



IMPROVING THE QUALITY OF HEALTH SERVICES – TOOLS AND RESOURCES

Improving the quality of health services: tools and resources

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IMPROVING THE QUALITY OF HEALTH SERVICES – TOOLS AND RESOURCES

compiled by the

**WHO Service Delivery and
Safety Department**

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This document has been developed by an Improvement cross-cut team within the Department of Service Delivery and Safety (SDS) at WHO headquarters. The document aims to support implementation of quality improvement approaches to make health services more effective, safe and people-centred. The document brings together the main tools and resources focused on quality improvement currently in use within the SDS department.

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THE COMPENDIUM AT A GLANCE

WHAT IS THE COMPENDIUM?

The tools and resources described in this document (hereafter referred to as “the compendium”) are a resource for WHO Member States aiming to improve the quality of service delivery. The compendium collates current tools and resources on quality improvement (QI) developed by the WHO Service Delivery and Safety Department (SDS) and provides examples of how the tools and resources have been applied in country settings.

WHO IS THE COMPENDIUM FOR?

- Ministries of health, quality improvement teams, researchers and development agencies.
- WHO technical programmes, regional and country offices in their technical cooperation work with country counterparts and donors.
- Those working to improve the quality of health service delivery.

WHY IS IT NEEDED?

- The compendium has been developed to collate existing resources that facilitate quality improvement in service delivery.
- As a technical resource for countries in support of quality improvement efforts within health service delivery.
- Highlight adaptable tools and resources that can support local quality improvement efforts.

SDS TECHNICAL AREAS AND TYPE OF TOOLS

TECHNICAL AREAS



- Traditional complementary and integrative medicine
- Emergency and essential surgery
- Primary care
- Blood safety
- Palliative care
- Hospital management
- People-centred care
- Infection prevention and control
- Emergency
- Policies, strategies and plans
- Community engagement
- Institutional health partnerships
- Patient safety



TYPES OF TOOLS AND RESOURCES

- Guidance
- Implementation
- Advocacy
- Manuals
- Capacity-building
- Guidelines
- Frameworks
- Research
- Assessment
- Training resources

HOW COULD I USE THE COMPENDIUM?

- As a reference list of helpful tools and resources aimed at improving the quality of health services.
- As an overview of available tools and resources for quality improvement that have been developed by WHO.
- As a starting point for further technical collaboration with partners and WHO expertise in these respective subject areas.
- The current compendium is not an exhaustive list of QI interventions. It should be used in conjunction with other existing evidence-based guidance. The compendium is grouped into two sections: the first part of the compendium provides an overview of finalized tools and resources. The second part of the compendium collates tools and resources currently under development. Where applicable, case studies have been provided.

INTRODUCTION

The adoption of the sustainable development goals (SDGs) placed additional emphasis on improving overall human development by 2030. Improving health outcomes is at the forefront of this global commitment, with Goal 3 calling on all stakeholders to “ensure healthy lives and promote well-being for all at all ages”. The SDGs also reaffirm a global commitment to advancing universal health coverage (UHC). Its focus is to ensure that all people and communities have access to the quality health services they need, without facing financial hardship. The momentum towards UHC is rooted in the principles of the Alma-Ata Declaration (7) which identified health as a human right. To realize the goal of health for all and achieve universal access to quality health services, the

WHO Framework for Integrated People-Centred Health Services (IPCHS) calls for a fundamental shift from health systems designed around diseases and health institutions towards health systems designed for people (2). Globally, there is a need to look beyond service coverage and financial protection and emphasize improvements in quality service delivery at the core of country action. This is because quality of health services, coupled with service coverage will play a critical role in strengthening national health systems and improving health outcomes.

Global consensus on quality is emerging. Three major publications on quality have been published in 2018: first, the joint WHO-World Bank-OECD publication on the delivery of quality health services as a global imperative for UHC; then, the Lancet Global

¹ Declaration of Alma-Ata. International Conference on Primary Health Care, Alma-Ata, USSR, 6-12: World Health Organization (http://www.who.int/publications/almaata_declaration_en.pdf?ua=1 accessed 20 August 2018)

² Framework on integrated people-centred health services. Report by the secretariat: World Health Organization (http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_39-en.pdf?ua=1 accessed 20 August 2018)

high quality health systems in the SDG era; and third, the US National Academies of Science Report on Improving the Quality of Health Care Globally. Each call for action on quality improvement. This document is developed in anticipation of and in support of this collective call and will be refined further over time.

There is an increasing collective recognition that quality health services should be:

- **effective:** providing evidence-based health care services to those who need them;
- **safe:** avoiding harm to people for whom the care is intended and reducing the risk of unnecessary harm associated with health care to an acceptable minimum;
- **people-centred:** adopting the perspectives of individuals, carers, families and communities as participants in, and beneficiaries of, trusted health systems that are organized around the comprehensive needs of people, rather than individual diseases, and that respect social preferences.

In addition, in order to achieve the benefits of quality health care, health services should also be:

- **timely:** reducing waiting times and sometimes harmful delays for both those who receive and those who give care;
- **equitable:** providing care that does not vary in quality on account of age, sex, gender, race, ethnicity, geographical location, religion, socioeconomic status, linguistic or political

- **integrated:** providing care that is coordinated across the entire spectrum of health care services and providers and makes available the full range of health services throughout the life course;
- **efficient:** maximizing the benefit of available resources and avoiding waste.

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