

Evidence of the Effectiveness of Quality Approaches – How much do we know? What do we need to find out?

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Even though quality cannot be defined, you know what quality is.

Robert Pirsig

- “Optimizing material inputs and practitioner skill to produce health” – Peabody, et al - Disease Control Priorities in Developing Countries
- “The degree to which health services for individuals and populations increases the likelihood of desired health outcomes and are consistent with current professional knowledge” – IOM, 2001

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Issues to consider

- Consensus that quality is an issue, but what to do is less clear
- “Relatively difficult to identify good, mediocre, and bad quality improvement practice”
- Evidence base – not strong anywhere, even less in low and middle-income
- Quality is evolving and many different models

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Elements of Quality

- **Structural** – infrastructure, tools, technology, financing, incentives
- **Process** – interaction between caregivers and patients – guidelines, etc. – best evidence is here
- **Outcomes** – health and also acceptability or responsiveness – what you care about the most

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Elements of Quality – evolved further

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|-----------------|-----------------------|
| ● Effectiveness | ● Patient safety |
| ● Efficiency | ● Effectiveness |
| ● Accessibility | ● Patient centredness |
| ● Acceptability | ● Timeliness |
| ● Equity | ● Efficiency |
| ● Safety | ● Equity |

WHO - 2006

IOM - 2001

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Quality is never an accident; it is always the result of intelligent effort.

John Ruskin

English critic, essayist, & reformer (1819 - 1900)

Multiple methods, but usually refer to some sort of learning cycle to include

- Situation analysis
 - Action or interventions
 - Monitoring or measurement of impact
 - Feed back
- Does not need to be mystified

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Policy Interventions to Improve Quality – Two types are sometimes recognized

- Influence provider practice by changing structural conditions
- Interventions that directly affect provider practice

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It is quality rather than quantity that matters.

Seneca, *Epistles*

Roman dramatist, philosopher, & politician (5 BC - 65 AD)

- Quantity of services – focus in lesser developed countries
- Misperception that quality is associated with cost
- Low cost services delivered with high quality may make the biggest contribution to health outcomes

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Influence provider practice by changing structural conditions

- Law, regulation, accreditation
- Litigation
- Peer review – professional oversight – support/supervision
- Sharing information – COHRED, QAP, Cochrane
- Higher volume of care
- Organizational change – QA committees or programmes

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Interventions that directly affect provider practice

- Training with peer review feedback
- Performance based pay
- Guidelines – clinical and evidence based
- Performance based professional recognition
- Supervision

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What works in LIC/MIC?

- Audit and feedback mechanisms
- Educational strategies – when combined with feedback work – not just a workshop
- Local consensus development combined with supervision/follow-up

Getting evidence into practice - Siddiqi, Newell, Robinson – Int. Jnl. Hlth Care Quality – 2005 (A systematic review of 44 studies in developing world)

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What do we know? – A few examples

- Targeted education and retraining – works, but requires follow-up, e.g. Tanzania, IMCI and ARI
- Supervision – works, but must be supported – avoid inspection
- Accreditation – evidence not yet strong – So. Africa
- Regulation – affects entry into the market

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Pay for Performance

- UK – associated with modest improvement
- Financial incentives can change professional behaviour
- Unintended consequences or risks
 - Gaming the system – focus on indicators
 - Neglect other areas
 - May crowd out humanistic motivation – the gift
 - Ethics is important

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The Tension between Needing to Improve Care and Knowing How to Do It

- Welcomes the increased interest in patient safety and quality in health care
- But – some concern that desire for action is moving faster than the evidence
- Quality improvement should follow the same principles of evidence as any other health intervention – RCT's still the gold standard, serial studies...

Auerbach, Landefeld, Shojania – NEJM Aug 9 2007

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Conclusions

- Evidence base is growing – most from developed world
- Results are contextual and findings must be adapted to each setting
- Transferability of experience between settings is not certain
- Evidence from low and middle-income is needed
- Research on quality methods is a high priority – it must be methodologically sound

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References

1. Quality of care: a process for making strategic choices in health systems – WHO 2006 – www.who.int
2. MAKER Managers taking Action based on Knowledge and Effective use of resources to achieve Results - www.who.int/entity/management/en/
3. Quality and accreditation in health care services: a global review – ISQua and WHO – 2003
4. Improving the quality of care in developing countries – Peabody, Taguiwalo, Robalino, Frenk – Chapter 70 from Disease Control Priorities in Developing Countries (2nd Edition) <http://www.dcp2.org/page/main/Home.html>
5. Getting evidence into practice: what works in developing countries? – Siddiqi, Newell, Robinson – Int Jnl for Quality in Health Care Vol 17, No. 5 – 2005
6. Quality of primary care in England with the introduction of pay for performance – Campbell, et al – NEJM July 12, 2007
7. The tension between needing to improve care and knowing how to do it – NEJM Aug 8 2007
8. The Gift Relationship: From Human Blood to Social Policy. Richard M Titmuss

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Resources - Websites

Quality assurance project of URC/USAID - www.qaproject.org

International society for quality in health care - <http://www.isqua.org.au/isqua>

Institute of Medicine – “Quality chasm” and other publications - www.iom.edu

World Alliance for Patient Safety - www.who.int/patientsafety

Cochrane Collaboration - www.cochrane.org

GIFT/HINARI - www.who.int/hinari/en

National Library of Medicine – www.nlm.nih.gov

MAKER Managers taking Action based on Knowledge and Effective use of resources to achieve Results - www.who.int/entity/management/en/

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It is the quality of our work which will please God
and not the quantity.

– **Mahatma Gandhi**

Thank You

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