



Maternal Care Quality Standards in the South African Context

Workshop: Villa Sterne Boutique Hotel, Pretoria

8.45 am - 2pm on 6th April 2016

Introduction:

Maternal health is a major health priority in South Africa. The National Department of Health's National Maternity Guidelines¹ provide a comprehensive guide to all aspects of maternity care, from early prenatal care, acute management of delivery and post-partum care. It is expected that adherence to the guidelines would have substantial impact on maternal and new-born outcomes, however, nationally-consistent implementation of the guidelines has been limited.

Quality improvement initiatives for reducing maternal mortality in the form of Quality Standards represent a cross-cutting programme of work that will enable joint working on key activities while addressing a major health priority in South Africa. However, while Quality Standards have been used internationally to good effect, it is imperative that any initiative is tailored to local needs and context. Further information about Quality Standards are included at the end of this document.

PRICELESS SA will host a meeting involving key individuals from the Ministry of Health and those involved in quality improvement initiatives in maternal care in South Africa, and representatives from NICE International and the state of Kerala, India, to discuss how Quality Standard development in maternal health could be implemented in the South Africa.

Meeting objectives:

- Identify existing guidance and quality improvement initiatives in maternal health and seek coordination and potential synergies.
- Learn about the experience of adapting NICE-developed Quality Standards in maternal health to the context of Kerala, India
- Explore the applicability of the Quality Standard approach to the South Africa context

¹ Guidelines for Maternity care in South Africa 4th Ed. National Department of Health, republic of South Africa

Agenda:

Time	ltem	Lead
8.30 – 8.45	Registration	
8.45 – 9.15	Welcome and introductions	Yogan Pillay (NDoH), Jack Moodley (Chair, CEMD)
9.15 – 9.30	 Meeting objectives Introduction to PRICELESS SA and iDSI 	Karen Hofman
9.30 – 10.30	 Current status and existing quality improvement initiatives in South Africa The 2015 Maternal guidelines: Focus on haemorrhage and hypertension and challenges to implementation Question and Answer 	Carol MarshallBob Pattinson
10.30 – 10.45	Break	
10.45 – 11.30	 Implementing quality: an introduction to Quality Standards Lessons learned: Developing Maternal Quality Standards Adapting to Kerala, India Question and Answer 	 Videoconference: Francoise Cluzeau (NICE International) Vakkanal Paily, Kerala Federation of Obstetrics and Gynaecology (KFOG) (TBC)
11.30 – 13.00	Discussion: Could maternal Quality Standards be adapted to the South African context? Identify: • Scope of QS • Key stakeholders • Proposed timeline and resources required	All Moderators: Karen Hofman / Tommy Wilkinson
13.00 – 13.15	Final wrap up and next steps	Karen Hofman
	Lunch provided for all attendees	

Background:

What are Quality Standards?

Quality Standards are a concise set of implementable, achievable, and auditable statements drive measurable quality improvements within a particular area of health or care. Quality standards enable:²

- People receiving health services, their families and carers and the public to find information about the quality of services and care they should expect from their health provider.
- Health professionals to make decisions about care based on the latest evidence and best practice.
- Service providers (hospitals and clinics) to quickly and easily examine the performance of their organisation and assess improvement in standards of care they provide.
- Policy makers to conduct budgeting and financial planning and to be confident that the services provided are high quality and cost effective and focused on driving up quality

A Quality Standard will typically consist of 8-10 quality statements with associated process and outcomes measures. The statements will be practical and implementable, and will describe what the standard means for different parties including clinical, allied health professionals, hospital management and payers. The quality statements are typically drawn from the best available evidence, ideally using a multidisciplinary process to identify high priority areas for focused quality improvement.³ The overprovision of care, with corresponding escalation of costs, represent inappropriate care quality. Quality Standards also represent a mechanism for signalling cost-effective care.

Quality Standards have been used successfully in the National Health Service in England and Wales since 2010 to assist implementation of the guidelines produced by the National Institute for Health and Care Excellence (NICE) and other accredited sources in more than 90 therapeutic areas and care pathways. Quality Standards provide a mechanism for the Department of Health, other NHS institutions such as

² http://www.nice.org.uk/standards-and-indicators

http://www.nice.org.uk/Standards-and-Indicators/Developing-NICE-quality-standards

NICE and the Care Quality Commission⁴ to drive a range of quality improvement initiatives such as payment for performance⁵ and clinical inspection and audit. Quality Standards also serve as a powerful patient empowerment tool to encourage patients to demand an appropriate level of quality care from the NHS.

Quality Standards are not the same as clinical guidelines and are focussed on specific actions or processes to drive quality improvement and will not re-visit the evidence base or existing guidance. In addition, Quality Standards differ from the National Core Standards for Health Establishments in South Africa issued by the Office of Standards and Compliance ⁶ as they centre around a therapeutic area rather than the general principles of a health facility.

How could Quality Standards improve care in South Africa?

Improving quality of care at South African health facilities will be a fundamental to successful implementation of National Health Insurance. Drawing on the NICE model, Quality Standards represent a viable mechanism for encouraging implementation of high quality, evidence based, and cost-effective care in the South African setting, and would be part of a range of outputs from an established Priority Setting Institution⁷. Subject to resources for implementation and inspection, Quality Standards could be used directly and immediately by the Office of Standards and Compliance, and could also provide a practical basis for future initiatives relating to strategic purchasing and payment for performance.⁸

In the area of maternal mortality Quality Standards would maintain consistency with existing initiatives and would identify simple, high priority actions at the health facility level needed to improve quality and save lives. Quality Standard development would draw on recommendations in the National Department of Health's Guidelines for Maternity Care in South Africa (4th Edition, 2015) and would be targeted towards key findings of the National Committee on Confidential Enquires into Maternal Deaths. It would align with the Strategic Plan for Maternal, Neonatal, Child and Women's Health and the Campaign on Accelerated Reduction of Maternal and Child Mortality in Africa.

⁴ http://www.cqc.org.uk/

⁵ Quality Outcomes Framework, (http://www.hscic.gov.uk/qof), Commissioning for Quality and Innovation (

⁶ http://www.rhap.org.za/wp-content/uploads/2014/05/National-Core-Standards-2011-1.pdf

Also termed "HTA Agency", priority setting institutions range in function and output but commonly play key roles aiding national decision making in health policy see

http://www.cgdev.org/files/1426240 file priority setting global health FINAL.pdf

⁸ https://www.phasa.org.za/to-nhi-or-not-and-if-so-what-when-why-and-how/

Importantly, it would build on and be complementary to the National Core Standards for South African Health Establishments.

What would be involved in developing Quality Standards for the management of post partum haemorrhage in the South African clinical setting?

Quality Standard development is a multi-disciplinary, multi-stakeholder process that must be aligned to the local context and existing policy. Development would typically require a technical secretariat, and the convening of Quality Standard committee and consultation processes over a period of 8-12 months.

Over a series of committee meetings, and with support of the technical secretariat, the Committee would prioritise actionable recommendations from existing guidance and draft quality statements with corresponding process and outcome measures. The measures would be consulted upon with relevant stakeholders. Development would include establishing how the Quality Standards would be used within the health service.

A fundamental requirement would be a direct link to policy, necessitating involvement of the Office of Health Standards and Compliance, national and local MoH and other relevant policy makers from the outset of Quality Standards development.