

Speech for the Third Global Ministerial Summit on Patient Safety

Mr. Katsunobu Kato,

Minister of Health, Labour and Welfare,

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(Grand Ballroom in Grand Hyatt Tokyo)

His Excellency, Mr. Alain Berset, President and head of the Federal

Department of Home Affairs of the Swiss Confederation,

Honourable Ministers and delegates,

Distinguished representatives and experts from international and

non-governmental organizations,

Ladies and gentlemen,

I. Introduction

1. A very good morning to all of you. As the Minister of Health, Labour and Welfare of Japan, I am honored to host this 3rd Patient Safety Ministerial Global Summit, and welcome you all to Tokyo.

2. At this Summit, we are particularly pleased to have the presence of not only health ministers and officials of each country, but civil society organizations and patient safety experts, as well as international and non-governmental organizations. For those of you who have come all the way to Japan, I sincerely thank you, but have to apologize, because you might expect to see the beautiful cherry blossoms for spring in Japan. It is a great pity that cherry blossoms have already gone this year, as spring has come a bit earlier than your arrival in Tokyo.

3. While I may have disappointed you on cherry blossoms, I promise you a fruitful outcome of this Summit, with the presence of all distinguished participants. I now officially declare the opening of the third Patient Safety Ministerial Global Summit.

II. History of Patient Safety

4. In old days, medical treatment was regarded as “sacred” in

many places including Japan. It was assumed that medical professionals make no mistake in their treatment. However, in 2000, the famous report “To Err Is Human”, published by the Institute of Medicine, challenged this conventional view. The report revealed that treatment errors leading to serious health damage had occurred far more frequently than previously thought.

5. The report also pointed out that these errors happen not solely from the incompetence or negligence of individual medical professionals. They are often caused by faulty systems and processes. Since then, multiple efforts have been made to address patient safety issues in many countries.

6. Against this background, the first Global Ministerial Summit on Patient safety was held in London two years ago, under the leadership of the Right Honourable Jeremy Hunt, who joined us today to deliver a keynote lecture. The objective of the first Summit was to engage with high-level policy makers to

promote patient safety measures at the health policy level, rather than leaving them behind as a matter purely for experts' research.

7. Thus, the first Summit successfully launched a global momentum of patient safety, by sharing a common understanding of its importance among high-level participants.
8. The second Summit, held in Bonn last year, discussed various concrete measures on patient safety, together with wide-ranging stakeholders including experts. Many health Ministers and high-level policy makers deepened their understanding of key policy options, and further strengthened the global movement.

Ladies and Gentlemen,

9. Today, we together witness this steady but impressive progress of the global movement, with the increasing number

of participating countries. As a matter of fact, ministerial participation has doubled in two years.

10. At this third summit, we will first focus on patient engagement, such as introducing the concept of “patient-centeredness” into policy making. We would also like to seek a common understanding on the importance of patient safety in the process of promoting universal health coverage (UHC). We will raise the global movement of patient safety to enter into a new stage.

III. Summary of expert summit (Day1)

11. The expert summit yesterday discussed five topics,
“Patient safety culture”,
“Patient safety in aging society”,
“Patient safety needs for achieving UHC in low-and
middle-income countries”,
“Information and Communication Technology (ICT) in patient
safety”, and
“Economics of patient safety”.

12. They discussed these topics with “patient-centred”
approach, mainstreaming patients’ perspectives in policy
formulation. We will soon hear messages from the expert
summit by the chairperson of each session.

IV. Today’s meeting

13. At today’s meeting, we will build on the outcome of the
expert summit, share our experiences and visions, and further
discuss how to advance patient safety agenda at the leaders’

levels.

14. At the end of today's Summit, I would like to announce the "Tokyo Declaration on Patient Safety" as the outcome document of the meeting. The Declaration will reaffirm the importance of concerted and coordinated efforts of our national governments and international organizations. The Declaration will elevate our global movement to a new phase, by mainstreaming the patient safety agenda into the process of promoting Universal Health Coverage, which has been one of the major focuses of WHO.

15. While I speak more in the roundtable session, now I would like to highlight a few key points based on Japan's experiences.

16. First, the promotion of patient safety requires more than the effort of medical professionals. Patient participation is indispensable.

17. Second, safe healthcare is an essential human right for all. Therefore, political leadership is crucial to achieve consensus among healthcare professionals, patients, and all other stakeholders to ensure patient safety.

18. Let me share with you one good example of leadership by Diet members in Japan. With deep conviction on the importance of patient-centred perspectives, they framed a Cancer Control Act to require representatives of cancer patients to be involved in designing the cancer control plan. In this March, I led the Ministry to release a new plan reflecting their views. Based on this plan, we will promote patient-centred cancer control measures.

19. As the Minister of Health, Labour and Welfare, I am also responsible for labour policies. As you may know, Japan has been promoting work style reform. Work style reform of medical professionals is critically important from the perspective of patient safety. In order to provide safe and

high-quality healthcare, it is crucial to secure a decent working environment for all medical professionals.

V. Ending the remarks

20. As I stressed earlier, I am convinced that this Summit will further boost the momentum of patient safety, including within the framework of WHO. In this connection, I warmly welcome the expression of strong interest by H.E. Dr. Tawfiq Fawzan Al-Rabiah, the Minister of Health of the Kingdom of Saudi Arabia to host the next Global Ministerial Summit at a very early stage. Unfortunately H.E. Dr. Tawfiq Fawzan Al-Rabiah had to cancel his attendance in the Summit due to unexpected circumstances, but I would like to give the floor to his representative later.

21. To conclude my remarks, I stressed my sincere hope that UHC and patient safety will be promoted hand-in-hand and in a holistic manner, leading to coherent and effective policy measures, tailored to the circumstances of each country.

Thank you very much for your attention..