

# Training can improve patient and health worker safety in sub-Saharan Africa

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Medical technology has made great advances. Yet, patients are often harmed while receiving medical care. Globally [four out of 10 patients](#) are harmed in primary and outpatient care. Furthermore, [15% of total hospital activity and expenditure](#) is a direct result of adverse events or irregularities in healthcare delivery.



Health providers need to practise in error-proof environments as much as possible. GettyImages

Worldwide, there are more than [five avoidable deaths every minute](#) as a result of mistakes made by healthcare providers. These mistakes include incorrect diagnosis, wrong medication, and unsafe surgical procedures.

The most sustainable and cost-effective way to protect patients' lives is to reduce the causes of human error. Therefore, health providers must strive to practise in a 'error-free' environment. In order to achieve this goal, health workers need to be properly trained to reduce adverse outcomes.

When health systems are [under pressure](#), so too are the professionals working within them. The safety of patients is intricately linked to the safety of health workers. Health professionals working under conditions that compromise their own health and safety will have difficulties delivering the highest standards of safety and quality care to their patients.

Issues concerning compromised health worker safety have become all too evident during the current pandemic. Covid-19 has put health systems around the world under severe stress. Globally, health systems have been grappling with spikes in patient intake, strained resources, new transmission prevention measures, and the need to rapidly develop solutions for an uncharted and ever-evolving health threat.

Several low-income countries have fared better in the fight against Covid-19 than richer and better-resourced nations. Rwanda, for instance, has made substantial progress against this pandemic despite limited resources. Rwanda has been [globally praised](#) for its robust, rapid, and human-centred response.

Rwanda has a network of [well-supported and frequently re-educated health workers](#), in addition to strong intersectoral collaborations that [inspire innovative solutions using minimal resources](#).

A strong and properly trained health workforce is critical to patient care. Professionals who are trained to critically examine and identify the root cause of risks within different settings are better able to avoid risks and advocate for the systemic changes needed to protect both providers and patients.

## Improved training

Academic and research institutions bear a responsibility in generating the evidence for patient and health worker safety. This evidence will go on to inform policy, regulations, and standards of practice. Competent use of existing technical resources, such as the [Surgical Safety](#) and [Safe Childbirth](#) checklists, is critical. But these resources should be paired with training that fosters a holistic approach to addressing the social, cultural, and economic reasons health providers struggle to provide safe, quality care. Such an approach will better equip health workers to identify and manage the risk factors that result in adverse healthcare outcomes.

Patient and health worker safety needs to be embedded in all health professional training. Critical and independent thinking, problem solving, communication, teamwork and collaboration, as well as leadership and management may all be dismissed by some traditional medical schools as “softer skills”. Yet, these skills have [a direct impact on patient outcomes](#). For example, ineffective communication can be linked to medical errors, harm to self, and harm to fellow health workers. The inability to communicate effectively can also limit a provider’s ability to engage with their patients – [an essential part of optimising safety](#).

Fostering leadership and management skills is critical to patient and health worker safety. Strong leadership earns the trust of those served, resulting in better cooperation in scientific-based guidance. Such outcomes were demonstrated by Rwanda’s [successful participatory approach](#) to fighting Covid-19.

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[\*\*\*How leadership matters in healthcare – especially in a crisis\*\*\*](#)

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Equitable caring for patients can’t be achieved without equity in health education. Yet, there are few training programmes for healthcare professionals in patient safety and healthcare quality in sub-Saharan Africa.

The [University of Global Health Equity](#), a global health sciences university based in Rwanda, aims to redress this gap. The Center for Executive Education at UGHE is developing a programme in patient safety and healthcare quality. The goal is to train a community of health care providers, administrators, and policy makers in the skills needed to reduce harmful healthcare outcomes.

## Looking forward

For sustained improvements in global patient and health worker safety, health organisations need to emphasise a systems approach that starts with professional education. Training the next generation of practitioners and health leaders to examine healthcare critically and holistically can help to ensure that the chain of errors and system failures that place patients and health workers at risk is managed more effectively.

The current pandemic has taught us several lessons. The importance of the health and wellbeing of the healthcare workforce is a lesson that can't be underestimated. Without a mentally and physically fit health workforce, alongside increased investment in their training to improve patient safety and healthcare quality, patients may ultimately suffer.

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