



General theme: Innovation & Quality

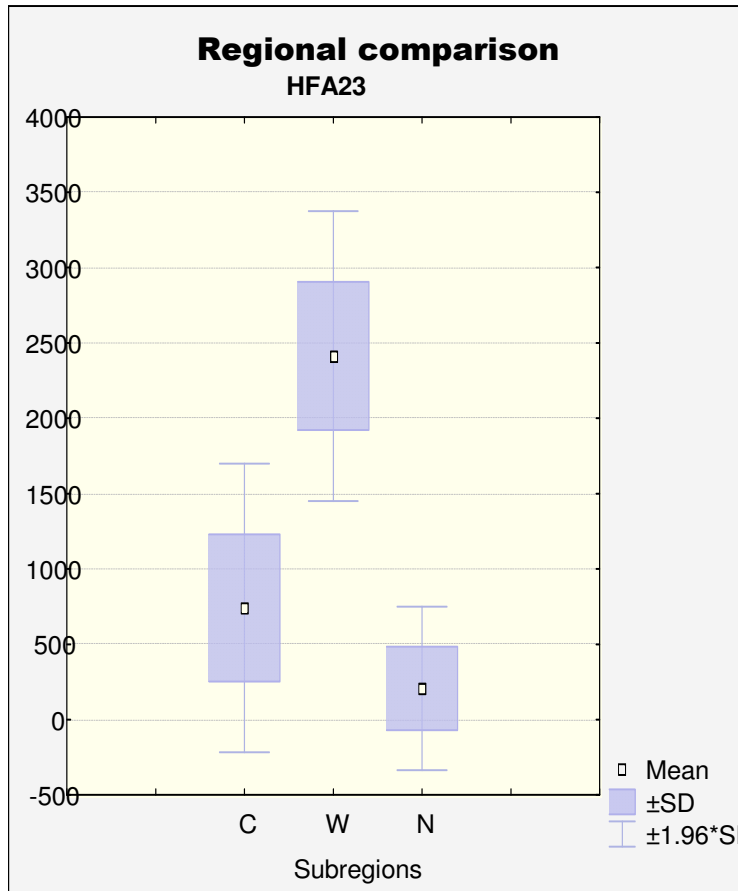
WHO Guidance on developing quality and safety strategies with a health system approach

Dr. Valentina Hafner

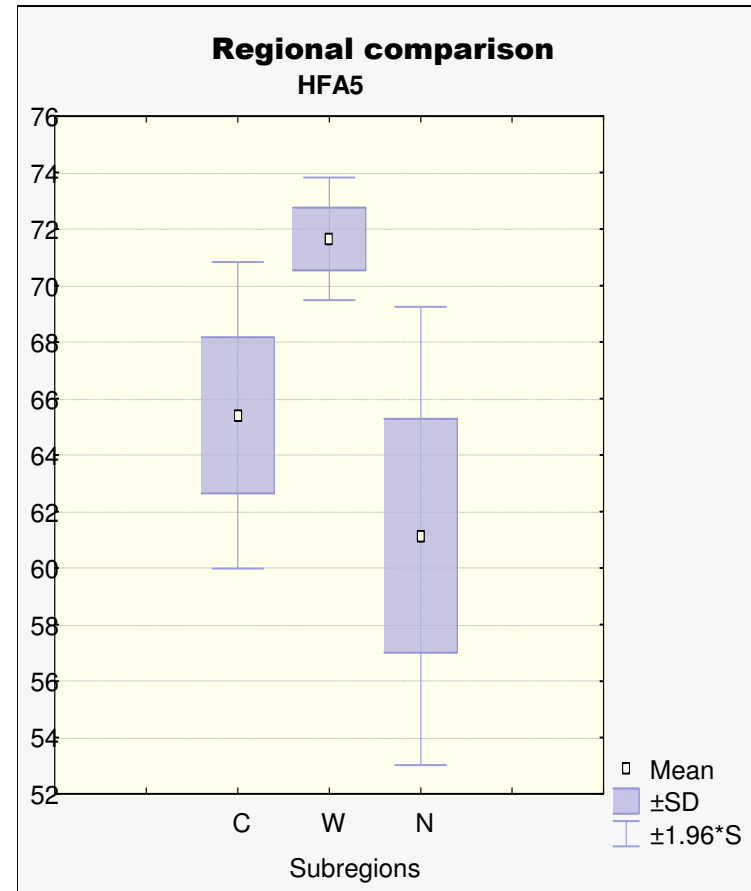
Country policies and systems

Division of country support

Total health expenditure in US\$ purchasing power parity per capita (HFA23)

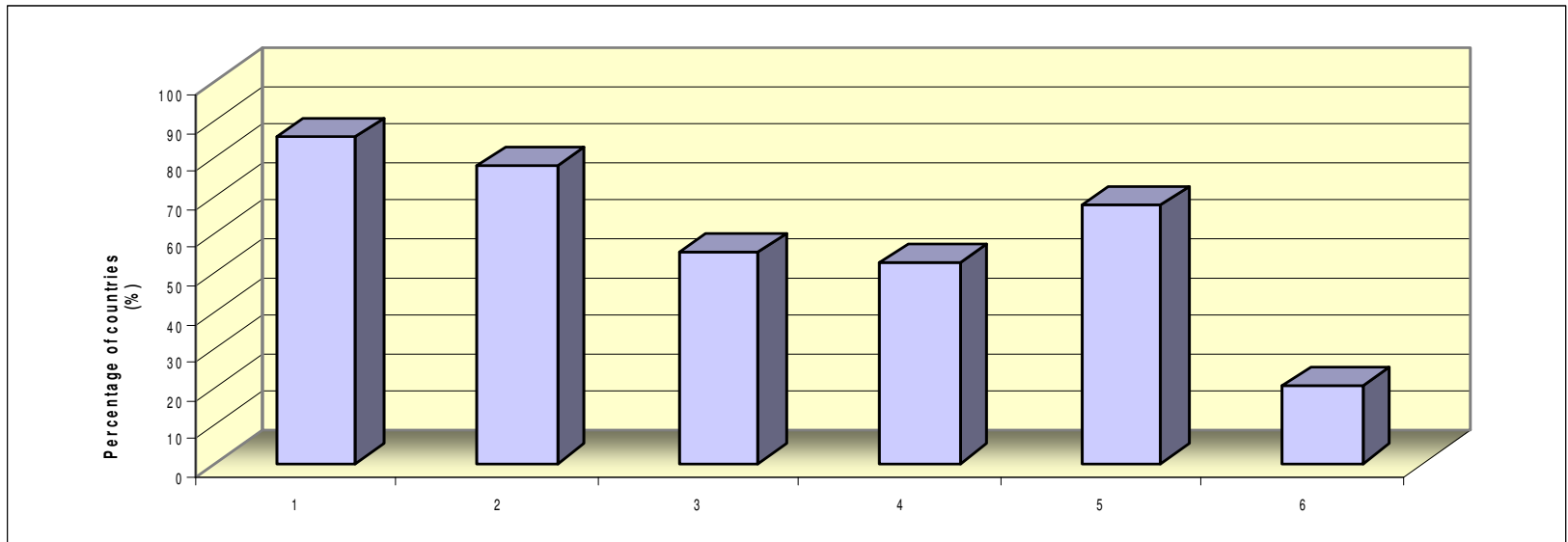


Disability-adjusted life expectancy in years (HFA5)



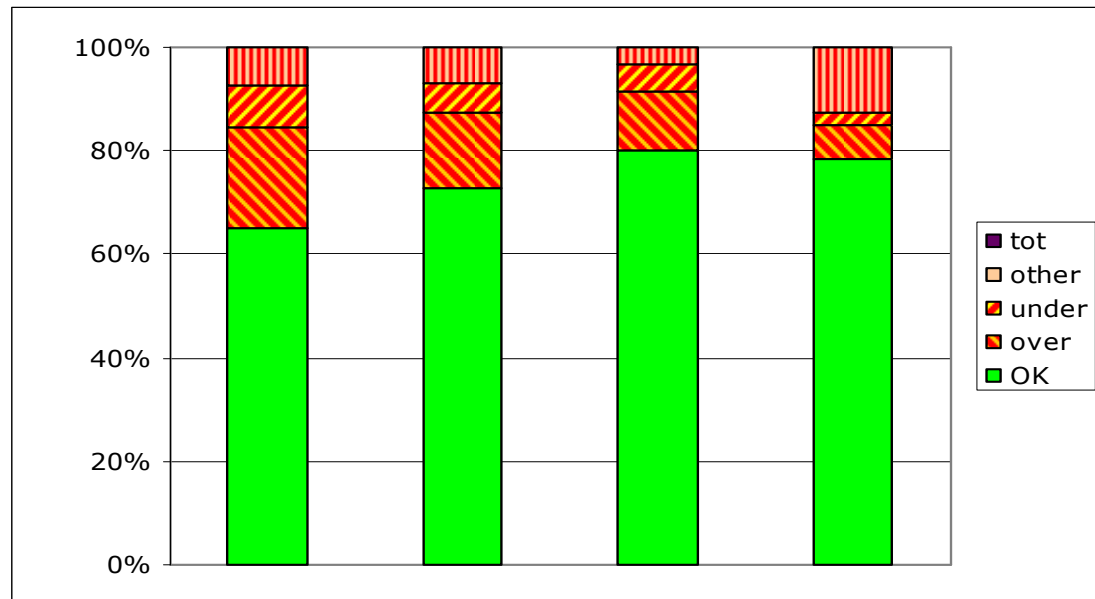
EURO baseline survey '05


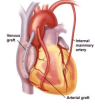


- Safety and quality on the national health agenda: **97%**
- Laws and regulations to support safety agenda: **97%**
- System of accreditation of health care settings: **45% + 29%** in part
- Periodic inspections of health care facilities: **72%**



National safety programmes in operation for (1) infection control (85% vaccination), (2) safe use of pharmaceuticals, (3) safe clinical practice, (4) a safe environment for care, (5) safe equipment and (6) others

Compliance with antibioprophyllaxis guidelines – PATH '07-08



	Colorectal cancer surgery 	CABG 	Hip replacement 	Hysterectomy 
Number hospitals participating	35	6	93	75
Number cases included in sample	1129	232	6270	5410
Average number of cases per hospital	32,3	38,7	67,4	72,1



EUROPE

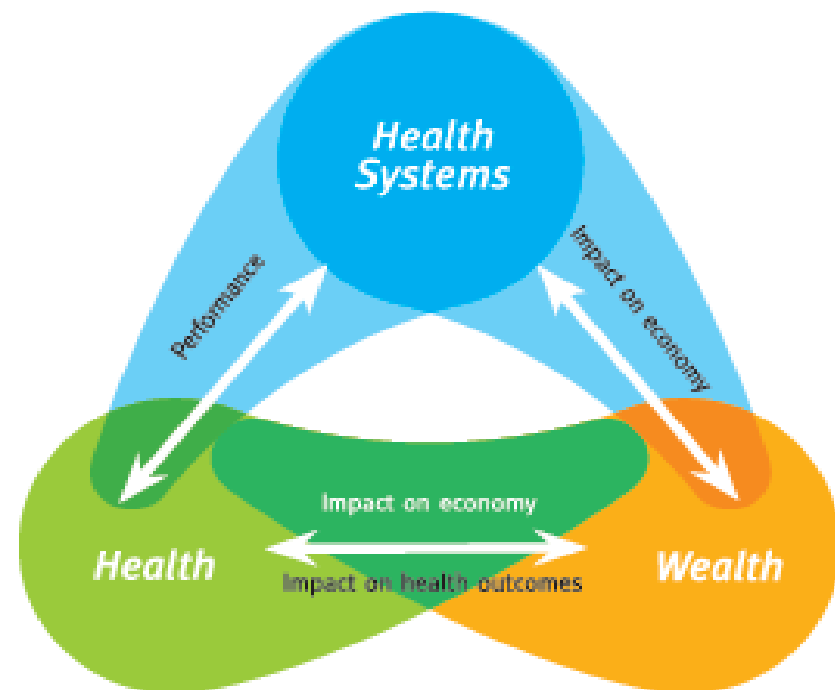
Why ?

- Health is a human right that must be supported by responsive prevention and care policies and interventions.
- The growing evidence that waste in healthcare is due to over treatment and poorly organized health systems.
- Health providers are dissatisfied with their conditions of work and are ready for changes allowing them to give better care.
- The evidence that quality methods can help to solve these and other challenges faced by low and high income countries alike.
- Money and time can be wasted on methods and approaches which are not appropriate, by poor implementation or by not sustaining efforts which take time to produce results.

There is no 'one approach or strategy' which works in all situations, but there is experiential evidence and knowledge of principles which can help to develop a strategy suited to a particular country situation.

Some historical moments...

- 1982: H. Vuori – Quality assurance of health services
- 2000: World Health report – the health system approach (C. Murray)
- 2002: I. Kalo & C. Shaw: Background for national quality policies (+ annex)
- 2006: R. Bengoa & R. Kwar: Quality of care - making strategic choices (+ 2 annexes)
- 2007: J. Ovretveit & N. Klazinga: guidance on developing quality and safety strategies with a health system approach
- 2008: WHO European Health systems ministerial conference



Our approach...

- Building on existing experience and work
- Towards a framework document adapted to the WHO European region
- 1st draft document – 2005: focused on accreditation
- 2nd draft document – 2006: focused on research
- 3rd draft document – 2007: a comprehensive perspective
- Guidance issued - 2008

A strategic advisory group

- to guide and advice on the development of the core structure of the document

A writing group:

- J. Ovretveit & N. Kalzinga

A peer review group

Overall objectives

- To define a regionally shaped strategic framework for quality and safety in health care
- To develop a regionally shaped assessment tool for quality and safety strategies, as support to priority setting at national level
- To assist in the compilation process of the final guiding document for regionally shaped quality and safety strategies

Key concepts

- **Service Safety:** *a service which does not cause avoidable harm to a patient*
- **Service Quality:** *the most effective way to meet health needs safely, without waste and within human rights and other higher level requirements.*
- **System Quality:** *services combine to provide service quality for patients throughout their illness episode and enhance population health.*
- **Quality policy:** *general principles and expectations governing action to ensure service and system quality.*
- **Quality strategy:** *coordinated actions to apply quality policy and create the best conditions for health care organizations to improve quality.*

3 perspectives to quality

1. Health care service perspective

- *Patient quality: provides patients with what they want and expect, during/ after the service.*

1. System of care perspective

- *Professional quality: follows procedures and methods thought to be most effective in meeting clinical needs, and meets the patient's needs assessed by professionals*

2. Populations public health perspective

- *Management quality: uses available resources in the best way to achieve patient and professional quality, without waste and within higher level requirements.*

Principles of quality improvement

- Multi-stakeholder approach
- Evidence based
- Systematic application to the local situation
- Organization and attitude change
- Project team process improvement



4 fold Quality methods approach

- Patient and community participation
- External regulation and assessment
- Local standard based quality management
- Local project team working on quality problems

5 types of National Q&S strategies

1. NQS aimed at health professionals
2. NQS aimed at health care organizations
3. NQS aimed at medical products and technologies
4. NQS aimed at health care users
5. NQS aimed at health care financiers

4 generic elements

- Legislation and regulation
- Monitoring and measurement
- Assuring/ improving professional performance
 - Individual
 - As a whole

Principles for strategy development

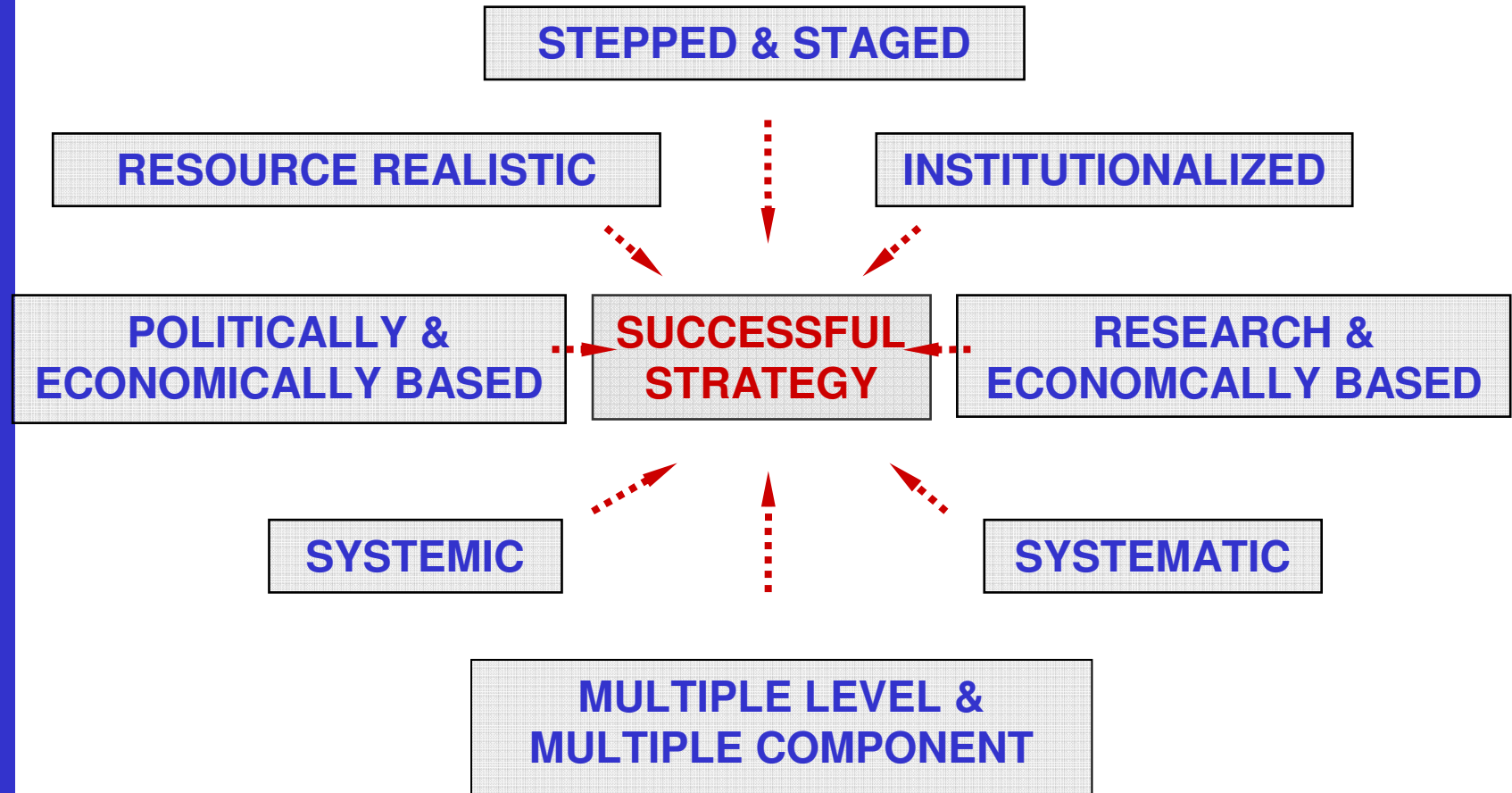
- Quality leadership system
 - Different institutions and levels
 - Resources and capabilities
 - Data evaluation and continuous renewal
- Deciding priorities
 - Evidence
 - Expertise and change capacity
 - Politics and values
 - Phased development

**Evidence based (informed by data and research)
Institutionalized structures and processes**

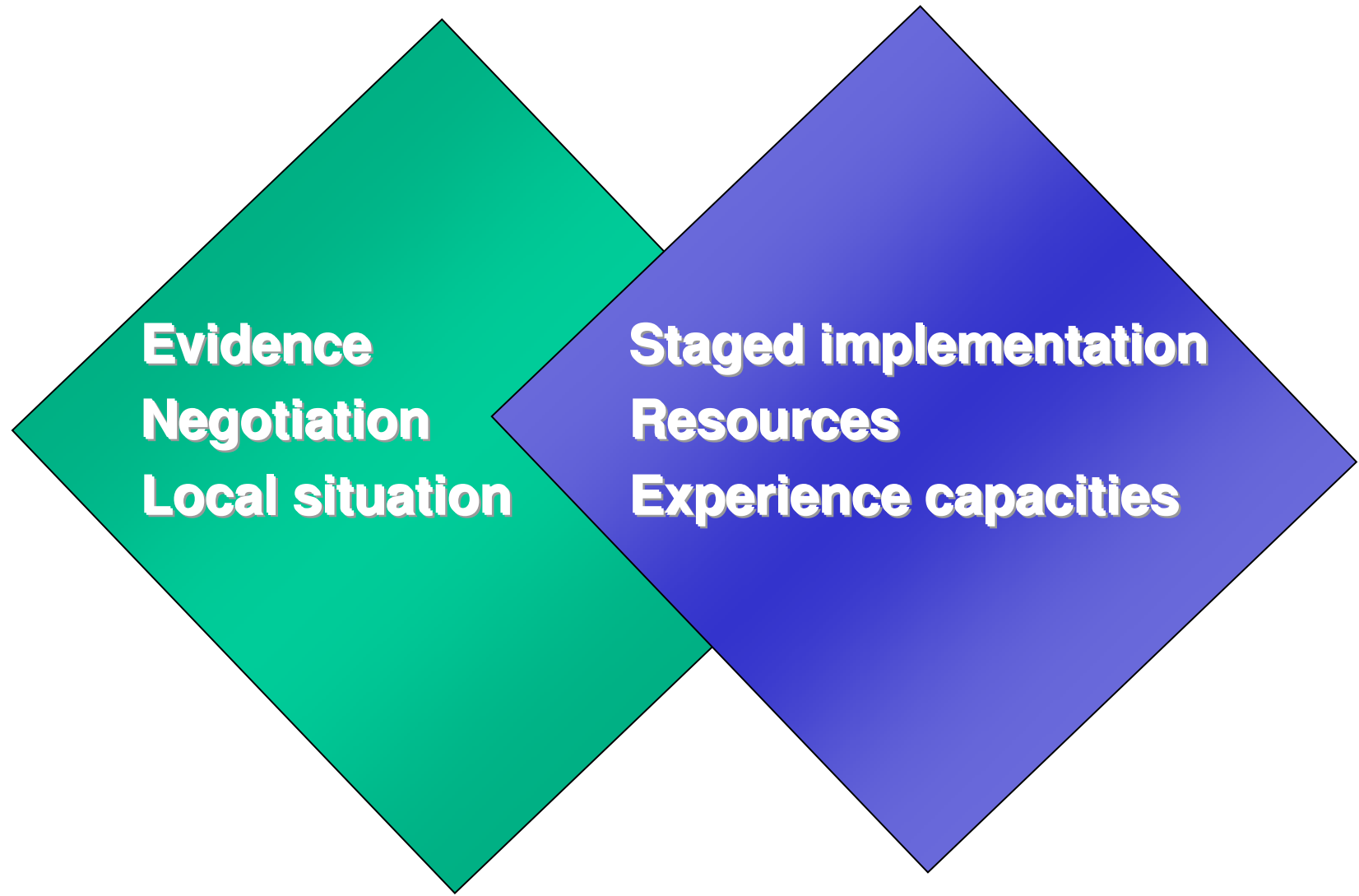
Quality change capacity:

- Ability to design and implement a solution in a way which visibly improves quality
- Depends on the amount of resources, expertise and experience using quality methods (quality units and how these teams work together).
- Health workers understanding of quality: motivation and knowledge of quality methods.
- Higher “quality change capacity” will be needed for more complex changes, and coordination with competing reforms

Developing a successful quality strategy



No roadmap for a NQS strategy



WHO six building blocks of Health systems strengthening:

- Good health services
- Well functioning info system
- Equitable access to essential medical products and technologies
- Well performing health workforce
- Good health financing system
- Leadership and governance

Thank you

www.euro.who.int

- Health systems conference
- Health systems webpage
- Service delivery page
- Patient safety page
- Quality and safety guidance page

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