



# Quality of care

As a research arena

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# Own experience

- I have worked for 25 years in quality of care in reproductive health, both Norway (infertility) and Africa (infertility, maternal, STD and abortion care).
- These are entities where well functioning health services are key for reduced morbidity, mortality and improved well-being

# Preventive and curative care

- Preventive: mass coverage with basic services.

Antenatal care (high coverage, poor quality)

Vaccination (coverage)

Assessment of risk factors / screening

- Curative; care for those in need

Obstetric care, C section, antibiotics, blood transfusion

Immediate newborn care

Post partum/post abortion care

# Quality of health care

- Quality assurance
  - Quality improvement
  - Quality assessment
  - Quality control
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- Many concepts. Some operational, some explorative

# Standards

- Common to all quality work is the issue of standards
- Quality is normative
- Who sets standards?
- «Gold standard» or adjusted standard?

# Types of standards

- Evidence based medical protocols
- Guidelines from large norm setting organizations (WHO, Ministries of Health, Medical Associations, etc)
- Local standards like protocols, guidelines of operation, etc
- Policy standards
- Subjective standards
- Experience based standards

# Quality measurement

- Quality measurement is assessing

WHAT IS

against

WHAT SHOULD BE

# Quality assessment frameworks

- DONABEDIAN's:
- Structure-Process-Output-Outcome



# Health Systems versus Health Services

- Health service delivery depends on a well-functioning health system
- But for people, it is the service that matters
- Good quality CARE influences:

Utilization (is the service used)

Access (can people get to the services)

Coverage (are those who need it reached)

Outcomes (do they get well, or at least feel well)

# Small or big quality issues?

- Users are often concerned about issues of conduct:
- Respect
- Dignity
- Timeliness
- Information
- «Being seen»

# Service delivery people may have different perspectives

- Medical: Are we doing the right thing? Do we have diagnostic accuracy, medicines that make a difference, correct procedures....?
- Managers: Do we have the tools, diagnostics, manpower, buildings that we need?
- Nursing: Are our clients properly taken care of?

# Quality of Care assessments

- Observation of procedures, infrastructure and guidelines
- Structured assessment toolboxes: Clinical Audits, Quality assessment committees
- Subjective assessments: Interviews, questionnaires, exit interviews

# Large scale quality

- Register studies: Coverage, outputs (how many patients run through the system)
- Outcomes: curative targets, survival (5-year cancer survival etc)
- Key: Health information systems

# Key question in resource poor countries

- What is the minimum level of qualified care, competence, and access that can make a difference
- Differential standards world wide
- Task shifting or sharing
- Lay health workers

# And the BIG question:

- Should we invest in «quick fix» medicines or gadgets for targeted improvement?
- Or
- Should we build up a general health system that functions across a differential of needs?