

Webinar

Delivering quality care to everyone, everywhere, at all times

Official launch of the WHO, The World Bank and *The BMJ* Collection on Quality of Care

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Welcome and introduction



Kathleen Hill
Senior Principal Technical Advisor
MOMENTUM Country and Global Leadership/Jhpiego









Programme

Welcome and introduction:

Kathleen Hill, Senior Principal Technical Advisor, MOMENTUM Country and Global Leadership/Jhpiego

Opening remarks

- Bruce Aylward, Assistant Director-General UHC and Life Course, World Health Organization
- Monique Vledder, Head of the Global Health, Nutrition and Population Department, The World Bank
- Kamran Abbasi, Editor in Chief, *The BMJ*

Panel discussions

- Panel 1: Creating an enabling environment for Quality of Care
 Facilitated by Anshu Banerjee, Director, Department for Maternal, Child and Adolescent Health and Ageing, WHO
- Panel 2: Engaging for Quality of Care Facilitated by Blerta Maliqi, Unit Head, Quality of Care, Department for Integrated Health Services, WHO
- Panel 3: Innovating for Quality of Care
 Facilitated by Sanam Roder-DeWan, Lead, Service Delivery Redesign, The World Bank

Wrap-up: Kathleen Hill, MOMENTUM Country and Global Leadership/Jhpiego

Closing remarks:

- Juan Pablo Uribe, Global Director, Health, Nutrition and Population, The World Bank and the Global Financing Facility
- Rudi Eggers, Director, Department for Integrated Health Services, WHO

Opening remarks



Bruce Aylward
Assistant Director-General UHC and Life Course
World Health Organization









Opening remarks



Monique Vledder
Head of the Global Health, Nutrition and Population Department
The World Bank









The BMJ perspective on the Quality of Care Collection

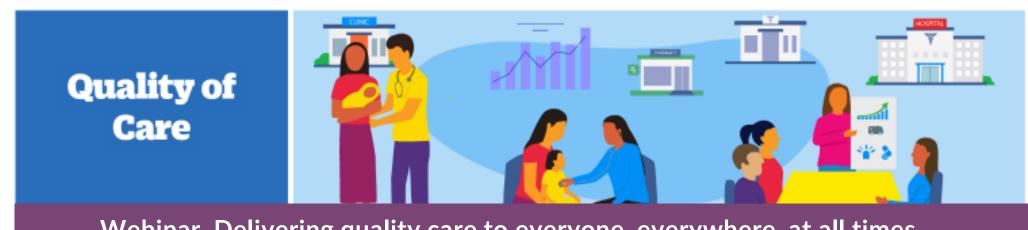


Kamran Abbasi **Editor in Chief** The BMJ









Panel 1

Creating an enabling environment for quality of care



Moderator: Anshu Banerjee

Director
Department for Maternal, Newborn, Child
and Adolescent Health and Ageing
WHO



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Leadership for QoC

Margaret Mannah

Program Manager, National Quality

Management Programme, Directorate of
Reproductive and Child Health, Ministry of
Health and Sanitation, Sierra Leone



Preparedness and resilience

Munir Kassa

Senior Technical Advisor Ministry of Health, Ethiopia



Systems strengthening with quality in mind

Selina Dussey

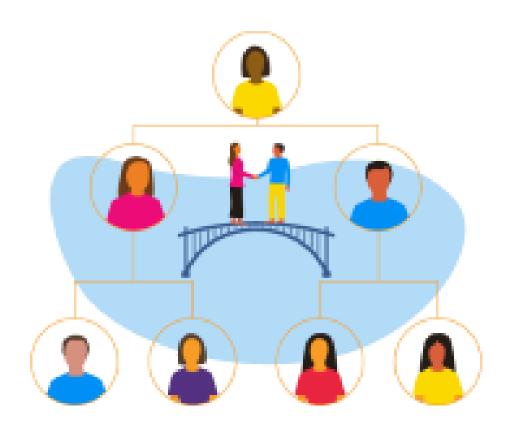
Acting Head, Quality Management Unit, Ministry of Health, Ghana

Facilitators of co-leadership for quality of care



Cocoman O, Dohlsten M, Asiedu E K, Taye D B, Mannah M, Chikwapulo B et al.

This Analysis paper argues that national leadership for quality of care requires working in a co-leadership model such that quality and programme units have equal standing and clearly defined individual roles and responsibilities



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- Country efforts to improve quality of care require joint leadership from national quality departments and specific health programmes
- Experience from a network of countries suggests that establishing organisational structures so that leaders have equal influence
- Clarifying roles and responsibilities is also essential to support effective co-leadership
- Conversely, weaknesses in co-leadership incur losses of time, investments, and support for quality







Prepared health systems provide quality care at all times

Maliqi B, Hinton R, Chowdhury M, Roder-DeWan S, Eluwa A, Kassa M.

This Analysis paper argues that capacity of a health system to provide good quality care even during health crises can save lives and is a strong indication of its resilience



https://www.bmj.com/content/380/bmj-2022-072698

- Quality of care was an afterthought in both prepandemic planning and reorganisation of essential services during the covid-19 crisis
- Health system leaders must ensure that national strategies on quality of care are aligned and integrated with emergency preparedness and response plans so that quality is a constant priority
- Health organisations and teams that are able to constantly learn and adapt are able to deliver quality care and are more resilient







Enable, engage, and innovate for quality

Chiponda K, Tadesse L, Dussey S, Uribe JP, Banerjee A.

An approach to consistently deliver quality healthcare to everyone, everywhere



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- Health systems in LMICs operate in different contexts and have different capacities but despite these differences, quality care is possible if championed by consistent leadership and supported by an enabling environment
- Such an environment encourages engagement of traditional and new actors to deliver quality care
- An enabling environment for quality healthcare also stimulates a culture of innovation and solutions that advance quality care







Panel 2

Engaging for Quality of Care



Moderator: Blerta Maliqi
Unit Head, Quality of Care
Department for Integrated Health Services
WHO



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Community engagement for QoC

Bongani Chikwapulo

Head of Norms and Standards, Quality Management Directorate, Ministry of Health and Population, Malawi



Engaging the private sector

Rajat Chabba

Technical Director, Market Solutions, Jhpiego



Motivated workforce for QoC

Minara Chowdhury

Senior Director, Institute for Healthcare Improvement

Institutionalising community engagement for quality of care: moving beyond the rhetoric



Gilmore B, Dsane-Aidoo P H, Rosato M, Yaqub N O, Doe R, Baral S.

This Analysis paper argues that community engagement has the potential to improve quality of care but is poorly represented in policy and the literature; its institutionalisation in health systems must be supported



https://www.bmj.com/content/381/bmj-2022-072638

- Comprehensive and appropriate community engagement is critical for quality improvement initiatives and improving health outcomes for communities
- Too frequently community engagement is poorly defined and inadequately documented, and efforts to engage communities are not integrated into existing health systems
- Experience from Ghana and Nepal shows the importance of generating and documenting evidence of impact as well as cost effectiveness to support institutionalisation of community engagement to improve health quality







Delivering quality care to all mothers and newborns requires governments to engage the private sector



Chabba R, Allen C, Yaqub N, Lattof S R, Ganesan R, Maliqi B.

This Analysis paper argues that more structured engagement with the private sector will contribute to achieving universal health coverage with quality



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- The private sector includes important providers of maternal and newborn healthcare services in mixed health systems
- Efforts to improve quality of care need to engage all actors across both the public and private sectors
- Building a conducive policy environment supported by the right mechanisms and systems for private sector engagement will facilitate the achievement of universal health coverage with quality







A motivated workforce is needed for quality improvement efforts to succeed



Chowdhury M, Meena U, Barker P.

This opinion piece reflects on workforce motivation for quality improvement projects in maternal and newborn healthcare in Bangladesh



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- Working to gain greater understanding of what motivates a workforce will help health systems develop improved services.
- Bottom-up quality improvement activities including soliciting the experience and wisdom of health workers for solutions to everyday problems and coaching leaders to encourage meaningful contributions of ideas from those delivering care, contribute to improved motivation.
- The experience from Bangladesh tells us that engaging health workers in designing solutions has helped to motivate the workforce in improvement







Panel 3 Innovating for Quality Of Care



Moderator: Sanam Roder-DeWan
Lead
Service Delivery Redesign
The World Bank

Associate Professor of Community and Family Medicine, Dartmouth Medical School



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Networks of care *Andrew Ayim*

Deputy Director Policy, Policy, Planning, Monitoring and Evaluation Division, Ghana Health Service



Service delivery redesign

Mickey Chopra

Global Solutions Lead for Service Delivery, Health Nutrition and Population global practice, The World Bank



Emedded implementation research

Hema Magge

Senior Program Officer, Newborn Health, Bill and Melinda Gates Foundation

Networks of care to strengthen primary healthcare in resource constrained settings



Agyekum E O, Kalaris K, Maliqi B, Moran A C, Ayim A, Roder-DeWan S.

This Analysis paper argues that networks of care are a promising way to provide support and resources for isolated primary care workers and deserve more research



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- Collaboration between healthcare facilities, in the form of networks of care has the potential to improve efficiency, quality, and outcomes in resource constrained settings
- Case studies of successful networks of care signal that the approach can strengthen structural and, most importantly, relational elements among facilities
- Networks of care are being implemented at primary healthcare level in many countries, providing opportunities for further research on its effects







Service delivery redesign is a process, not a model of care



Roder-DeWan S, Madhavan S, Subramanian S, Nimako K, Lashari T, Bathula A N et al.

This Analysis paper calls for wider application of the principles of service delivery redesign to provide accessible, high quality services across healthcare



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- Service delivery redesign has become synonymous with one model of care for one condition
- Service delivery redesign is a process that allows development of innovative solutions that are tailored to specific needs
- Government support and community input from the start help ensure improvement in quality of care







Embedding implementation research to cross the quality of care chasm during the covid-19 pandemic and beyond



Peters M, Cloete K, Odwe G, Tadele G, Hirschhorn L, Magge H, Roder-DeWan S.

This Analysis paper argues that concerted efforts to embed implementation research can improve health services, even in the most challenging operating environments



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- Embedding implementation research can improve health outcomes by ensuring research is an integrated and systematic part of health systems functions
- Embedded implementation research can occur across multiple levels, including the organisational level through integration into formal planning and budgeting processes, and the programmatic level, where research and learning collaborations are tied to specific health project cycles
- Embeddedness can prepare health systems to respond to emerging health shocks like the covid-19 pandemic and improve the quality of service delivery, even in the most challenging operating environments
- Donors, policymakers, implementers, and researchers all have critical part to play in prioritising embeddedness and strengthening the research and learning capacity of health systems







Wrap-up



Kathleen Hill
Senior Principal Technical Advisor
MOMENTUM Country and Global Leadership/Jhpiego









Additional articles in *The BMJ* Collection on Quality of Care



Analysis papers:

- Regular measurement is essential but insufficient to improve quality of healthcare; Agweyu, A et al.
- Implementation research to cross the quality of care chasm during the COVID-19 pandemic and beyond;
 Peters, M et al.
- The politics of health system quality: The challenge of igniting demand; Kruk, M et al.

Opinion pieces:

- Decolonisation and quality of care; Yanful, B et al.
- Embedding quality in primary healthcare; Secci, F & Syed, S
- Quality of care reform: A case for systems thinking and human centered design capabilities; Mitgang, E et al.
- Continuous measurement of quality is vital for improving care for women, newborns, and children in Nigeria; Okoli, U et al.

All of the articles are freely available to read Open Access www.bmj.com/qualityofcare







Continue the conversation



WHO GLOBAL LEARNING LABORATORY FOR QUALITY







Closing remarks

- Juan Pablo Uribe, Global Director, Health, Nutrition and Population, The World Bank and the Global Financing Facility
- Rudi Eggers, Director, Department for Integrated Health Services, WHO















