National Quality Improvement Presentation

ARC EAST SUMMATIVE CONGRESS PAMOZI HOTEL, LUSAKA JULY 6-8, 2017

Presented by:
Rachael Lungwebungu – QI Specialist

Presentation outline

- Definition
- Mission statement and goal
- Basic Principle of QI
- The Main Approach – PIA

Definition of Quality

- **"Doing the right thing right, right away."** (W. Edwards Deming, 1982)

- **Making sure we are doing the right things, at the right time, for every client, every time!**

Definition of Quality of Healthcare

- Quality Health care "consists of proper performance according to standards of interventions that are known to be safe, that are affordable to the society in question and that have **the ability to produce an impact on mortality, morbidity, disability and malnutrition"** (Roemer and Montaya-Aguillar, 1988.)

Mission Statement

MoH Mission statement

- To provide equity of access to cost-effective, quality health care as close to the family as possible.

National QI program goal

- To create and support a culture of improvement throughout the ministry supporting health care providers to be able to deliver the **highest quality care.**

Principles of QI

- System thinking - focussing on systems and processes other than individuals:
  - Every system is perfectly *designed* to achieve the results it achieves - use Quality Improvement to create a better system!
- Committed to change
- Client Centered
- Data grounded
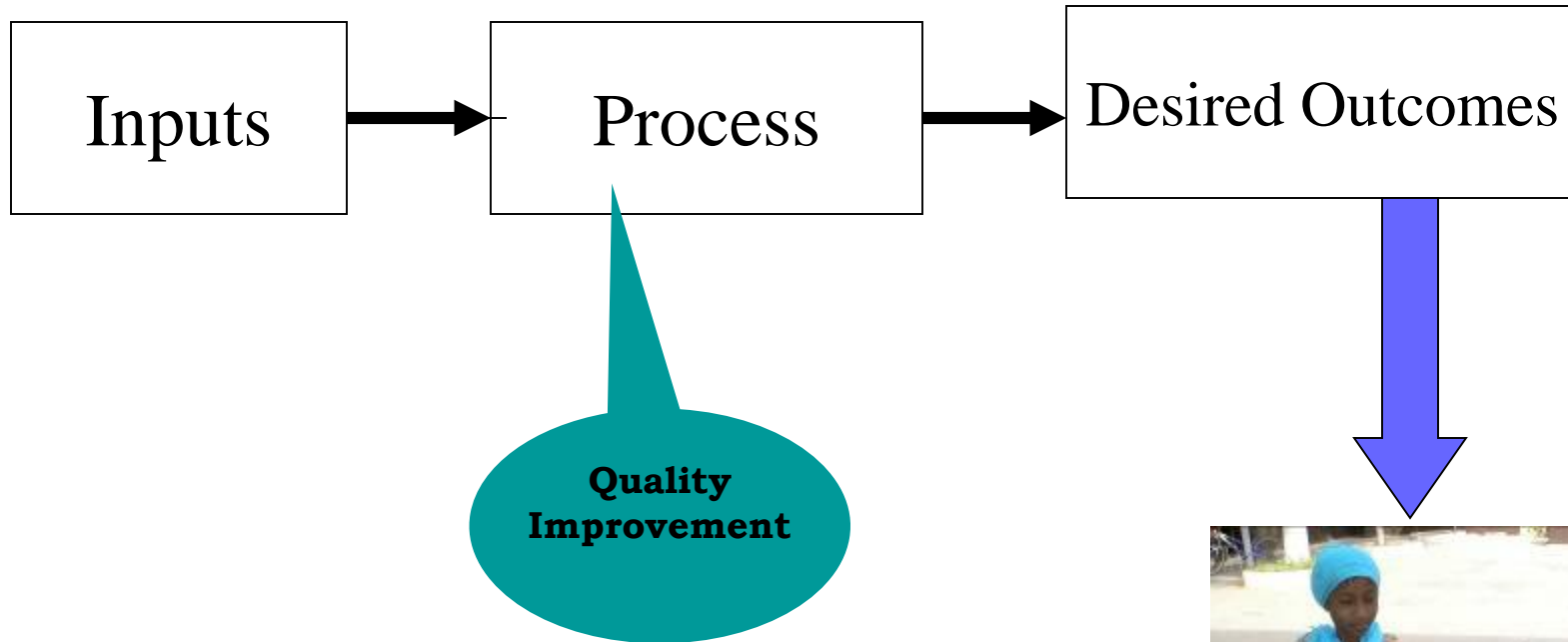- Measurements – know where u are and where u want to be & when?

Principles Cont.

- Leadership support, commitment and owning improvement efforts
- Structure/infrastructure – QI committees, Coaches/mentors
- Team approach/Problem solving
- Sharing of promising practices

Quality Improvement: a systematic approach.

Inputs → Process → Desired Outcomes

Quality Improvement

Process analysis: How can we organize our work differently How can we do it more effectively and efficiently

What are we trying to accomplish with QI

- **Identification of gaps compared to standards**
- **Prioritization: Which gap to work on**
- **Defining an aim/goal by consensus**
  - Measurable
  - Specific
  - Time bound
  - Ambitious/but realistic
  - Might need operational definitions

How would you know if a change is an improvement?

- By use of indicators….
- Determine…
  - Which indicators would you collect?
  - Who would collect them?
  - When?

Example of indicators

- Proportion of partographs filled in during labour
- Proportion of TPR charts filled in
- Proportion of facility/institutional deliveries
- Proportion of facilities with functional communication systems for emergency referral
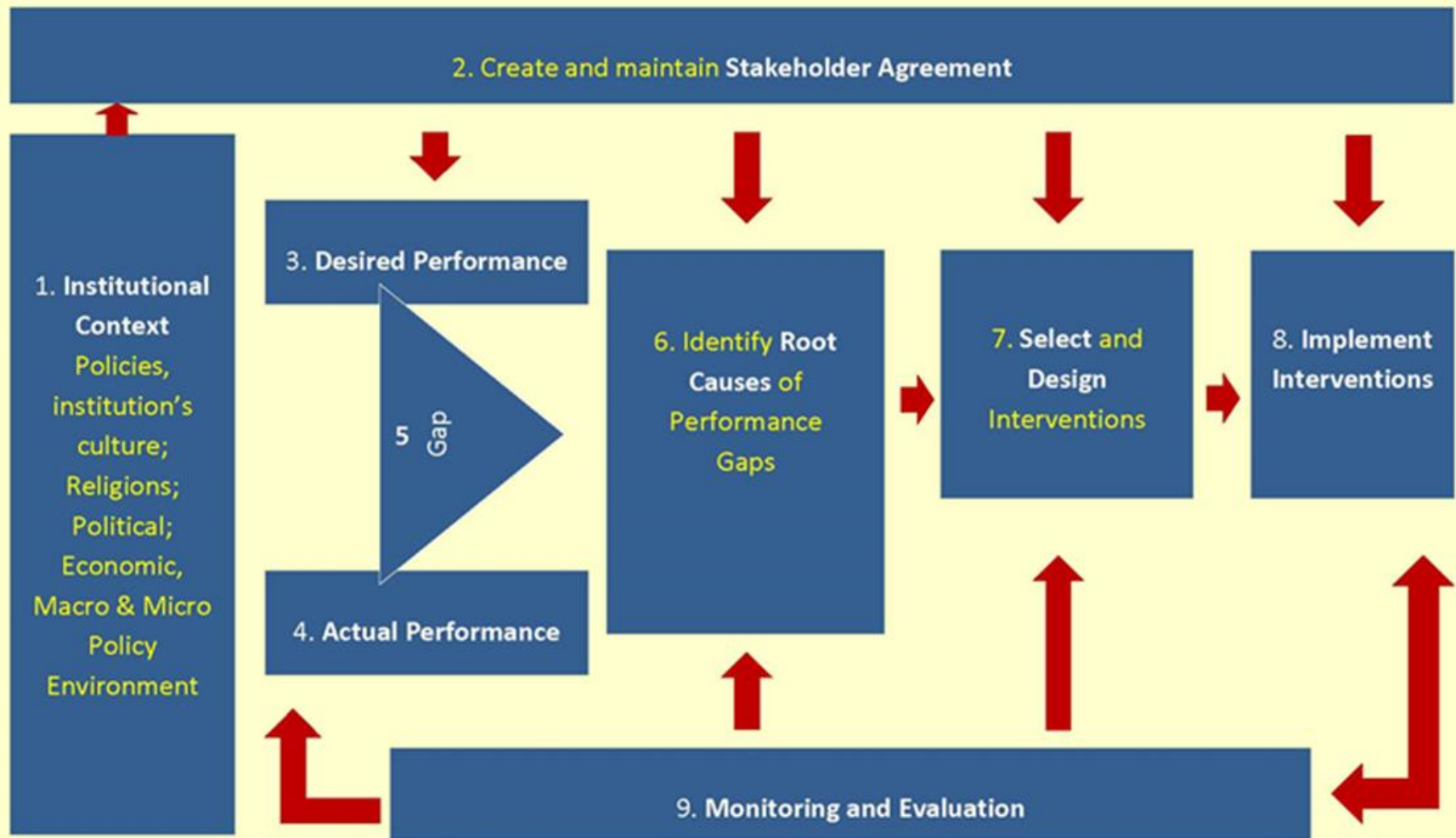- Proportion of malaria cases confirmed

Operationalization

- National QI guidelines
- National QI training package – 5days
- QI Structure – committees at all levels of care

MOH's QI Model – The PIA

THE PERFORMANCE IMPROVEMENT FRAMEWORK

The PIA Process steps

1. Institutional context
2. Stakeholder identification
3. Desired performance
4. Actual performance
5. Performance gap
6. Root cause analysis
7. Select interventions
8. Implement interventions
9. Monitor and evaluate performance

The Nine Steps of the Framework

1. Analyse the institutional context
- Appreciate the cultural, social, political and financial forces that can influence the organization and how it works

2. Obtain and maintain stakeholder agreement
- You need to know who your partners and competitors are. Who can help you?
- Involve key decision makers and influencers to establish a transparent and participatory process and that strengthens ownership of the process and results.

The Nine Steps of the Framework

3. Define desired performance

– The quality, scale, and depth of performance must be defined to know the level of expectation

– You must be clear about what you want to achieve; if you do not know where you are going you will never arrive!

4. Describe actual performance

– You must know how you are performing now to be able to measure the improvements you make. This is your baseline – without a baseline you cannot quantify the change!

The Nine Steps of the Framework

5. Define the performance gap

– This tells you how big your problem is! It is the difference between where you want to be (desired performance) and where you are (actual performance)

The Nine Steps of the Framework

6. Root Cause Analysis

– This is where you determine what is really causing your problem. You need to get to the root of your problem so that when you get rid of this root your problem will be over! Think of a tree (your problem) – you can only kill it if you destroy the tap root (your root cause)

The Nine Steps of the Framework

7. Select and Design Interventions

– This is where you decide how to get rid of your problem; you target the root cause with an appropriate intervention; you must think through the appropriateness of your actions, how these actions will fit together, how they will be implemented, how you will monitor and measure the changes that you expect to happen

The Nine Steps of the Framework

8. Implement interventions

This is the action time; this is where you DO something about getting rid of your root causes

9. Monitor and evaluate

As you implement you must monitor all activities to make sure all is going well and that you make timely adjustments if you have to; at agreed points you evaluate to see if the changes are being achieved and to what extent

Session 4.1 The Performance Improvement Framework

THANK YOU FOR LISTENING!