



Leadership is all about
Influencing, Igniting, and
Inspiring Ordinary People
to do **Extra-Ordinary things.**

Leadership & Quality in Healthcare

SQHN Conference. August 2015

PharmAccess
FOUNDATION

Health
Insurance
Fund

MEDICAL
CREDIT
FUND
AFMCA

SafeCare
BASIC HEALTHCARE STANDARDS

Conference Theme: Healthcare Quality Management

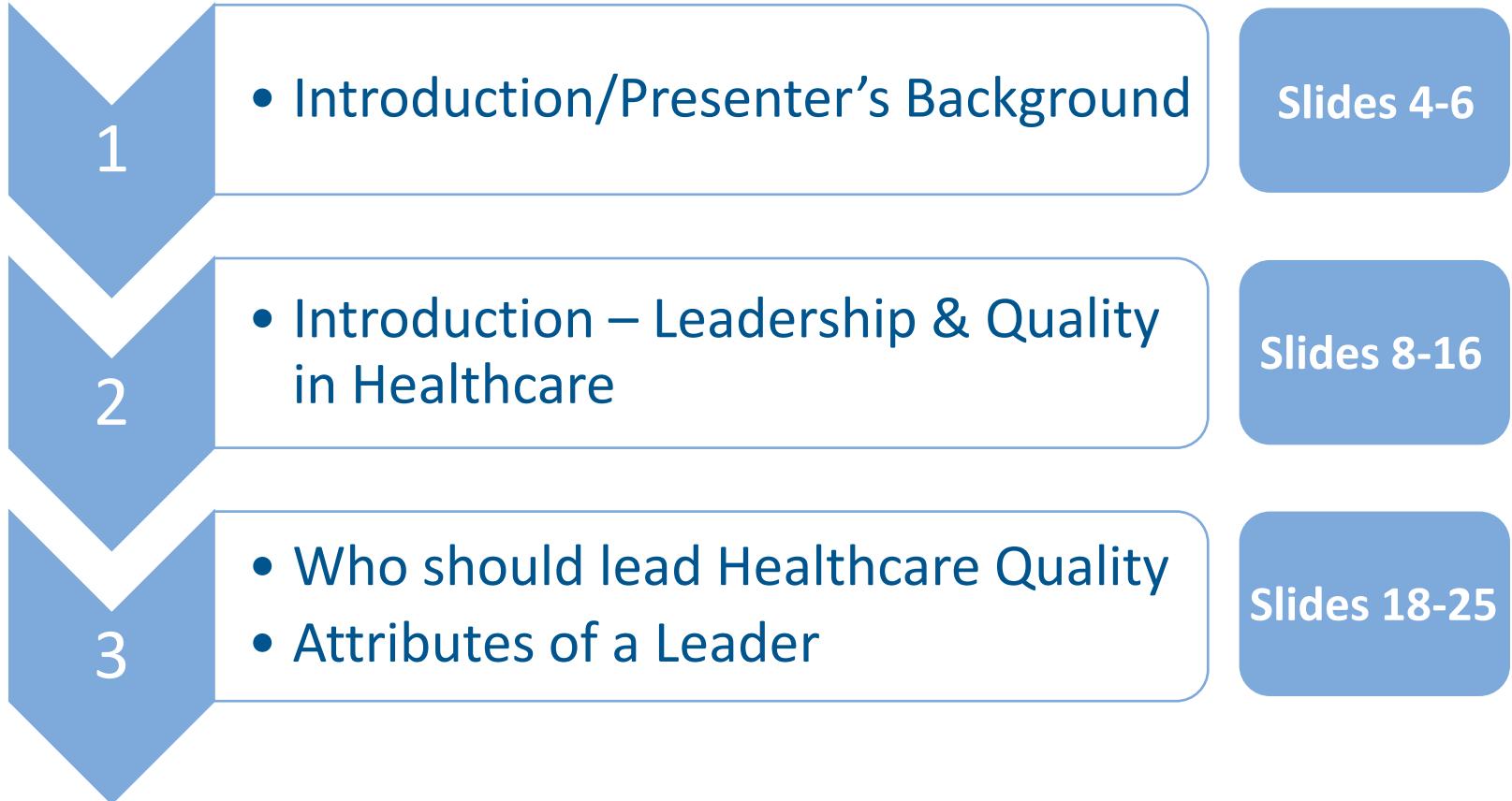
Conference Objectives:

- To understand the effect of internal system operations on quality and patient safety
- How to redesign and align systemic operations to promote quality and patient safety
- Lowering costs and improving outcomes
- Who should lead Healthcare Quality and the attributes of a Leader
- How to manage the process of change in Healthcare Quality

Topics & Presenters

- Logistic Management for Drugs & other commodities – Simbo Davidson
- Cost, Value & Quality – Adebowale Ojekale (QM The Bridge Clinic)
- Leadership & Quality in Healthcare – Dr Dupe Oludipe
- Change Management in Healthcare Quality – Oghogho Olakunrin

Outline





Connecting People to Affordable, Quality Healthcare

The PharmAccess Approach

PHARMACCESS GROUP

PharmAccess
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Health
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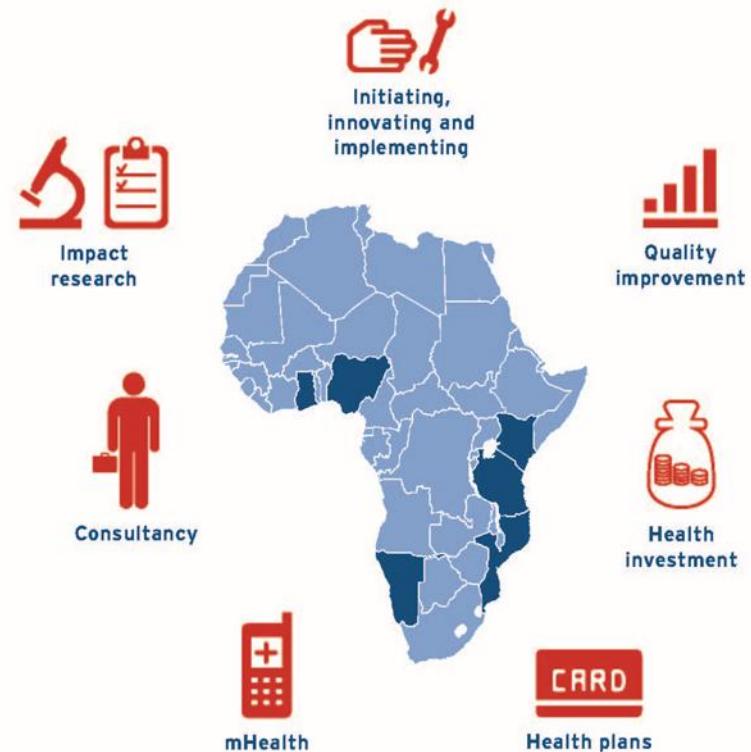
MEDICAL
CREDIT
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AFRICA

SafeCare
BASIC HEALTHCARE STANDARDS

Introducing the PharmAccess Group

- 180 staff, of which 60% in Africa
- 6 offices:
 - Netherlands (Amsterdam)
 - Nigeria (Lagos, Ilorin, Abeokuta)
 - Kenya (Nairobi)
 - Tanzania (Dar es Salaam, Moshi)
 - Namibia (Windhoek)
 - Ghana (Accra)

Summary of Activities



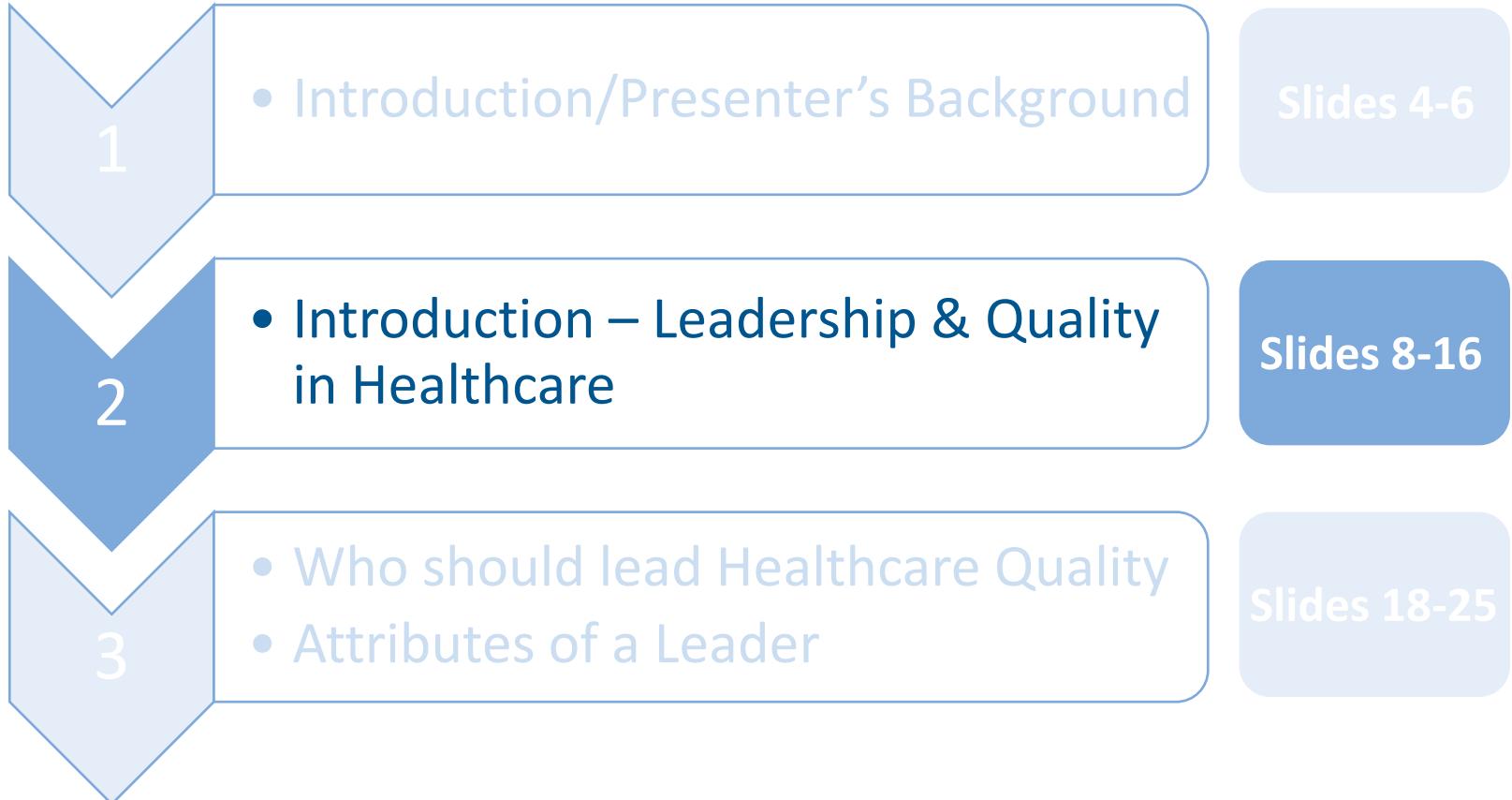


Overview of Projects/Programs

SafeCare Nigeria has transitioned from working with 3 programs/30 facilities/2 states in 2011 to 8 programs/417 facilities/14 states presently.

Projects	# of Facilities	# of Trained Local Facilitators
1. LMW & CAPDAN	16	6
2. Kwara (N,C,S & Scale Up)	41	6
3. SHELL (Niger-Delta & Ogun)	10	60
4. AHME	230	18
5. AHME-DSF	11	18
6. SOMLI-NPHCDA-Sure P	48	17
7. HVN	56	6
8. SafeCare Consultancy	5	0
Total	417	131
Total Presently Active	343	48

Outline



Concept of Quality

- We define Quality based on the “expected attributes” of the item/ product/ service.
- We label that item/product/service as having poor quality when its performance or attributes falls below our expectation.
- For example: how can we identify a good quality wristwatch?

5 sure signs of a Quality Wrist Watch

Its weight

- Heavy is good. Heavy (supposedly) spells reliability. When you put it on, it should feel like a wrist watch and not a toy.

The movement

- If it is not ‘tick-tock’, then it’s suspect material

Swiss branding

- This spells stringent standards have been met – so “Swiss Made” or “Swiss Movement”

Accuracy

- If it can’t tell time accurately, then

Name

- Speaks of the brand and tradition



Concept of Healthcare Quality

- Look at healthcare – what makes a service good quality?
- Good quality service means it met and possibly exceeded our expectations of its content and delivery.
- The expectations of care can be summarised into 11 attributes that define quality of care. These attributes, are called **dimensions of quality**.
- The goal of providing quality care is to improve health outcomes and health system performance.



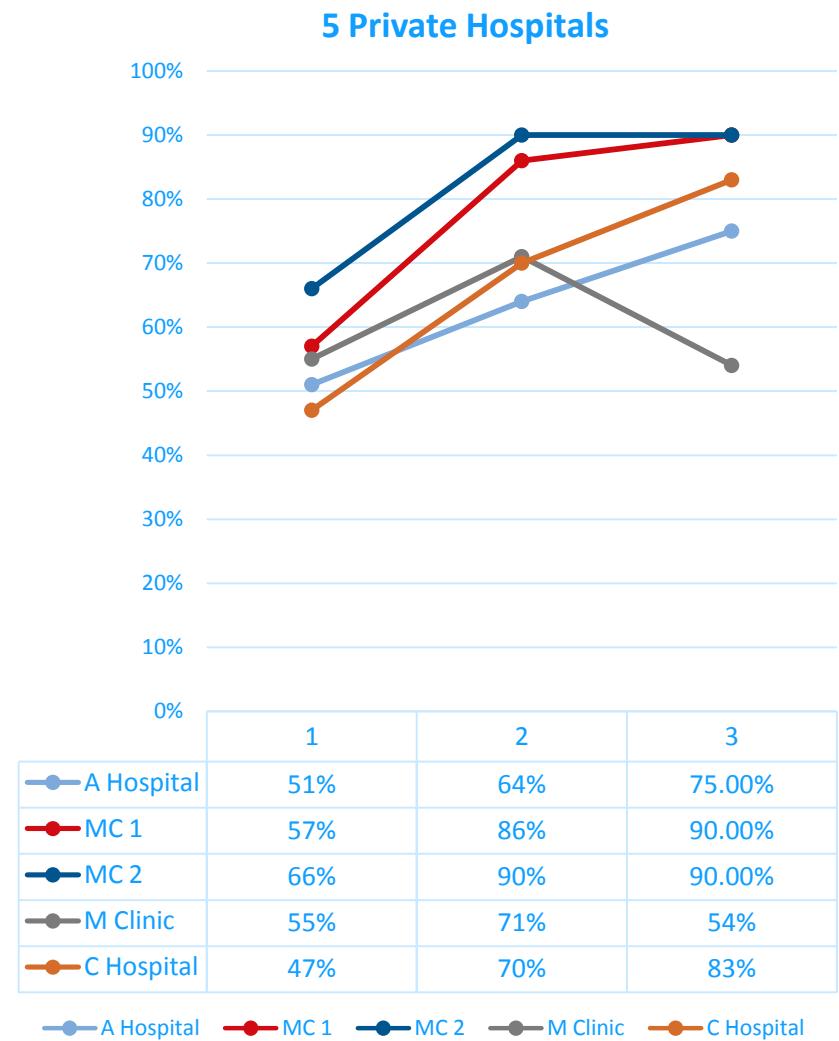
Determining Enablers of Quality Care Delivery - I



- **PharmAccess Foundation** in collaboration with **JCI** & **COHSASA** developed a set of Standards (called the SafeCare Standards) which **addresses all the 11 dimensions of Healthcare Quality**.
- PharmAccess Foundation then went further to get the SafeCare Standards **ISQua certified**.
- Since March 2011 till date, the SafeCare Standards are being used by Healthcare Facilities to guide them in their quest for quality healthcare delivery

Determining Enablers of Quality Care Delivery - II

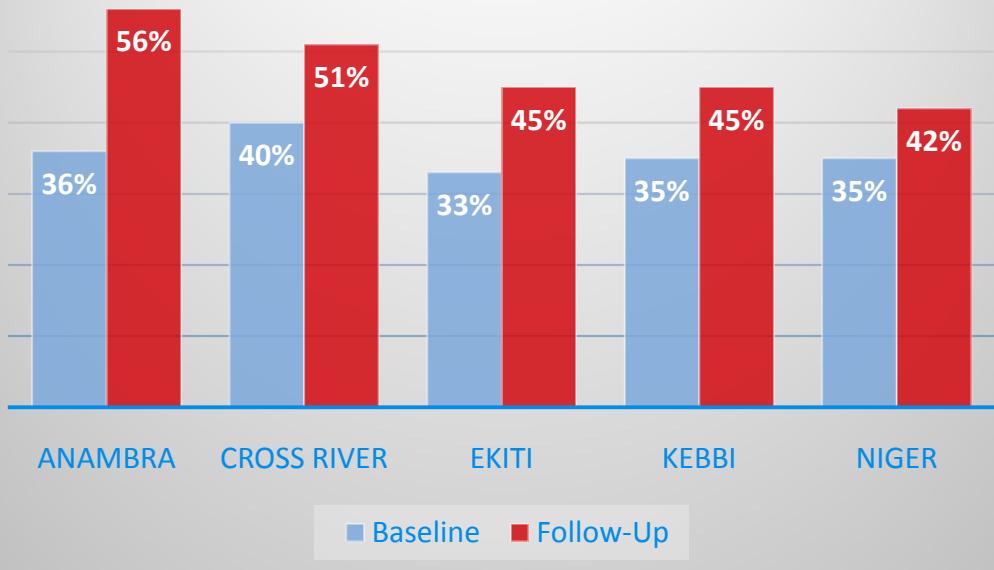
Overview of 7 facilities in Lagos: 2011 - 2013



Determining Enablers of Quality Care Delivery - III



**Quality Improvement achieved per State
(using average overall scores)**



Reasons for Improvement – Success Factors – Quality Enablers

- Cadre of OIC
- Self-driven, motivated OIC & Quality Leads
- Staff cooperation & team work
- Functional WDC
- Enabling environment for implementation
- Low staff turnover

Hitting the mark: Enablers of Quality Care Delivery



Increased Compliance

Safe Care

BASIC HEALTHCARE STANDARDS

- Conducive policy environment
- Leadership (Management team)
- Employee empowerment (requisite knowledge and skills, enabling environment)
- Team approach
- Partnership with clients
- Reliance on data/ evidence-based decision making, not assumptions

The Pivotal Role of Leadership in enabling Quality Healthcare Delivery

Good Leadership is at the centre of the successful implementation of Healthcare Quality

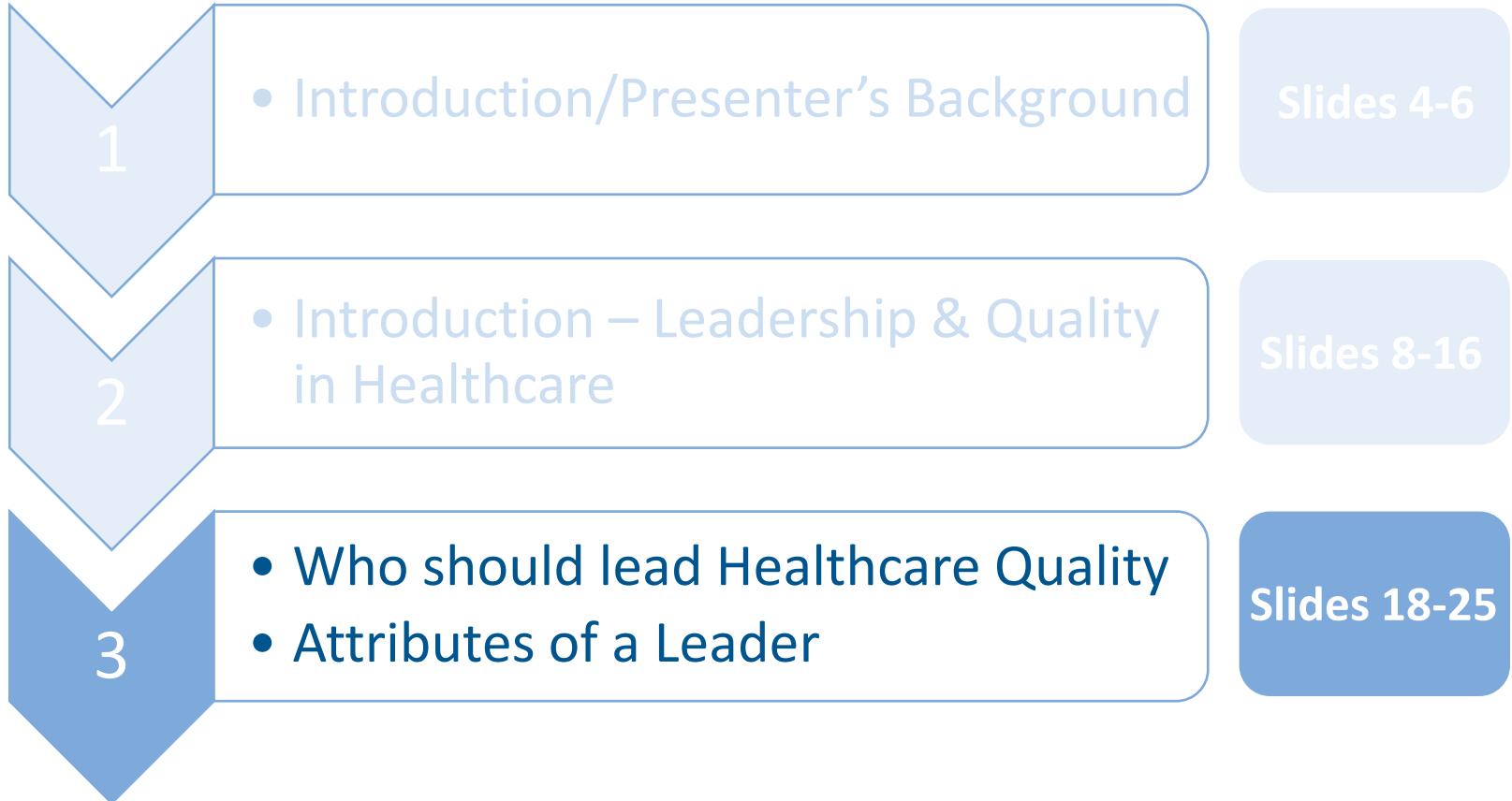
- Ownership/Accountability
- Strategizing & Planning,
- Creating conducive policy environment
- Creating enabling implementation environment
- Resource identification, Resource allocation & Resource mobilization,
- Ensuring Sustainability.



The Pivotal Role of Leadership in enabling Quality Healthcare Delivery

- There is little question about the importance of leadership in influencing healthcare delivery and health outcomes.
- It is generally agreed that healthcare service organizations continue to flourish under great leadership and face considerable difficulty or even fail when leadership is poor (Pointer, *et al.* 1997).
- Leadership exists at every level throughout an organisation and usually includes management tasks.
- To distinguish (if/where necessary) between leadership and management:
 - management is seen as the seeking of order and stability, managing resources
 - while leadership is about influencing for (constructive) outcomes

Outline



Question: Who should lead Healthcare Quality?



Answer: Anyone leading Healthcare Quality must:

- ✓ Understand the concept of quality
- ✓ Understand the concept of Healthcare Quality
- ✓ Know and understand the attributes that define healthcare quality = dimensions of quality
- Must be able to command resources to ensure his organisation addresses the dimensions of healthcare quality to the point that these attributes are met and possibly exceeded (when assessed by all especially the users of the service)
- Must be able to build systems to institutionalize quality, to make QA & QI an integral and sustainable part of the healthcare delivery system.

Leadership vs Leadership Styles - I

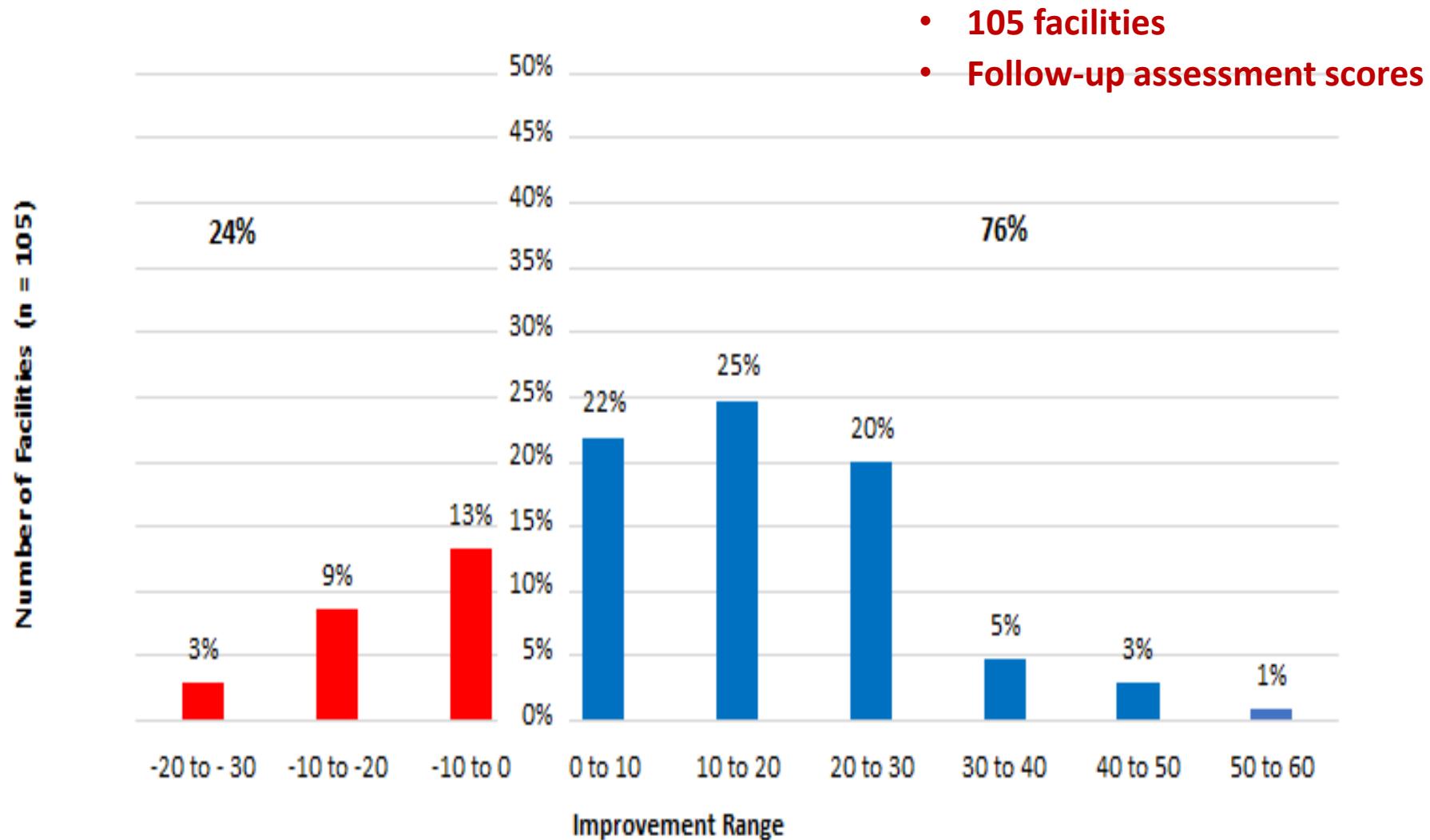
- A leader is an individual who is able to influence the attitude and behavior of others. The key role of a leader is to encourage his followers to accomplish a common goal (Northouse 2010), (Yukl 2005).
- *'Let whoever is in charge keep this simple question in his/her head - not how can I always do this right thing myself, but how can I provide for this right thing to always be done.'* Florence Nightingale (1869)

Florence Nightingale's words are interesting because she had clearly recognized the important role of leadership in influencing the delivery of high quality care through delegation and empowerment.

Leadership vs Leadership Styles - II

- Leadership styles vary but in Healthcare Quality, two take the lead:
 - Transactional leadership and
 - Transformational leadership (Davis, 2003)
- A proficient transformational leader aims to align the needs and aspirations of followers with the desired goals of the organization. In doing so, a transformational leader is able to foster the follower's commitments towards the organization and encourages them to surpass their expected performance.
- While the most prominent aspect of transactional leadership is the focus on the basic physical and security needs of their followers (Bass, 1985). This leadership style leans heavily on the use of rewards or incentives in response to appreciable performances of employees.

Data for Informed Decision-Making



Transformational Leadership Competencies

Five transformational leadership competencies and values:

- **Mastering change:** the capacity to help organizations view change as an opportunity for new alternatives and calculated risk taking.
- **Systems thinking:** the capacity to understand interrelationships and patterns in solving complex problems.
- **Shared vision:** the capacity to craft a collective organizational vision of the future.
- **Continuous quality improvement:** the capacity to engender a ‘never-satisfied’ attitude which supports an on-going process to improve clinical and service outcomes.
- **Serving public/community:** the capacity to wield social mission to organizational goals, objectives and actions.

In conclusion...

Conference Objective: Who should lead Healthcare Quality



Answer: Anyone leading Healthcare Quality must:

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- Must be able to build systems to institutionalize quality, to make QA & QI an integral and sustainable part of the healthcare delivery system.

Conference Objective: The attributes of a Healthcare Quality Leader



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Thank you
www.safe-care.org