





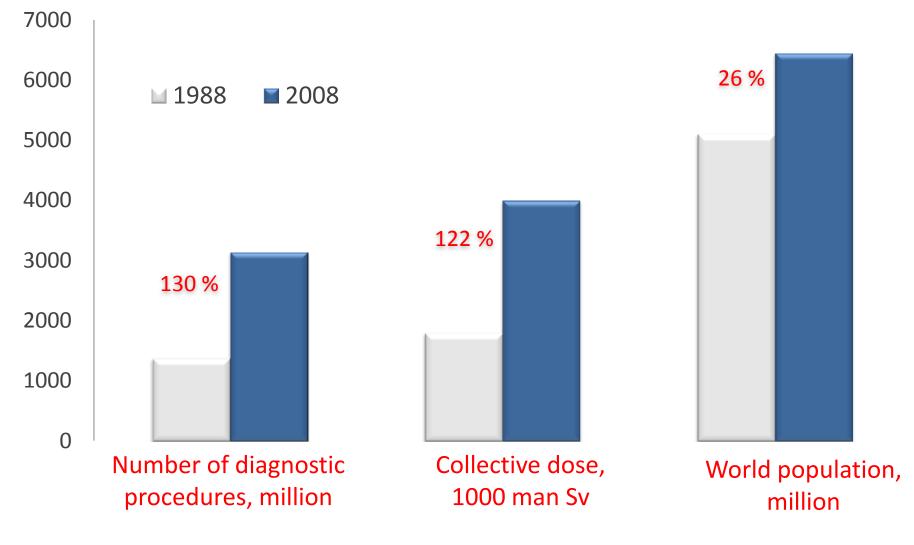
Bonn Call for Action Afrosafe Rad and Arabsafe campaigns

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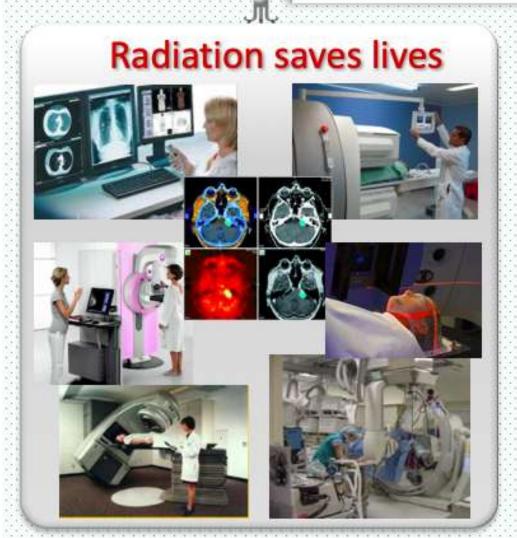
Alger le 27 Avril 2019

Global increase in the use of radiation



^{*} UNSCEAR 2008 Report





Radiation can cause harm

Short-term effects (deterministic)













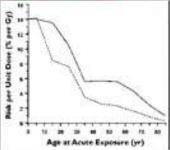


Long-term effects (stochastic)

- Carcinogenesis
- Hereditary effects
- Effects in the embryo/foetus







Respective roles and issues

Referring physicians

- Clinical context, medical history
- Defensive medicine

Radiological practitioner

- Knowledge about procedure benefits, risks, limitations
- Financial conflict of interest



"Request for consultation" versus "order/instruction to perform"



Referral guidelines / criteria of appropriateness

...shall be carried out through consultation between the radiological medical practitioner and the referring medical practitioner,

Challenges



- The advances in health technology continue opening new horizons for the applications of ionising radiation in health care.
- This has resulted in an increase in the number of medical procedures, professionals and patients involved, and in the need for structured strategies and a holistic approach.
- The safety and the quality have to be embedded into policies, processes and institutions.
- This, which represents at the same time a challenge and an opportunity, can be achieved with good leadership, robust planning and strategic investment.



Bonn Call for Action (2012-2022)



- The Bonn Call-for-Action,
 joint position statement with WHO,
 highlights ten main actions, and
 related sub-actions, that were
 identified as being essential for the
 strengthening of radiation protection in
 medicine over the next decade.
- In 2017 the mid point was reached



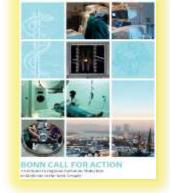
BONN CALL FOR ACTION
19 Actions to Improve Budistion Protection







Bonn Call for Action



- 1. Enhancing implementation of justification of procedures
- 2. Enhancing implementation of optimization of protection and safety
- 3. Strengthening manufacturers contribution to radiation safety
- 4. Strengthening RP education and training of health professionals
- 5. Shaping & promoting a strategic research agenda for RP in medicine
- 6. Improving data collection on radiation exposures of patients and workers
- 7. Improving primary prevention of incidents and adverse events
- 8. Strengthening radiation safety culture in health care
- 9. Fostering an improved radiation benefit-risk-dialogue
- 10. Strengthening the implementation of safety requirements (BSS) globally

hhttp://www.who.int/ionizing_radiation/about/14-2649_bonncallforaction.pdf?ua=1 ttps://rpop.iaea.org/RPOP/RPoP/Content/News/bonn-call-for-action-joint-position-statement.htm

Championing radiation safety

- All over the world, there has been a rallying call for radiation health workers to adhere to the principles of radiation protection and radiation safety related to the implementation of the 10 actions of the Bonn call for action.
- This has lead to numerous successful campaigns such as Image Gently and Image Wisely, Eurosafe, Japansafe, Latinsafe, Canadasafe
- Afrosafe Rad, Arabsafe.....









ISRQSA



- the ISR formally established the Quality and Safety Alliance (ISRQSA) in 2016.
- The Global Alliance for Quality and Safety has been established to provide a platform for exchange and collaboration for the various continental and regional safety
- This Alliance is under the umbrella of the ISR with a body consisting of representatives of continental/national campaigns as Afrosfe Rad and Arabsafe

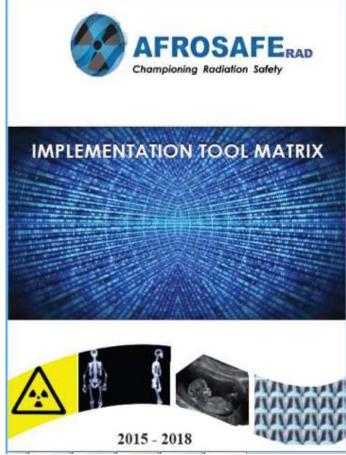




- IAEA-WHO Bonn Call for Action (2012)
- 2017 mid term of the call

- •Translation of the IAEA-WHO Bonn Call for Action into an African perspective
- Developped on 1995 (Pacori congress)
- Under the umbrella of the ASR







❖MISSION:

Ensure that the benefits outweigh the risks for all medical radiation exposures.

❖GOAL:

> All radiation-based procedures are appropriate, justified and optimized.

❖VISION:

➤ All radiation-based medical procedures in Africa are beneficial.



Launch of Afrosafe Rad chapters

- **❖**Kenya (2015)
- **❖**Uganda (2015)
- ❖ French speaking countries (2016)
- > Algeria, Benin, Cameroun, Cote d'Ivoire, Marrocco,
- ➤ Mauritania, Senegal, Tunisia
- **❖** Tanzania (2017)
- ❖South Africa (2018)
- **❖**Ghana (2019)
- ❖ Nigeria (2019)
- ✓ Work in progress





ARABSAFE



- During the Pan Arab Association of Radiological Societies (PAARS) congress organized in Marrakech (Morocco), from 4 to 5 May 2017, ARABSAFE was launched during the opening ceremony
- With the participation of the presidents and representatives of the Arab Societies of Radiology present at the meeting: Algeria, Egypt, Kuwait, Lebanon, Morocco, Mauritania, Jordan, Palestine, Bahrain, Qatar, UAE, Saudi Arabia, Tunisia, Yemen.

Next: Oman



ARABSAFE



• Vision:

- Establishing a radiation safety culture among Arabic speaking countries.

• Mission:

- To ensure the appropriate use of radiation in medicine.



MEMBERSHIP

- Membership : North Africa / Middle East
- ❖Link: Arabsafe/Afrosafe
- > Algeria, Egypt, Libya, Mauritania, Morocco, Sudan, Tunisia
- A collaborative approach is an opportunity to develop a strategic approach to implement a structural reform to improve safety and efficiency of medical imaging



Actions and Results



Action 1: justification

- ✓ Implementation of CIG's
- Algeria, Cameroon Egypt ,ivory coast , Kenya, Uganda, South Africa ,Saudi Arabia, UAE, Tanzania, Tunisia , and Ghana
- ✓ CDS/Iguide:
- Egypt, Tunisia, Uganda (work in progress..)







Action 2: optimisation

- DRL's: Egypt, South Africa, Nigeria, Kenya,
 Uganda, UAE, Saudi Arabia Algeria
- **❖** Action 4: training
- RP session Scientific societies 2016,2017,2018.2019
- ASR, PAARS, ISR, RSNA, ESR, SFR, FMR......
- **Action 6 : global information**
- Ghana . Egypt, Algeria, UAE, Saudi Arabiaindividual and collective dose record

How will AfroSafe Rad/Arabsafe be achieved?

- Logical framework approach:
- ➤ Implementation of the actions will be carried out at a national and regional level record keeping
- > Adherence of more champions
- Fathering of Specifics of individual approach related to mission, geographic representation, leadership, strategic plan, business model, relationship to health authorities, and communication strategies.





STRATEGY

- Systematic approach considering the implementation of the campaigns in one cultural and organisational setting for application in a different context.
- Adaptation may be undertaken by champions with a strong support of stakeholders, approach suitable taking in consideration human, technical and financial resources available



STRATEGY

- Changing the way of the professionnals operate is vital to meet current safety health challenges, considering that people, and therefore healthcare organizations, are inherently resistant to change.
- To deal with the growing demand for the safety policy, radiation protection measures needs to be better integrated with other healthcare services, helping to improve ordering behaviors, manage demand on services and ensure the results lead to better patient care.
- Political will, scaling up and empowering human resource, professional collaborations are essential.







Conclusion



- The success of any campaign depends on taking into consideration the peculiarities and specificities of each country as the culture and the language in order to ensure a good dissemination with a balanced distribution of burdens between countries at the regional level.
- Thus AFROSAFE Rad and ARABSAFE campaigns offers an opportunity of promotional continuity of the radiation protection in the global approach and the ASR /PAARS remains the appropriate space to ensure such a load because implying all the scientific societies taking care to integrate all the health professionals ..
- AFROSAFE Rad /ARABSAFE have to be strenghened and enforced by realistic and practical perspectives
- Work in progress.....

THANK YOU!







