Summary from Panel-4

1. ICT (Information and communication technology) has strong potential to improve service quality and patient safety, however, it also has pros and cons on its adaption. In order to maximize the practical use of ICT for patient safety, governments, health care leaders and other stakeholders, should lead coordinated efforts to assess and implement of ICT at all levels of the health system to improve patient safety, experience, and outcomes. These efforts should include assessing and implementing functionality, usability, interoperability, cost effectiveness and easiness of maintenance.

2. Addressing fragmented and uncoordinated data management, and incompatibility of data sharing will bring improvement of quality of data toward integrated, people centred and health services,. Data use on patient safety should be considered in the context of the framework of health information systems for further analysis and decision making. National policies for piracy, confidentiality as well as secondary use of data such as AI should be appropriately coordinated.

3. ICT can be a strong contributor to empower patient and family to raise awareness on patient safety. They are one of the key players in people-centred health services toward universal health coverage. The use of mobile device for health care, or mHealth can make it easy for patient and family to report incidents, communicate with health professionals, and provide useful information.

4. Although ICT has been evolving rapidly and widely used in health care, its impact on patient safety has not been well studied comparing to that on maternal and new born, HIV, TB, or non-communicable disease. Capacity building of patient safety research for ICT is critical to evidence safer, appropriate, and effective adaption of ICT at all levels of health care settings nationally and globally.