Point of care Quality Improvement POCQI
Midwifery Education and Practice
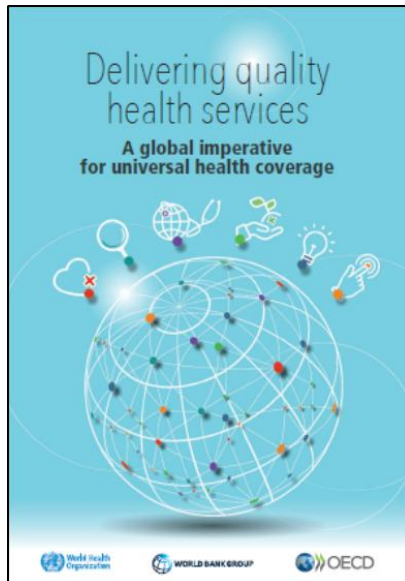

Dr Rajesh Mehta MD FIAP

Regional Adviser - Newborn, Child Adolescent Health

WHO South-East Asia Region

Quality of Care: Why are we concerned?

HQSS
The Lancet Global Health
Commission on
High Quality Health Systems
in the **SDG Era**

Delivering quality
health services
**A global imperative
for universal health coverage**

- Poor quality is a bigger contributor to mortality than non-utilization today
- Considerable proportion of patients do not receive appropriate, evidence-based care
  ANC: Full care received by <50%
- > 8 million lives can be saved each year in LMICs by high-quality health systems

- 10% patients have adverse events during treatment (high-income countries)
- 7-10%: Healthcare-associated infections
- US$ 42 billion/yr: Global cost associated with medication errors
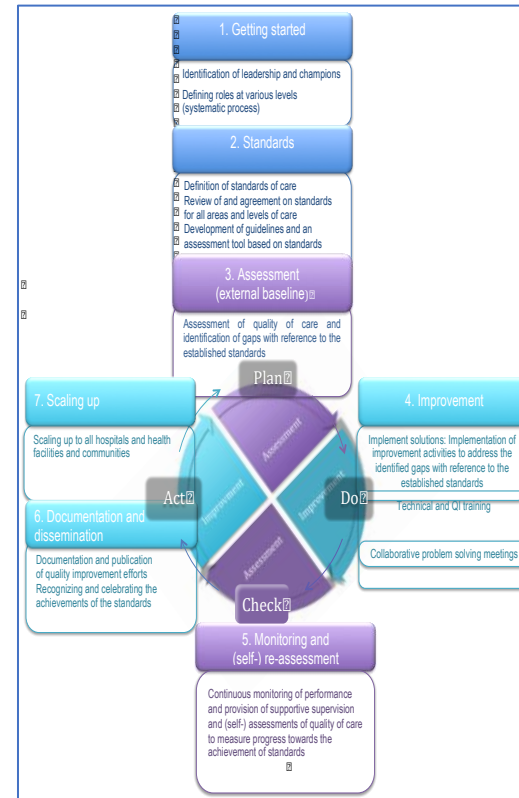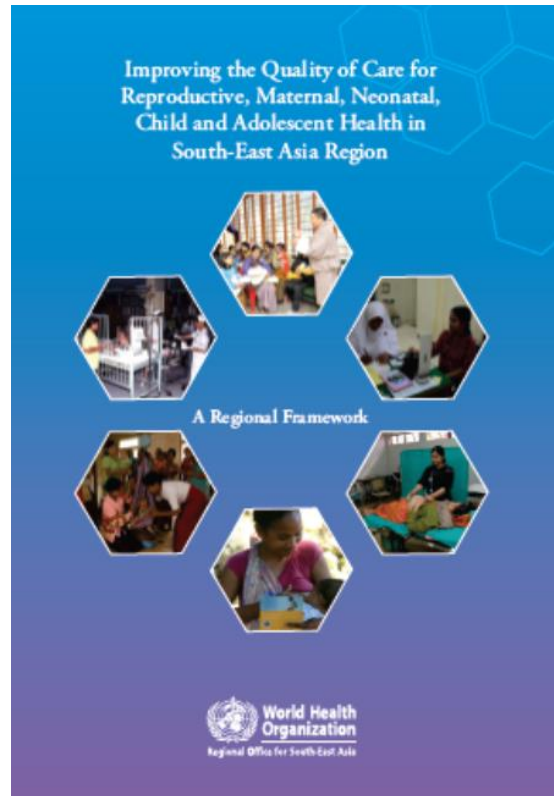
Healthcare workers must contribute to improving quality of care

Quality of care

SDG3 UHC = Coverage + Quality + Financial Protection
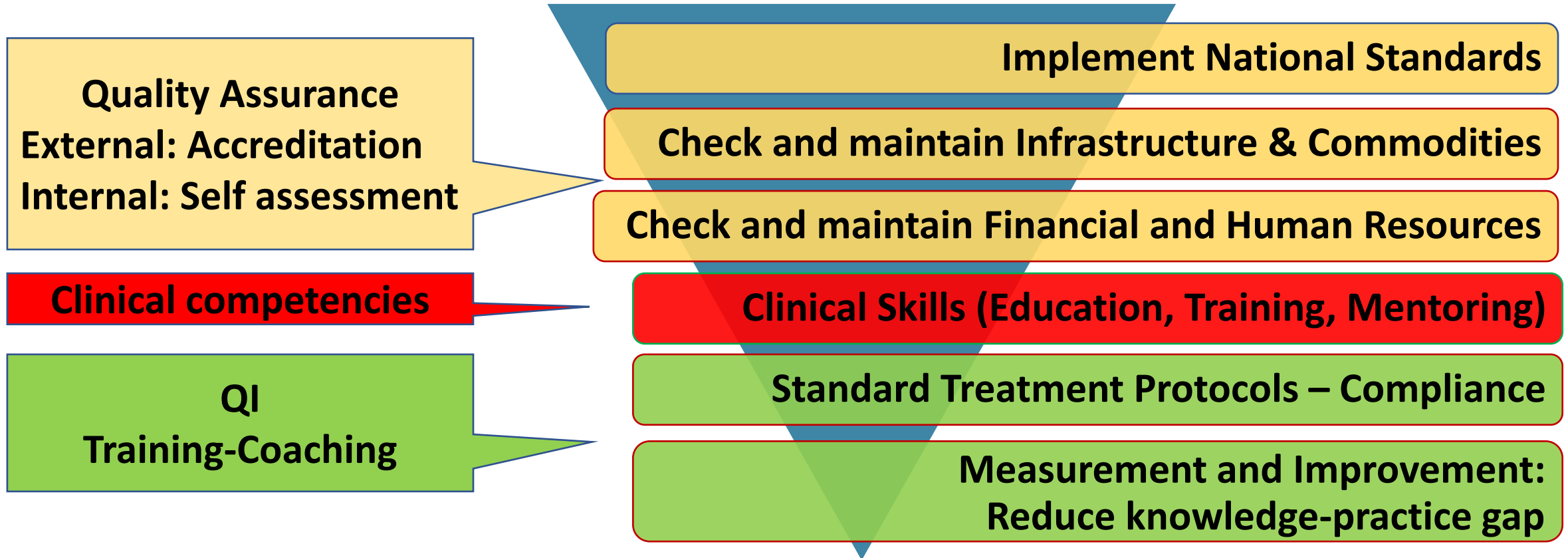**Global-National Commitment – Obligation to fulfill Rights of people**

- Safe
- Timely
- Effective
- Equitable
- Efficient
- People-centric

Improving the Quality of Care for Reproductive, Maternal, Neonatal, Child and Adolescent Health in South-East Asia Region

A Regional Framework

World Health Organization
Regional Office for South-East Asia

1. Identify and develop **leadership**
2. Develop / adapt **national standards** of care
3. **Assessment** of current quality of care
4. **Improvement** of process of care
5. **Reassessment**
6. **Documentation of Success** and dissemination
7. **Scaling-up**

Three streams of work for QOC at service level
Point of Care: Interaction between Midwives and patients

Quality Assurance
External: Accreditation
Internal: Self assessment

Clinical competencies

QI
Training-Coaching

Implement National Standards

Check and maintain Infrastructure & Commodities

Check and maintain Financial and Human Resources

Clinical Skills (Education, Training, Mentoring)

Standard Treatment Protocols – Compliance

Measurement and Improvement:
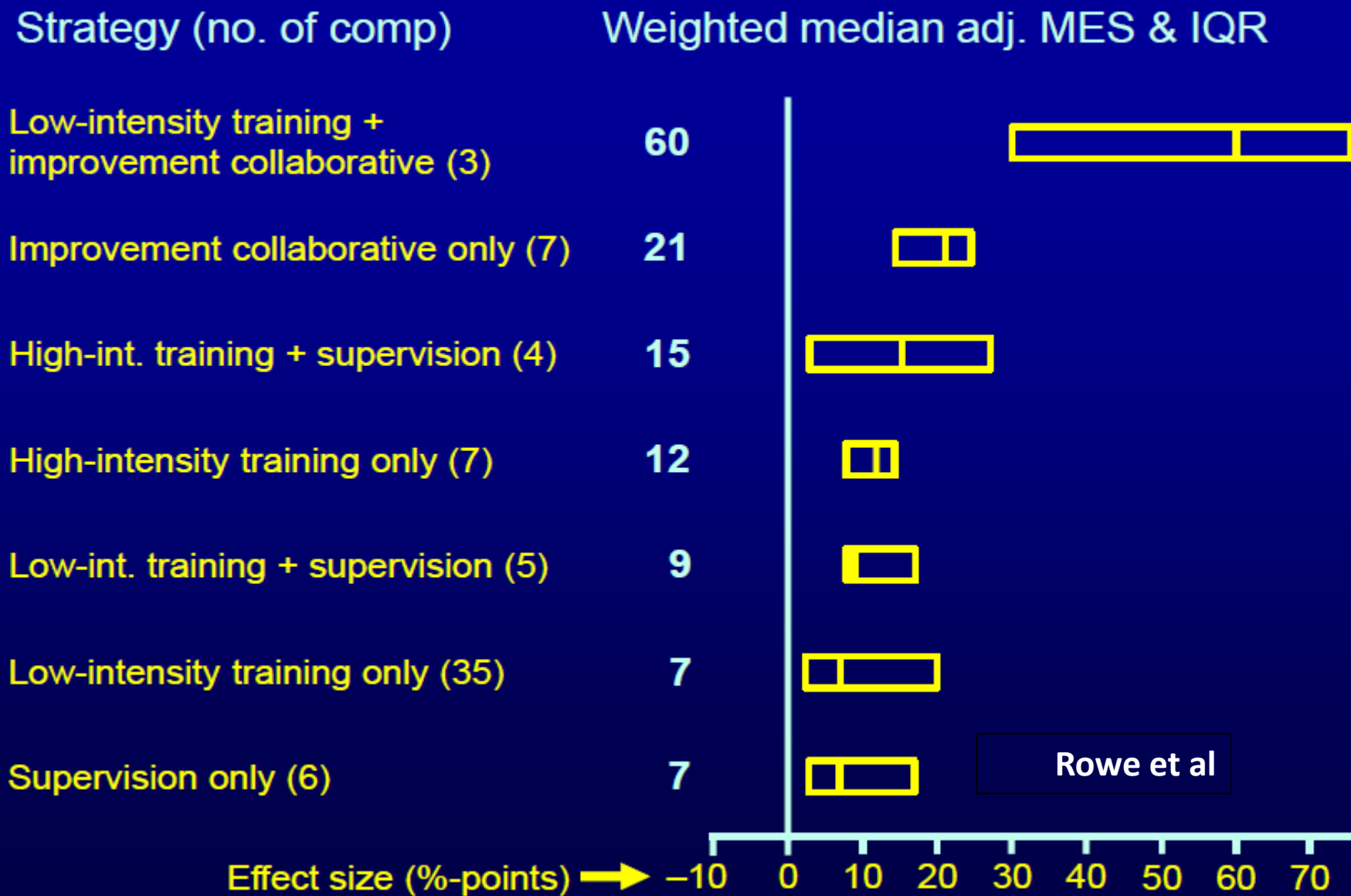Reduce knowledge-practice gap

Tools and strategies for improving performance of healthcare workers

POCQI for Healthcare Workers
Pre-service Education
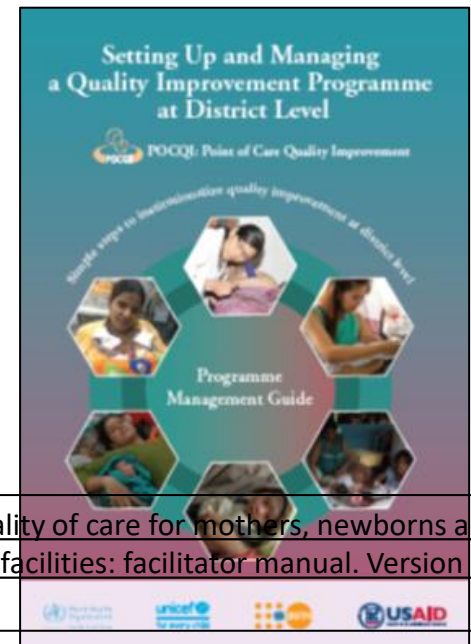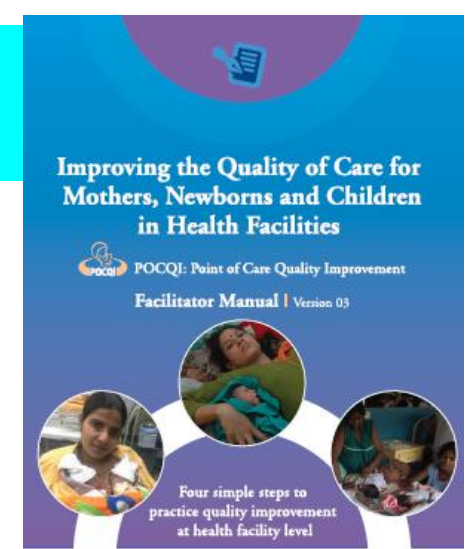**In-service Training**

Learn – Practice - Share

Strategy (no. of comp)	Weighted median adj. MES & IQR	
Low-intensity training + improvement collaborative (3)	60	
Improvement collaborative only (7)	21	
High-int. training + supervision (4)	15	
High-intensity training only (7)	12	
Low-int. training + supervision (5)	9	
Low-intensity training only (35)	7	
Supervision only (6)	7	

Effect size (%-points) ➡ –10 0 10 20 30 40 50 60 70
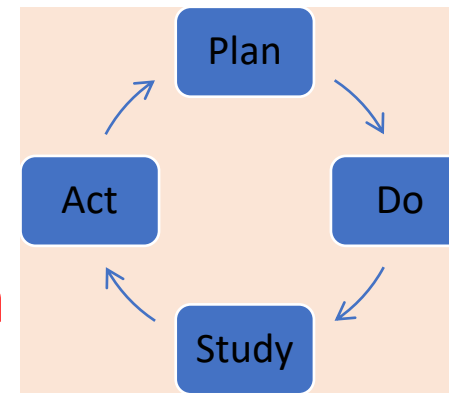
Rowe et al

POCQI: 4 Simple Steps

A cyclical process to

1. **Form a team and identify a Quality gap (Problem)**

2. **Root cause analysis:** Understand the causes of the problem

3. **Identify Solutions (Change idea): Develop and test a change:**
   - **Implement the solution**
   - **Use local data to check for improvement**
   - **Failure** ➡️ **Apply alternate change idea**
   - **Success** ➡️ **Continue the changed way**

4. **Sustain the improvement**

POCQI Resources available at:
https://www.pocqi.org/ and https://www.nqocn.org/

Plan

Do

Study

Act

Improving the Quality of Care for Mothers, Newborns and Children in Health Facilities
POCQI: Point of Care Quality Improvement
Facilitator Manual | Version 03

Four simple steps to practice quality improvement at health facility level

Setting Up and Managing a Quality Improvement Programme at District Level
POCQI: Point of Care Quality Improvement

Programme Management Guide

Improving the quality of care for mothers, newborns and children in health facilities: facilitator manual. Version 3 (who.int)

POCQI Project by Midwives in Myanmar:
AIM: 80% newborns receive essential care at birth in 4 weeks
1. Immediate drying
2. Skin-to-skin contact
3. Delayed cord clamping
4. Initiation of breastfeeding within 1 hour

- **Some nurses had no knowledge of ENC** ➡ **On-the-job training**

- **Non-adherence to ENC protocol** ➡ **Use Job-aid: Checklist for all the steps of ENC**

- **No clean linen for drying the baby** ➡ **Better preparedness: Handover checklist at change of shift**

Result: ALL elements of ENC practiced in nearly 100% babies within 4 weeks

Continuous Quality Improvement

POCQI is a tool – a model to improve quality of care at the point of care:

- Clinical (health) care outcomes

- Experience of care: Counselling, satisfaction, waiting time, crowd management

- Optimize cost: Reduce wastage

- Improve safety: Reduce harm

https://apps.who.int/iris/handle/10665/337921
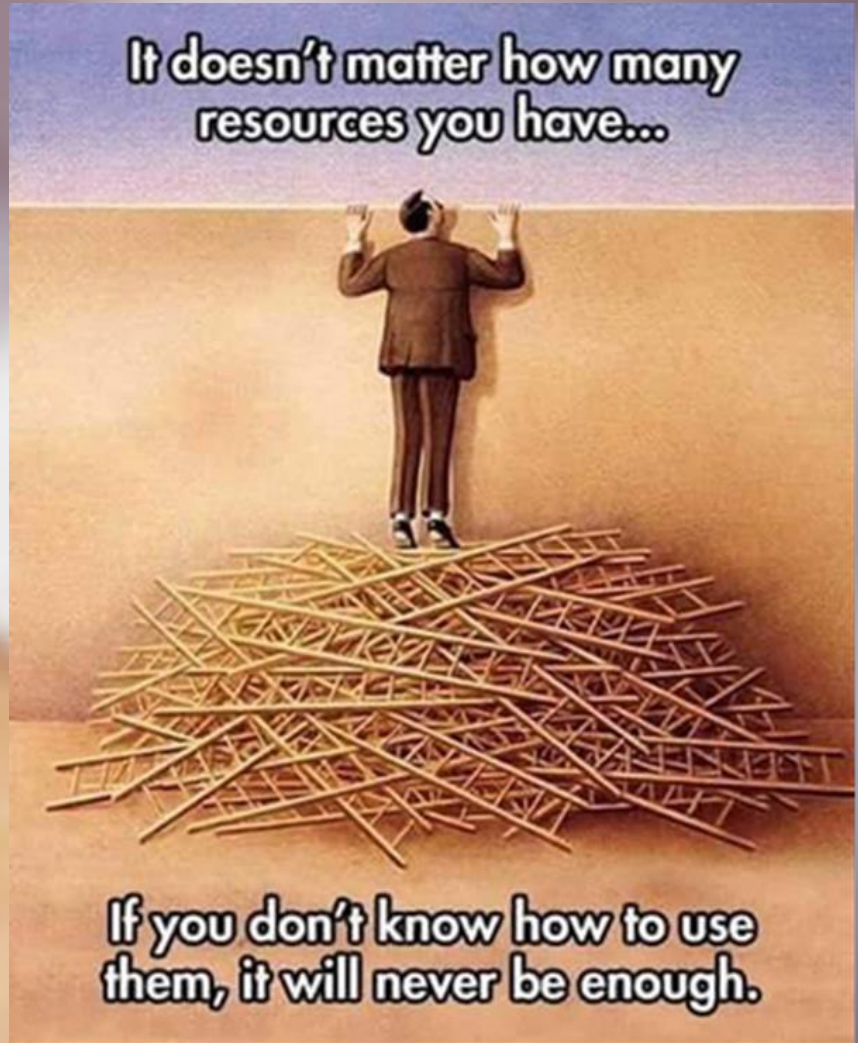
POCQI depends on:

- **Healthcare teams-patients engagement**

- **Availability of essential infrastructure and supplies**

- **Support of the local leaders and local system**

- **Macro level support: National and sub-national systems**

It doesn't matter how many resources you have...

If you don't know how to use them, it will never be enough.

THANKS

POCQI helps Healthcare Teams convert resources into good health outcomes

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