Recommending and Implementing Solutions

Day 2 Session 4

Session Objectives

- Learn how to prepare SMART recommendations to address modifiable factors that lead to preventable neonatal deaths and stillbirths

- Learn how to disseminate recommendations from review meetings

- Learn how to implement changes at the health facility level

- Learn factors responsible for success of perinatal death reviews

Introduction

- Perinatal death audits may be a useful tool for reducing stillbirths and neonatal deaths in facilities

- Can improve QoC, as long as the audit loop can be closed

- When successful, audits can result in a 30% reduction in perinatal deaths

Recommending Solutions

- As data and trends are examined- patterns of problems become evident

- Moving from *problems to solutions is key*

- Solutions are dependent on:

  - Individuals responsible for the investigation

  - Breadth of stakeholder involvement

  - Level of development and local resources

- Committees need the authority to determine what mixture of relevant and effective strategies

- What are evidence based strategies required to address the main gaps in care that have been identified in the review process?

- *What went well and what could have been done better?*

Recommending Solutions

- Solutions should always be SMART

- Assigning a designated person is

- A formal platform where review findings are presented should be created, if such a platform does not exist

- Meeting minutes - essential and follow up on action items

- Possible solutions include interventions at the level of health worker, health facility, wider health sector, at the level of families or communities.

- Facility based QI approaches are needed to bring about changes in clinical practice or modification of services at the level of systems for e.g.: how to provide the necessary drugs or coverage of trained personnel or establishment of clinical guidelines

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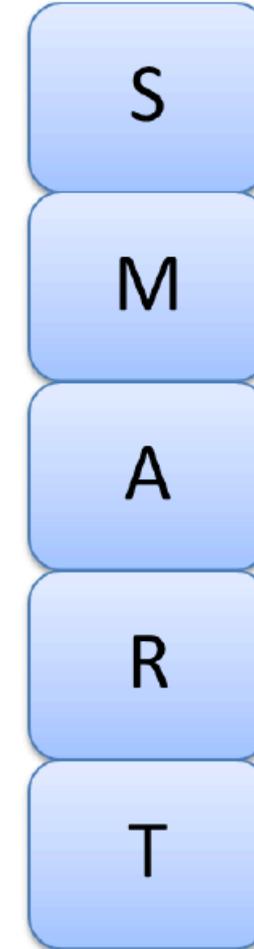
- **Specific**
  State exactly what you want to achieve. Can you break a larger task down into smaller items?

- **Measurable**
  Establish clear definitions to help you measure if you're reaching your goal

- **Action-Oriented**
  Describe your goals using action verbs, and outline the exact steps you will take to accomplish your goal

- **Realistic**
  Give yourself the opportunity to success by setting goals you'll actually be able to accomplish. Be sure to consider obstacles you may need to overcome.

- **Time-Bound**
  How much time do you have to complete the task? Decide exactly when you'll start and finish your goal.

Recommending Solutions

- Use findings to create a list of possible actions (during the review meeting)

- Prioritize problems on the basis of the significance of their effect on prognosis, and on the feasibility of the actions necessary to solve them

- Recommendations:

  - Health care provider (improved clinical practices)

  - Health system (improved availability of drugs and commodities)

  - Clinical governance (strengthen clinical guidelines)

Dissemination of Review Findings

- Important at multiple levels

- Audience: Anyone that can implement recommendations or make a difference towards improving quality of care

- Periodic reports – clear, easy to follow language, standard sections such as data audit trends covering births and deaths, causes and modifiable factors, recommendations and solutions enacted

- No blame and no link to individuals involved in care provision

- Context specific: Newsletters, email listserv, whatsapp groups

- Positive vignettes may also be useful for e.g.: cases of a near miss that were prevented because of an action developed by the audit committee.

Implementing Change- 1

- Taking action and implementing change is the entire reason for implementing the audit cycle

- Develop SMART recommendations
    - Immediate term: provider related - improving staffing ratios
    - Medium term: improved logistics supply, establish clinical guidelines.
    - Longer term: patient education, improved infrastructure or transport

- Who is responsible for implementing and monitoring change- maybe more than one person

Implementing Change- 2

- Start with things that are easily achievable

- Use audit meetings as advocacy tools to prompt administration to further action

- Modifiable factors within the control of health workers (detailed history taking, partograph use)

- Modifiable factors within the control of managers (ambulance availability, lack of equipment or supplies)

- Follow up on implementation of recommendations and monitor changes over time

- Celebrate success and identify successful changes whenever they occur

Keep Learning from Excellence

- Analyzing cases from pre-conception to bereavement care will identify areas of good practice

- Important to highlight and recognize these areas amongst staff and across wider hospital teams

- Formal process to share stories of excellent care are useful

- Compendium of successful stories

- Use successful stories for advocacy

Factors for Success

Proactive institutional ethos that promotes learning as a crucial part of improving QoC

Supportive political and policy environment at the national or the local level

▪Individual responsibility and a sense of ownership

Leadership at all levels

A skilled, independent and respected chairperson who is a champion for the process

Task oriented meeting minutes: recommendations, suggested actions and focal person

Starting with things under health worker control

Following up on items that have not been completed

Staff stability

Good communication between departments

Celebrating progress as and when it occurs