AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

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Australia joins international push to halve medication errors

A global drive to reduce medication errors by 50% within five years will be launched in Brisbane today, as part of a new push by the World Health Organization to save lives and reduce the harm caused by medication mix-ups.

The WHO's third Global Patient Safety Challenge, called 'Medication Without Harm', aims to help countries strengthen their systems for preventing medication errors, which are estimated to cost US\$42 billion annually – with people in low-income countries disproportionately affected.

Medication errors are a problem in Australia, as they are in other countries. Previous estimates indicate between 2% and 3% of all Australian hospital admissions are medication-related. This suggests at least 230,000 admissions annually in this country are caused by patients taking too much or too little of a medicine, or taking the wrong medicine – with an estimated annual cost of at least \$1.2 billion.

Medication errors can occur for a number of reasons, including human and other factors affecting how medicines are prescribed, dispensed or administered. Improving medication safety is a key area of focus for the Australian Commission on Safety and Quality in Health Care, which is facilitating today's WHO regional campaign launch with the Australian Government Department of Health.

The campaign launch for the WHO's Western Pacific region will take place today at the Brisbane Convention Centre by the WHO's regional director, Dr Shin Young-soo. The Australian Government's Chief Medical Officer, Dr Brendan Murphy, and Commission Chair Professor Villis Marshall AC will speak at the launch. Besides Australia, nearly 30 nations will be represented at the WHO meeting in Brisbane, including China, Japan, the US, Malaysia, the Philippines, South Korea, Singapore, New Zealand and France.

Commission CEO Adjunct Professor Debora Picone AM said unsafe medication practices and medication errors were a leading cause of injury and avoidable harm in health care systems across the world.

"Some people in our community with poorer health are taking four or more different medicines at once, sometimes under the supervision of a number of GPs, hospitals and specialists," Professor Picone said.

"In addition, these people often need to take medicines that are regarded as being higher risk, which can be because their narrow therapeutic range makes an unintended overdose more likely.

"Another scenario in which mistakes can happen is in the transitions of care, when patients move between clinicians, hospitals or other health providers and have their prescriptions adjusted."

The WHO campaign aims to help countries joining the campaign to make improvements in each stage of the medication process, including prescribing, dispensing, administering, monitoring and use. It aims to improve patient understanding of the medicines they are taking, and specifically targets 'polypharmacy', which refers to the routine use of four or more medicines at the same time.

Ms Jan Donovan, a health consumer advocate from Melbourne, said medication mishap was one of the greatest concerns for patients, as the consequences of mistakes could be high.

"Older people are more likely to be taking multiple medications, and it remains easier than we would like for mistakes to happen at any point – including in the doctor's rooms, in the pharmacy or in the patient's own home," she said. "This focus by the WHO is welcome and should help raise the profile of this important healthcare issue."

Professor Lloyd Sansom AO, an advisor to the Australian Government who led development of Australia's National Medicines Policy, said the Quality Use of Medicines was "a fundamental component of our National Medicines Policy" and a range of measures to address medication safety were in place.

Public and most private hospitals generally have medication safety programs in place. The national accreditation scheme requires health services to be accredited against the *National Safety and Quality Health Service Standard 4: Medication safety.* Tools to underpin medication safety in hospitals include nationally standardised inpatient and specialist medication charts, 'Tall man lettering' standards designed to reduce the risk of medicine names being misread, and standardised terms and abbreviations.

The WHO Western Pacific Region launch of the Global Patient Safety Challenge will take place at the Brisbane Convention & Exhibition Centre from 7.30–8.30am on Tuesday 10 October. More information about *Medication Without Harm: The third WHO Global Patient Safety Challenge* can be found at the WHO website: http://www.who.int/patientsafety/medication-safety/en/ ENDS

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About the Commission

The Australian Commission on Safety and Quality in Health Care is an Australian Government agency that leads and coordinates national improvements in the safety and quality of health care based on the best available evidence. The Commission works in partnership with the Australian Government, state and territory governments and the private sector to achieve a safe and high-quality, sustainable health system. In doing so, the Commission also works closely with patients, carers, clinicians, managers, policymakers and healthcare organisations.