# WHO GLOBAL LEARNING LABORATORY

For Quality Universal Health Coverage

2017 ANNUAL REPORT

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2017 ANNUAL REPORT

#### WHO/HIS/SDS/2018.6

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## **ACRONYMS**

ASSIST	Applying Science to Strengthen and Improve Systems
GLL	Global Learning Laboratory
HCF	health care facilities
IC4P	Integrated Care for People platform
IPC	infection prevention and control
IPCHS	integrated people-centred health services
JLN	Joint Learning Network
LMIC	low- and middle-income country
NQPS	National quality policy and strategy
QSR	Quality Systems and Resilience team
SDS	Service Delivery and Safety department
UHC	universal health coverage
USAID	United States Agency for International Development
WASH	water, sanitation and hygiene
WHA	World Health Assembly
WHO	World Health Organization



### **EXECUTIVE SUMMARY**

#### 2017 ACCOMPLISHMENTS

The WHO Global Learning Laboratory (GLL) for Quality UHC aims to create a safe space to share knowledge, experiences and ideas; challenge those ideas & approaches; and spark innovation. This 2017 annual report aims to capture progress since the activation of the GLL and reflect on lessons learned to inform future implementation efforts of the Global Learning Laboratory. The target audience for this report are platform members of the WHO GLL for Quality UHC, members of the GLL general mailing list, other learning networks, WHO departments and technical units as well those actively involved in improving care for all.

### THE NUMBERS

1031 members reached on GLL mailing list

251

registered individuals on GLL interactive SharePoint Platform



75

average participants on GLL webinars

members on Water, Sanitation and Hygiene and Infection, Prevention and Control Learning Pod

key lessons learned on building a learning community



38

members on National Quality
Policy and Strategy Learning Pod

learning laboratory events at global and national levels

webinars on quality, UHC and specific technical areas



activated learning pods to foster shared learning in specific technical areas



global platform to share, challenge and spark thinking and action on quality UHC

### **BACKGROUND**

Since adoption of the Sustainable Development Goals (SDGs), quality of care has received increased attention given its prominent role in improving overall health outcomes for populations. Quality is firmly embedded in the definition of universal health coverage (UHC) as well as SDG 3, specifically Target 3.8. This target urges countries to achieve UHC, including financial risk protection, access to quality essential health services and access to safe, effective, quality and affordable essential medicines, as well as providing vaccines for all. There is a clear acknowledgment that quality of health services will be critical to progress towards achieving UHC. Health services of good quality are:

- SAFE avoiding injuries to people for whom the care is intended;
- **EFFECTIVE** providing evidence-based health care services to those who need them;
- **PEOPLE-CENTRED** providing care that responds to individual preferences, needs and values.

In addition, health services of good quality should be:

- TIMELY reducing waiting times and harmful delays;
- **EQUITABLE** providing care that does not vary in quality on account of gender, ethnicity, geographic location, and socio-economic status;
- INTEGRATED providing care that makes available the full range of health services throughout the life course;
- **EFFICIENT** maximizing the benefit of available resources and avoiding waste.

## UNIVERSAL HEALTH COVERAGE

Ensuring that all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient **QUALITY** to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.

A key element of improving health care relates to the aspect of learning. As national health systems strive to improve overall health outcomes, significant amounts of learning —both tacit and implicit—are generated. This knowledge is often confined to the original geographical area where the care has improved. Further, multiple efforts are under way locally to improve quality of care, often using different entry points. Stimulating convergence of these multiple entry points, focussing on and documenting the key drivers that led to sustainable improvements in health outcomes becomes critical.

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