northern Ireland
406. Royale Hayat Hospital, Kuwait
407. RSU Bondowoso, Indonesia
408. Ruban Memorial Hospital, India

409. Rumah Sakit Umum Pusat Dr M. Djamil Padang, Indonesia
410. Rustaq Hospital, Oman
411. Ryukyu University Hospital, Japan
412. Saarland University Hospital, Germany
413. Sahara Hospitals, India
414. Salud Castilla y Leon, Spain
415. Samallout One Day Surgery Hospital, Egypt
416. SAMUR-Civil Protection, Spain
417. San Vicente de Paúl Hospital, Costa Rica
418. San Vicente Fundación, Colombia
419. Santa Sofia IPS Espinal SAS, Colombia
420. Sedibeng District Health Services, South Africa
421. Shahid Kamyab Hospital, Islamic Republic of Iran
422. Sheikh Khalifa Bin Zayyad Hospital, Pakistan
423. Shalby Hospitals, India
424. Sharg Alneel Hospital, Sudan
425. Shifa International Hospital, Pakistan
426. Shimane University Hospital, Japan
427. Shri Chhatrapati Shivaji Maharaj Dialysis Center, India
428. Slim River Hospital, Malaysia
429. Sociedad de Lucha Contra el Cancer, Ecuador
430. Southport and Ormskirk Hospital NHS Trust, United Kingdom of Great Britain and Northern Ireland
431. Specialty Hospital, Jordan
432. Sree Renga Hospital, India
433. St John's Hospital, Ireland
434. St Jude Hospital, Saint Lucia
435. St Luke's Combined Hospices, South Africa
436. St Luke's International Hospital, Japan
437. St Vincent's Health Australia, Australia
438. Steward Health Care, Malta
439. Sunrise Japan Hospital Phnom Penh, Cambodia
440. Sunway Medical Centre, Malaysia
441. Tabarak New Cairo Hospital, Egypt
442. Tabba Heart Institute, Pakistan
443. Tampere University Hospital, Finland
444. Tanta Cancer Center, Egypt
445. The Medical City, Philippines
446. Tirol Kliniken GmbH, Austria
447. Tokai University Hospital, Japan
448. Toyooka Public Hospital, Japan
449. Tung Shin Hospital, Malaysia
450. Unidade de Saúde Familiar Garcia de Orta, Portugal
451. Unidade Hospitalar de Macedo de Cavaleiros, Portugal
452. Universal Hospital, Sudan
453. University Hospital Magdeburg, Germany
454. University Hospital Limerick, Ireland

- 455. University Hospitals of Derby and Burton NHS Foundation Trust, United Kingdom of Great Britain and Northern Ireland
- 456. University Medicine Göttingen, Germany
- 457. University of Cebu Medical Center, Philippines
- 458. Vadodara Institute of Neurological Sciences (VINS Hospital), India
- 459. Vale Infusões, Brazil
- 460. Vall d’Hebron University Hospital, Spain
- 461. Vijaya Group of Hospitals, India
- 462. Vivantes Hospital Group, Germany
- 463. Wadi Kabeer Health Center, Oman
- 464. West Hertfordshire Teaching Hospitals NHS Trust, United Kingdom of Great Britain and Northern Ireland
- 465. West Yorkshire Health and Care Partnership, United Kingdom of Great Britain and Northern Ireland
- 466. Westmead Hospital, Australia
- 467. Whipps Cross Hospital, United Kingdom of Great Britain and Northern Ireland
- 468. Woreda 10 Efoyta Health Center, Ethiopia
- 469. Yokohama City University Hospital and General Medical Center, Japan
- 470. Yokohama City University Hospital, Japan
- 471. Yorkshire Ambulance Services NHS Trust, United Kingdom of Great Britain and Northern Ireland
- 472. Zavod Za Fizikalnu Medicinu I Rehabilitaciju “Dr Miroslav Zotović”, Bosnia and Herzegovina

Intergovernmental and international organizations

- 473. Africa Centres for Disease Control and Prevention
- 474. African Medicines Agency
- 475. African Union Development Agency – NEPAD
- 476. European Medicines Agency
- 477. International Atomic Energy Agency
- 478. International Organization for Migration, Ecuador
- 479. OIC Ministerial Committee of Scientific and Technological Cooperation (COMSTECH), Pakistan
- 480. Organisation for Economic Co-operation and Development
- 481. Partnership for Maternal, Newborn and Child Health
- 482. Red Cross, Colombia
- 483. Red Cross, Ecuador
- 484. United Nations
- 485. United Nations Children's Fund, South Sudan
- 486. United Nations Office for Project Services, Somalia
- 487. United Nations Population Fund East and Southern Africa

Nongovernmental and professional organizations

- 488. Academy Health, United States of America
- 489. American Academy of Pediatrics, United States of America
- 490. American Pharmacists Association, United States of America
- 491. American Society of Anesthesiologists, United States of America
- 492. Arab Institute for Continuing Professional Development, Egypt
- 493. Arab Medical Union, Egypt

494. Asian Medical Student Association West Visayas State University, Philippines
495. Asian Society for Quality in Health Care, Malaysia
496. Asociacion Anestesia Analgesia y Reanimacion de Buenos Aires, Argentina
497. Association of Nurse Executives, India
498. Australian Nursing and Midwifery Federation, Australia
499. Austrian Network for Patient Safety, Austria
500. BC Patient Safety and Quality Council, Canada
501. Brazilian Network for Nursing and Patient Safety (REBRAENSP), Brazil
502. Bundesverband Patientensicherheitsbeauftragter Deutschlands, Germany
503. Central Patient Safety Center, Republic of Korea
504. CHEN – Patient Fertility Association, Israel
505. Chinese Hospital Association, China
506. Cochrane, New Zealand
507. College of Physicians and Surgeons of Costa Rica, Costa Rica
508. Colombian Society of Anesthesiology and Resuscitation, Colombia
509. Colombian Society of Hospital Pharmacists, Colombia
510. Consumers' Union of Finland, Finland
511. Czech Chamber of Pharmaceutical Assistants, Czechia
512. Czech Pharmaceutical Chamber, Czechia
513. Danish Society for Patient Safety, Denmark
514. Deutsche Gesellschaft für Chirurgie, Germany
515. Doctors' Association UK, United Kingdom of Great Britain and Northern Ireland
516. Dr Ameyo Stella Adadevoh (DRASA) Health Trust, Nigeria
517. Egyptian Pharmaceutical Students' Federation, Egypt
518. Emergency Care Research Institute, United States of America
519. Estonian Society of Hospital Pharmacists, Estonia
520. Ethiopian Pharmaceutical Association, Ethiopia
521. European Alliance for Access to Safe Medicines
522. European Association of Hospital Pharmacists
523. European Consumer Organisation
524. European Health Management Association
525. European Junior Doctors Association
526. European Society of Anaesthesiology and Intensive Care
527. FDI World Dental Federation
528. Federation of Argentine Societies of Otorhinolaryngology, Argentina
529. Fernandez Foundation, India
530. Fight the Fakes Alliance
531. Finnish Centre for Client and Patient Safety, Finland
532. Finnish Medical Association, Finland
533. Foundation for Patient Safety Chile, Chile
534. French Federation of Rescue and First Aid, France
535. General Council of Official Nursing Colleges of Spain, Spain
536. General Pharmaceutical Council of Spain, Spain
537. German Coalition for Patient Safety, Germany
538. Gesellschaft für Versicherungswissenschaft und -gestaltung e.V, Germany
539. Global Association of Physicians of Indian Origin
540. GS1
541. Gunma Medical Association, Japan

542. Hand in Hand for Aid and Development, Syrian Arab Republic
543. Healthcare Excellence Canada, Canada
544. Health Research Advisory Board, Pakistan
545. Hippocrates, Greece
546. Hong Kong Medical Association, China
547. Hospital Pharmacists Association of Kenya, Kenya
548. Hospitales sin Infecciones, Mexico
549. Hungarian Health Management Association, Hungary
550. Indian Association of Palliative Care, India
551. Indian Medical Association, India
552. Indian Pharmaceutical Association, India
553. Indian Pharmacological Society, India
554. Indonesian Pharmacists Association, Indonesia
555. Institute for Healthcare Improvement
556. Institute for Safe Medication Practices
557. Institute for Safe Medication Practices Canada, Canada
558. Institute for Safe Medication Practices Spain, Spain
559. Instituto de Efectividad Clínica y Sanitaria, Argentina
560. International Confederation of Midwives
561. International Council of Nurses
562. International Federation of Gynecology and Obstetrics
563. International Federation of Medical Students' Associations – Iraq, Iraq
564. International Federation of Pharmaceutical Manufacturers and Associations
565. International Hospital Federation
566. International Organization for Medical Physics
567. International Pediatric Association
568. International Pharmaceutical Federation
569. International Pharmaceutical Students' Federation
570. International Society for Quality in Health Care
571. International Society of Blood Transfusion
572. International Society of Pharmacovigilance
573. International Society of Radiographers and Radiological Technologists
574. International Society of Radiology
575. International Society on Thrombosis and Haemostasis
576. Irish Nurses and Midwives Organisation, Ireland
577. Israeli Medical Association, Israel
578. Israeli Society for Patient Safety and Risk Management in Medicine, Israel
579. Italian Network for Safety in Healthcare, Italy
580. Japan Pharmaceutical Association, Japan
581. Japanese Association of Radiological Technologists, Japan
582. Japanese Midwives Association, Japan
583. Japanese Society for Quality and Safety in Healthcare, Japan
584. Japanese Nursing Association, Japan
585. Kanagawa Prefecture Hospital Pharmacists Association, Japan
586. Kenyan Medical Association, Kenya
587. Korean Medical Association, Republic of Korea
588. Korean Nurses Association, Republic of Korea
589. Korean Pharmaceutical Association, Republic of Korea

590. Leapfrog Group, United States of America
591. Maldivian Medical Association, Maldives
592. Management Sciences for Health
593. Médecins Sans Frontières
594. Médecins Sans Frontières Germany, Germany
595. Medical College of Chile, Chile
596. Medical Women's Association of Nigeria, Ebonyi State Chapter, Nigeria
597. Medicolegal and Ethics Society of Ethiopia, Ethiopia
598. Nairobi University Pharmacy Students Association, Kenya
599. National Quality Forum, United States of America
600. NEVES Association for Patient Safety, Hungary
601. Observatorio Argentino de Seguridad del Paciente, Argentina
602. Occupational Health and Safety Managers, Nigeria
603. Oman Medical Association, Oman
604. Order of Nurses Lebanon, Lebanon
605. Pakistan Islamic Medical Association, Pakistan
606. Pakistan Society of Health-System Pharmacists, Pakistan
607. Patient Safety Movement Foundation
608. Pharmaceutical Defence Limited, Australia
609. Pharmaceutical Society of Ghana, Ghana
610. Pharmaceutical Society of Uganda, Uganda
611. Pharmacy Forum NI, United Kingdom of Great Britain and Northern Ireland
612. Philippine Medical Association, Philippines
613. Platform for Continuous Improvement of Quality of Care and Patient Safety, Belgium
614. Polish Society of Anaesthesiology and Intensive Therapy, Poland
615. Portuguese Pharmaceutical Society, Portugal
616. Royal College of Pathologists, United Kingdom of Great Britain and Northern Ireland
617. Royal College of Surgeons of Edinburgh, United Kingdom of Great Britain and Northern Ireland
618. Royal Pharmaceutical Society, United Kingdom of Great Britain and Northern Ireland
619. Singapore Psychological Society, Singapore
620. Slovene Chamber of Pharmacy, Slovenia
621. Sociedad Chilena de Farmacia Asistencial, Chile
622. Sociedad Dominicana de Infectología, Dominican Republic
623. Sociedad Ecuatoriana de Medicamentos Y Seguridad del Paciente, Ecuador
624. Sociedad Española de Medicina Intensiva, Crítica y Unidades Coronarias, Spain
625. Sociedad Mexicana de Salud Pública, Mexico
626. Sociedade Brasileira de Farmácia Hospitalar e Serviços de Saúde, Brazil
627. Sociedade Brasileira para a Qualidade do Cuidado e Segurança do Paciente (SOBRASP), Brazil
628. Sociedade Portuguesa de Farmacêuticos dos Cuidados de Saúde, Portugal
629. Society of Anaesthetists of Zambia, Zambia
630. Society of African and Caribbean Midwives
631. Society of Hospital Pharmacists of Australia, Australia
632. Society of Radiographers Trinidad and Tobago, Trinidad and Tobago
633. South African Pharmacy Council, South Africa
634. Spanish Association of Nursing in Otorhinolaryngology and Head and Neck, Spain
635. Spanish Society for Healthcare Quality, Spain

- 636. Spanish Society of Hospital Pharmacy, Spain
- 637. SRA Occitanie, France
- 638. Swiss Patient Safety Foundation, Switzerland
- 639. Tanzania Pharmaceutical Students' Association, United Republic of Tanzania
- 640. Thalassaemia International Federation
- 641. Trained Nurses' Association of India, India
- 642. Turkish Nurses Association, Türkiye
- 643. University of Rwanda Student Surgical Society, Rwanda
- 644. WaterAid America
- 645. WaterAid West Africa
- 646. Women in Global Health Kenya, Kenya
- 647. World Federation of Societies of Anaesthesiologists
- 648. World Medical Association
- 649. World Organization of Family Doctors

Patient and civil society organizations

- 650. Action against Medical Accidents, United Kingdom of Great Britain and Northern Ireland
- 651. Action Camerounaise Des Droits De l'Homme, Cameroon
- 652. Action Globale et Inclusive pour le développement de la RDC, Democratic Republic of the Congo
- 653. Action Group for Health, Human Rights and HIV/AIDS, Uganda
- 654. Alkhidmat Health Foundation, Pakistan
- 655. AMR Patient Group
- 656. Building Foundation for Development, Yemen
- 657. Cancer Club CISC, Indonesia
- 658. Community Health and Information Network, Uganda
- 659. Crohn's and Colitis Society Singapore, Singapore
- 660. Cyprus Federation of Patients' Associations, Cyprus
- 661. DiaLeb, Lebanon
- 662. European Liver Patients' Association
- 663. Foundation for African Medicine and Education, United Republic of Tanzania
- 664. Farah Social Foundation, Lebanon
- 665. FOKUS Patient, Sweden
- 666. Fondation Maira, Algeria
- 667. Fundación SER, Colombia
- 668. Funluvi Fundación, Honduras
- 669. Genomics and Public Health Foundation, India
- 670. Health Development Initiative, Rwanda
- 671. Health Information Initiative, Nigeria
- 672. Hyper-Cent Care Africa, Kenya
- 673. Indian Alliance of Patient Groups, India
- 674. International Alliance of Patients' Organizations
- 675. Journey of Hope Botswana, Botswana
- 676. Kalorgu Development Association, Nigeria
- 677. Klinikkompass, Germany
- 678. Korea Alliance of Patients Organization, Republic of Korea
- 679. Kuwait Association of Social Workers, Kuwait
- 680. L'Info du Pharmacien, Benin

- 681. Mercy Ships
- 682. National Association of Persons with Multiple Sclerosis, North Macedonia
- 683. National Patient Safety Board Coalition, United States of America
- 684. National Thalassemia Welfare Society, India
- 685. Operation Fistula Madagascar, Madagascar
- 686. Our Patient Voices, United Kingdom of Great Britain and Northern Ireland
- 687. Pan Arab Patient Safety Association
- 688. Pan-American Network of Patients for Patient Safety
- 689. Patient Academy for Innovation and Research
- 690. Patient Safety Learning, United Kingdom of Great Britain and Northern Ireland
- 691. Patients For Patient Safety Canada, Canada
- 692. Patients For Patient Safety India, India
- 693. Patients for Patient Safety Ireland, Ireland
- 694. Patients for Patient Safety US, United States of America
- 695. Patients for Safer Nuclear Medicine
- 696. Greek Patients Association, Greece
- 697. Risk Reduction Initiative and Skills Empowerment, Nigeria
- 698. Taiwan Alliance of Patients' Organizations, Taiwan, China
- 699. Udruženje Pacijenata S Alergijama, Astmom I Atopijskim Dermatitismom, Bosnia and Herzegovina
- 700. Uganda Alliance of Patients' Organizations, Uganda
- 701. Women In Communities Zimbabwe, Zimbabwe
- 702. World Patients Alliance
- 703. Youth Arise Organisation, Ghana

Publishers, newspapers, magazines and scientific journals

- 704. Economic Times of India
- 705. Forbes
- 706. Frontiers
- 707. Health Policy Watch
- 708. Karger Publishers
- 709. Nature
- 710. Wolters Kluwer

WHO Collaborating Centres

- 711. WHO Collaborating Centre for Strengthening Pharmacovigilance Practices, Morocco
- 712. WHO Collaborating Centre for International Drug Monitoring, Sweden
- 713. WHO Collaborating Centre for Research and Training on Interprofessional Education, Japan
- 714. WHO Collaborating Centre in Human Factors and Communication for the Delivery of Safe and Quality Care, Italy
- 715. WHO Collaborating Centre on Patient Safety Policies and Strategies, Saudi Arabia
- 716. WHO Collaborating Centre on Quality of Care in Health Service Delivery, Mexico
- 717. WHO Collaborating Centre for Education, Research and Evaluation of Safety and Quality in Healthcare, Portugal
- 718. WHO Collaborating Centre on Infection Prevention and Control and Antimicrobial Resistance, Switzerland

World Health Organization

- 719. WHO headquarters
- 720. WHO Regional Office for Africa
- 721. WHO Regional Office for the Americas
- 722. WHO Regional Office for South-East Asia
- 723. WHO Regional Office for Europe
- 724. WHO Regional Office for the Eastern Mediterranean
- 725. WHO Regional Office for the Western Pacific

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