

PROJECT OVERVIEW

The EC/ACP/UNFPA SRH project in Tanzania focused on testing an innovative performance-based approach to quality of care piloted in the Quality Improvement and Recognition Initiative (QIRI).

Designed to facilitate improvement in standards of SRH service delivery at public health facilities, project implementation was carried out through the decentralized health system and was aligned to all national and international policy and development frameworks.

The project focused on five districts – two in mainland Tanzania and three in Zanzibar – based on their poor reproductive health indices. Its approach was tested with a view to institutionalizing and up-scaling it to other areas of the country. The Ministry of Health and Social Welfare has fully embraced the initiative, with a view to its integration into regular monitoring and evaluation systems.

The QIRI strengthens systems by fostering improvement in quality service provision and offering a systematic method of measuring the results of that improvement in quality.

Its strategy complemented Ministry of Health and Social Welfare SRH policies and priorities, as well as those of UNFPA and EC/ACP. Additionally, all relevant stakeholders at local, district and national levels were involved, ensuring acceptance and integration of the programme into district health plans. It aimed at filling an important gap, since no national tool previously existed for quality assessment of facility performance.

Use of existing resources to track results and improve health care performance

The QIRI strengthens systems by fostering improvement in quality service provision and offering a systematic method of measuring the results of that improvement in quality. It used existing human resources and systems to build capacity for measuring quality in service provision. Health care clinic performance is tracked across a rigorous set of indicators grouped into six key areas including job expectations; performance feedback, physical environment and tools; motivation; skills and knowledge; and client satisfaction. Performance across all indicators was calculated using a single index score on a 1 to 100 scale. A health facility has to get a QIRI score of 90% and above and maintain that score for at least three successful yearly assessments to be considered a 'quality performing facility', eligible for recognition and awards. Although no health clinics achieved this standard by the project's end, all target districts showed strongly positive trends from a range of 21 to 26.6 at baseline in July 2004 to between 70.6 and 85.3 by September 2006 pointing to a continuous improvement in service delivery over time.

Increasing community mobilization through drama

Involvement of communities through established cultural theatre groups was a highly successful method for transmitting sexual and reproductive health messages to community members. These messages have had an observable impact on their sexual and health-seeking behaviour.

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FACTFILE

Title Quality of SRH Services Delivery

Aim To facilitate improved standards of SRH service delivery at public health facilities.

Duration 44 months: 2003–2006

Budget US\$1.891 million

KEY ACHIEVEMENTS

- ▶ Use of existing resources to track results and improve RH service performance.
- ▶ Increasing community mobilization through drama.
- ▶ Participation and collaboration between multi-level stakeholders.



SUSTAINABILITY

Districts are able to use existing supervision structures to conduct quality assessments. At the same time, at central ministry level, the QIRI tool has been accepted as a means of verification for the National Standards of quality reproductive and child health services. QIRI findings have provided valuable information on performance gaps that have been used as key feedback for districts and rural health centres to improve planning for RCH-related interventions.

Following project completion, the government has continued to defray some of the costs on infrastructure while communities were willingly sharing the cost of operating the vehicles provided by the project in primary health care centres. The government has continued to undertake building maintenance in project service delivery centres as well as undertaking new constructions (Kivunge hospital and Matwemwe and Tumbatu primary health care units in Zanzibar in partnership with France).

The use of community-based theatre groups to empower people with quality health information will have a long-term impact as the project not only respected local cultural contexts, but also facilitated capacity building using existing systems.

The district cultural officers and RCH coordinators were joint supervisors of the theatre groups, thus complementing their skills and ensuring planned awareness activities were firmly grounded in local settings. In all project sites (mainland and Zanzibar) the theatre groups were used in other local and national events to deliver health messages. National HIV testing campaigns in the mainland have benefited significantly from these cultural groups.

Community involvement occurred at all stages of the project cycle through the primary health care centres and selected community members.

Participation and collaboration among multi-level stakeholders

The project actively involved participation and collaboration across government, private sector actors and local communities. Strong in-country partnerships were fostered with government, local authorities and local communities building national ownership. Community involvement occurred at all stages of the project cycle, particularly at the planning and implementation stages through their representatives in the primary health care centres and selected community members. This partnership was encouraged by planning with district authorities and linking planned district interventions with the main Country Programme support to human resources to complement the efforts of other partners. As a result, districts have entered QIRI-related activities in their 2007–08 Council Comprehensive Health Plans (CCHP) as seen in Singida Rural, Manyoni, Unguja and Pemba districts. Integration of project activities into CCHPs has helped ensure that new projects have district level financial commitments to ensure sustainability.

LESSONS LEARNED

DANIDA has begun to support the scaling-up of QIRI across Zanzibar through its Health Service Assistance Fund channeled through districts. As a result, all districts have already conducted baseline QIRI assessments and district annual plans currently include QIRI as an important health care quality improvement and monitoring tool. UNFPA could play an active role to support effective scaling-up in Zanzibar. Furthermore, UNFPA and the Ministry of Health and Social Welfare in mainland Tanzania could explore avenues for scaling-up QIRI interventions, in a stepwise manner, to allow more contextually relevant lessons to be drawn from its implementation.

The QIRI has initiated a process with the potential for sustained strengthening of the Tanzanian health system in terms of quality of services delivery. The Ministry of Health and Social Welfare Reproductive and Child Health Sections as well as the Tanzania Quality Improvement Framework (TQIF) Section should lead the process of learning from QIRI as well as other quality improvement initiatives in Tanzania, so that a standardized approach to improved quality of health systems can be identified.

The success of this project provides a good case for the government and other SRH stakeholders to consider further scaling-up of QIRI to other districts in Tanzania. This could be achieved if SRH is considered as a priority in the Health Sector Strategic Plan III and in the Medium Term Economic Framework. Reproductive and Child Health Sections of the Ministry of Health and Social Welfare have clear advantages and experience in leveraging donor support for SRH interventions to improve performance and management for quality health care provision in Tanzania. UNFPA will play a key advocacy role in making sure that SRH is made a priority component of the Health Sector Strategic Plan.



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