



# **Key Initiatives of Quality Improvement Secretariat(QIS)**

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# Quality Improvement for Universal Health Coverage

## Introduction

Quality is one of the main dimensions of Universal Health Coverage (UHC). To achieve the UHC, Bangladesh government has been taking several steps and quality has become the prime agenda.

Quality is an integral part of health care service delivery and like many other health systems, health sector in Bangladesh is committed to provide quality healthcare to its citizens. The issue of quality has become more important since when Health Care Financing Strategy (2012-2032) has been adopted that which is necessarily a roadmap to achieve the Universal Health Coverage (UHC). Achieving Universal Health Coverage requires addressing the quality of care agenda. The government of Bangladesh hence planned different initiatives to improve the quality of health care service delivery.

## Quality Improvement Secretariat

Established in 2015, the quality improvement secretariat is playing a crucial role in overseeing the nationwide activities of the quality improvement of health care service delivery areas. The unit is the formal management body of the National Quality Improvement Committee (NQIC) led by the DG (Director General) of the Health Economics Unit. The major mandate of QIS is to guide & oversee the quality improvement activities nationwide through:

- ✓ M&E of Quality of Care for Health Service Delivery
- ✓ Quality of Care related protocols, guideline, SOP, tools
- ✓ Ensuring attainment of National Health Care Standards
- ✓ Ensuring Coordination mechanism among GO,NGO,DP and autonomous body

## Strategic Planning on Quality of Care : Paradigm shift from QA to QI

A strategic planning on Quality of Care has developed with the aim to achieve post MDG agenda “ Universal Health Coverage”. Through a collaborative and participatory process and taking the learnings from executing quality focused implementation, a core committee comprising of the major stakeholders of health and population sectors developed a strategic planning documents. This approach of quality improvement involves a substantial shift in idea of the work in healthcare and suggests the use of a wide variety of modern tools and methods. Based on the experience in

implementing quality assurance program in Bangladesh health services, and the comparative advantages among different approaches, this plan has adopted the 'Quality Improvement Approach' and thus, has made a paradigm shift from its earlier pattern of quality assurance program.

***Vision:*** Universal Health Coverage with Quality Health Care by 2032

***Mission Statement:*** Achieving an effective health system which provides the highest Quality of Care by Quality Improvement approach.

***Purpose:*** To implement and promote better Quality of Care through developing a strategic framework

The strategic plan comprises five major strategic objectives and three additional objectives. These objectives have Intermediate objectives under each category with several indicators. Implementation at all facilities and service delivery points will be guided by these indicators so that there is a standardized approach to the quality improvement programme.

Strategic Objective 1: Introduce consumer and patient-centered services

Strategic objective 2: Improve patient safety:

Strategic Objective 3: Improve clinical practice

Strategic Objective 4: Improve Leadership Management systems

Strategic Objective: 5: Improve public health & preventive services

**As per guidance of National Strategic Planning The National Health care Standard has developed:**

Health services will be well managed so as to achieve the core elements with a minimum wastage of resources. Managers are allocated the necessary authority to achieve planned objectives and held accountable for overall performance and results. The health care standards for service delivery will have the key characteristics like: Comprehensiveness, Accessibility, Appropriate Coverage, Continuity, Quality, Person-centeredness, Coordination & Accountability and efficiency:

Health services has responsibility for implementation of quality standards for health service delivery & clinical governance, which will provide an assurance that healthcare organizations are providing high quality healthcare. We also have responsibility for monitoring their compliance.

QIS has developed the "National Health Care Standards" for Primary, Secondary & Tertiary level hospitals.

This service delivery standard is set at a strategic level as a generic approach and will be used to test the arrangements that healthcare organizations have in place to deliver against the Healthcare Quality Strategy quality ambitions.

**Based on the that National Health Care Standards KPI & FLI has developed and formation 64 Districts QIC for M&E:**

Quality Improvement secretariat has developed Key Performance Indicators (KPI) and Facility Level Indicators (FLI) for assessing the QI implementation activities which has also linked to DHIS2. The key performance indicators are the national level indicators and these were developed based on six major dimensions of quality of care: Safe, effective, patient centered, timely, efficient and equitable. The facility indicators are prepared based on different work areas in a facility. Facility indicator list is an internal assessment tool for work improvement areas.

**For Capacity development purposes The National Resource Pool & Divisional Resource pool has formed:**

QIS has facilitated the process of forming a resource pool for each division with the intent to spread out the QI activities nationwide. On an average, ten resource person have been selected from each division either from the category of facility managers and medical doctors.

Resource pool is one of the major innovative plans of QIS to plan for a solution for the decentralization process of implementing the quality of care related health services. A total of 70 doctors (10 from each division) were brought within the resource pool group who have a definitive interest to work in the areas of quality. After preliminary training on QI, these doctors will be assigned for conduction of the QI training at divisional to upazila level facilities. They will be also included in the monitoring team embedded in the M& E framework.

**For effective coordination and consideration resource limitation GO NGO collaboration plan has developed:**

QIS has developed a plan to coordinate with DPs and the NGOs for facilitation of the QI activities nation-wide as per the national strategic planning. In this regards, the QIS conducted a mapping exercise to chalk out the DP's/NGO's supported areas. At national level, QIS facilitated the coordination process through one to one advocacy with different organizations. During this advocacy meeting, the detailed terms of references expected from the DPs/NGOs were discussed. A specific TORs has been finalised after discussing with them the feasibility of facilitating the QI activities. Total 64 districts are covered by UNICEF, UNFPA, SCI, Engender Health & Mary Stopes for limited QI support.

**Several model Initiative has taken with GO NGO collaboration for piloting the several QI model frameworks:**

QIS is piloting two health facilities at national level: Shaheed Suhrawardy Medical college Hospital, Dhaka Medical College Hospital and 10 district hospitals. In these facilities, 5S-CQI-TQM

approach is following and through a gradual process other QI interventions will be introduced. The objective is to pilot model health facilities with QI interventions.

On the Other side MNH piloting in Kurigram , RMNCAH piloting in Narsinghdi & Community Participation model is piloting in 10 model QI facilities.

**For Development of National QI protocols, Guideline, Tools, QIS has formed a TAG( Technical Advisory Group)**

Quality Improvement Secretariat formed a Technical Advisory Group (TAG) composed of experienced public health experts, Clinicians, Researchers & Management experts of major stake-holders. The main responsibility of TAG is to guide through the process of developing tools, guide-lines, protocols for QI implementation activities.

**The following national documents has finalized and approved**

- TQM operational module
- MPDSR National Guideline.
- RMNCAH QI framework
- National Strategic Planning on Patient Safety.
- Infection Prevention and Control.
- ICU QI Framework.
- Antimicrobial Resistance QI framework.
- PDCA Module.
- Clinical Mentorship
- 10 Standard Operating Procedure
- Safe Surgery Check list.
- 80 Clinical management protocols.
- Evidence Based Medicine.