

ENSURING QUALITY OF CARE INCLUDING REFERRALS (IN UHC)

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WHOLE HEALTH SYSTEM FAILING

NIGERIAN PERSPECTIVE

WHAT WE KNOW -

- HIGH MORBIDITY AND MORTALITY IN NIGERIA FROM PREVENTABLE CAUSES PERSIST.
- CAUSES ARE NUMEROUS, MOSTLY PREVENTABLE INCLUDING DELAYED ACCESS.
- TINKERING & 'FIRE BRIGADE' TYPE INTERVENTIONS.
- NO INDEPENDENT HEALTH QUALITY ASSESSOR ORGS.
- INNOVATIVE, PROVEN CHANGE IS NEEDED ACROSS NIGERIA.

SOME CAUSES OF WHOLE HEALTH SYSTEM FAILINGS IN NIGERIA

NON CLINICAL	CLINICAL
INADEQUATE FUNDING	BAD ATTITUDE & POOR PROFESSIONALISM
DELAYED / LACK OF ACCESS	KNOWLEDGE & SKILLS LACK
INFRASTRUCTURE-NON FUNCTION	INADEQUATE HRH, LOW MORALE & MAL DISTRIBUTION
EQUIPMENT– LACK /OLD/NON FUNCTION	LACK OF CAREER-LONG IMPROVEMENT

NEEDS & OBJECTIVES OF CHANGE –

- **WHOLE SYSTEM CHANGE**
- **PERSONNEL IMPROVEMENT**
- **CARE OUTCOME IMPROVEMENT**

EDUCATION/SKILLS ↔ SERVICE DELIVERY

ADEQUATE FUNDING

FUNDING MIX

1. Minimum 10% budget allocation to health from 2014
2. Mandatory NHIS by 2015 including Community Pre-paid Insurance Scheme for non formal / self employed citizens.
3. New Special Health Fund from special levy / taxation (Ring-Fenced for Healthcare)
4. Targeted PPP
5. 'SWAP' approach for donor partner resources.
6. Exemptions: U-5, Pregnant women, certified full time students; medically certified mental & physically disabled; Elderly over 75 years of age.

(NMA Clinical Governance & Research Committee 2013)

WHO ON CLINICAL GOVERNANCE

“Countries that have established Clinical Governance for their health system have the best outcomes in healthcare delivery.”



CLINICAL GOVERNANCE: QUALITY & SAFETY

PROTECTING PATIENTS'

- FAST SERVICE
- EFFICIENT SERVICE
- RESPONSIVE
- HIGH QUALITY
- CONSISTENT
- EQUITY
- SATISFIED PATIENT
-

'SUPPORTING CARE-PROVIDERS' INTANDEM

- Attitude & Behaviour change
- CONTINUING PROF. DEVELOPMENT
- GOOD MEDICAL PRACTICE
- TRAINING-RETRAINING & SKILLS
- WELFARE including PAY/ CONDITIONS
- EFFECTIVE SELF REGULATION e.g. MDCN
- ETHICS & JOB SATISFACTION
- LIMITED TO LEVEL OF COMPETENCE / REFERRAL**

EDUCATION/SKILLS

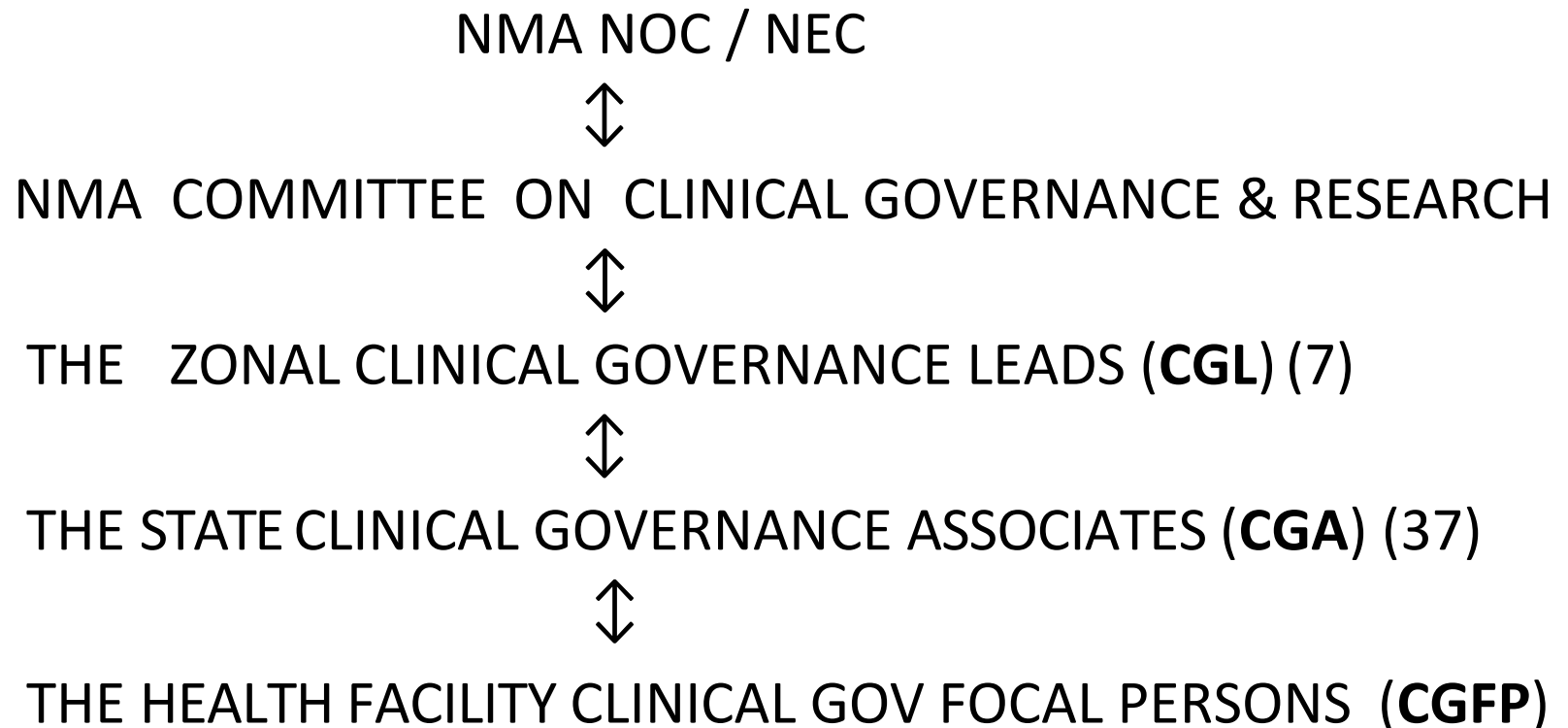


SERVICE DELIVERY

(CCGRT, SMOH, CALABAR, NIGERIA 2004)

(Ana, J.'Whole system change of failing health systems' 2009)

**NIGERIAN MEDICAL ASSOCIATION (NMA)
CLINICAL GOVERNANCE STRATEGIC POLICY &
IMPLEMENTATION WORK PLAN**



UNIVERSAL HEALTH COVERAGE (UHC) OFFERS

- **HEALTH POLICY**- Nigeria Health Act funded including NHIS
- **QUALITY** – safe, quality provision of promotive, preventive, patient-centred care, acute care, chronic care, rehabilitative and palliative care
- **ACCESS** – Effective Referral system from tier to tier
- **EFFICIENCY** - expenditures and administrative costs, use of ICT, re-admission, and duplication of tests
- **EQUITY** – Patients visiting Health Workers on need, getting tests / treatment, prescription, and follow up
- **LONG, HEALTHY, PRODUCTIVE LIFE** – Countries with Universal Coverage, score highest on all of these indicators.

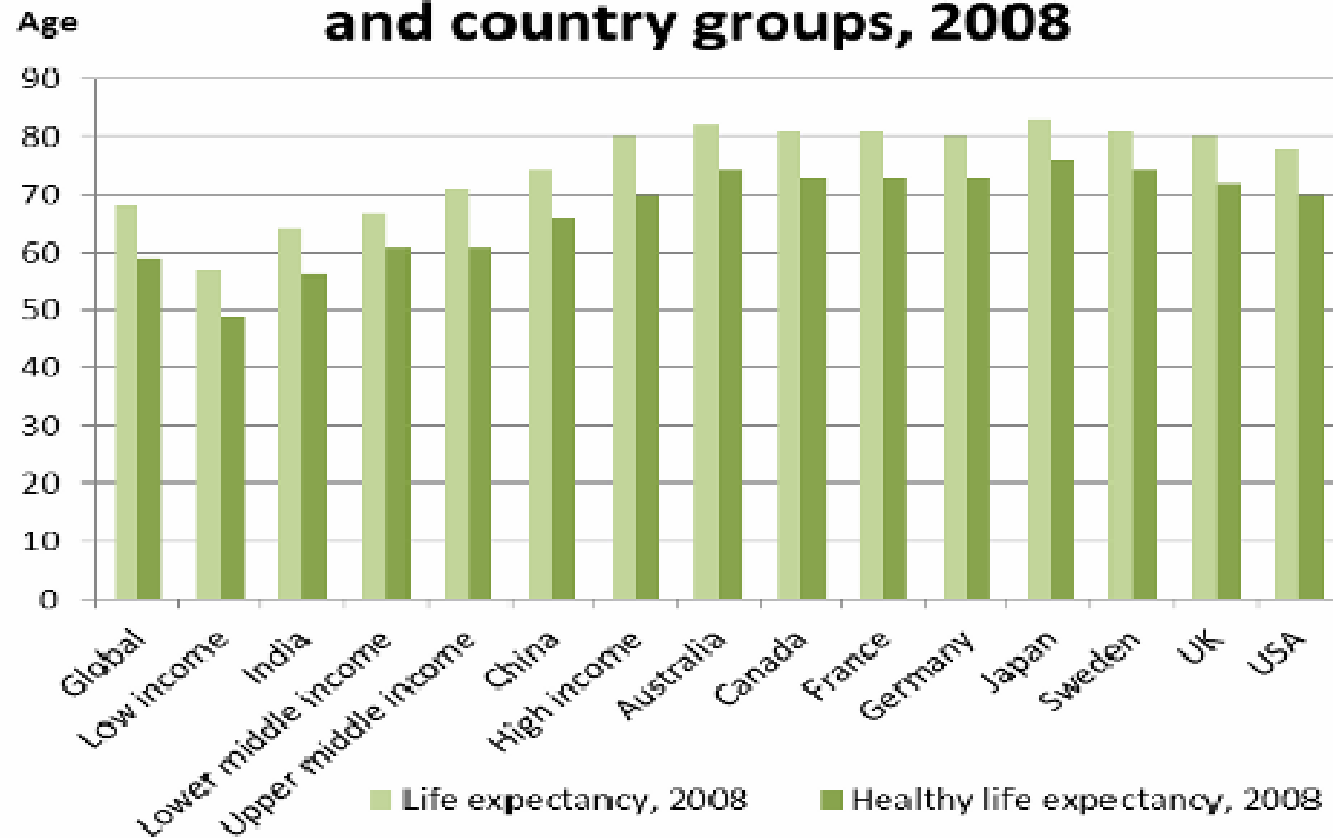
UHC – VARIOUS SIZES AND STYLES

CAUTION -

- Varying cost, social, cultural, political and economic conditions in different countries
- No ‘one-size-fits-all’ or No ‘one-style-suits-all’
- NIGERIA should look to adopt Health Funding Mix that enables QUALITY Universal Health Coverage

www.globalissues.org

Life expectancy, in selected countries and country groups, 2008



Source: WHO Health Statistics 2010

GLOBAL MAP OF COUNTRIES WITH ADEQUATE FUNDING & CLINICAL GOVERNANCE (CG) - UHC

- UNITED KINGDOM (UK)
- ALL FORMER WESTERN EUROPE
- AUSTRALIA
- JAPAN
- CANADA

Exceptions:

- **USA HAS CG & funds
BUT NO UHC (until
OBAMACARE)**
- **DEVELOPING COUNTRIES—NO CG
or FUNDS and NO UHC !**



CHECKS & BALANCE

HEALTH CARE QUALITY ASSESSORS AND EVALUATORS ARE ESSENTIAL

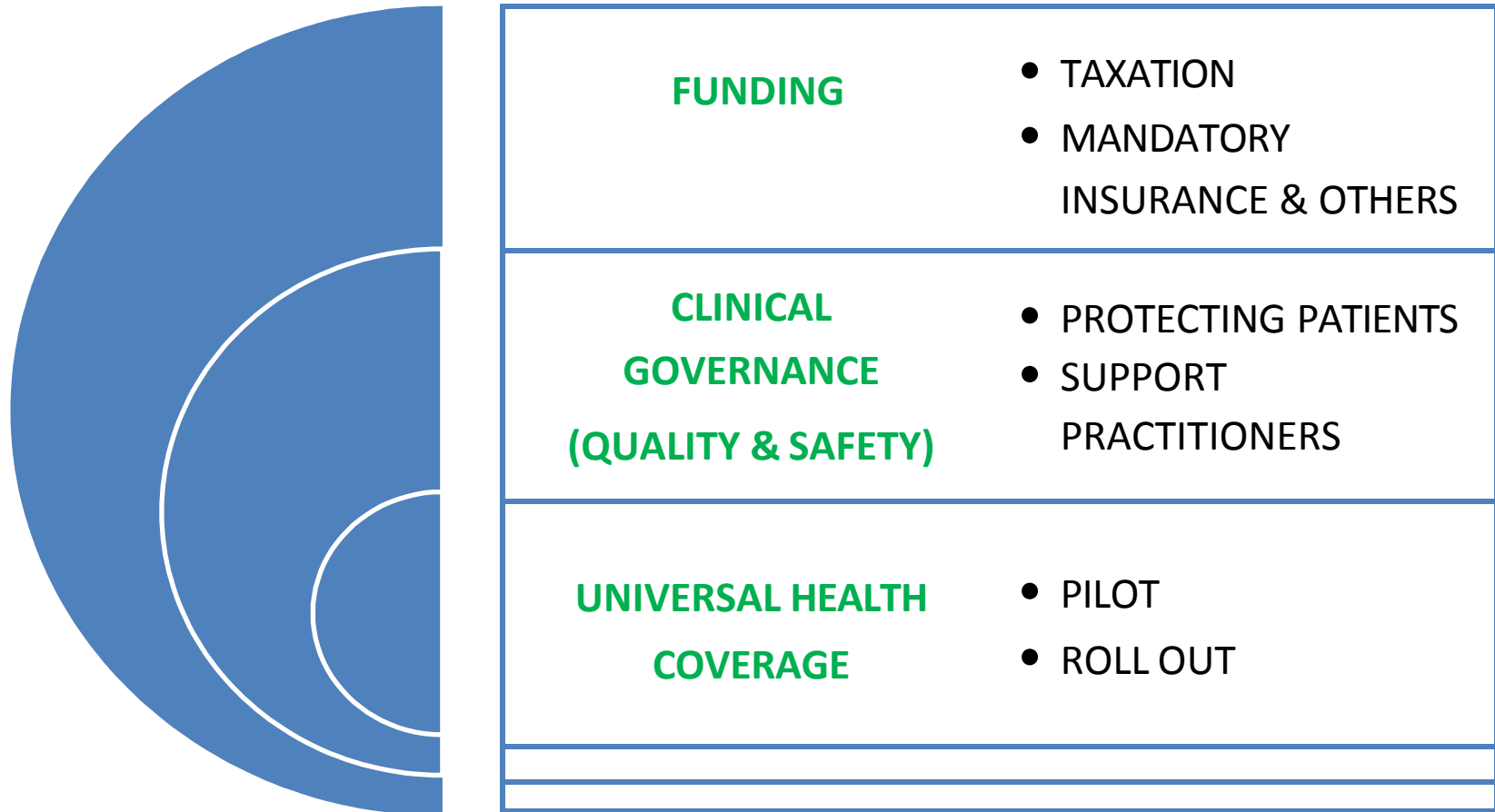
UNITED STATES	UNITED KINGDOM	NIGERIA
JCAHO – Joint Commission on Accreditation of Health Organisation	NPSA – National Patient Safety Agency (NHS SHA)	?
NCQA – National Committee for Quality Assurance	CQC - Care Quality Commission	
FACCT – Foundation in Accountability	NICE – National Institute of Health and Clinical Excellence	
IHI – Institute of Health Improvement	MONITOR	MDCN
	GMC-UK	

SOUTH AFRICA HAS A QUALITY ASSESSOR ORGANISATION

- **ADEQUATE FUNDING** underpins **CLINICAL GOVERNANCE**
- **Both, enable UNIVERSAL HEALTH COVERAGE (UHC) .**

THAT IS THE GLOBAL EVIDENCE!

ESSENTIAL TRIPOD



REFERRAL ENABLED HEALTH SYSTEM



MOTHER FATHER NEWBORN BABY

MDG 4 & 5



THANK YOU