



REPUBLIC OF KENYA  
MINISTRY OF HEALTH

# The Kenya HIV Quality Improvement Framework

Training Course Guide

2014





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## Executive Summary

Quality improvement activities have existed in health programs in recent years. In the past, responsibility of assessing, planning implementing, monitoring, managing, and reporting these activities has fallen to individual departments or, in some cases, to individual people.

Major efforts have been made towards streamlining quality improvement activities. The Kenya Quality Model for Health Care (KQMH) and the Kenya HIV Quality Improvement Framework (KHQIF) are strategy documents that provide the blueprint for improving the quality of care and services. Health care professionals are to increasingly use QI methods to:

- Promote client-centred care and safety, and improve equity in health service delivery
- Improve the quality of HIV care in Kenya by engaging both public and private stakeholders in quality improvement
- Promote the culture of continuous quality improvement informed by performance data review and improvement cycles across all levels: national, county, and facility
- Foster the development and integration of national, county and facility HIV quality improvement infrastructures

Ensuring that health care professionals develop processes for continuous quality improvement (CQI), requires that all health personnel acquire the necessary knowledge, skills and abilities to plan, define, monitor, improve and evaluate quality on a continuous basis. Through this training package, the Ministry of Health takes the lead in providing training and coaching, and will ensure that all QI teams receive a standard HIV QI training that can support their quest for assuring a continuum of care that addresses client's needs in an effective, responsive, and respectful manner. This document is designed as a training package to help expert health care professionals in planning, designing, implementing and sustaining improvement using the dimensions of quality.

# Section 1

## Rationale and Justification

### Introduction

There is increasing expectation from many sources (both at the National and County level) for health care providers to demonstrate excellent health outcomes for clients. Healthcare providers are dedicated and passionate about providing the best possible care for their clients. The Quality Improvement (QI) methods needed to provide that care have not been broadly taught during HIV training; therefore few healthcare providers have had experience practicing those methods.

The *Kenya HIV Quality Improvement Framework* and *Operational Manual* have fronted the Plan-Do-Study-Act as the methodology for Quality Improvement. The methodology aims to transform client-care and is the foundation for this training package. The purpose of QI is to identify, assess, prioritize, and enhance effectiveness in improving care and optimizing outcomes. For providers to understand QI, they will receive QI training and actively participate in QI initiatives. They will be expected to work in teams to conduct QI projects, which they will choose, design, and implement in health service delivery areas to achieve a continuum of high quality care.

### Rationale

The training package presented herein is intended to provide background information, goals, objectives, and specific skills for QI and ensure participants identify areas of improvement. Materials for didactic presentations, small group teaching, suggested approaches to experiential learning, as well as resource materials and suggested resources will be included. The resource material provided in the training package is intended to supplement the material in the National HIV Harmonized curriculum and be sufficiently flexible to permit each Quality Improvement team to adapt the material to its own circumstances and develop its own program. This training package provides well-researched and tested material to build the capacity of healthcare providers to recognize, understand, and facilitate QI in healthcare. It also provides a transferable knowledge base for future practice.

## Goals

A primary goal of this training package is to ensure all health care professionals have the knowledge, skills and attitudes to provide more reliable evidence-based care; implement QI processes; and utilize quality measures to improve care systems and outcomes. They will also be able to participate effectively in quality improvement teams, with respect for all members and roles, in order to maximize their contributions to improving client and population health. Through the training package, operational manual and accompanying QI materials health care providers and managers will be well armed to improve the health of our clients and to transform the healthcare delivery system.

## Training Approach

Capacity building will be conducted in three ways;

### **Step 1: Advocacy and sensitization**

*Sensitization of top-level managers and leaders engaged in health service provision and QI through the national and county stakeholder's forums.* This shall be done in collaboration with the Ministry of Health division of quality improvement. The target audience for this will thus incorporate technical administrative gatekeepers as well as political wing gatekeepers at national and county-levels. The county quality management team in collaboration with stakeholders shall ensure sensitization of sub-county and facility managers. This step is critical to ensure stakeholder buy-in, resource mobilization and ownership of CQI at all health care levels for sustainability (refer to phase 1 of the KHQIF implementation plan).

### **Step 2: Cascaded CQI training**

The technical team at the national level shall train a technical team at the county level who shall be trainers, mentors and champions. Counties shall select the participants to be trained using a standardized criterion from the NASCOP. The county technical team shall cascade the training to the sub-county and facility levels as follows;

- Half-day sensitization of managers at county, sub-county QM and facility management teams
- 5 day training for QI TOTs at the county levels
- 5 day training for QI implementers for facility teams by QI TOTs at the counties

The training shall be in three formats;

1. **Structured didactic format** that provide an understanding of the theory and structural components of CQI. Where feasible, it is best conducted at facility level for implementers.
2. **The experiential format** which is the learning avenue whereby participants learn about the tools and have the opportunity to actually use the tools in simulated exercise or in their CQI projects.
3. **The Self-Learning format** that entails continuing medical education (CME) through reading learning materials from various sources including libraries and journals and e-learning will allow health care providers to understand key quality concepts evaluate their QI knowledge and receive further information on QI topics in the health literature.

### **Step 3: Mentorship and Learning Networks/sessions**

The QI technical teams shall be engaged in cascaded face-to-face mentorship and coaching opportunities in this approach. The national program advocates for teams to explore and adopt innovative approaches including teleconferencing and personal professional development initiatives. Additionally, national and international learning networks and experience sharing forums shall be instituted and supported to cultivate continuity. Specifically, county and inter-county annual learning and networking meetings shall be promoted for peer learning in QI best practices.

## Section 2

### Training Outline

#### Continuous Quality Improvement Orientation and Training for HIV Services

##### Health Managers Module

##### **Introduction**

The KHQIF outlines the leadership as an important element to safeguard and improve the quality of care. Evidence suggests a significant correlation between effective leadership/management and the level of performance and client outcomes within that organization<sup>1</sup>.

**Rationale:** The Health leaders/managers implement and maintain health systems; materials, education and training that ensure the health workforce delivers safe, effective and reliable health care. They support the establishment of partnerships with clients and providers when designing, implementing and maintaining health systems. Their key role is managing performance and facilitating compliance across the health care system and within individual areas of responsibility for the governance of quality improvement. They are leaders who can model behaviors that optimize safe and high quality care. Better health outcomes can be achieved when health managers consider quality improvement implications in their decision-making processes.

**Target Audience:** Policy Makers; including senior managers and politician, in national and county agencies and bodies, parastatal heads, program managers.

##### **Resource Materials for Training:**

- Kenya HIV Quality Improvement Framework
- HIV QI List of Indicators (Operational Manual Appendix 6)

##### **Training Objectives:**

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<sup>1</sup> Machell S, Gough P, Naylor D, Nath V, Steward K, William S, Putting quality first in the boardroom; Improving the business of caring. London; The Kings Fund. 2010

The CQI Sensitization training Objectives are that participants will be able to:

- Describe own responsibilities for improvement as an individual and as a member of team
- Understand what continuous quality improvement is and how they can integrate CQI activities into the Health Facility setting
- Facilitate others understanding of health care systems and implementing of the Kenya HIV QI framework
- Provide support and monitor QI projects at different levels
- Champion a sustainable approach to QI

Time	Topic	Presenter	Slide Set
8:30 –9:00	Welcome and Introductions		
9:00 – 10:00	<ul style="list-style-type: none"> <li>• Background and Rationale for Quality Improvement (QI)</li> <li>• Overview of KQMH &amp; KHQIF</li> </ul>		S-Day_1.1
10:00 – 10:30	Defining Quality and Quality Improvement		S-Day_1.2
10:30 – 11:00	Tea Break		
11:00 – 12:00	Data Flow and Performance Review		S-Day_1.3
12:00 – 12:45	Implementation and scale up of Quality Improvement		S-Day_1.4
12:45 – 13:00	Closing		

## Continuous Quality Improvement Orientation and Training for HIV Services

### Health Care Providers Module

#### Introduction

Through this training package the participants will understand concepts of QI through analyzing case studies, understanding QI tools, developing projects, and discussing how QI will contribute towards achieving better client outcomes and service delivery within their respective organizations. It is intended that the training package will enable participants with different roles in the health care system to identify gaps between their current knowledge and skills and future requirements. This training package has also been designed with the view that all trainers will have undergone the innovative teaching methodology provided through the national harmonized curriculum then, undergo facilitators training for QI.

**Target Audience:** Health Care Providers and QI Champions (Trainers of Trainers etc).

#### Resource Materials for Training:

- Training Agenda
- Pre-test and post-test
- KHQIF
- Operational Manual (including Appendices)
- KHQIF Training Participants Workbook.
- Data abstraction tools
- Dummy data for data abstraction practical: MOH 257 blue cards, HEI Register, ANC Register, Postnatal register, Partographs.

#### Training Objectives:

- To enable participants to define quality and best practices in the context of Health Care Delivery model
- To make participants understand what continuous quality improvement is and how they can integrate CQI activities into the Health Facility setting
- To empower participants to implement the PDSA cycle and identify at least one tip for developing small test of change
- To enable participants to understand the importance of data collection/analysis/

utilization and teamwork approach at the program and facility level

- To empower participants to identify at least one area of their scope of work to apply CQI principles and methodologies
- To train participants on the tools for understanding processes, analyzing and displaying data, and organizing ideas
- To empower participants to develop a CQI team at their work place

### Training Agenda:

Time	Topic	Presenter	Slide set Ref.
<b>Day One</b>			
8:30 – 9:00	Welcome to Participants Sign In – Introductions – Expectations – Ground Rules		Day_1.1
9:00 - 9:30	Overview of CQI Training Objectives & Pre-Test		Day_1.1
9:30 – 10:30	Opening remarks and Presentation of County Profile		Day 1.1
10:30 – 11:00	Break		
11.00 – 12:00	Background and Rationale for Quality Improvement (QI) (Overview of KQMH & KHQIF)		Day 1.2
12:00 – 13:00	QM Infrastructure: Roles and responsibilities		Day 1.3
13:00 – 14:00	Lunch		
14:00 – 15:00	Defining Quality and Quality Improvement		Day 1.4
15:00 - 16:00	Introduction to the 5S		Day 1.5
16:00 - 16:45	Principles of QI – Focus on Clients Needs and Expectations		Day 1.6
16:45- 17:00	Wrap-Up/ Questions & Answers		
	<b>Homework Day 1:</b> <ul style="list-style-type: none"> <li>• Exercise 2: MOH QI Facility Requirements</li> <li>• Read Operational Manual Appendix 7- HIV QI Indicators</li> </ul>		
<b>Day Two</b>			
8:30 – 8:45	<ul style="list-style-type: none"> <li>• Re-cap of Day 1</li> <li>• Collect Exercise 2: MOH QI Facility Requirements from participants</li> </ul>		
8:45 – 9:30	Principles of QI – Focus on Data: Performance Measurement		Day_2.1
9:30 - 10:15	Performance Measurement- HIV QI Indicators		Day 2.2
10:15 – 10:45	Break		

Time	Topic	Presenter	Slide set Ref.
10:45 – 13:00	Performance Measurement: <ul style="list-style-type: none"> <li>SOP QI Indicator file review &amp; Group Exercise</li> <li>Care and Treatment File data abstraction and Summary Report</li> </ul>		Day 2.3
13:00 – 14:00	Lunch		
14:00-15:30	Performance Measurement: <ul style="list-style-type: none"> <li>SOP QI Indicator file review &amp; Group Exercise</li> <li>Care and Treatment File data abstraction and Summary Report</li> </ul>		Day 2.4
15:30 – 16:30	Improving Medical Record Documentation		Day_2.5
16:30 – 16:45	Wrap-Up/Questions & Answers		
	<b>Homework Day 2:</b> <ul style="list-style-type: none"> <li>Read the Case Study (Mrs. J.O)</li> <li>Read the Operational Manual Section 4: SOP PDSA and Section 5: QI Tools</li> </ul>		
<b>Day Three</b>			
8:30 – 8:45	Re-cap of Day 2		
8:45 – 9:00	Introduction to Mrs JO		Day_3.1
9:00 – 9:45	Principles of QI: Systems approach		Day_3.2
9:45 – 10:30	Steps in QI and the PDSA model		Day_3.3
10.30 – 11:00	Break		
11:00 – 13:00	PDSA Simulation: Brainstorm, Multi-voting, Decision Matrix and WIT QI Project Template		Day_3.4
13:00 – 14:00	Lunch		
14:00 – 15:30	PDSA Simulation: 5-Whys		Day_3.4
15:30 – 16:30	PDSA Simulation: Fishbone,		Day_3.4
16:30 – 16:45	Wrap-Up/Questions & Answers		
	<b>Homework Day 3:</b> <ul style="list-style-type: none"> <li>Read the Operational Manual Section 4: SOP PDSA and Section 5: QI Tools</li> </ul>		
<b>Day Four</b>			
8:30 – 8:45	Recap of Day 3		
8:45 -9: 45	PDSA Simulation: Process Mapping		Day_4.1
9:45-10:30	PDSA Simulation: Performance Measurement Plan, Change Package,		Day_4.1
10:30 - 11:00	Break		

Time	Topic	Presenter	Slide set Ref.
11:00- 13:00	PDSA Simulation: Displaying data		Day_4.2
13:00 - 14:00	Lunch		
14:00 – 14:45	Principles of QI- Focus on Leadership		Day_4.3
14:45 – 15:45	Moving towards Implementation – Focus on teamwork: Identification of QI champions		Day_4.4
15:45 – 16:30	Building A Positive Attitude		Day_4.5
16:30 – 16:45	Wrap-Up/Questions & Answers		
	<b>Homework Day 4:</b> <ul style="list-style-type: none"> <li>• Read Operational Manual Section 1: SOP Organizational Assessment ideas for workplan implementation</li> </ul>		
<b>Day Five</b>			
8:30 – 8:45	Recap of Day 4		
8:45 - 9:45	Conducting an Organizational Assessment		Day_5.1
9:45 – 10:15	Post- Test		
10:15 - 10:45	Break		
10:45- 12:00	<ul style="list-style-type: none"> <li>• Summary of PDSA,</li> <li>• Dissemination and Maintenance</li> <li>• Review all resource materials</li> </ul>		Day_5.2
12:00 - 12:30	Preparation of implementation Plans		Day_5.3
12:30 – 13:00	Group Work: Development of Implementation plans (CQI)		
13:00 - 14:00	Lunch		
14:00 – 15:00	Group Work Presentations: Development of Implementation Plans (CQI)		
15:00 – 15:30	Post- Test Feedback		Day_5.4
15:30 - 16:00	Wrap- Up/Questions & Answers/ Evaluation		
16:00	Closing		



