



Maintaining Quality Care During COVID-19: Learning from country experiences

WHO COVID-19 Health Services Learning Hub
& The WHO Global Learning Laboratory for Quality UHC

3 December 2020

Shams Syed
Quality Team Lead
Integrated Health Services
World Health Organization



Introductory remarks

Agenda

01	Welcome and introductory remarks	Shams Syed
02	Overview of HLH & GLL	Sunny Khan & Nana M-Abrampah
03	Country presentation: Liberia	Lekilay Tehmeh
04	Country reflection: Maldives	Arvind Mathur
05	Facilitated discussion	All
06	Further reflections	David Weakliam & Peter Lachman
07	Facilitated discussion	Ernest Konadu Asiedu & Vinay Bothra
08	Wrap up	Shams Syed

Objectives

The webinar will allow participants to :

01

Explore strategies undertaken by countries to integrate quality into the maintenance of essential health services during COVID-19;

02

Identify common barriers and solutions in maintaining quality care during COVID-19;

03

Recognise common learning themes and technical assistance needs from countries.

Significant body of knowledge

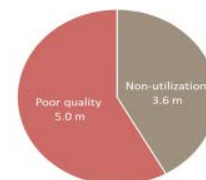


Three Reports in 2018:
Building the evidence and responding to the call for a UHC with Quality



High-quality health systems could prevent...

- 2.5 million deaths from cardiovascular disease
- 1 million newborn deaths
- 900 000 deaths from tuberculosis
- half of all maternal deaths each year.

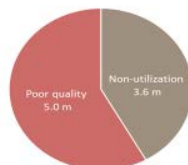


Available here: <https://www.hqsscommission.org/>



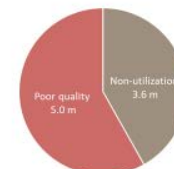
Deaths due to poor quality of care

- **8.6 million** deaths per year (UI 8.5-8.8) in 137 LMICs are due to inadequate access to quality care.
- Of these, **3.6 million** (UI 3.5-3.7) are people who did not access the health system.
- Whereas, **5.0 million** (UI 4.9-5.2) are people who sought care but received poor quality care.



COVID-19 – Access and Quality

- Need intentional focus on quality
 - Care for patients with COVID-19
 - Maintaining essential health services
- Likely increase in deaths related both to access & quality in Covid-19 pandemic – not clear which will have greatest effect
- Two sides of the same coin and should be addressed together!



Quality is not a given. It takes vision,
planning, investment,
compassion, meticulous execution,
and rigorous monitoring, from the
national level to the smallest,
remotest clinic.

Dr Tedros Adhanom Ghebreyesus
WHO Director-General



<https://www.thelancet.com/action/showPdf?pii=S2214-109X%2818%2930394-2>

Webinar etiquette

- We encourage your participation to generate a dynamic discussion during this webinar
- Ask questions related to the topic of this webinar in the Q&A box
- Provide general comments in comment box
- Mute microphones during the session

Sunny Khan
Project Lead
COVID-19 Health Services Learning Hub
Integrated Health Services
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Overview of HLH

COVID-19 Health Services Learning Hub



“The best defense against any outbreak is a strong health system. COVID-19 is revealing how fragile many of the world’s health systems and services are, forcing countries to make difficult choices on how to best meet the needs of their people.”

(WHO Director-General)Tedros Adhanom

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Background

- COVID-19 pandemic has caused significant disruption to essential health services in many countries
- Increased direct and indirect mortality now – and in future
- Member States have asked WHO for technical support in helping to maintain essential health services
- Strong appetite for cross-country learning, including innovative strategies to inform global response
- [Phase 1 Launch Dec 2020](#)

COVID-19 Health Services Learning Hub



A new, innovative learning architecture to support Member States in maintaining essential health services

HLH will support implementation of **WHO Operational Guidance for Maintaining Essential Health Services (EHS)**

Immediate focus on EHS – but also health service recovery and strengthening in the future

Audience :

- COVID-19 incident management teams
- Service planners at national, subnational and facility levels
- Service providers
- WHO departments and technical partner

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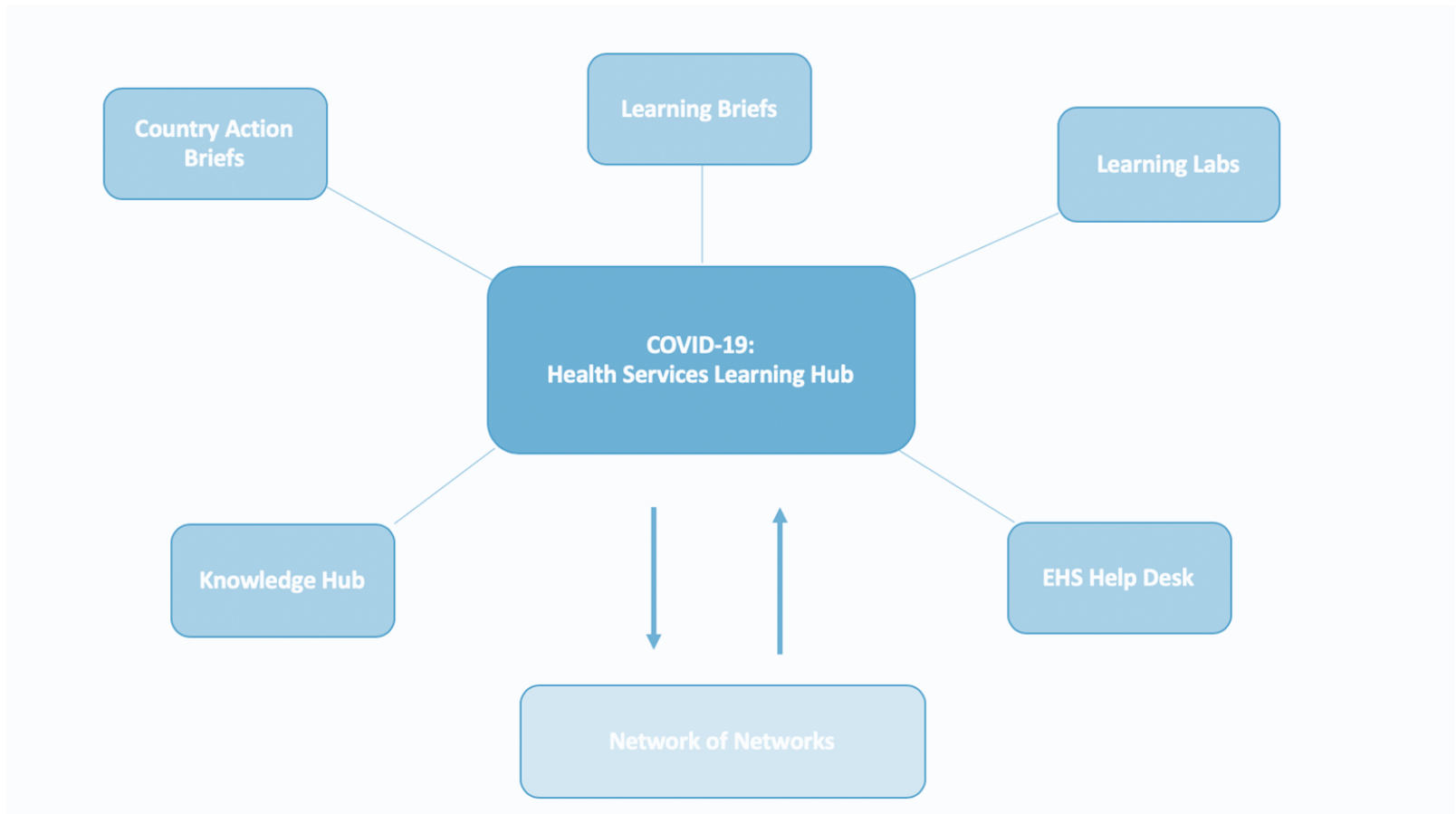


Goal

Drive activated learning to maintain essential health services in context of COVID-19 pandemic – and transform health services for the future

COVID-19 Health Services Learning Hub

Architecture



COVID-19 Health Services Learning Hub



Network of Networks

Partners supporting countries in maintaining essential health services working together to:

- Amplify individual efforts for collective impact
- Harnessing comparative advantages for shared learning
- Help countries 'cut through the noise' on COVID-19 information
- Explore innovative approaches for making a difference during this unprecedented time
- Survey of interested partners on opportunities for engagement

COVID-19 Health Services Learning Hub



Key Principles

- **Action focus** : immediate utility
- **Responsive** : zero tolerance to burden countries
- **Innovative** : use novel digital strategies for policy discussion
- **User-led development** : Action briefs + Learning Labs
- **Collaborative** : Network of Networks

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Scope

- HLH will have an immediate focus on maintenance of EHS (Pillar 9)
- Identify Member State priorities via number of entry points (i.e. EHS survey)
- Does not cover clinical case management of COVID-19 (IMST) or the research agenda (Science Division)
- HLH will maintain close connectivity with relevant initiatives within WHO and external partners

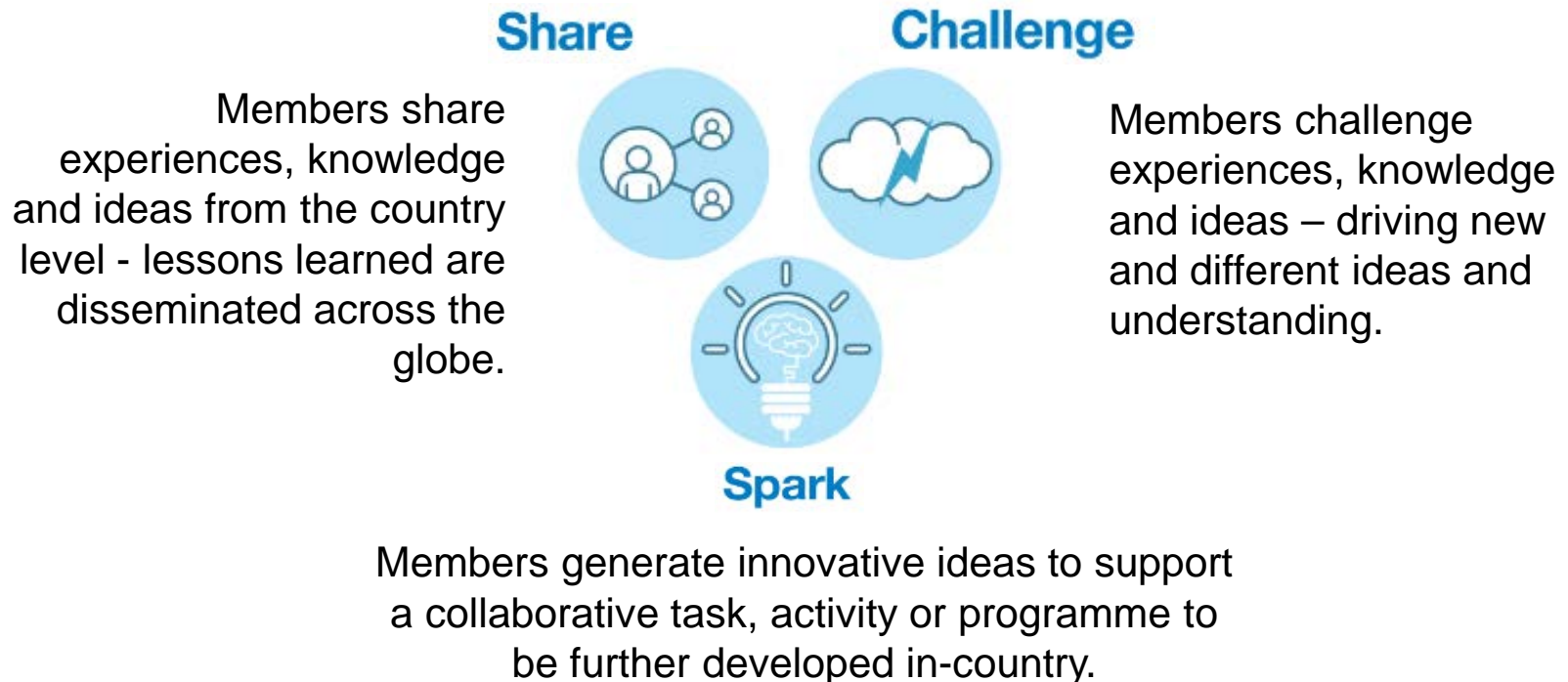
Nana A. Mensah Abrampah
Technical Officer
Quality
Integrated Health Services
World Health Organization



Overview of GLL

WHO Global Learning Laboratory for Quality UHC

To create a safe space to share knowledge, experiences & ideas; challenge those ideas & approaches; and spark innovation for quality UHC.



WHO Global Learning Laboratory for Quality UHC



Populate **repository** of tools and resources and emerging technical documents shared by learning lab members



Maintain close engagement with other related **groups and knowledge platforms** on quality within the context of UHC



Host **webinar series**



Keep momentum through **blogs/workshops/conferences**



Activate inter-linked **Learning Pods**



Engage in **country deep dives** to explore key technical issues at the frontline



Identify and disseminate **knowledge products** based on country experience & member implementation activities

To learn more: <https://www.who.int/initiatives/who-global-learning-laboratory-for-quality-uhc>

Lekilay Tehmeh
Clinical Coordinator for Patient Safety &
Healthcare Quality Management Unit
Ministry of Health, Liberia



Country presentation : Liberia

Maintaining Quality Care During COVID-19: Learning from country experience – Liberia



Outline

- COVID-19 Snapshot – Liberia
- Quality & COVID-19: Maintaining Essential Health Services
- How has quality been integrated into COVID-19 context in Liberia (national, sub-national, facility & community)?
- Seven Lessons from Liberian Experiences in 2020
- Barriers & Solutions
- What technical assistance is needed to support progress on quality health services during COVID-19?



COVID-19 Snapshot – Liberia

- First confirmed COVID-19 case on 16 March 2020 in Monrovia
- Robust quarantine of travelers from China and other countries ↑ numbers of transmission
- Lockdown instituted
- As of November 28, 2020, the country recorded:
 - A total of 1,598 confirmed cases of COVID-19; 169 active confirmed cases
 - 75% males, 39.7 % females: most affected age group 35-54 (44.7%)
 - 83 total deaths (13 in TUs, 43 in HFs, 27 in community)
 - 34,150 laboratory tests; 4.5% positivity rate
 - 8,583 contacts completing 14 days; 206 contacts under follow-up
 - 947 cumulative discharge
 - 218 (13.6%) HCWs infection; 5 (2.3%) death among infected HCWs



Quality and COVID-19: Maintaining essential health services



Quality element	Implications in Liberia
Effectiveness	Updated/adapted guidelines with a focus on provision of effective clinical care in the context of COVID-19.
Safety	Maintained a strong focus on patient safety but have seen challenges with rollout of contemporary COVID-19 trainings as well as availability & accessibility of needed PPEs at point of care.
People-centredness	Needed to keep an intentional focus on compassion (between health workers as well as in interactions between health workers and patients) for various facets in maintaining essential health services.
Timeliness	HR challenges to commit to both routine and outbreak services resulting in prolonged waiting time; implementing IPC measures during service delivery result in prolonged waiting times.
Equity	Huge health disparity among different populations of people especially those living beyond 1-hour walking distance of healthcare facilities; need for CHWs in hard-to-reach areas to take up additional service delivery roles like the provision of essential vaccines to these communities.
Integration	Focus on COVID-19 response at the detriment of essential health services posing challenges to service integration; COVID-19 IPC supervision & mentorship currently being integrated into routine services.
Efficiency	Well adapted and coordinated system for facility screening, triaging and isolation, will help make patient flow and care more efficient.

How is quality being integrated into COVID-19 response – national level

- HQMU currently provides leadership and guidance for infection prevention & control practice during COVID-19
- Adapted interim guidance documents for different sectors in Liberia
- Developed training modules for different professional groups
- Current tools for QA, IPC adapted with COVID-19 context (for care of COVID-19 patients as well as in routine services)
- Trainings, mentorship & coaching at healthcare facilities across the country (and monthly coordination with counties to strengthen HF oversight)
- Keeping an emphasis on roll out of national quality strategy (COVID tilt)



How is quality being integrated into COVID-19 response - county & district level

- Quality management teams being strengthened to respond to the needs of DHTs and healthcare facilities at the county level
- QA system (Joint Integrated Supportive Supervision) tools adapted to consider COVID-19 response efforts
- County level engagement meetings in place to discuss county health deliverables on quality health services merged with response efforts



How is quality being integrated into COVID-19 response – facility level

- Emphasis is now being placed on ensuring that proper triaging and screening is done for every patient to ensure smooth flow through the healthcare environment
- Quality management team empowered to discuss more improvement initiatives – focus on application of QI approaches to “burning issues” at the facility level
- Focus is not just on the PPEs and IPC measures (while that is a priority), but quality services as a whole

How is quality being integrated into COVID-19 response – community level

- CHWs providing community level health services currently trained to provide safe health services (appropriate IPC measures, Proper use of PPE)
- Continuous clinical learning materials with COVID-19 content developed for CHWs – focus on quality improvement approaches
- COVID-19 specific health promotion materials currently being used by CHWs as they provide care in the community
- Steps for community level case detection for COVID-19 included in IDSR guidelines



Seven lessons from Liberian experiences in 2020

1. Overwhelmed system – both direct mortality from outbreak and indirect mortality from vaccine-preventable & other treatable conditions.
2. Insufficient attention given to maintenance of quality routine health services during public health emergency.
3. Quality improvement approaches can be successfully applied at multiple levels of the system, although much more needs to be done.
4. Use of individuals with experience from EVD response helped accelerate progress with early response efforts.
5. Proper communication of risk of the outbreak crucial to maintain the trust of the population to keep delivering quality essential health services.
6. Engaging all relevant stakeholders in all phases of health promotion activities and allowing an active role for communities is crucial.
7. Can keep an emphasis on roll out of national quality strategy and use as a systems driver (with a COVID tilt).



Barriers & Solutions

3 BIG BARRIERS WE FACED

1. Health workers fears
2. "Response only" mentality
3. Quality misunderstood

3 SOLUTIONS

1. Active engagement of health workers at all levels of the system to address fears
2. Technical inputs on maintaining essential health services (and how it links with the response)
3. Consistent and intentional focus on quality within a drive to maintain health services

What technical assistance is needed to support progress on quality health services during COVID-19?

1. To translate best practices into actionable research projects for publication – feed cross-country learning.
1. Strengthening linkages with private sector for improved quality in the context of COVID-19.
2. Support further implementation of the national quality strategy in the context of COVID-19 with focus on an integrated approach.

Acknowledgement



**LAST
MILE
HEALTH**

Thanks for Listening!



Arvind Mathur
WHO Representative to the Republic of Maldives



Country reflection: Maldives

Facilitated discussion

Further reflections

David Weakliam
ESTHER



Selected reflections

Peter Lachman
International Society for Quality in Health Care



Selected reflections

Facilitated Discussion

Ernest Konadu-Asiedu
Head, National Quality Management Unit
Ministry of Health
Ghana



1. Can you shed light on your experience in Ghana regarding maintaining the quality of essential health services during COVID-19?

Ernest Konadu-Asiedu
Head, National Quality Management Unit
Ministry of Health
Ghana



2. What are the 3 key lessons learned on maintaining quality essential health services during COVID-19 from Ghana?

Vinay Bothra
Health Systems Advisor
WHO Country Office
Timor Leste



1. Can you shed light on your experience in Timor Leste regarding maintaining the quality of essential health services during COVID-19?

Vinay Bothra
Health Systems Advisor
WHO Country Office
Timor Leste



2. How have you connected the learning from various programmes to improve quality at the frontlines ?

Shams Syed
Quality Team Lead
Integrated Health Services
World Health Organization



Wrap-up

Moving forward...

- Post event open survey to keep the learning flowing
- Learning discussions currently on HIFA and on HLH/GLL platforms (Jan 2021)
- Examination and use of the WHO training module on maintaining quality care during COVID-19 <https://openwho.org/courses/clinical-management-COVID-19-general-considerations>
See Module 5: Maintaining quality care during COVID-19
- Comments / follow up questions welcome : hlh@who.int

Thank you for your participation

