

Perspectives on Quality

Institutionalizing quality within national health systems: key ingredients for success

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Abstract

Quality improvement initiatives can be fragmented and short-term, leading to missed opportunities to improve quality in a systemic and sustainable manner. An overarching national policy or strategy on quality, informed by frontline implementation, can provide direction for quality initiatives across all levels of the health system. This can strengthen service delivery along with strong leadership, resources, and infrastructure as essential building blocks for the health system. This article draws on the proceedings of an ISQua conference exploring factors for institutionalizing quality of care within national systems. Active learning, inclusive of peer-to-peer learning and exchange, mentoring and coaching, emerged as a critical success factor to creating a culture of quality. When coupled by reinforcing elements like strong partnerships and coordination across multiple levels, engagement at all health system levels and strong political commitment, this culture can be cascaded to all levels requiring policy, leadership, and the capabilities for delivering quality healthcare.

Key words: quality of care, institutionalization, health systems strengthening, learning, governance, national quality policy and strategy

Introduction

In a landscape of fragmented efforts on quality in many countries and difficulties to ensure a common vision on quality for health system actors, there is clear and urgent need to create a sustained culture towards improved quality of care. In 2018, three important publications brought greater attention to the importance of quality with recommendations for countries to take forward. The World Health Organization (WHO), the World Bank and the Organisation for Economic Cooperation and Development; the National Academies

of Science, Engineering and Medicine in the United States of America; and the Lancet Global Health Commission covered aspects of quality health systems in the context of universal health coverage (UHC) and the sustainable development goals [1–3]. Authors of the reports call for quality to be a core ingredient in accelerating UHC, which was further endorsed by the WHO Director-General emphasizing that ‘without quality, UHC remains an empty promise’ and that this takes ‘vision, planning, investment, compassion, meticulous execution and rigorous monitoring at each level’ [4]. Investing in access of health

services will not necessarily deliver improved health outcomes, if we do not also invest in the quality of care provided [5].

Operationalizing the reports' recommendations within national programs and health systems will require a culture shift towards quality. This perspective article focuses on active learning and reinforcing elements that drive quality, drawn out from thematic analysis from the 2018 ISQua Conference session on 'institutionalizing quality', which was comprised of quality improvement experts and hosted by The Global Fund to Fight AIDS, Tuberculosis, and Malaria and the WHO.

Need for active learning

Active learning is critical to continuous improvement; it is a means of quickly harvesting internal and external best practices and the creation of multiple feedback loops that enable a rapid response to bottlenecks that impede the process of care. Countries need to test, study and scale-up effective solutions, informed by frontline application, to address problems in local health systems [6]. All three quality reports emphasize on implementing an infrastructure for learning to understand root causes and continually improve the quality of health care, closing the gap between action and knowledge. In Brazil, Proqualis launched communities of practice across the health system encouraging participation for shared learning, which allowed providers and hospitals to compare performance and continually improve their learning processes [7]. Learning to improve the quality of health services can take place through communities of practice, measurement and evaluation at the facility level or learning collaboratives [8]. In Kenya and Uganda, facilities adapted clinical services to meet the needs of patients by using real-time facility data that monitor performance to improve HIV treatment success rates [9]. It is important to understand the context in which care is delivered, including social determinants that impact health, to provide quality person-centered care [10].

Scaling up of evidence through active learning

Establishing a culture of quality within the health system is integral to the way in which services are designed, implemented and evaluated. By documenting interventions, focusing on information that supports measurable improvement, experiences can be applied to complement data use and strengthen the evidence base for effective quality improvement. This may mean understanding human actions that underpin systems-redesign in some contexts for improved quality to ensure intervention work, optimizing their effectiveness [11].

Instituting quality improvement interventions, in alignment with defined quality strategies and plans at national, subnational, facility and community levels can facilitate this organizational change and learning for improvement. This can be done by ensuring that frontline implementation experiences are systematically fed into national directions on quality, through meaningful engagement with all stakeholders across the health system. Such an approach promotes ownership, closes the fragmented approach to programming and facilitates uptake of the national policy/strategy [12, 13].

Governments will need to foster an enabling environment to support active learning. This will require investments in the overall health system blocks with governance and organizational structures in place to ensure accountability and monitoring, clear quality metrics to improve effectiveness and efficiency of improvement interventions and tools/resources to systematically collect and learn from quality improvement efforts.

Case studies: harmonization of quality initiatives and active learning

Strengthening the national direction on quality is key to overcoming fragmented quality improvement initiatives within countries and drives harmonization. An example of this has been shown with Project Fives Alive! in Ghana, an Institute for Healthcare Improvement initiative that demonstrated significant improvements in access (maternal and newborn) and quality of care across a spectrum of maternal, newborn and child health activities as well as showing evidence of an accelerated improvement of outcomes for children under 5 years in hospitals. This was achieved through active learning combined with strong and coordinated partner efforts in a phased scale-up design using quality improvement methods, revealing best practices that can be taken to national scale [14].

Another experience worthy of mention is the SUMAR program in Argentina, since 2005, a public supplementary insurance program, designed to increase access to quality health care for uninsured children and pregnant women aimed to address large disparities leading to a 19% reduction in low birth weight among beneficiaries and improved results for congenital heart disease surgery program at the national level. Advancements were based on evidence implementation, financial incentives, investments, measurement and learnings that helped create and sustain a culture of improvement maintaining achievements through the following years [15].

Conclusions

Institutionalizing a culture of quality through active learning can determine how quality is perceived and prioritized within a national health system. This becomes stronger with reinforcing elements such as leadership, governance, with explicit policies, strategies and structures grounded by realities on the ground, which determine the national direction and health priorities for a country. Thus, learning is critical in scaling up evidence-based interventions, increasing awareness and diligence, contributing to development of standards and measures and instituting systems to monitor and improve quality with team-based strategies and coordinated partner efforts. With active learning and reinforcing elements in place, countries can promote forward thinking and establish a positive quality improvement cascade all the way down to communities.

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