



Sustaining Quality Improvement: The Role of Facility Recognition

Rebecca Furth
Initiatives Inc.
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Presentation Purpose

- To describe the use of recognition to sustain the effects of quality improvement and its relevance to the private sector



Goal of PHCI Project in Jordan

- To create a sustainable system for quality improvement in a primary health care program



Objectives

- To test a process and tools for QI
- To incorporate a strategy for scale up to 200/350 health centers
- To build QI capacity at all MOH levels to sustain and continue scale-up
- To develop national quality monitoring systems and capacity to use them



Guiding Principles

- Foster dependence on data for planning, monitoring, and solving problems,
- Identify, analyse and monitor processes
- Create enabling structures for leadership and commitment
- Incorporate client needs in the design and implementation of services
- Develop self-sufficiency in implementing quality improvements



Quality Improvement Steps

- Infrastructure:
 - Establish QI structure at facility, health directorate (HD) and central level
 - Identify and support champions
- Standards:
 - Develop PHC standards of care
 - Strengthen monitoring role of HD – Quality Assurance Coordinators (QACs)
- PI Tool:
 - Defines elements and indicators to measure and monitor quality
- Data:
 - Strengthen collection and use of data at all levels
 - Identify, monitor and report on status of HC health service priorities i.e. chronic conditions, MCH services

Motivating Factors

- Team membership status
- Peer sharing seminars
- Training and certificates
- External visits
- Publication & Promotion
- Recognition Plaques at public ceremonies
- Study tours



Impact of Quality Improvements on Zarqa Al Jedidah Health Center

RH Utilization	2001	2002	2003
PPC Clients	3	19	81
FP Clients	360	475	682
ANC Clients	236	273	334
PHC Utilization	27,677	28,266	33,899



The Quality Plaque: Foundation

- Presence of Quality Champions
- Trained and Empowered QA Cs & Health Directors
- Knowledge and skill in dissecting processes into measurable steps
- Cognizant of need for evidence-based data
- Quality Directorate leadership and facilitation



Other Enabling Factors

- Branded logo
- Physical Improvements
- Client awareness of QI and quality logo
- Project technical inputs and funding
- Competition among HDs
- History of public ceremonies
- Established and disseminated Standards of Care

The Quality Plaque - Process

- Collaboration between Project & MOH (Quality Units & Quality Directorate)
- Developed a two step process
 - Presence of basic quality inputs = plaque
 - Achievement of health service objectives = stars



Plaque

- Covered 8 elements: e.g. access, safety, training, standards, IP
- Identified standards to be met
- Used standardized tool to assess and score the performance of each site.
- Established minimum acceptable scores for each section and overall performance
- Prepared experienced QA Coordinator teams to conduct assessment across directorates

Results and Achievements

- 139/200 HCs awarded plaques in 3 rounds
- Demonstrated MOH capacity to establish standards and measure HC performance.
- Power of quality recognition as a unifying concept for administrative & service delivery units at MOH
- Value to private sector demonstrated by request of IPPF affiliate for guidance on recognition process.



The Minister of Health presents a a Health Center Manager a plaque on the National Day of Quality



Stars – Stage Two

- Plaque can accommodate up to 5 stars
- Intent is to ensure award is based on continual and incrementally more advanced criteria
- Concept is to set output indicators, e.g. % increase in ANC clients
- Some indicators and a process are being field tested and analyzed
- Outstanding issues include: consensus on indicators, objective criteria and a monitoring system



Recognition: Incentive or Constraint

- Increases public awareness of quality
- Encourages continual improvement for facility & staff
- Establishes a foundation for certification & accreditation
- Can lead to Complacency
- Hard to remove recognition
- Labor intensive
- Requires continual re-monitoring
- Needs transparency to ensure credibility



Issues for Private Sector

- Who are the providers?
- Will QI increase market share?
- Is there a regulatory body to set and assess/re-assess standard compliance?
- What opportunities for collaboration can exist between private/public sector?
 - Opportunity for contracting out
 - Availability of reduced-cost commodities
 - Potential for accredited CME training
 - Potential for joint training