



USAID
FROM THE AMERICAN PEOPLE

AFGHANISTAN

Strengthening Referral Hospitals in Post Conflict Afghanistan

**Rural Expansion of Afghanistan's Community-based
Healthcare (REACH) Program**

A. Frederick Hartman MD MPH; M. Dad Shinwary MD;

W. Newbrander MHA PhD; Sallie Craig Huber MSPH

Management Sciences for Health

APHA Annual Meeting

November 7, 2007

Health Statistics in Afghanistan, 2004

- Maternal mortality: 1,600/100,000
- Infant mortality: 121/1,000
- Child mortality: 265/1,000
- Total Fertility Rate: 6.26
- Population Growth Rate: 2.5%
- Contraceptive Prevalence Rate: 10%
- One of 5 countries still having wild polio virus
- 70,000 new cases of TB/year; 2/3 women



Source: Afghanistan Health Fact Sheet 2004

Contextual Challenges

- Inaccessibility (geography, climate)
- Security
- Ethnic and culture diversity



Health Systems Challenges

- Limited basic *infrastructure*
- Lack of *depth* in management and technical expertise
- Lack of *data* on health status, knowledge, attitudes and practices
- *Balancing* tertiary and primary services
- Donor/partner *coordination*

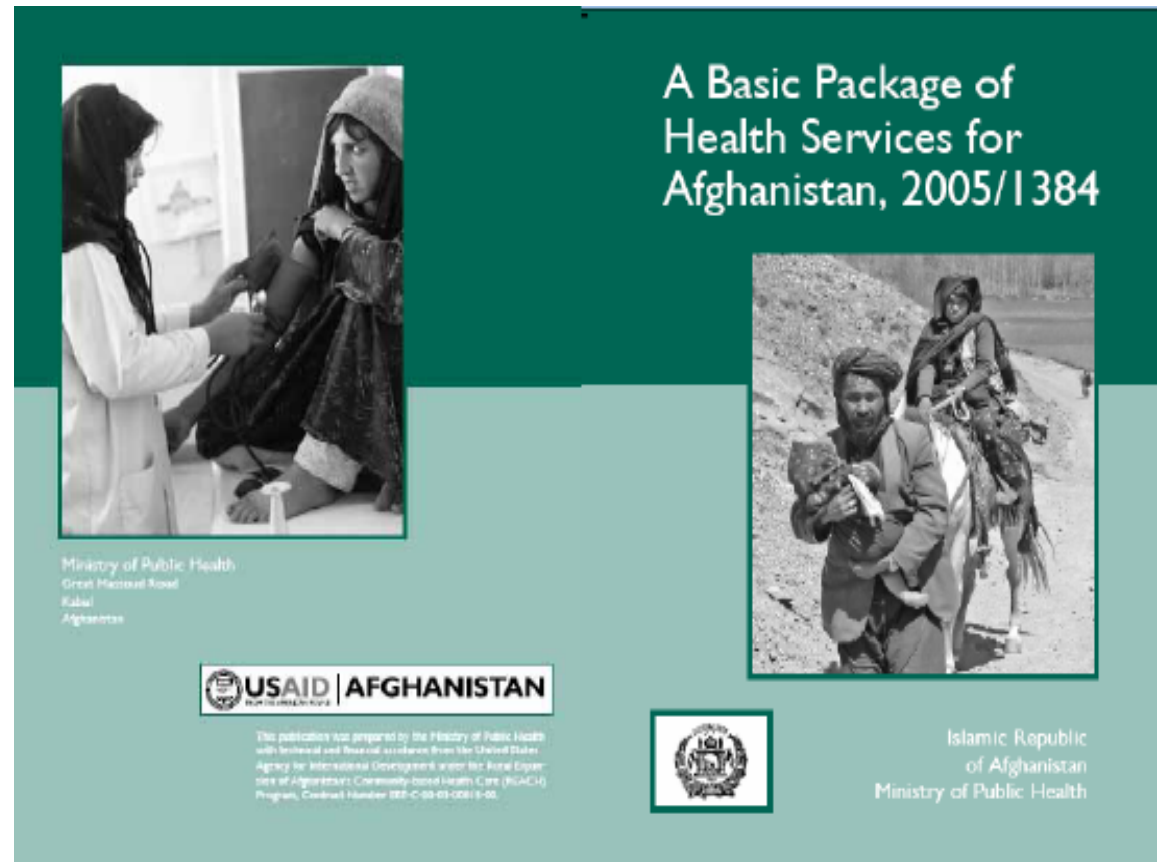


Key Policies: 2002-2006

- Contracting out services to NGOs
- Basic Package of Health Services (BPHS)
- Essential Package of Hospital Services (EPHS)
- Supplementary policies: maternal health, child health, health financing, disease surveillance and control

Contents of the BPHS

- Maternal and newborn health
- Child health and immunization
- Public nutrition
- Communicable diseases
- Mental health
- Disability
- Supply of essential drugs



Types of Basic Health Facilities



Health Post



Basic Health Center



Comprehensive Health Center



District Hospital

Expanding Coverage Of Health Services

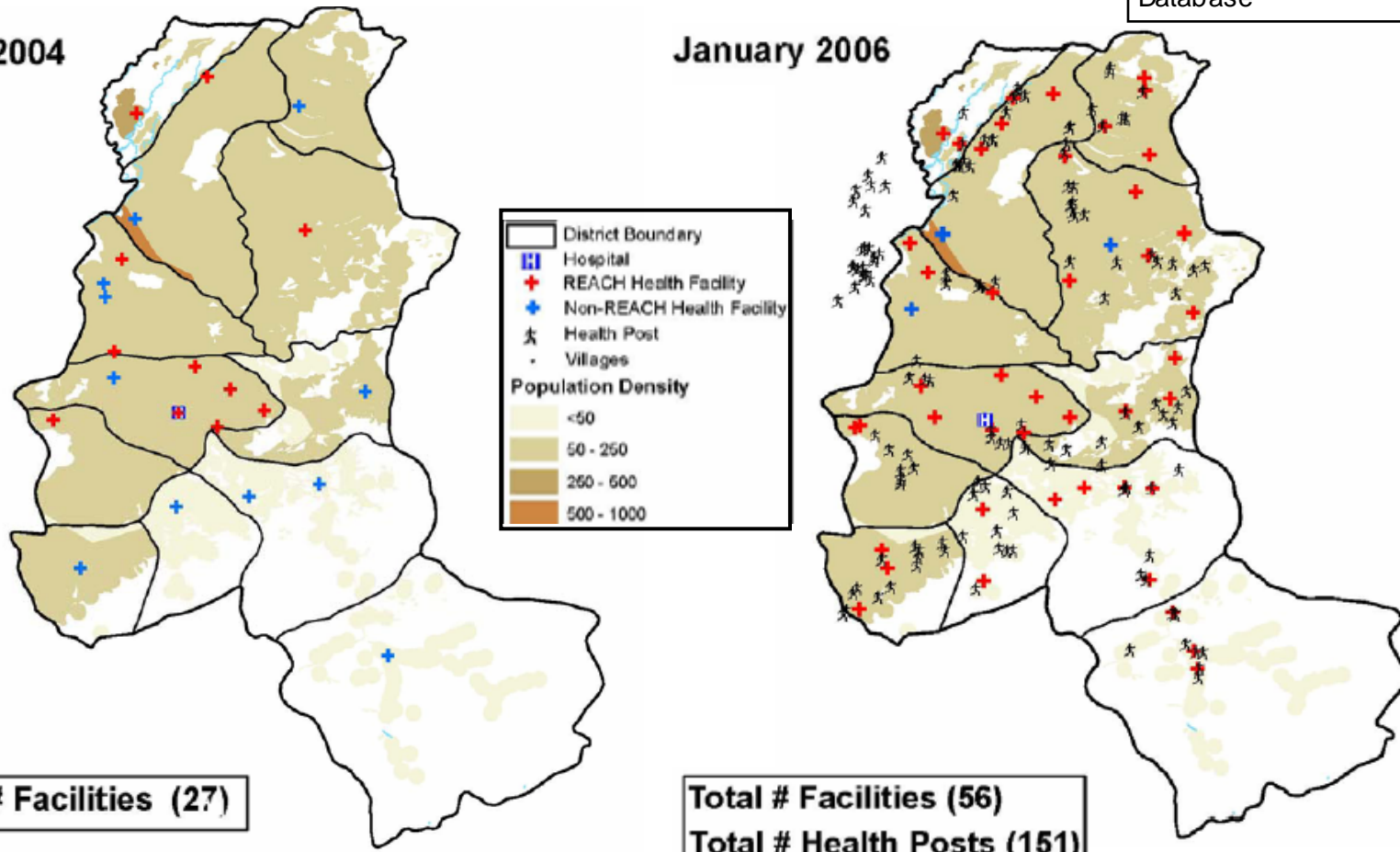
Status of Active Health Facilities in Takhar

Data Sources

MOPH National HMIS Database
REACH Grant Management Database

January 2004

January 2006



Total # Facilities (27)

Total # Facilities (56)
Total # Health Posts (151)

Essential Package of Hospital Services

- Standardizes hospital services by level (Central, Regional, Provincial, District)
- Allows rational planning of staffing, equipment, formulary and supplies.
- Establishes national policy for hospital standards at each level
- Establishes policy for future hospital accreditation based on these standards

Hospital Management Improvement Initiative

Objectives

- To develop standards for hospitals in both clinical and management areas
- To develop a methodology and tools that can be applied to other hospitals
- To improve the quality of hospital care at all levels
- To strengthen the referral system

Standards-based Management Performance Quality Improvement

- Standards developed for both clinical services and hospital management*
- Participatory process involving international experts and Afghan providers
- Baseline survey of standards achievement in 5 provincial hospitals as initial field test
- Recurrent surveys over 3 years (2004-2007) to measure progress

*Adapted from the Emergency Obstetric Standards originally developed by JHPIEGO

Hospital Standards

Clinical

- Essential Obstetric Care
- Surgery and Emergency Care
- Anesthesia and Post-anesthesia Care
- Pediatrics
- Internal Medicine
- Infection Prevention

Management

- Community Boards
- Human Resource Management
- Hospital Maintenance
- Pharmacy
- Blood Bank
- Laboratory

Management Standard-Pharmacy

Performance Standards for Hospitals: Hospital Pharmacy – Afghanistan

Identification of health facility (name and place): _____

Date of visit: _____

Individual responsible for visit: _____

Area: Hospital Pharmacy

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
Ordering of drugs and supplies			
1. The drugs and supplies needed are ordered in a timely manner and are based on usage and expected needs of patients.	Verify the existence of <ul style="list-style-type: none"> • Date of drug delivery for each item • Frequency of distribution of drug orders • Calculation and use of lead time in ordering and receipt of drug shipments to determine when drugs are to be ordered • Calculation of Average Monthly Consumption (AMC) • Take into consideration stock out periods when calculating the AMC • Calculate the Maximum Stock by multiplying the AMC by the Maximum Stock Factor • The Maximum Stock has been calculated for each item in the store • The Maximum Stock is recorded on each item's stock card • Place your order when the stock balance is less than the Maximum Stock • When order, use the Quantity to Order 	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____	

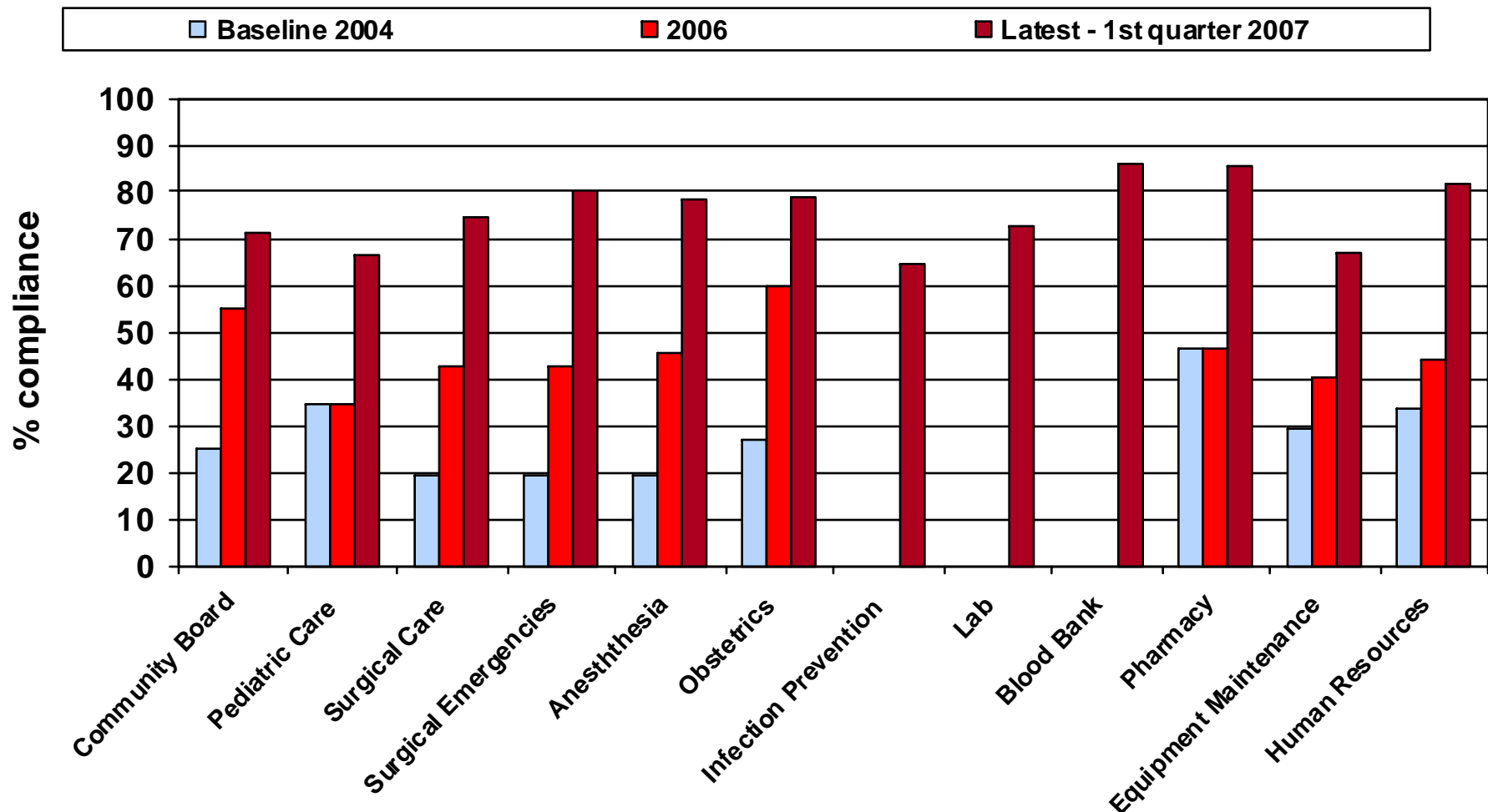
Mentoring: Action Plan Follow-up

Action Plan:		Followed up in February 2005										
Ghazni Provincial Hospital												
Components: Human and Physical Materials for Labor and Delivery												
Objectives	Evidence of Achievement	Activities	Resources needed (Human financial, Materials)	People responsible	Timeline							
					1st Quarter			2nd Quarter		3rd Quarter		
					Months							
					1	2	3	4	5	6	7	
Child specialist	N. Available	New appointment /recruitment	HRD MOH	PHD		u.pro		ok				
		training of MO's	do	do			p.p		May			
Air conditioner /Fan and/or workers at reception	N. Available	Procure	T.F Assistance	PHD- MOH					ok			
Benches	Less in number	Procure	T.F Assistance	Grantee				ok				
Goose neck lamp	N. Available	Procure	T.F Assistance	PHD- MOH Ip Grant				ok				
Screens for Mothers	N. Available	Procure	F. Assistance	PH, IP	u.pro			March				
Ladder for Patient	N. Available	Procure	F. Assistance	Admin , IP		done						
Alternate delivery . area	N. Available	Allocate area, procure	clean delivery kits	Admin , IP	u.pro		March					
20 delivery kit	N. Available	Procure	T.F Assistance	PHD/IP	u.pro			April				
Amniotic reputer kit	N. Available	Procure	T.F Assistance	PHD/Admin		n.d		April				
Measuring tape	N. Available	Procure	T.F Assistance	PHD/Admin		done						
Card Clamp/threads	only threads	Procure/U.cords	T.F Assistance	PHD/IP		done						
Elec./Manual suction appts.for aspiration	NA	Procure	T.F Assistance			p.d						
soap, Antiseptic	N. Available	Procure	F. Assistance	PHD/IP	done							
EOC	N. Available	equiped	F. Assistance	PHD/IP			pre.p		May			
Heated crib	N. Available	procure	do	do							June	
Aspirator	N. Available	do	do	do				ok				
Anesthesia Machine	N. Available	do	do	do						ok		

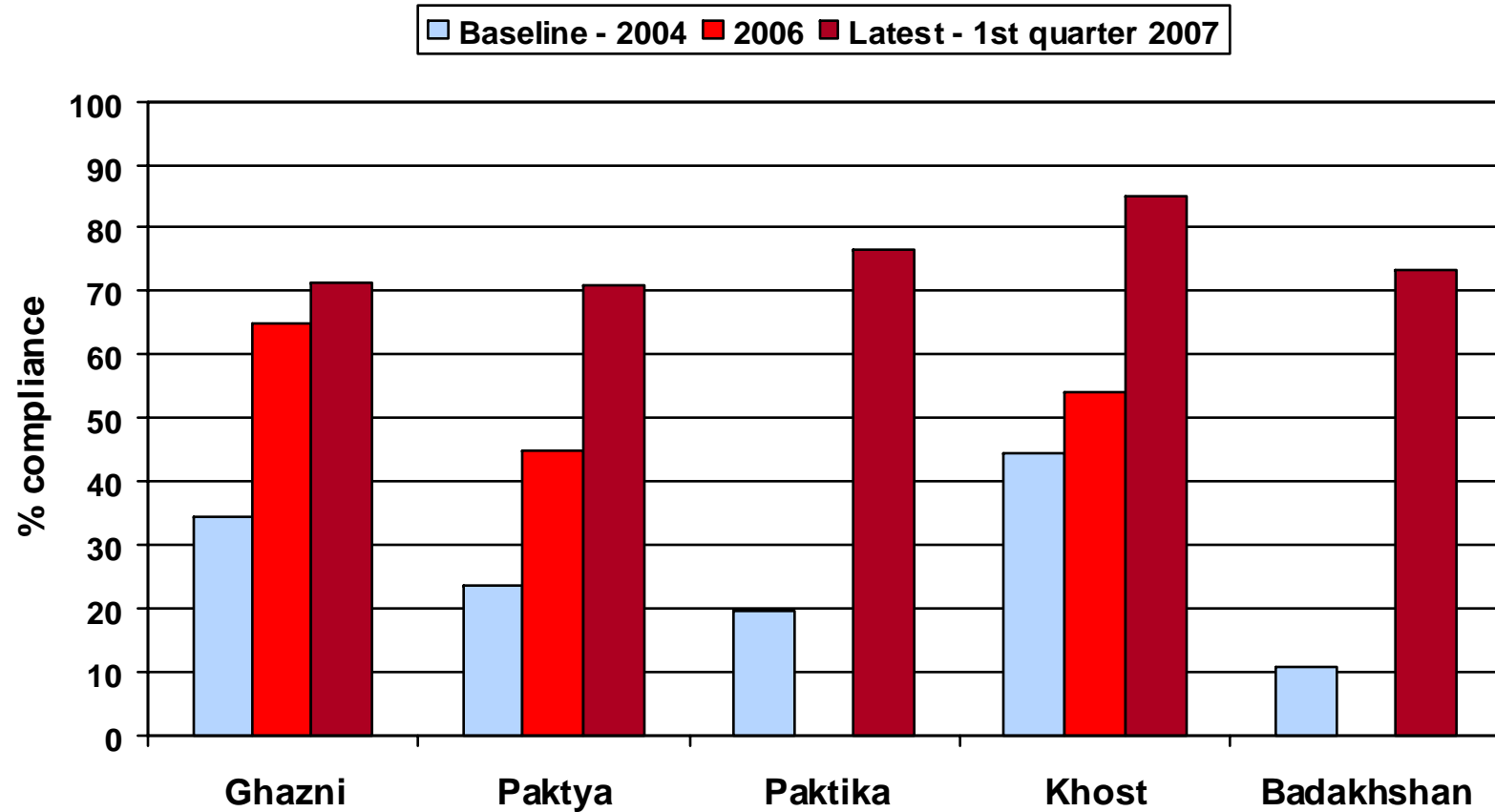
Mentoring: Action Plan Follow-up

Action Plan Form		Followed up in February 2005														
Ghazni Provincial Hospital																
Components: Management system																
Objectives	Evidence of Achievement	Activities	Resources needed (Human financial, Materials)	People responsible	Timeline											
					1st Quarter			2nd Quarter			3rd Quarter			4th Quarter		
					Months											
					1	2	3	4	5	6	7	8	9	10	11	12
list and duty roosters of MO's	N. Available	Duty rooster sign board	T. Assistance	PHD/P Admin ND	done											
Map of Hospital	N. Available	Repared and drawan	F. Assistance	PHD/P Admin ND		u.pro										
I/C HMS	N. Available	recurete	F. Assistance	PHD/P Admin ND		u.pro										
Shelves	N. Available	procure	F. Assistance	Admin		u.pro										
Coding file	N. Available	Prepare	F. Assistance	Admin PHD/P		p.p										
HMS office	N. Available	allocation room	F. Assistance			u.pro										
Weekly surveillance meetings	N. Available	Implement	T. Assistance, training MOH	i/c HMS Admin		u.pro										
Action plan (obqvn)	N. Available	Prepartion	T.Assistance	H of ward	done											
assesment of action plan	N. Available	Preparation	T.Assistance	H. of ward												
complaint/sugesion box	N. Available	procure	F. Assistance	Admin		done										
Graphics show	N. Available	procure	F. Assistance	Admin		u.pro										
Implementation of action plan based on complaints	No Action	implimention	F. Assistance	PQT team ,head of wards	u.pro											
referral system	No system in place	Establish the system design form prepare R/R	T.F Assistance specific. Form MOH	PHD Admin IP. H. Wards		u.pro										

Compliance with National Standards- Five Provincial Hospitals



Compliance with National Standards- Five Provincial Hospitals



Raising the Bar to Improve Hospital Quality

BEFORE



Photo: Fred Hartman

Above
Badakshan Provincial Hospital under construction

AFTER



Photo: Fred Hartman

Above
Badakshan Provincial Hospital after construction improvements



Photo: Fred Hartman

Above **Badakshan Provincial Hospital used tents as temporary wards during construction**

Raising the Bar to Improve Surgical Quality

BEFORE



Photo Fred Hartman

Above
Surgical theater in Ghazni before implementation of hospital and surgical standards

AFTER



Photo Fred Hartman

Above
Surgery in Khost Provincial Hospital after surgical standards had been implemented

Lessons Learned

- Innovation in combining clinical and management improvements
- Post-training mentoring and networking among hospitals is essential to success
- Setting standards and establishing PQI teams helps sustain improvements
- Measurable improvement motivates staff for further improvement
- Provision of equitable pay, essential equipment, supplies and medication, and facility renovation to support management improvement is essential