

National Strategic Plan Healthcare Quality and Safety

Sri Lanka

2021 – 2025



Directorate of Healthcare Quality and Safety
Ministry of Health
Sri Lanka



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FORWARD

With the provision of free healthcare to all citizens irrespective of their sociodemographic characteristics, Sri Lanka has achieved remarkable successes in the healthcare system. Health indicators of Sri Lanka remains far ahead from the regional countries and are in comparable to the developed countries.

Having achieved many health related targets, it is a need of the hour to focus on improving quality of care and patient satisfaction in both clinical and non-clinical extents. Respecting patient's autonomy, dignity and confidentiality are the areas to be focused in improving healthcare quality and fostering patient centered care being utmost essential.

Deficiencies related to resources such as equipment, human resource and other facilities are commonest concerns arising when establishing a quality system in Sri Lankan healthcare. Further, deficiencies in inter-sectoral coordination and establishing quality culture are utmost important in Improving of these facilities will facilitate to enhance the quality of the healthcare system. Hence, quality improvement requires an integrated approach.

Concerning to the basic concept of health, 'first do no harm', patient safety is a salient aspect in provisioning quality care. Through the National Policy of Healthcare Quality and Safety, Ministry of health has advocated wider spectrum of quality improvements including patient safety and enhancing patient satisfaction. This 'National Strategic Plan of Healthcare Quality and Safety' should guide the action plans of healthcare institutions for improving healthcare quality and patient safety in individual institutions. Healthcare providers at each level should take initiatives to implement the activities categorized under seven key results areas as per the given timeframe to make this a success.

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LIST OF ABBREVIATIONS

AIDS	Acquired Immunodeficiency Syndrome
BH	Base Hospital
CEC	Clinical Ethics Committee
CNTH	Colombo North Teaching Hospital
CSHW	Castle Street Hospital for Women
CSTH	Colombo South Teaching Hospital
DDG	Deputy Director General
DGH	District General Hospital
D-HI	Director - Health Information
DHQS	Directorate of Healthcare Quality and Safety
DMH	De Soyza Maternity Hospital
DO	Development Officer
E&OH	Environment and Occupational Health
ET&R	Education, Training and Research
FHB	Family Health Bureau
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
GH	General Hospital
HI	Health Information
HIMS	Health Information Management System
HIU	Health Information Unit
HIV	Human Immunodeficiency Virus
HPB	Health Promotion Bureau
IEC	Information, Education and Communication
IHP	Institute for Health Policy
KRA	Key Results Area

LRH	Lady Ridgeway Hospital
MO	Medical Officer
MoH	Ministry of Health
MRI	Medical Research Institute
MS	Medical Superintendent
MS-1	Medical Services - 1
MSD	Medical Supplies Division
NCD	None Communicable Diseases
NHRD	National Hospital for Respiratory Disease
NHSL	National Hospital Sri Lanka
NIHS	National Institute of Health Sciences
NIMH	National Institute of Mental Health
NO	Nursing Officer
NPO	National Professional Officer
OPD	Out Patient Department
PD	Provincial Director
PDHS	Provincial Director of Health Services
PHS-1	Public Health Services - 1
PMC	Primary Care
PPE	Personal Protective Equipment
QMU	Quality Management Unit
RDHS	Regional Director of Health Services
SGNO	Special Grade Nursing Officer
SLNC	Sri Lanka Nursing Council
SMLT	Supra Grade Medical Laboratory Technologist
TB	Tuberculosis
TQM	Total Quality Management
WHO	World Health Organization
WITs	Work Improvement Teams
YED	Youth Elderly and Disabled

EXECUTIVE SUMMARY

Since its inception, the main focus of the healthcare system of Sri Lanka is to ensure equitable access to quality assured services in every nook and corner of the country. With the “free health policy” adopted in 1951, preceded by the 1946 legislation of Britain’s setup the directives for health reforms in the post-independent Ceylon. In fact, this approach is the cornerstone of the present successful healthcare system, reflected by the health indices including; life expectancy at birth, maternal mortality and infant and child mortality rates. Compared to its peers in the South Asian region, Sri Lanka reports impressive health indicators, which are much comparable to the developed world.

Even though the Sri Lankan healthcare system focuses on providing a remarkable service, it is not well recognized by the public. While the Ministry of Health strives to ensure universal health coverage to all citizens, relevant to the disease burden experienced in the country through a well-integrated, comprehensive and efficient health service, it is utmost important to focus on the quality of care and patient safety. Ministry of Health has published the National Policy on Healthcare Quality and Safety in year 2015, with the aim of enhancing the effectiveness, timely accessibility, capacity, safety, equity and patient centeredness of the healthcare service of Sri Lanka. The regional strategy for patient safety in the WHO South-East Asia Region (2016-2025) was developed by WHO expert working group in 2015, to support the development of national patient safety strategies within the Region including Sri Lanka. In light of this, the working committee to revise the National Policy on Healthcare Quality and Safety adopted the following guiding principles;

- a. Focusing on health systems improvement;
- b. Strengthening capacity through education and training;
- c. Learning from mistakes and minimizing risks in future;
- d. Adopting a patient-centred approach;
- e. Targeting all levels of healthcare;
- f. Introducing evidence-based interventions;
- g. Establishing priorities;
- h. Identifying implementing agencies and ensuring sustainability.

With the vision of ‘Providing optimum quality and safe healthcare services to the people of Sri Lanka’, National Policy on Healthcare Quality and Safety is focused on the following seven key result areas to fulfill its strategic objectives as follows;

1. Customer/ Patient Satisfaction and Experience - To strengthen organizational settings towards customer-focused care responsive to their preferences, expectations and values and patient-centred care
2. Leadership, Governance and Systems - To establish effective leadership and develop governance and systems to facilitate healthcare quality improvement and patient safety.
3. Clinical Effectiveness - To promote evidence-based, ethically accepted clinical practices to ensure the best possible outcome for the patient.
4. Risk Management and Safety - To mitigate risk from medications, procedures and adverse events to ensure safety of patients and staff.
5. Enabling a Culture for Quality Improvement - To internalize quality improvement strategies to assure shared values in creating health promoting and environment friendly healthcare organizations.
6. Staff Development and Wellbeing - To develop a competent, healthy and satisfied workforce to enhance productivity, quality and safety in healthcare.
7. Research for Quality Improvement and Patient Safety - To promote research in the field of quality improvement and patient safety.

Under each strategic objective major strategies and activities are identified in this National Strategic Plan for Healthcare Quality and safety (2021 – 2025). Sub activities, time lines, priority requirements and the responsibilities are spelt out clearly to ensure its attainment. Key performance indicators to monitor the effective completion of the activities are also defined to ensure a monitoring mechanism in place.

KEY RESULT AREA 1: CUSTOMER / PATIENT SATISFACTION AND EXPERIENCE

OBJECTIVE:

To strengthen people centered care in response to their preferences, expectations and values

STRATEGIES:

1. Enhance patient centered care
2. Develop mechanisms to ensure timeliness on service delivery
3. Develop mechanisms to ensure responsiveness on service delivery for all including the disabled, elderly & special groups in hospitals
4. Engage patients and community for improvement of health and service delivery
5. Establish and enhance mechanisms for grievance handling

ACTION PLAN FOR THE KEY RESULTS AREA – 1

No	Strategies	Interventions	Responsible Units	Timelines	Priority
1	Enhance patient centered care	<p>1. Raise awareness among public on patient-centered care</p> <p>a. Develop and distribute IEC materials for the public</p> <p>b. Involve mass media for awareness of public</p>	DHQS/ Health Promotion Bureau/PDHS/RDHS/ Institutions	2021-2025	High
2	Develop mechanisms to ensure timeliness on service delivery	<p>1. Ensure timeliness in healthcare delivery process</p> <p>a. Establish/strengthen mechanism to evaluate waiting time at institutions</p> <p>b. Promote patient movement study and process mapping of patient flow at institutions</p> <p>2. Strengthen appointment system in OPD and clinics</p> <p>3. Introduce a patient information booklet and establish effective discharge plan</p>	<p>DHQS/PDHS/RDHS/Institutions</p> <p>PDHS/RDHS/Institutions</p> <p>PDHS/RDHS/Institution</p>	<p>2021-2025</p> <p>2021-2025</p> <p>2021-2025</p>	<p>Medium</p> <p>Medium</p> <p>Medium</p>

No	Strategies	Interventions	Responsible Units	Timelines	Priority
3	Develop mechanisms to ensure responsiveness on service delivery for all including the disabled, elderly & special groups in hospitals	<p>1. Ensure maintenance of privacy, confidentiality and respect at all level of care</p> <ul style="list-style-type: none"> a. Establish suitable infrastructure in healthcare settings b. Define roles and responsibilities of healthcare workers c. Empower patients on their rights in terms of privacy, confidentiality and respect 	MoH/ PDHS/RDHS/ Institutions	2021-2025	High
		<p>2. Provide appropriate facilities and access for special groups</p> <ul style="list-style-type: none"> a. Construct and provide facilities for differently abled groups b. Provision of preferential services including priority services for special groups <p>3. Ensure clear display of hospital layout for customer orientation</p>	<p>DHQS/Directorate -YED/ Director-Building/ Institutions</p> <p>DHQS/PDHS/RDHS/Institutions</p>	2021-2025	Medium
				2021-2025	High

No	Strategies	Interventions	Responsible Units	Timelines	Priority
4	Engage patients and community for improvement of health and service delivery	<p>1. Establish and/or strengthen Hospital Development Committees and Friends of hospital societies</p> <p>2. Educate patients on care and shared decision making with patients and families</p> <p>3. Encourage the formation of patient support groups</p> <p>4. Conduct open day programme for enhanced patient interaction and increased public awareness of hospital activities</p> <p>5. Develop institutional mechanisms for managing complaints and appraisals</p> <p>a. Ensure placement of suggestion/feedback box and analysis of suggestions in every institution</p> <p>b. Establish customer feedback mechanism via appropriate modes of communication and documentation (public complaint register, hotline number, social media).</p>	<p>Institutions</p> <p>Institutions</p> <p>DHQS/ Institutions</p> <p>DHQS/Institutions</p> <p>DHQS/Institutions</p>	<p>2021-2025</p> <p>2021-2025</p> <p>2021-2025</p> <p>2021-2025</p> <p>2021-2025</p>	<p>High</p> <p>Medium</p> <p>Medium</p> <p>Medium</p> <p>Medium</p>

No	Strategies	Interventions	Responsible Units	Timelines	Priority
		<p>6. Enhance the patient satisfaction/experience surveillance system for providing feedback</p> <p>a. Conduct regular patient experience surveys in institutions, analyze and feedback</p> <p>7. Introduce Exit Interview to assess patient satisfaction</p> <p>a. Develop and implement exit interview format</p>	<p>DHQS/Institutions</p> <p>DHQS/Institutions</p>	<p>2021-2025</p> <p>2021-2025</p>	<p>High</p> <p>High</p>
5	Establish and enhance mechanisms for grievance handling	<p>a. Identify a suitable officer to handle patients' grievances at healthcare institutes</p> <p>b. Introduction of patients' grievance procedures to resolve grievances systematically.</p>	Healthcare Institutes	2021-2025	High

KEY RESULT AREA 2: LEADERSHIP, GOVERNANCE & SYSTEMS

OBJECTIVE:

To strengthen effective leadership and governance to improve systems and processes

STRATEGIES

1. Recognize healthcare quality and safety as a priority by the leadership
2. Facilitate development and implementation of institutional action plans based on National policy on Healthcare Quality and Safety
3. Establish standards in healthcare quality and safety towards accreditation
4. Ensure continuous quality improvement in accordance with National Policy on Healthcare Quality and Safety
5. Ensure Total Quality Management (TQM) through engagement and shared responsibility of all stakeholders in the internal and external environment
6. Strengthen the Information System to support the quality improvement programmes
7. Develop/ adopt and/or strengthen mechanisms for performance assessment using data driven quality monitoring system for corrective action in healthcare
8. Strengthen quality of primary health care, services and conduct regular supervision
9. Develop a mechanism for inter-sectoral collaboration and advocacy for healthcare quality and safety

ACTION PLAN FOR THE KEY RESULTS AREA - 2

No	Strategies	Interventions	Responsible Units	Timelines	Priority
1	Recognize healthcare quality and safety as a priority by the leadership	1. Establish the National Policy on Healthcare Quality and Safety and its Action Plans	MoH/DHQS	2021-2022	High
		2. Establishment of a National Steering Committee on healthcare quality and safety	MoH/DHQS	2021-2022	High
		3. Establishment of working committees at provincial level on healthcare quality and safety with the aim of implementing the National policy at provincial level	PDHS	2021-2022	High
		4. Advocate healthcare quality and safety as a priority in all health-related policies	MoH/DHQS/PDHS/RDHS	2021-2025	High
2	Facilitate development and implementation of institutional action plans based on National policy on Healthcare Quality and Safety	1. Provide directions to prepare institutional action plans based on the policy of Healthcare Quality Safety	DHQS	2021-2025	High
		2. Conduct gap analysis at the institutional level, emphasizing issues pertaining to three diseases (HIV/AIDS, TB and Malaria) and provide necessary support for quality improvement *	DHQS/Institutions/GFATM/HIV, Malaria, TB campaigns	2021-2023	High

No	Strategies	Interventions	Responsible Units	Timelines	Priority
3	Establish standards in healthcare quality and safety towards accreditation	1. Conduct consultative meetings to develop/review standards for healthcare quality improvement	DHQS	2021-2023	High
		2. Pilot standards in selected hospitals and refining standards	DHQS	2021-2023	High
		3. Conduct surveyor induction and mock training to carry out baseline assessment of selected hospitals based on refined standards	DHQS	2021-2023	High
		4. Seek expertise to review the applicability of accreditation in Sri Lankan healthcare system and develop a road map and strategy for future efforts	DHQS	2021-2023	High
4	Ensure continuous quality improvement (CQI) in accordance with National Policy on Healthcare Quality and Safety	1. Encourage adoption and use of quality and safety methodologies for quality improvement	Institutions	2021-2025	Medium
		2. Promote benchmarking and sharing of good practices	Institutions	2021-2025	Medium
5	Ensure Total Quality Management (TQM) through engagement and shared responsibility of all stakeholders in the internal and external environment	1. Engage all stakeholders in the internal and external environment (including staff, patients, professional organizations, suppliers etc.) in quality improvement programmes	Institutions	2021-2025	Medium

No	Strategies	Interventions	Responsible Units	Timelines	Priority
6	Strengthen the Information System to support the quality improvement programmes	1. Strengthen Information System to incorporate the reporting of healthcare associated incidents and accidents.	DHQS/Institutions	2021-2023	Medium
		2. Developing a dedicated national website on patient safety and quality	DHQS	2021-2023	High
		3. Establish/strengthen the setup of Teleconferencing unit and e learning platform at DHQS	DHQS/HI	2021-2023	Medium
		4. Strengthen the information system to support quality improvement in all levels of care including primary level.	DHQS/HI	2021-2023	Medium
7	Develop/ adopt and/or strengthen mechanisms for performance assessment using data driven quality monitoring system for corrective action in healthcare	1. Develop a framework for performance and quality assessment* a. Develop Quality Performance Evaluation Tool (QPET) b. Develop quality performance indicators generated by core HMIS	DHQS/PDHS/RDHS /Institutions/ HIV-AIDS/Malaria, TB/Information unit	2021-2023	High
		2. Strengthen performance and quality monitoring mechanism at all levels including primary care and feedback for improvement	DHQS/PDHS/RDHS/ Director-PMC/Institutions	2021-2023	High
		3. Design and distribute annual healthcare quality and safety bulletin	DHQS	2022-2023	High

No	Strategies	Interventions	Responsible Units	Timelines	Priority
8	Strengthen quality of primary health care, services and conduct regular supervisions	1. Review and revise quality standards applicable to primary health care	Director-Primary Healthcare/ DHQS	2021-2023	High
		2. Promote sharing resources among primary healthcare institutes	Director-Primary Healthcare	2021-2025	Medium
9	Develop a mechanism for inter-sectoral collaboration and advocacy for healthcare quality and safety	1. Integrate Healthcare Quality Excellence Awards with the National Productivity Secretariat/National Quality Awards (Ministry of Health can provide criteria for the assessment of nominees) 2. Liaise with provincial and regional authorities about healthcare quality and safety excellence awards at local level	DHQS	2021-2025	Medium
			DHQS/PDHS/RDHS/ Institutions	2021-2025	Medium

*- this is one of the activities included in D2H proposal, which would be funded through Global Fund for HIV/AIDS, TB and Malaria

KEY RESULT AREA 3:

CLINICAL EFFECTIVENESS

OBJECTIVE:

To promote evidence-based and ethically accepted clinical practice to ensure the best possible outcome of the patient.

STRATEGIES

1. Develop and institutionalize evidence-based cost-effective clinical guidelines and protocols
2. Provide professional guidance to promote clinical audits
3. Develop mechanisms for peer review, peer benchmarking, peer networking and peer review learning & sharing of clinical practices
4. Strengthen the clinical information management system to facilitate decision making
Establish mechanisms to ensure ethical clinical practice

ACTION PLAN FOR THE KEY RESULTS AREA - 3

No	Strategies	Interventions	Responsible Units	Timelines	Priority
1	Develop and institutionalize evidence-based cost-effective clinical guidelines and protocols	1.Establish a national guideline committee to facilitate development of clinical guidelines and multidisciplinary clinical protocols	MoH/DHQS/Professional Colleges	2022-2025	High
		2.Develop clinical protocols and guidelines in collaboration with stakeholders and encourage their usage	MoH/DHQS/Professional Colleges	2022-2025	High
2	Provide professional guidance to promote clinical audits	1. Promote conducting clinical audits regularly in institutions and encourage reporting and share the feedback	DHQS/Institutional QMU	2021-2025	High
3	Develop mechanisms for peer review, peer benchmarking, peer networking and peer review learning & sharing of clinical practices	1. Develop, revise and pilot clinical indicators relating to clinical performance, morbidity, mortality, adverse events evaluation at institution level	DHQS/Institutional QMU	2021-2025	High
		2. Review performance of the institutions based on these indicators with peer units at institutional, regional and national levels	DHQS/ Institutional QMU	2021-2025	High
		3.Establish and strengthen mechanisms to share best practices/performances	DHQS/ Institutional QMU	2021-2025	High

No	Strategies	Interventions	Responsible Units	Timelines	Priority
4	Strengthen the clinical information management system to facilitate decision making	1. Ensure guidelines are available online	MOH/DHQS	2021-2025	Medium
		2. Incorporate clinical indicators into HIMS.	Director Health Information/DHQS	2021-2025	Medium
		3. Incorporate clinical support decisions systems into HIMS	Director Health Information/DHQS	2021-2025	Medium
5	Establish mechanisms to ensure ethical clinical practice	1. Establish/Strengthen Clinical Ethics Committee (CEC) in hospitals	DHQS/Institutions	2021-2025	Medium
		2. Develop guidelines for clinical practice based on principles of ethics	DHQS/Institutions	2021-2025	Medium
		3. Develop informed consent practice in all the clinical procedures	DHQS/Institutions	2021-2025	Medium

KEY RESULT AREA 4: RISK MANAGEMENT AND SAFETY

OBJECTIVE: To mitigate risk from medications, procedures and adverse events to ensure safety of patients and staff

STRATEGIES:

1. Ensure an effective risk management system with active surveillance and periodic risk evaluations
2. Strengthen an effective reporting system for adverse events and near-misses
3. Establish a mechanism for focused investigations of severe adverse events (sentinel events)
4. Expand mortality reviews
5. Strengthen mechanisms for safe practice
6. Strengthen infection prevention and control
7. Mitigate unintended harm from medication and medical devices
8. Establish effective communication for patient and staff safety
9. Ensure safe environment

ACTION PLAN FOR THE KEY RESULTS AREA – 4

No	Strategies	Interventions	Responsible Units	Timelines	Priority
1	Ensure an effective risk management system with active surveillance and periodic risk evaluations	1. Implement risk assessment activities in institutions a. Periodically conduct the risk assessments b. Identify hazardous, unsafe and risk prone conditions c. Make adequate risk mitigation plans to address them	DHQS/PDHS/RDHS/ Heads of Institutions	2022-2025	High
2	Strengthen an effective reporting system for adverse events and near-misses	1. Strengthen the adverse event reporting system a. Provide standardize definitions, classifications and formats for adverse event reporting b. Provide a user-friendly mechanism for adverse event reporting c. Facilitate learnings from adverse events at organization	DHQS/PDHS/ RDHS/ Heads of Institutions	2021-2023	High
		2. Ensure confidentiality of adverse event reporting system a. Provide a mechanism for confidential adverse event review with the relevant staff	DHQS / PDHS/ RDHS/ Heads of Institutions/ Legal unit-MoH	2021-2023	Medium
3	Establish a mechanism for focused investigations of severe adverse events (sentinel events)	1. Establish an institutional system for internal investigation with root cause analysis of severe events	DHQS / PDHS/ RDHS/Heads of Institutions	2022-2025	Medium
		2. Utilize learnings from investigations	Heads of Institutions	2022-2025	Medium

No	Strategies	Interventions	Responsible Units	Timelines	Priority
4	Expand mortality reviews	1. Develop criteria for selection processes for mortality reviews	DHQS / PDHS/ RDHS/ Heads of Institutions	2023-2025	Low
		2.Promote conducting mortality reviews and establish a reporting structure	DHQS / PDHS/ RDHS/ Heads of Institutions	2021-2025	Medium
5	Strengthen mechanisms for safe practice	1. Develop guidelines for Transition of Care – a. Effective handing over and taking over of staff during shift change; b. Inter hospital transfer; Intra-hospital care	MoH/DHQS/ Professional Colleges/PDHS/RDHS/ Institutions	2021-2025	Medium
		2. Promote the use of Surgical Safety Checklist - Ministry of Health, for major and minor surgeries	DHQS/ Professional Colleges/ Institutions	2021-2025	High
6	Strengthen infection prevention and control	1. Develop infection prevention and control guidelines	MoH/DHQS/Head of Institutions/ Professional Colleges	2021-2024	High
		2. Ensure regular infection prevention and control review committee meetings at the institutional level	MoH/DHQS/ Head of Institutions	2021-2024	Medium
		3. Promote hand hygiene, proper use of PPE and other safety precautions	MoH/DHQS/ Head of Institutions / Professional Colleges	2021-2024	High

No	Strategies	Interventions	Responsible Units	Timelines	Priority
7	Mitigate unintended harm from medication and medical devices, blood products and vaccines	1. Promote medication safety using national action plan of medication safety. 2. Promote activities to prevent unintended harm from medical devices, blood transfusions and vaccines.	MoH/DHQS/ Head of Institutions / Professional Colleges/ Academia	2021-2025	High
8	Establish effective communication for patient and staff safety	1. Promote effective communication with staff and patients on patient safety a. Encourage hospital-rounds to ensure patient and staff safety b. Establish and strengthen “Friends of hospital societies” to empower patients on patient safety c. Advocate patient safety via mass media	DHQS/HPB/PDHS/ RDHS/ Heads of Institutions/ Professional bodies	2021-2025	Medium
9	Ensure safe environment	1. Ensure safe and comfortable environment for patients and care providers including a. Ensure a fire safety in all institutions b. Ensure continuous safe water supply c. Ensure safe management of waste including safe disposal of infectious and sharp waste	DHQS/ PDHS/RDHS/ Heads of Institutions/ E&OH/Local authorities	2021-2025	Medium

KEY RESULT AREA 5:

ENABLING A CULTURE FOR QUALITY IMPROVEMENT

OBJECTIVE:

To internalize quality improvement strategies to assure shared values in creating health promoting and environment friendly healthcare organizations

STRATEGIES

1. Strengthen quality culture in healthcare organizations
2. Promote a proactive safe culture in healthcare institutes
3. Ensure quality culture by benchmarking and sharing best practices with peer and external healthcare organizations
Develop a mechanism to encourage team work and spiritual health in healthcare institutions

ACTION PLAN FOR THE KEY RESULTS AREA - 5

No	Strategies	Interventions	Responsible Units	Timelines	Priority
1	Strengthen quality culture in healthcare organizations	1. Establish mechanisms for strengthen focal points for quality and safety in district and institutional level by means of formulating functional quality steering committee and WITs	DHQS/PDHS/RDHS/Institutions	2021-2023	High
		2. Develop, institutional quality and safety operational policies and action plans aligned with national healthcare quality and safety policy facilitating innovative ideas	Head of Institutions	2021-2025	Medium
		3. Conduct periodic quality and safety reviews for continuous quality improvement	DHQS/Head of Institutions	2021-2025	Medium
2	Promote a proactive safe culture in healthcare institutes	1. Conduct advocacy programmes on safety culture	DHQS/Head of Institutions	2021-2025	Medium
		2. Establish and promote non-punitive culture for reporting adverse events.	DHQS/Head of Institutions/QMU/All WITs	2021-2025	Medium
		3. Establish/Strengthen health promoting culture	MoH/DHQS/PDHS/RDHS/Institutions	2021-2025	High

No	Strategies	Interventions	Responsible Units	Timelines	Priority
3	Ensure quality culture by benchmarking and sharing best practices with peer and external healthcare organizations	1. Conduct institutional level benchmarking performance and sharing review (monthly, quarterly) e.g. at meetings, on hospital safety bulletin, hospital notice board.	Director, QMU DHQS, QMU and all units	2021-2025	Medium
		2. Celebrate World Patient Safety Day annually	DHQS	2021-2025	Medium
		3. Establish appreciation/ rewarding mechanism for best practices	DHQS/PDHS/RDHS Regional level	2021-2025	Medium
		4. Develop and conduct Annual National Convention of Healthcare Quality & Safety for sharing best practices, research etc.	DHQS Director of the hospital/MS, QMU	2021-2025	Medium
		5. Introduce study visits to health and non-health institutions for learning quality culture e.g. Bench marked institutions	DHQS/PDHS/RDHS/Heads of Institutions	2021-2025	Medium
4	Develop a mechanism to encourage team work and spiritual health in healthcare institutions	1. Promote physical and mental wellbeing of staff with activities such as physical training programs , annual sports events, religious activities and annual trips, staff get-togethers, shramadaana etc. 2. Facilitate life skills development programme 3. Strengthen hospital development committees and encourage team work	PDHS/RDHS/Head of the institutions/ QMU DHQS/PDHS/RDHS/Heads of Institutions PDHS/RDHS/Heads of Institutions	2021-2025	Medium

KEY RESULT AREA 6:

STAFF DEVELOPMENT AND WELLBEING

OBJECTIVE:

To develop a competent, healthy and satisfied workforce to enhance productivity, quality and safety in healthcare

STRATEGIES

1. Establish mechanisms to strengthen professionals attitudes and competencies of healthcare staff for ensuring healthcare quality and safety
2. Facilitate continuous professional education and development of staff
3. Strengthen mechanisms to staff appraisal, reward creativity and innovation among staff for quality improvement and patient safety
4. Design and implement activities to support staff wellbeing and enhance job satisfaction

ACTION PLAN FOR THE KEY RESULTS AREA - 6

No	Strategies	Interventions	Responsible Units	Timelines	Priority
1	Establish mechanisms to strengthen professionals attitudes and competencies of healthcare staff for ensuring healthcare quality and safety	1. Develop competency framework for patient safety and healthcare quality for healthcare staff	DHQS	2022-2025	Medium
		2. Attitudinal development of healthcare staff for maintaining responsiveness in patient care	Institutions/DHQS/ Professional bodies	2022-2024	Low
		3. Advocate to incorporate healthcare quality and safety module in basic training of healthcare professionals	DHQS/Universities/ DDG-ET&R	2022-2025	Medium
		4. Enhance capacity building of healthcare staff for patient safety and quality including primary healthcare staff	MoH/DHQS/D- PMC/PDHS/RDHS/ Institutions/ Private health sector regulatory council/ Military hospital	2022-2025	Medium
2	Facilitate continuous professional education and development of staff	1. Strengthen training arm in DHQS with special focus on online training, assessment and feedback	DHQS/D-HI	2021-2023	High
		2. Develop/revise healthcare quality and safety training program for master trainers a. Conduct need assessment of health staff of curative and preventive sectors with regard to quality and safety for future trainings and preparation of a manual b. Revise the format of training of trainer programmes in healthcare quality and safety c. Conduct training of trainers programmes	MoH/DHQS/ ET & R/Professional bodies/ Academia	2021-2022	High

No	Strategies	Interventions	Responsible Units	Timelines	Priority
		<p>3. In-cooperate healthcare quality and safety for postgraduate education and training curricula.</p> <p>4. Conduct workshops on clinical audits to support Implementation of evidence-based guidelines</p> <p>5. Develop and conduct workshops on effective communication</p>	<p>DHQS/PGIM/ET&R</p> <p>DHQS/ET & R D/NIHS</p> <p>DHQS/professional bodies</p>	<p>2021-2022</p> <p>2022-2024</p> <p>2022-2024</p>	<p>High</p> <p>High</p> <p>Low</p>
3	Strengthen mechanisms to staff appraisal, reward creativity and innovation among staff for quality improvement and patient safety	<p>1. Establish a process to encourage creativity and innovation for improvement of healthcare quality and patient safety</p> <p>2. Recognize best performers who excelled in achieving patient safety and quality</p>	DHQS/PDHS/RDHS/ Head of the institution	<p>2022-2024</p> <p>2021-2025</p>	<p>Medium</p> <p>Low</p>
4	Design and implement activities to support staff wellbeing and enhance job satisfaction	<p>1. Facilitate to conduct regular survey to find the current employee satisfaction level at institutional level</p> <p>2. Review the survey findings and identify areas of improvement for planning and implementing activities for enhancing employee satisfaction</p> <p>3. Advocate to enhance staff wellbeing by creating supportive health promoting settings to improve physical, mental, social and spiritual health</p>	<p>Institutions</p> <p>Institutions</p> <p>MoH/DHQS/ PDHS/RDHS/ Director-NCD/ E & OH/ head of the Institutions</p>	<p>2021-2025</p> <p>2021-2025</p> <p>2021-2025</p>	<p>Medium</p> <p>Medium</p> <p>Medium</p>

KEY RESULT AREA 7: RESEARCH FOR QUALITY IMPROVEMENT AND PATIENT SAFETY

OBJECTIVE:

To promote research in quality improvement and patient safety

STRATEGIES

1. Promote research in healthcare quality and safety for evidence-based management in healthcare safety
2. Promote development of research expertise pool for enhancing skills of healthcare staff for conducting research
3. Enhance dissemination and use of research findings

ACTION PLAN FOR THE KEY RESULTS AREA - 7

No	Strategies	Interventions	Responsible Units	Timelines	Priority
1	Promote research in healthcare quality and safety for evidence-based management in healthcare safety	1. Advocate healthcare quality and safety as a healthcare research priority	DHQS	2021-2022	Medium
		2. Identify priority research areas within healthcare quality and safety and facilitate conduction of research	DHQS	2021-2024	Medium
		3. Establish central reference library	DHQS	2021-2022	Medium
		4. Promote collaborative research with other institutions (professional associations, Universities, Private sector)	DHQS/professional bodies/ Academia	2021-2022	Medium
2	Promote development of research expertise pool for enhancing skills of healthcare staff for conducting research	1. Formulate national level and regional level research workshops for quality and safety research including analytical, epidemiological and informatics skills for performance measurement and benchmarking	DHQS/ ET &R	2022-2024	High
		2. Facilitate distance learning for research skills development with regard to healthcare quality and safety	DHQS/ ET &R	2022-2023	Medium
		3. Promote and develop specific expertise for quality and safety research - programme & impact evaluation; implementation science methodology, healthcare technology assessment and cost effectiveness studies	DHQS/ ET&R Health Information Unit	2022-2024	Medium
3	Enhance dissemination and use of research findings	1. Establish repository on healthcare quality and safety research conducted by healthcare staff including private sector	DHQS	2022-2023	Medium
		2. Disseminate research, innovations with collaboration with international collaborators	DHQS/ET & R	2022-2025	Medium

MONITORING & EVALUATION PLAN

Monitoring and Evaluation of Strategic Plan for Healthcare Quality and Safety

	Key Indicators	Numerator	Denominator	Time period	Baseline year/ value	Target	Method	Means of verification
Impact Indicator								
1	Proportion of the patients who are satisfied with the hospital care received	Number of patients who are satisfied with the hospital care service	Total number of patients who received care from the hospital and responded to the survey	2021-2025	2020/ value	To increase by 10%, 15%,20% and 30% from the baseline value in 2021, 2022, 2023 and 2025 respectively	Patient Satisfaction Surveys conducted by QMUU in hospitals	Random checks by DHQS
Outcome indicators								
2	Hospital associated infection rate	Number of hospital associated infections reported	Total number of admissions in total line ministry hospitals and base hospitals	2021-2025	2020/ value	Reduce by 50% in 2025	Passive data collection at quarterly review	Random checks by DHQS, by observations

	Key Indicators	Numerator	Denominator	Time period	Baseline year/ value	Target	Method	Means of verification
Output and process indicators								
Key Results Area 1								
3	Percentage of hospitals conducted evaluation of waiting time at OPD	Number of hospitals conducted evaluation of waiting time	Total line ministry hospitals and provincial ministry hospitals above Base hospital level	2021-2025	2020/ value	100% in each year	Passive data collection at quarterly review	Random checks by DHQS. Availability of reports
4	Percentage of hospitals that has established and analysed feedbacks/suggestions at least once a month	Number of hospitals that analysed feedbacks/suggestions	Total line ministry hospitals and provincial ministry hospitals above Base hospital level	2021-2025	2021/ value	100% in each year	Passive data collection at quarterly review	Random checks by DHQS by observation
5	Percentage of hospitals having community/ patient representation in hospital development committees / Friends of hospital societies	Number of hospitals having community/ patient representation in hospital development committees / Friends of hospital societies	Total line ministry hospitals and provincial ministry hospitals above Base hospital level and verifiable PMCII	2021-2025	2021/ value	100% in 2025	Passive data collection at quarterly review	Random checks by DHQS by observation

	Key Indicators	Numerator	Denominator	Time period	Baseline year/ value	Target	Method	Means of verification
Key Results Area 2								
6	Percentage of hospitals reporting quality improvement data through the Quality Performance Evaluation Tool (QPET)	Number of hospitals reporting quality improvement data through the Quality Performance Evaluation Tool (QPET)	Total line ministry and provincial ministry hospitals and verifiable PMCII	2021-2025	N/A (QPET will be developed in 2021)	100% in 2023	Passive data collection at reviews	Supervision visits
7	Percentage of verifiable primary Healthcare Institutions covered by Quality Supervision visits (At least 3 supervisions per year)	Number of verifiable hospitals in which at least three supervisions conducted in a year	Number of verifiable hospitals planned to be supervised in the given year	2021	54%	90% by 2023	Passive data collection	Random checks
8	Publishing of annual healthcare quality and safety bulletin	NA	NA	2022	NA	Publish in 2022	Compiling of the bulletin	Publishing of the bulletin
Key Results Area 3								
9	Percentage of hospitals that have conducted at least one clinical audit per quarter	Number of hospitals that have conducted at least one clinical audits per quarter	Total line ministry hospitals and provincial ministry hospitals above Base hospital level	2021-2025	2020/ Value	70% in 2023 and 90% in 2025	Passive data collection at quarterly reviews	Random checks by DHQS. Availability of audit reports

	Key Indicators	Numerator	Denominator	Time period	Baseline year/ value	Target	Method	Means of verification
Key Results Area 4								
10	Percentage of hospitals with medication error reporting system	Number of hospitals with medication error reporting system	Total line ministry hospitals and provincial ministry hospitals above Base hospital level	2021-2025	2022/ value	Increase by 50% in 2023 and by 60% in 2025	Passive data collection at quarterly reviews	Random checks by DHQS. Availability of reports
11	Percentage of hospitals that have completed surgical safety check list at least 90% for their major surgeries	Number of hospitals that have completed surgical safety check list at least 90% for their major surgeries	Total line ministry hospitals and provincial ministry hospitals above Base hospital level	2021-2025	2020/ Value	100%	Passive data collection at quarterly reviews	Random checks by DHQS. Observations
12	Percentage of hospitals that follow a guideline to monitor Antibiotic Resistance	Number of hospitals that follow a guideline to monitor Antibiotic Resistance	Total line ministry hospitals and provincial ministry hospitals above Base hospital level	2021-2025	2020/ Value	Increase by 25% from the baseline in 2023 and by 50% by 2025	Passive data collection at quarterly reviews	Random checks by DHQS. Availability of a guideline
13	Percentage of hospitals with adverse event reporting mechanism	Number of hospitals (base and above) with adverse event reporting mechanism	Total line ministry hospitals and provincial ministry hospitals above Base hospital level	2021-2025	2020/ Value	Increase by 70% from the baseline in 2023 and by 90% in 2025	Passive data collection at reviews	Random checks by DHQS. Availability of reports

	Key Indicators	Numerator	Denominator	Time period	Baseline year/ value	Target	Method	Means of verification
14	Percentage of hospitals having established adverse event review meetings for taking corrective and preventive measures	Number of hospitals having established adverse event review meetings	Total line ministry hospitals and provincial ministry hospitals above Base hospital level	2021-2025	2021/ Value	Increase by 70% from the baseline in 2023 and by 90% in 2025	Passive data collection at reviews	Random checks by DHQS. Availability of reports
Key Results Area 5								
15	Percentage of hospitals having at least one institutional review for performance assessment and monitoring per quarter	Number of hospitals having at least one institutional review for performance assessment and monitoring per quarter	Total line ministry hospitals and provincial ministry hospitals above Base hospital level	2021-2025	2021/ Value	By 70% in 2023 and by 90% in 2025	Passive data collection at quarterly reviews	Random checks by DHQS. Availability of minutes of the meetings
16	Conducting of an Annual National Convention of Healthcare Quality & Safety for sharing best practices	NA	NA	2022-2025		Conduct in 2022	Organizing the National Convention	Conducting the National Convention
17	Percentage of hospitals with at least 60 % of functional WITs out of the units available in the hospital	Number of Hospitals with at least 60 % of functional WITs out of the available units in the hospital	Number of total hospitals (base and above)	2021-2025	2020	By 70% in 2023 and by 90% in 2025	Passive data collection at reviews	Random checks by DHQS. Availability of minutes

	Key Indicators	Numerator	Denominator	Time period	Baseline year/ value	Target	Method	Means of verification
Key Results Area 6								
18	Percentage of Master Trainers, conducted training programs at institutional level (at least twice a year)	Number of Master trainers who conducted training at their respective hospitals	Number of Master trainers trained by DHQS during the stipulated period	2021-2025	2018/ 83%	Increase by 95% in 2023	Passive data collection	Random checks by DHQS. Availability of attendance sheets
19	Number of PG training programs which has incorporated patient safety content into training curricula	NA	NA	2021-2025	2021/ Value	Increase by 25% from the baseline in 2023 and by 50% by 2025	NA	From PGIM
Key Results Area 7								
20	Number of researches conducted per year on Healthcare Quality and Safety	NA	NA	2021-2025		By 50% in 2025	Active data collection by DHQS	Random checks