## Building Quality into Foundation of Health System: Gaps and Roles of Each Actor

#### Dr. James Tumaini Kengia For Director, Health Services- PORALG





### Outline

- Background
- Existing gaps in quality of HIV services
  - National level
  - Implementation level
  - Research
- Opportunities and roles of various stakeholders





## Background

- High quality health system for HIV services can only be achieved through the use of evidence based QI activities.
- This requires contribution from policy makers, implementers, researchers and users
- Potential next steps to address issues raised during this symposium can be divided into:
  - Gaps at national level
  - Implementation challenges
  - Research gaps





#### Gaps at national level

- Coordination and leadership for institutionalization of QI culture???Structures-TWGs.....
- Insufficient fund to support QI initiatives at all levels of health system
- Accountability for quality of care at all levels
- Reporting system for quality of care and QI activities



#### **Roles at national level**

- Strengthen national leadership and coordination for integration of QI
- Facilitate institutionalization of QI initiatives at all levels of health system
- Finalize development of comprehensive harmonized QI indicators
- Mobilize resource for QI





#### **Gaps at Implementation level**

- Lack of institutionalization of mechanism for integration of QI plans at regional and district levels-Common framework
- Sometimes QI activities not streamlined into routine plans both at LGA's and health facilities
- Low capacity of providers to develop and implement QI activities
- No timely and routine data to inform planning and progress for QI activities



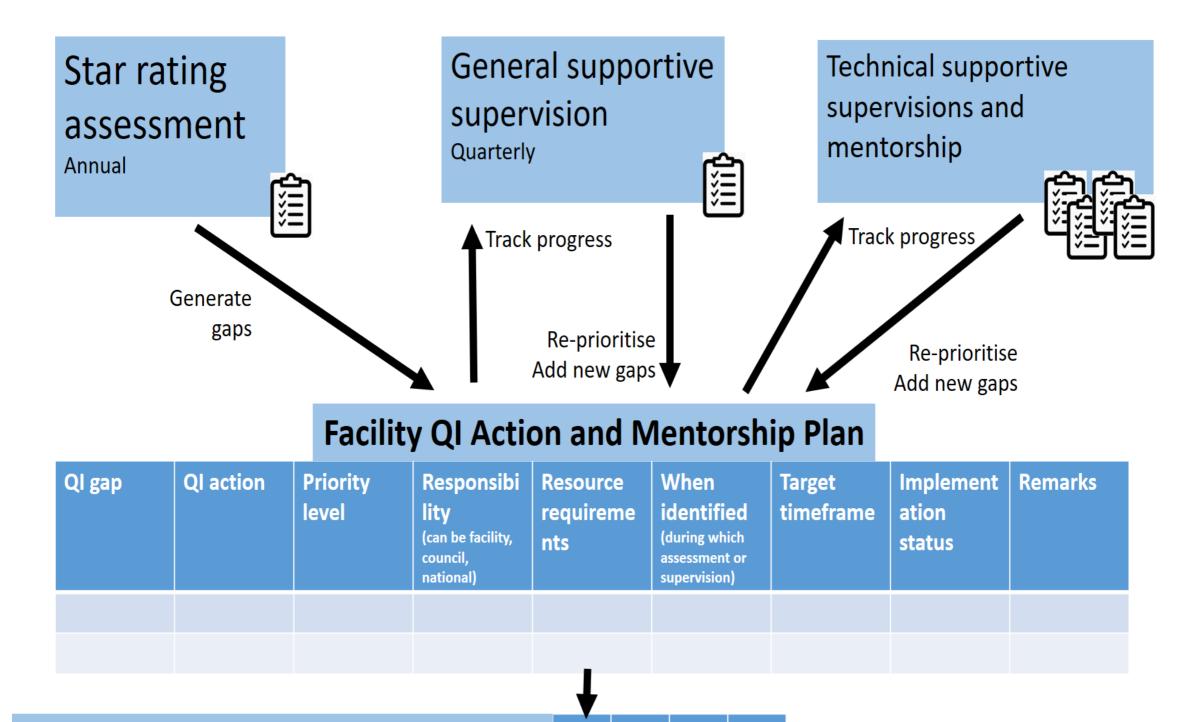


### **Roles of Implementers**

- Support development of mechanism for integration of regional and district QI plans-Common framework
- Integrate QI agenda in quarterly supportive supervision activities
- Train technical members of RHMT, CHMT and health facilities using nation QI tools and manuals
- Collect and use data to analyze and evaluate QI initiatives-Institutionalization of Data use culture







#### Annual Health Facility Plan and CCHP





### **Research gaps**

- Fewer studies on HIV/AIDS QI interventions-Evolved from the implementers
- Insufficient funds to support research activities for QI in the country
- Inadequate capacity to conduct research at implementation level
- Weak integration of quality measurements into existing surveys and evaluations projects
- No evidence on effective measures of quality of HIV care
- Inadequate capacity to use available data as well as dissemination of QI best practices



#### **Roles of researchers**

- Integrate QI components in HIV/AIDS research agenda
- Engagement of implementers in generation of themes
- Mobilize funds to support QI studies
- Promote integration of QI measures in existing national survey and evaluation
- Develop and evaluate efficient QI measures
- Design data use and dissemination plan for QI activities





# Thank you !





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HARVARD SCHOOL OF PUBLIC HEALTH Department of Global Health and Population