Standards for improving quality of maternal and newborn care in health facilities

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In the context of the drive towards Universal Health Coverage

Every mother and newborn receives quality care throughout the pregnancy, childbirth and postnatal periods

Quality of care for pregnant women and newborns—the WHO vision
Conceptual framework to drive the action

Health system

Quality of Care

PROVISION OF CARE
1. Evidence based practices for routine care and management of complications
2. Actionable information systems
3. Functional referral systems

EXPERIENCE OF CARE
4. Effective communication
5. Respect and preservation of dignity
6. Emotional support

Individual and facility-level outcomes

Coverage of key practices
People-centred outcomes
Health outcomes

7. Competent, motivated human resources
8. Essential physical resources available
WHO tools to facilitate implementation

Quality of Care Framework

WHO Guidelines

Standards of care

Effective intervention strategies to improve QoC

Learning system

Indicators and monitoring framework

Global network of governments and partners

Systematic implementation guidance

- Establish national policy, strategy and structures
- Build a broad coalition of stakeholders
- Conduct a landscape analysis and review data from health facilities
- Develop an operational plan and assign responsibility
- Adapt and adopt quality of care standards
- Agree indicators and monitoring framework
- Build capability for quality improvement interventions

Plan

Act

Do

Implement interventions

Monitor progress and learn

Refine or adapt interventions

Study
STRATEGIC WORK AREA

STANDARDS OF CARE & MEASUREMENT INDICATORS
Scope of the standards

- Applicable to all health facilities offering maternity services.
- Cover labour, childbirth and early postnatal period
- Are woman, newborn, and family-centred.
- Specific for the priority thematic areas identified.
Development Process

- **Standards of care:**
  - Technical meeting held in June 2015
  - Standards of care and quality statements finalized
  - Criteria for developing quality measures agreed

- **Quality measures:**
  - May – October 2015, drafting of the quality measures
  - October 2015, 1st Delphi round conducted in to develop & build consensus on the measures
  - December 2015, 2nd Delphi round conducted to rank measures based on the agreed criteria
Taxonomy and Structure

8 Standards
one for each QoC framework domain

31 Quality Statements
2 to 3 quality statements per each standard

350 Quality measures
Includes input, output/process measures and outcome (if applicable) for each quality statement
The Network

Bangladesh, Côte d’Ivoire, Ethiopia, Ghana, India, Malawi, Nigeria, Uganda, Tanzania

Partners: ASSIST, Bill and Melinda Gates Foundation, Council of International Neonatal Nurses (COINN), Institute for Healthcare Improvement (IHI), International Confederation of Midwives (ICM), International Council of Nurses (ICN), International Federation of Gynecology and Obstetrics (FIGO), International Pediatric Association (IPA), Jhpiego, Liverpool School of Tropical Medicine, Management Sciences for Health (MSH), Save the Children, The Partnership for Maternal, Newborn and Child Health (PMNCH), UNICEF, UNFPA, University College London, University Research Co., LLC – Center for Human Services (URC-CHS), USAID, WHO

http://qualityofcarenetwork.org/
A broad-based partnership of **committed governments, implementation partners and funding agencies**, coordinated by the WHO to support efforts to improve QoC for maternal, newborn and child

- **Country-led** and builds on national structures for quality of care and domestic resources

- Composed of **first wave countries** to build partnerships for learning which can be rapidly drawn upon by other countries
Vision

- Every pregnant woman and newborn infant receives good quality care throughout pregnancy, childbirth and the postnatal period
- Underpinned by core values of equity and dignity

Goal

- Reduce maternal and newborn mortality
  - reduce maternal and newborn deaths and stillbirths in participating health facilities by 50% over five years.
- Improve experience of care – enable measurable improvement in user satisfaction with the care received.
**WHO Network to Improve Quality of Care for Mothers and Newborns**

**Vision**
Every mother and newborn receives quality care throughout pregnancy, childbirth and postnatal period

**Values**
Quality, equity and dignity

**Measure of success**
Halving maternal and newborn deaths in health facilities in five years

**Strategic objectives**

1. To build and strengthen national institutions and mechanisms for improving QoC in the health sector
   - National governance structure for QoC is established and functioning
   - National operational plan for improving QoC in MNH services is developed, funded, monitored and regularly reviewed
   - National advocacy and mobilization agenda for QoC is developed and implemented

2. To accelerate and sustain implementation of QoC improvements for mothers and newborns
   - WHO evidence-based standards of care for mothers and newborns are developed and adapted
   - National package of improvement interventions is developed, adapted and implemented
   - Clinical and managerial capabilities to support implementation of interventions are developed, strengthened, and sustained

3. To facilitate learning, share knowledge and generate evidence on QoC
   - Mechanism to share knowledge and support a learning network are developed and strengthened
   - Data systems for QoC improvement are developed, strengthened and used
   - Data and practice are analysed and synthesized to generate evidence-base on QoC improvement

4. To develop, strengthen, and sustain institutions and mechanisms for accountability on QoC
   - National framework and mechanisms for accountability on QoC are established and functioning
   - Monitoring and reporting framework for the programme is developed and implemented
   - Impact of the global initiative on MNH quality of care is evaluated

**Implementation principles**
Accountability, scalability, sustainability and participation

**Government-led strategies, plans and implementation**

- WHO
- Implementing partners
- Professional associations
- Academia
- Civil societies
- Donors

**Network management support (WHO)**
Network Launch Meeting – Malawi Feb 2017

Network Launch Meeting – Malawi Feb 2017

Committed to Quality, Equity, Dignity
A Network for Improving Quality of Care for Maternal, Newborn and Child Health

STATEMENT OF THE FIRST MEETING OF THE NETWORK FOR IMPROVING QUALITY OF CARE FOR MATERNAL, NEWBORN AND CHILD HEALTH

1. Committing to the 2030 Agenda for Sustainable Development, including Sustainable Development Goal 3, to ensure healthy lives and promote well-being for all at all ages, and particularly the targets to end preventable maternal and child mortality, and achieve universal health coverage.
2. Committing to the implementation of the Global Strategy for Women’s, Children’s and Adolescents’ Health 2016-2030 to reach its objectives of ‘transform, thrive and transform’.
3. Welcoming the strong commitment of partners joined under the umbrella of the Global Health Commission to implement the Global strategy and support quality, equity and dignity in maternal, newborn and child health services.
4. Recognizing that, despite remarkable advances in the past twenty decades, maternal, newborn and child mortality, stillbirth, premature and under-five mortality are still too high, and that progress has been uneven across and within countries, often leaving behind the most vulnerable.
5. Welcoming universities and global organizations, all joining forces to establish and lead the Network for Improving Quality of Care for Maternal, Newborn and Child Health.
6. We commit to work under a common vision to support learning, advocacy and global movements for high-quality care with equity and dignity.
7. We commit to achieve the goal of halving maternal and newborn mortality and stillbirths as health facilities in each country within five years, and working towards the seven national targets of ending preventable maternal and newborn deaths and stillbirths, and reducing mortality and disability.
8. Acknowledging that the ambitious goal set forward by the Network requires a renewed, coordinated effort that should be sustained for joint learning and should go beyond the health sector.
9. Building on the progress that countries have made to various degrees and in different ways to improve quality of care in health services.

Jointly, Côte d’Ivoire, Ethiopia, Ghana, India, Malawi, Nigeria, Tanzania, Uganda

Prepared for the Network launch meeting, 14-15 February 2017, Lilongwe, Malawi
What will success look like

• **Quality of care institutionalized** in health sector governance, plans and actions at national, district and facility levels

• **Effective change packages identified** for different contexts and scaled up nation-wide

• **Broad-based multi-stakeholder partnership functional** in support of the national quality strategy and plans

• **Evidence of improvements** in care practices and client satisfaction with care leading to reduced mortality and better health outcomes available

• **Global network for Quality, Equity and Dignity expanded** engaging more countries and more partners and covering the continuum of care for women, children and adolescents

• **Knowledge enhanced** of effective, scalable and sustainable approaches to improve quality of care
Thank you

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