



Quality of Health Care (QHC) Model

Cycle of Activating and Sustaining Continuous Quality Improvement (CQI/ KAIZEN) in Four Southern Provinces (Champasak, Salavan, Sekong and Attapeu) in Lao PDR



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Background

To realize “Five Goods One Satisfaction”, Ministry of Health studies how to encourage continuous quality improvement (CQI) in hospitals in Lao PDR. This report aims to share experiences of Improving Quality of Health Care Services Project (Department of Healthcare and Rehabilitation, Ministry of Health, four Southern provinces and JICA) to introduce “Quality of Health Care (QHC) model” as a pilot in four Southern provinces for one year since May 2017.

Conclusions

“QHC model” encouraged CQI in four Southern PHs without financial support from JICA. When quality and priority view was fostered, financial support may accelerate improving and sustaining quality of health care in PHs. Participatory development of the model through trials and errors seems essential in the new field like quality and safety in health care. Further challenge is to strengthen CQI and hospital-wide quality management capability in hospitals in Lao PDR.

Methods

QHC model

QHC model is a repeated cycle of (1) Hospital Quality Criteria (HQC), (2) routine quality assessment and (3) CQI including (i) trainings to fill in gaps of skills among staff and (ii) sharing and learning opportunities (Figure 1). Series of interventions of (1), (2), (i) and (ii) were introduced to encourage (3) CQI in four Southern Provincial Hospitals since May 2017.

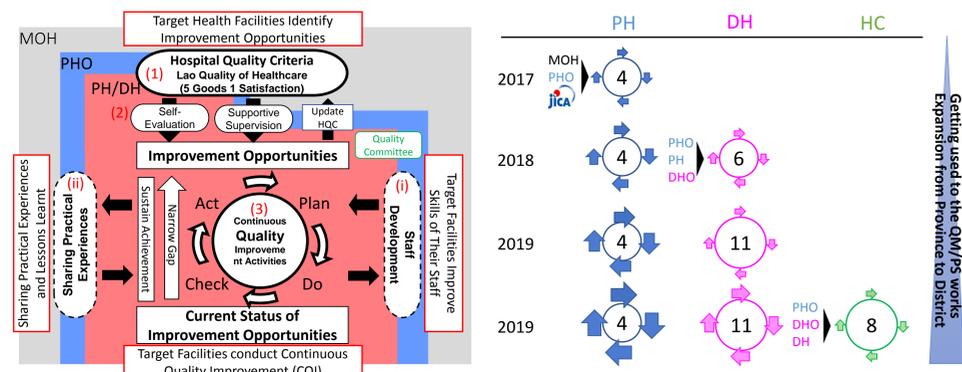


Figure 1. QHC Model and its plan of pilot implementation

(1) Hospital Quality Criteria

HQC is a set of standards that defines quality requirements of services in hospitals. Perception of Lao people was reflected on four HQCs (Reception of OPD, Toilet, Care for Eclampsia and Care for Postpartum Hemorrhage) by participatory development and updating of the HQCs with staff in four provinces since February 2017.

(2) Routine Quality Assessment

Self-evaluation has been conducted every quarter since November 2017 and the results were visualized with each hospital's achievement and hospital ranking. Supportive supervisions were conducted for three provinces (Champasak, Salavan, Attapeu).

(i) Training to fill in gaps of skills among staff

Three out of four types of trainings have been conducted.



(ii) Sharing Practical Experience and lessons learnt on Hospital Quality Management

Lao forum committee member was assigned and attended the Third Vietnam Forum on Hospital Quality Management and Patient Safety.

Results

(3) Continuous Quality Improvement Activities

All four PHs improved their achievement in HQCs as a result of CQI on hospital's initiative. However, sustainability of the attained achievement is the next challenge.

1) Reception of OPD April 2018

Rank	Hospital	1 st (Nov)	2 nd (Jan)	3 rd (Mar)
1	Champasak PH	G0 (14/15)	★G3 (10/12)	◻G3 (9/12)
2	Attapeu PH	G0 (12/15)	★G3 (8/12)	◻G2 (14/15)
3	Sekong PH	G0 (11/15)	★G2 (11/15)	◻G2 (10/15)
4	Salavan PH	G1 (10/15)	◻G1 (14/15)	◻G1 (14/15)

3) Care for PPH April 2018

Rank	Hospital	1 st (Nov)	2 nd (Jan)	3 rd (Mar)
1	Sekong PH	G1 (3/6)	◻G1 (5/6)	★G4 (1/5)
2	Attapeu PH	G1 (3/6)	◻G1 (5/6)	★G3 (4/5)
3	Champasak PH	G1 (2/6)	◻G1 (5/6)	★G2 (4/5)
4	Salavan PH	G0 (4/5)	★G2 (3/5)	◻G1 (0/5)

2) Toilet (OPD) April 2018

Rank	Hospital	1 st (Nov)	2 nd (Jan)	3 rd (Mar)
1	Champasak PH	G0 (5/6)	★G4 (2/3)	★G5
2	Attapeu PH	G0 (2/6)	★G2 (8/11)	◻G2 (10/11)
2	Salavan PH	G1 (8/9)	◻G1 (8/9)	★G2 (9/11)
2	Sekong PH	G0 (3/6)	★G2 (8/11)	◻G2 (8/11)

4) Care for Eclampsia April 2018

Rank	Hospital	1 st (Nov)	2 nd (Jan)	3 rd (Mar)
1	Attapeu PH	G2 (2/5)	◻G2 (4/5)	★G5
2	Sekong PH	NA	G1 (4/5)	★G2 (4/5)
2	Champasak PH	G2 (4/5)	◻G1 (4/5)	★G2 (3/5)
4	Salavan PH	G1 (3/5)	◻G1 (3/5)	◻G1 (4/5)

Table 1. Trend of achieved grade of HQC in four Southern Provincial Hospitals

(2) Routine Quality Assessment

Self-evaluation was conducted four times in four provincial hospitals (PH). All four PHs improved their achievement in HQCs. HQCs helped identification of improvement opportunities in four PHs. As a result, CQI has been conducted on hospital's initiative.

(i) Trainings

Objective of trainings were re-defined to improve quality of health care services. Trainings filled gaps of skills among staff and helped staff to understand improvement opportunities and agree on their solutions.

(ii) Sharing and learning opportunities

Sharing and learning opportunities in national and four provinces accelerated the achievement of CQI.

First Lao Forum on Improving Quality of Health Care Services



Four Provinces' Joint Meeting



Vietnam Forum on HQM/PS

