Lessons from Ghana

Building systems to scale up and sustain implementation of quality of care for mothers and newborns

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Strategic Actions taken 1/2

- Strong national leadership / National dialogues / summits on quality healthcare involving stakeholders and Partners/ TWG

- Development of a National Healthcare Quality Strategy and National Operational Plan for MNH QoC and Roadmap
- Development of Operational Guidelines for Service delivery by the GHS for the NHQS

- Adaptation of the WHO Standards for improving quality of care in facilities to country context – Implementation guide, tools, guidelines etc
- Development of a National RMNCAH Strategic Plan with Quality of Care as the pivot
Strategic Actions taken 2/2

- Inclusion of newborn care standards in the National Health Insurance Authority credentialing tool & Health Facility Regulatory Agency assessment tool

- Involvement of Regulatory Bodies and Professional associations e.g. Nursing and Midwifery Council, Medical and Dental Council, Paediatric Society of Ghana, Society of OBGYNS

- Community involvement using the Community Score-Card system and Community Health Management Committees
Implementation scale-up

- UNICEF and WHO jointly supporting GHS in the 5 network regions and 110 Health facilities

- Other partners supporting QOC interventions in other regions of Ghana
  - JHPIEGO
  - PATH
  - JICA
  - USAID
  - UBORA
  - UNFPA
Interventions and practices

**Infrastructure**
- Establishment of KMC and newborn units and corners
- Procurement of emergency obstetric equipment
- Motorbikes for community outreach and home visits
- Mechanization of boreholes & construction of washrooms for maternity units

**Institutionalization of QI**
- QI teams in facilities
- Training, mentorship, coaching
- Death audits and response

**Implementation**
- Infection prevention
- Water, sanitation, hygiene
- Labour monitoring, postnatal & newborn care
- Community engagement
- Privacy
- Triaging
- Referrals
Lessons learned

• QI interventions save lives and should be the thrust for achieving sustainable reductions in mortality

• Leadership at national and sub-national levels must work synergistically

• Fully integrated QI coaching models will allow support care at all levels, critical for settings with access challenges

• Data quality improves with QI and early improvements in care may be masked by improvements in data capture of mortality

• Community engagement is key to establish accountability of patient experience of care