



QUALITY-ORIENTED HEALTH SECTOR REFORM

TRAINING MODULE:

INSTRUCTOR NOTES

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CONTENTS

ACKNOWLEDGEMENTS	II
ACRONYMS.....	II
COURSE SUMMARY	1
INTRODUCTION	1
COURSE GOALS	1
OBJECTIVES	1
TARGET AUDIENCE.....	2
PREREQUISITES.....	2
FORMAT	2
INSTRUCTIONAL METHODS	2
REQUIREMENTS OF THE INSTRUCTOR.....	2
EQUIPMENT AND MATERIALS REQUIRED	3
EVALUATION.....	3
SAMPLE AGENDA	3
INTRODUCTION: COURSE OVERVIEW	4
WELCOME/OVERVIEW/ INTRODUCTIONS	4
SESSION 1: OVERVIEW OF HEALTH SECTOR REFORM	5
INTRODUCTION TO THE SESSION	5
DEFINING HSR AND COMPONENTS OF THE HEALTHCARE SYSTEM.....	5
EXERCISE.....	5
SUMMARY OF THE SESSION.....	6
SESSION 2: OVERVIEW OF QUALITY ASSURANCE	7
INTRODUCTION TO THE SESSION	7
DEFINING QUALITY.....	7
DEFINITION OF QA.....	8
SUMMARY OF THE SESSION.....	8
SESSION 3: RELATIONSHIPS BETWEEN HSR AND QA	9
INTRODUCTION TO THE SESSION	9
HSR AND QA	9
SUMMARY OF THE SESSION.....	10
SESSION 4: CASE STUDY.....	11
INTRODUCTION TO THE SESSION	11
PART 1	11
SESSION SUMMARY.....	11
COURSE WRAP-UP	11
COURSE FEEDBACK: QUALITY-ORIENTED HEALTH SECTOR REFORM.....	12
COURSE POWERPOINT SLIDES	14

ACKNOWLEDGEMENTS

This training course is based on the content of the conceptual framework for incorporating quality assurance strategies within health sector reform that was developed as a collaborative effort of the Quality Assurance Project (QAP) and the Pan American Health Organization (PAHO). The training course was developed by consultant and former QAP Director of Training, Jolee Reinke. The framework document, *Maximizing Quality of Care in Health Sector Reform: The Role of Quality Assurance Strategies*, was published for the United States Agency for International Development by the Quality Assurance Project and is available at: www.lachsr.org as LACHSR Report No. 64. The companion document to this Instructor Guide—the Quality-Oriented Health Sector Reform Participant Manual—is also available at www.lachsr.org as LACHSR Report No. 67.

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ACRONYMS

HSR	Health Sector Reform
LAC	Latin America and the Caribbean
MOH	Ministry of Health
PAHO	Pan American Health Organization
QA	Quality Assurance
QAP	Quality Assurance Project
QI	Quality Improvement
WHO	World Health Organization
USAID	United States Agency for International Development

RECOMMENDED CITATION

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COURSE SUMMARY

INTRODUCTION

This course is based on the content of the conceptual framework for quality assurance and health sector reform that was developed by the Pan American Health Organization (PAHO) and the Quality Assurance Project (QAP). The framework is presented in the Latin America and the Caribbean Regional Health Sector Reform Initiative report, *Maximizing Quality of Care in Health Sector Reform: The Role of Quality Assurance Strategies*. The course does not include all of the content of the conceptual framework.

COURSE GOALS

By the end of this course, participants will be able to describe how to integrate health sector reform (HSR) and quality assurance (QA) strategies in quality-oriented health sector reform.

OBJECTIVES

1. Describe common HSR strategies
 - Define health sector reform as used in this course.
 - Identify four components of health care within which health sector reforms are commonly grouped.
 - Describe at least two health sector reform strategies in each component.
2. Define quality in health care as a multi-dimensional concept incorporating the views of providers, health care managers, clients and the community
3. Define quality assurance
 - Recognize the principles of Quality Assurance
 - Identify the three main strategies of Quality Assurance as defining quality, measuring quality and improving quality.
 - Give at least two examples of activities for each Quality Assurance strategy.
4. Describe the differences and similarities between traditional health sector reform and quality assurance
 - Describe the differences in how traditional HSR and QA address quality
 - Describe the difference in the level and scope of interventions between traditional HSR and QA
 - Recall from Sessions 1 and 2 at least 4 strategies unique to each of HSR and QA
 - Identify at least four strategies which are common between HSR and QA

5. Given a case study, use the HSR/QA matrix to identify quality-oriented health sector reform
 - Identify the HSR strategies in use
 - Identify QA strategies appropriate to add to promote quality oriented health sector reform.

TARGET AUDIENCE

The course is designed for senior level health care managers from regional or central levels who are implementing, or planning, health sector reforms. The course is planned for 20 participants. Small groups should consist of 6-10 participants. To use these materials, participants must read and speak English.

PREREQUISITES

Participants should have a good understanding of HSR, either in general or as applied to their specific countries. While exposure to QA would be helpful, it is not assumed.

FORMAT

This course includes four sessions to be conducted in a half-day workshop. The sample agenda can be used as a guide for planning the workshop. Additional time could be added to actually do planning of quality oriented health sector reforms.

INSTRUCTIONAL METHODS

The primary instructional methods for this course include: illustrated lecture (using overheads or slides), instructor-led discussion in the large group or plenary, and small group work.

Guidelines to the instructor assume that participants are seated in small groups of 6 - 10 participants. If participants are in plenary and need to transition to a small group setting, additional time must be added to this agenda.

REQUIREMENTS OF THE INSTRUCTOR

The course requires that the instructor:

- Works effectively with teams / small groups
- Understands a variety of health sector reform strategies
- Understands quality assurance principles, strategies and implementation
- Is comfortable allowing learning to emerge from participant experience, rather than participants passively listening to lecture

EQUIPMENT AND MATERIALS REQUIRED

- Nametags
- Course feedback forms
- Easels with flipchart paper for each small group
- Markers and masking tape (or other method to display flipchart products)
- Overhead and/or power point projector (if not available, instructor will prepare flipchart headings to guide the workshop)
- Copy for each trainee of *Quality-Oriented Health Sector Reform: Participant Manual*
- Copy for each trainee of *Maximizing Quality of Care in Health Sector Reform: The Role of Quality Assurance Strategies*

EVALUATION

Course, Materials and Trainer

- Written participant feedback should be collected at the conclusion of the course. A model of a form is included at the end of these notes.

Participant

- Trainer observation during group work and discussions
- Case study / group work developing standards – sequenced learning and task attainment

SAMPLE AGENDA

30 minutes	Welcome / Introductions / Overview / Housekeeping
60 minutes	Overview of Health Sector Reform
60 minutes	Overview of Quality and Quality Assurance
30 minutes	Relationships between Health Sector Reform and Quality Assurance
15 minutes	Break
90 minutes	Case Study
15 minutes	Summary and Course Evaluation

INTRODUCTION: COURSE OVERVIEW

WELCOME/OVERVIEW/ INTRODUCTIONS

Estimated time: 30
minutes

Note: if there are more
than 20 participants,
more time will be needed

Slides 1-2

WELCOME the participants; provide general information regarding the facilities such as location of phones, bathrooms, and lunch plans if pertinent.

ESTABLISH group norms—ground rules—in any way the trainer prefers.

(The trainer should get information about participants' expectations. This should be done during pre-course audience analysis. If this has not been done, do now and add time to the agenda.)

DISCUSS the course goal and general objectives.

COMPARE participant expectations to the course purpose, objectives and content, and identify 1) how expectations will be addressed and 2) if any expectations cannot be met during the course and where the participant can go to get the desired information / experience.

DISCUSS the training methods to be used and emphasize the need for participant involvement to ensure effective learning.

DISCUSS how participants will be evaluated (observation, exercises, case study).

DISCUSS how the course will be evaluated (end of course feedback, recommendations for future courses).

CONDUCT introductions. Use an ice breaker to develop rapport within the group. Consider pairing participants, have each interview the other about their relationship to HSR and QA topics, and each introduce the other to the large group.

TELL participants about the contents of their materials: the participant manual has brief technical excerpts from the PAHO/QA paper, materials for small group work and the case study.

SESSION 1: OVERVIEW OF HEALTH SECTOR REFORM

<p>INTRODUCTION TO THE SESSION</p> <p>Estimated time: 5 minutes Slide 3</p>	<p>TELL participants the objectives of this module</p> <p>The general objective is that participants will describe common HSR strategies.</p> <p>The specific objectives are:</p> <ul style="list-style-type: none"> ▪ Define health sector reform as used in this course ▪ Identify four components of healthcare within which health sector reforms are commonly grouped ▪ Describe at least two health sector reform strategies in each component
<p>DEFINING HSR AND COMPONENTS OF THE HEALTHCARE SYSTEM</p> <p>Estimated time: 5 minutes Slides 4-6</p>	<p>ASK participants for their definition of health sector reform (HSR). Conclude by TELLING them how the conceptual framework paper defines HSR.</p> <p>PRESENT the organizing framework from Table 1.1 of <i>Maximizing Quality of Care in Health Sector Reform: The Role of Quality Assurance Strategies</i>, defining each component.</p>
<p>EXERCISE</p> <p>Flip charts, markers, Participant Manual Participant Manual pp. 2-3 Small group work 25 minutes</p> <p>Debrief (20 minutes)</p>	<p>TELL participants to form groups of 6 - 10. Refer to page 2 of the Participant Manual for instructions for this exercise (reprinted here):</p> <p>“Form groups of 6 - 10 participants. Use 30 minutes to have a discussion about HSR strategies used in your country, or strategies you have heard about.</p> <p>Use the following page [page 3 of the Participant Manual] to group the strategies you discuss under the four components of health care described above.</p> <p>The organizers may ask you to post these lists on flip chart paper.</p> <p>After your discussion, the organizers will lead a debriefing session in which you will list and describe the strategies your group(s) identified.”</p> <p>FACILITATE a discussion to answer these questions:</p> <p>What strategies have been identified? Which were repeated among groups? Which were unique to a certain group? Add strategies from Table 1.1 that may have been omitted.</p>

<p>SUMMARY OF THE SESSION</p> <p>5 minutes Slide 7</p>	<p>REVIEW specific objectives for the unit, determine that participants have met objectives or provide additional time to enable them to do so.</p> <p>LINK this session to the next, i.e. “Now that we have agreed on what health care strategies are, we will work with QA”.</p>
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SESSION 2: OVERVIEW OF QUALITY ASSURANCE

<p>INTRODUCTION TO THE SESSION</p> <p>5 minutes</p> <p>Slide 8</p>	<p>TELL participants the objectives of this module</p> <p>The general objectives are:</p> <ul style="list-style-type: none"> ▪ Define quality in health care as a multi-dimensions concept incorporating the views of providers, health care managers, clients and the community ▪ Define quality assurance <p>The specific objectives are:</p> <ul style="list-style-type: none"> ▪ Identify the three main strategies of QA as defining quality, measuring quality and improving quality ▪ Give at least two examples of activities for each QA strategy
<p>DEFINING QUALITY</p> <p>Exercise</p> <p>10 minute introduction</p> <p>Slides 9-10</p> <p>Participant Manual pp. 4-6</p> <p>15 minute small group work</p> <p>10 minute debrief</p>	<p>TELL participants to go to page 4 in the participant manual.</p> <p>TELL participants there is not one definition of quality, because “quality” depends on which dimension you are addressing and your point of view</p> <p>TELL participants the dimensions of quality; refer them to pp. 4-5.</p> <p>TELL participants the 4 perspectives from which quality can be viewed.</p> <p>TELL participants to read the case on page 6 of their manuals and fill in the table.</p> <p>During the exercise, observe small group work and help participants to find examples of good quality from the 4 perspectives, addressing the 9 dimensions.</p> <p>Debrief the exercise by ASKING for examples of good quality, and what dimension(s) is/are addressed. Fill in information for any missing dimension or perspective based on your own ideas.</p>

<p>DEFINITION OF QA</p> <p>20 minutes instructor-led discussion</p> <p>Slide 11</p> <p>Slide 12</p> <p>Slide 13</p> <p>Slides 14-16</p> <p>Slide 17</p>	<p>TELL participants QA is defined as “all actions that may be taken to make health care better at the service delivery entry point and across the continuum of care”</p> <p>TELL participants that what distinguishes QA from “not QA” approaches to making health care better are the principles on which QA is based.</p> <p>DESCRIBE the four principles.</p> <p>EXPLAIN that the 3 strategies are defining, measuring and improving quality.</p> <p>EXPLAIN that a triangle is used as a model to describe the connectivity of the strategies, that one can begin at any point, and that there are a variety of activities than are associated with each strategy.</p> <p>ASK for examples of defining, measuring and improving quality. After some are volunteered, use slides to DISCUSS various activities.</p> <p>EXPLAIN that an organization can be said to institutionalize QA when they focus on quality of care. Briefly present the institutionalization model, as a way to show that the items which HSR strategies address are part of the institutionalization model.</p>
<p>SUMMARY OF THE SESSION</p> <p>5 minutes</p> <p>Slide 18</p>	<p>REVIEW specific objectives for the session determine that participants have met objectives or provide additional time to enable them to do so.</p> <p>LINK this session to the next, i.e. “Now that we have a good understanding of HSR and QA separately, the next session will allow us to consider how they can work together.”</p>

SESSION 3: RELATIONSHIPS BETWEEN HSR AND QA

<p>INTRODUCTION TO THE SESSION</p> <p>5 minutes</p> <p>Slide 19</p>	<p>TELL participants the objectives of this module</p> <p>The general objective is to describe the differences and similarities between traditional health sector reform and quality assurance.</p> <p>The specific objectives are:</p> <ul style="list-style-type: none"> ▪ Describe the differences in how traditional HSR and QA address quality ▪ Describe the difference in the level and scope of interventions between traditional HSR and QA ▪ Recall from Sessions 1 and 2 at least 4 strategies unique to each of HSR and QA ▪ Identify at least four strategies which are common between HSR and QA
<p>HSR AND QA</p> <p>Instructor-led discussion</p> <p>30 minutes</p> <p>Flip chart / markers</p> <p>Participant Manual page 10</p> <p>Slide 20</p> <p>Slide 21, Participant Manual pp. 10-11</p>	<p>REFER TO posted lists (or completed page 3 of participants' manuals) of HSR strategies and slide copies of QA strategies.</p> <p>ASK: What are some strategies unique to HSR?</p> <p>ASK: What are some strategies and activities unique to QA?</p> <p>POST responses on the left and right sides of a flip chart paper</p> <p>ASK: What are some activities / strategies that are in both HSR and QA?</p> <p>POST responses in the middle of the flip chart paper. DRAW circles making a Venn diagram. Refer to page 10 of the Participant Manual for a diagram.</p> <p>ASK: What do you think the difference is in the way HSR addresses quality, and the way QA addresses quality. Be sure they mention:</p> <ul style="list-style-type: none"> ▪ HSR focuses broadly on a number of goals including health status, efficiency, equity, access ▪ QA focuses specifically on quality of care ▪ HSR: concern for quality implicit ▪ QA: concern for quality explicit <p>ASK: what level do HSR and QA work at (or what is their scope)?</p> <p>HSR: policy changes at national level</p> <p>QA: primary interventions at service delivery level, operational changes in response to policy</p> <p>ASK: what happens when QA and HSR use the same strategies? Is there a difference in how they approach the same topic?</p> <p>USE THE EXAMPLES of regulatory strategies, efficiency and performance indicators to illustrate. Refer to pp. 10-11 of the Participant Manual for this discussion.</p>

<p>SUMMARY OF THE SESSION</p> <p>5 minutes</p> <p>Slide 22</p>	<p>REVIEW specific objectives for the session determine that participants have met objectives or provide additional time to enable them to do so.</p> <p>LINK this session to the next, i.e., “In the next session, we will do an exercise to apply these concepts of quality-oriented health sector reform to a hypothetical country example.”</p>
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SESSION 4: CASE STUDY

<p>INTRODUCTION TO THE SESSION</p> <p>5 minutes</p> <p>Slide 23</p>	<p>TELL participants the objectives of this module</p> <p>The general objective is to learn to use matrix analysis to develop quality oriented health sector reform</p> <p>The specific objectives are:</p> <ul style="list-style-type: none"> ▪ Identify the HSR strategies in use ▪ Use HSR/QA matrix to identify QA strategies appropriate to add to promote quality oriented health sector reform.
<p>PART 1</p> <p>Small group work</p> <p>Participant Manual pp. 12-14</p> <p>60 minutes</p> <p>Debrief 25 minutes</p>	<p>TELL participants to read the case study and create an HSR/QA matrix according to the instructions.</p> <p>HELP the groups as needed during their work.</p> <p>PRESENT matrices from each group (5-7 minutes each). Discuss answers to questions about methodology in the remaining time.</p>
<p>SESSION SUMMARY</p> <p>Slide 23</p>	<p>REVIEW specific objectives for the session determine that participants have met objectives or provide additional time to enable them to do so.</p>

COURSE WRAP-UP

<p>5 minutes</p> <p>Course feedback form</p>	<p>REVIEW course content. (“Today we have covered...”)</p> <p>THANK participants for their work and contributions.</p> <p>ASK participants to complete the course feedback form.</p>
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COURSE FEEDBACK: QUALITY-ORIENTED HEALTH SECTOR REFORM

We would like your candid reaction to this workshop. Please answer the questions below and add any additional comments that you may have. Thank you.

On a scale from 1 to 5, with 1 being the lowest, please circle the number that best represents your agreement with these statements.

Strongly Disagree					Strongly Agree
1	2	3	4	5	

1. The **technical content** was presented in a useful and understandable way:
2. The **session objectives** (presented in the overheads) were met.
3. The **text reference materials** supported the technical content
4. The **exercises** enhanced my learning
5. My **questions** were answered to my satisfaction
6. My **expectations** were met
7. I will be able to **use this information** in my work

Please comment on any item you rated 3 or less.

Please rate the following items using this scale:

Poor	Fair	Good	Very Good	Excellent
1	2	3	4	5

8. Visibility and clarity of visuals (flipcharts, overheads)
9. Detail and clarity of participant materials
10. Ability to hear presenter
11. Ability to understand presenter

12. Based on your previous knowledge and experience, the level of the work was:

- Too basic Appropriate Too complex

If not appropriate, please state reasons:

13. Which, if any, of the presentations, activities, and discussions did you find the **most** useful?

14. Which did you find the **least** useful?

15. What are your suggestions for improving the course?

16. Please write any additional comments or suggestions below.

COURSE POWERPOINT SLIDES

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