Report from the Commission to the Council on the basis of Member States' reports on the implementation of the Council Recommendation (2009/C 151/01) on patient safety, including the prevention and control of healthcare associated infections

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The Committee on the Environment, Public Health and Food Safety adopted an own-initiative report by Oreste ROSSI (EPP, IT) as a follow-up to the report from the Commission to the Council on the basis of Member States' reports on the implementation of the Council Recommendation (2009/C 151/01) on patient safety, including the prevention and control of healthcare associated.

According to estimates, **health-care associated infections (HAIs) are contracted by an estimated 5% of patients in hospitals**. HAIs, which have a high impact in terms of morbidity, mortality (with 37 000 people dying directly of such infections in the EU) and cost (estimated at over EUR 5.5 billion per annum Union-wide), constitute a major public health problem in the Member States.

Against this background, the report recommended that issue of patient safety, and in particular the prevention and control of HAIs, be given a **place near the top of the political agenda in the EU**, both at national level in the Member States and at regional and local level.

Members welcome the measures put in place by Member States with the principal aim of improving general patient safety and preventing the incidence of HAIs. They also welcome the fact that some of the actions recommended by the Council have thus far been implemented by only a **limited number of Member States**, and that there is **room for improvement** – in both hospital and non-hospital care.

Improving patient safety in Europe, including by preventing and controlling HAIs: **Member States are urged to** continue their efforts to improve patient safety by taking, if they have not already done so, additional measures, including setting up action plans for combating HAIs. Measures should aim to:

empower citizens in respect of patient safety and the prevention and control of HAIs;

- promote **thorough and continuous training**, based on well-defined standards, of healthcare workers in the area of patient and healthcare worker safety;
- encourage **research into patient safety** using an evidence-based approach with a focus on implementation and focusing in particular on forms of therapy that offer an alternative to treatment with antibiotics;
- introduce, or strengthen if they already exist, arrangements for **reporting** adverse events – in particular those involving medicines and medical devices.
- improve the **information** provided to patients by healthcare establishments;
- support **research into the prevention and control of HAI**s, particularly those caused by methicillin-resistant Staphylococcus aureus (MRSA), Clostridium difficile and other emerging difficult-to-treat infections.

Prevention: Member States are called upon to: draw up national guidelines for **hand hygiene** and general cleaning of hospitals and care homes; (ii) promote targeted action to prevent errors in hospitals; (iii) encourage efforts to study hospital outbreaks; (iv) conduct specific information and training **campaigns** to raise awareness among patients and healthcare professionals of the issue of antimicrobial resistance.

The state of health of patients (particularly older persons and persons with reduced mobility) returning home after a period of hospitalisation must be assessed thoroughly when they leave hospital.

Communication, education and training: the report recommended Member States to:

- conduct **specific awareness-raising and training measures** concerning HAIs which are aimed not only at healthcare professionals but also, for example, formal and informal carers and hospital volunteers who have contact with patients;
- introduce **national guidelines** for health professionals on how to train patients in the use of antibiotics.

Patients' rights: Member States are invited to: (i) ensure that patients trust their health systems and, in particular, to involve patients closely in patient safety; (ii) involve patient organisations in the development of new laws and health programmes; (iii) designate at local level an authority or a contact person responsible for providing patients with information and data concerning patient safety; (iv) encourage practising doctors to inform patients of their rights and the possibilities open to them in terms of lodging complaints and reporting errors and adverse events.

Control, diagnosis and follow-up: the Commission, the relevant EU agencies and the Member States are called upon to consider action to **ensure the provision of feedback on patient safety**, not only from medical staff but also from patients. Members called on the European Centre for Disease Prevention and Control (ECDC) to draw up, in cooperation with the EMA, a **list of pathogens** that can cause serious or potentially fatal antibiotic-resistant infections and pose a serious health risk.

European and international cooperation: Members called on the Member States and the Commission, in conjunction with the WHO and the OECD, to improve cooperation with a view to **developing standardised definitions**, terminology and indicators in the area of patient safety, in particular so as to ensure that high-risk patients can be isolated should a pandemic or cross-border threat emerge.

The report emphasised the importance of establishing an effective **European network of national surveillance systems** which would work, on the basis of standardised criteria to be adopted by the Commission and the Member States.

Member States are called upon to collaborate in the creation of **platforms** which allow the sharing of information concerning adverse events in healthcare.