

Driving Change through Quality UHC

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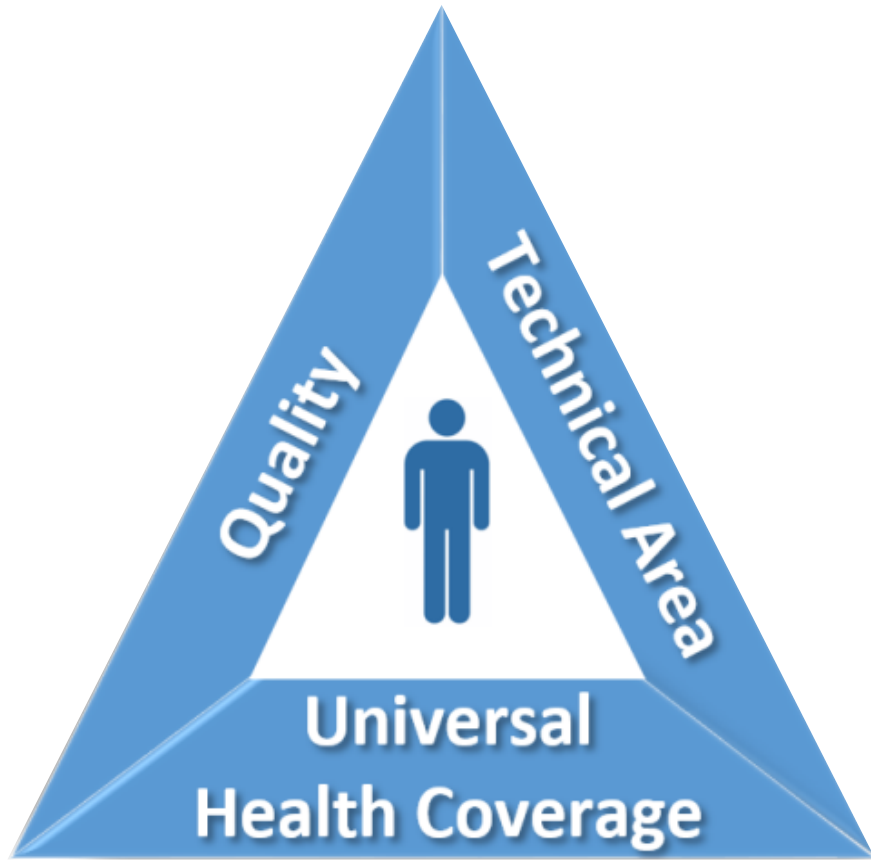
Strategic Review & Planning
Water, Sanitation & Hygiene in Health Care Facilities
London

March 23, 2016



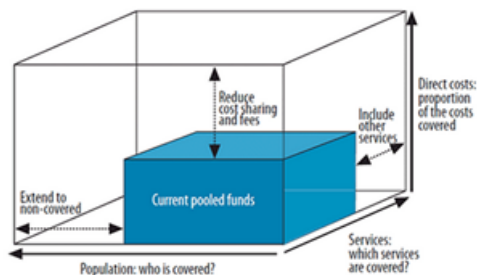
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Triangulation for Change



Point 1: Ensure quality in the UHC equation

Universal Health Coverage What's in the Cube?



Three dimensions to consider when moving towards universal coverage



But look at the cube again...

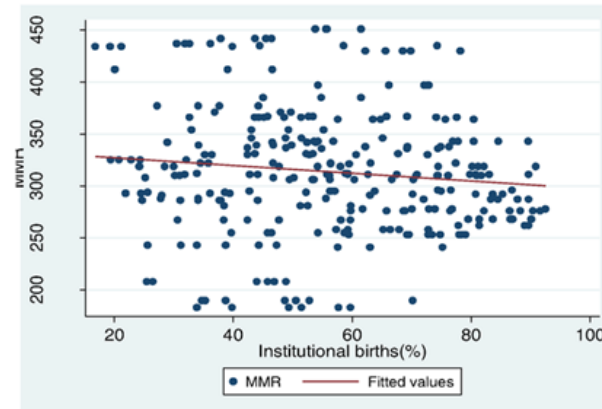
"What good does it do to offer free maternal care and have a high proportion of babies delivered in health facilities if the quality of care is sub-standard or even dangerous?"

Margaret Chan,
World Health Assembly - May 2012

Towards universal coverage



Figure 3. plot of MMR and proportion institutional births.

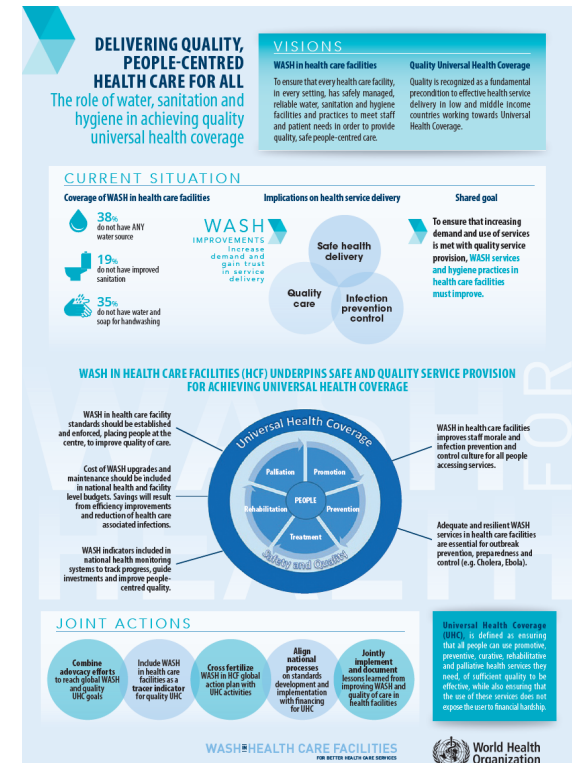
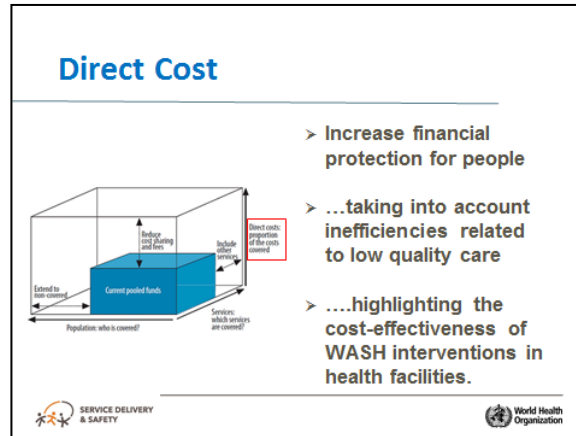
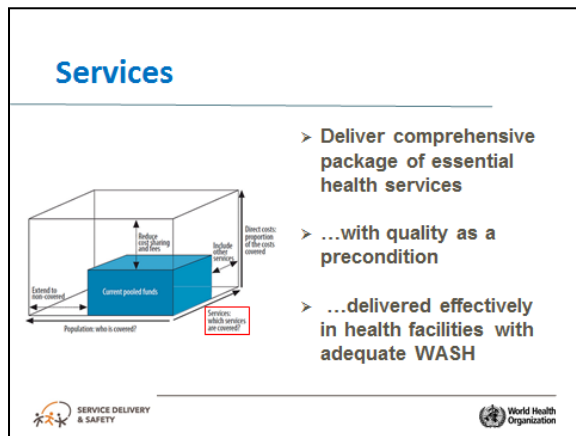
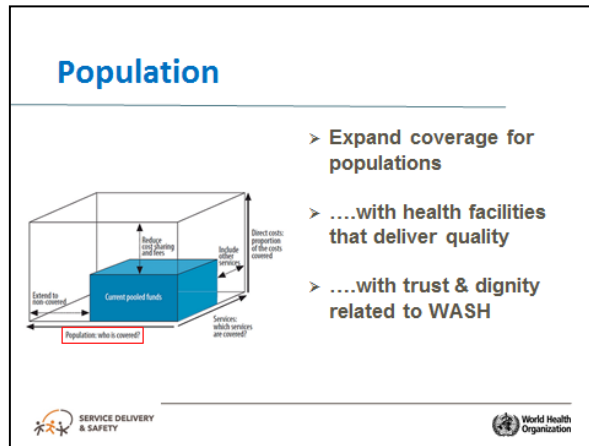


Randive B, Diwan V, De Costa A (2013) India's Conditional Cash Transfer Programme (the JSY) to Promote Institutional Birth: Is There an Association between Institutional Birth Proportion and Maternal Mortality? PLoS ONE 8(6): e67452. doi:10.1371/journal.pone.0067452
<http://journals.plos.org/plosone/article?id=info:doi/10.1371/journal.pone.0067452>



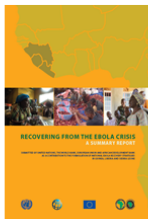
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Point 2: Stay concrete!



Point 3: Link Global Drive with Local Action

Ebola Recovery Assessment



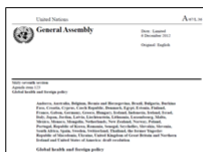
- Complex multi-sectoral recovery processes requiring national & regional implementation approaches.
- Making the case for health services within a wider context of national recovery with multiple agencies.



Global Work on Ebola Early Recovery



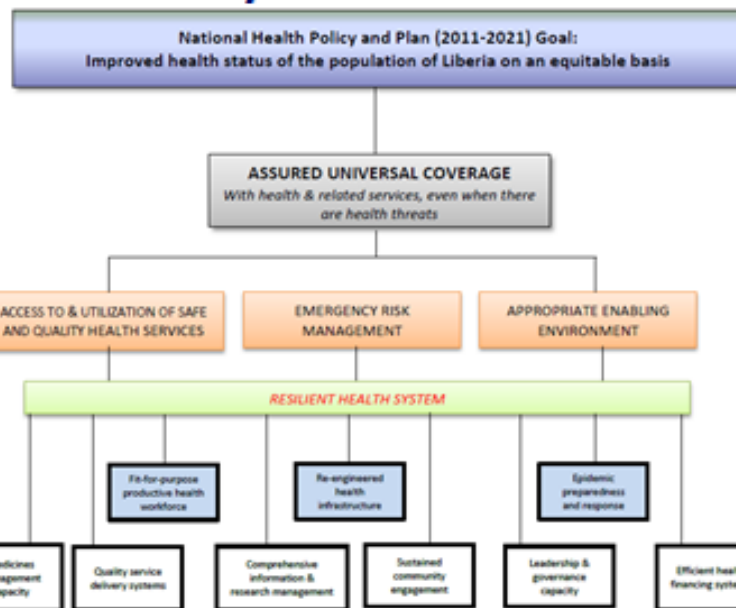
Global Political Will at Highest Level



21. Encourages Member States, in collaboration with other stakeholders where applicable, to plan or pursue the transition of their health systems towards universal coverage while continuing to invest in and strengthen health delivery systems to increase and safeguard the range and quality of services and to adequately meet the health needs of the population

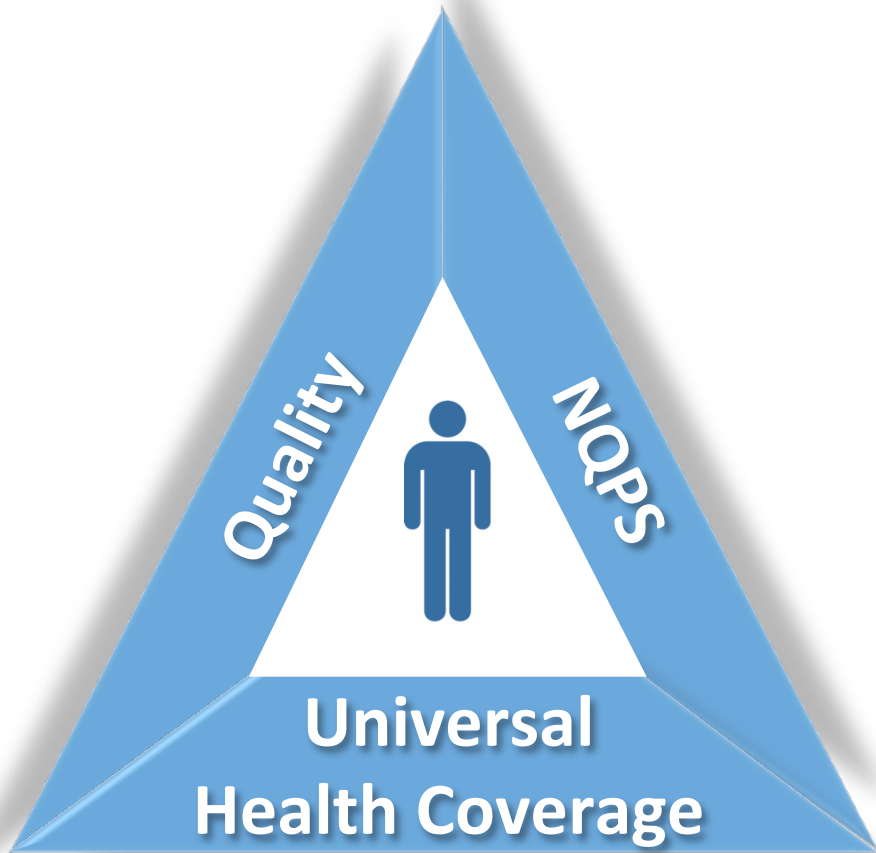


Investment Plan for Building a Resilient Health System: Liberia



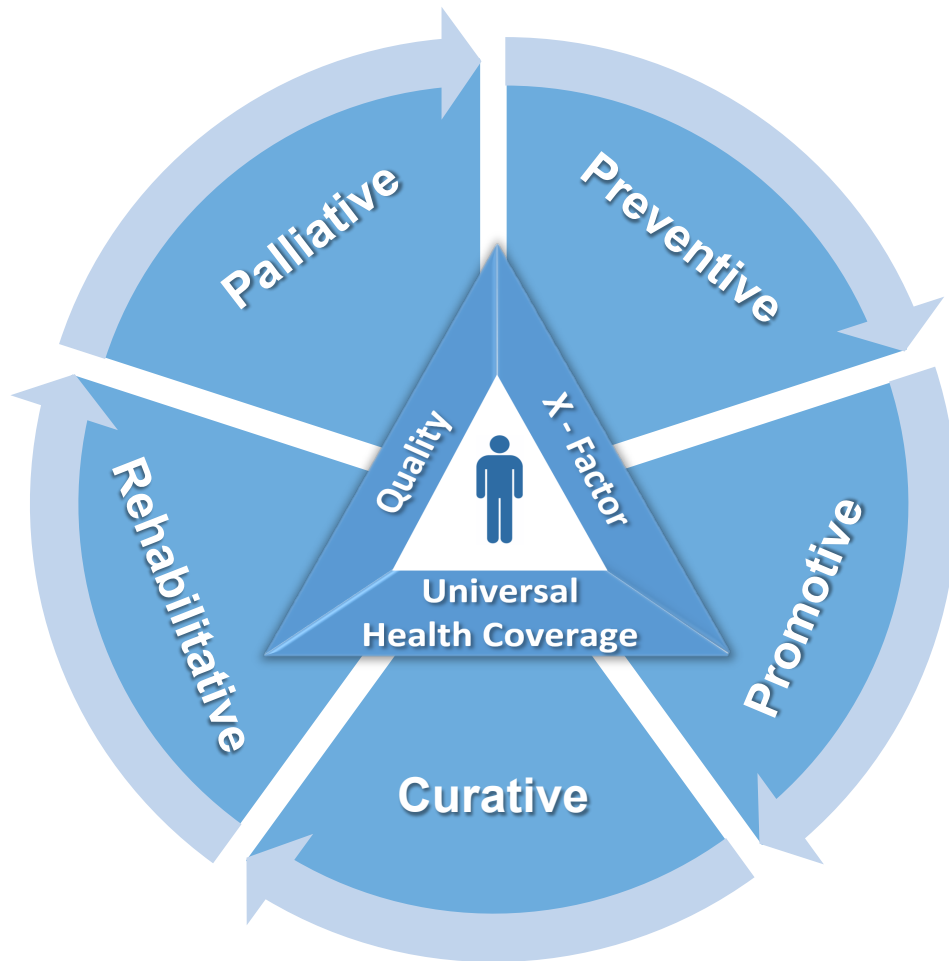
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Point 4: Support National Quality Policy & Strategy Informed by the Front Line



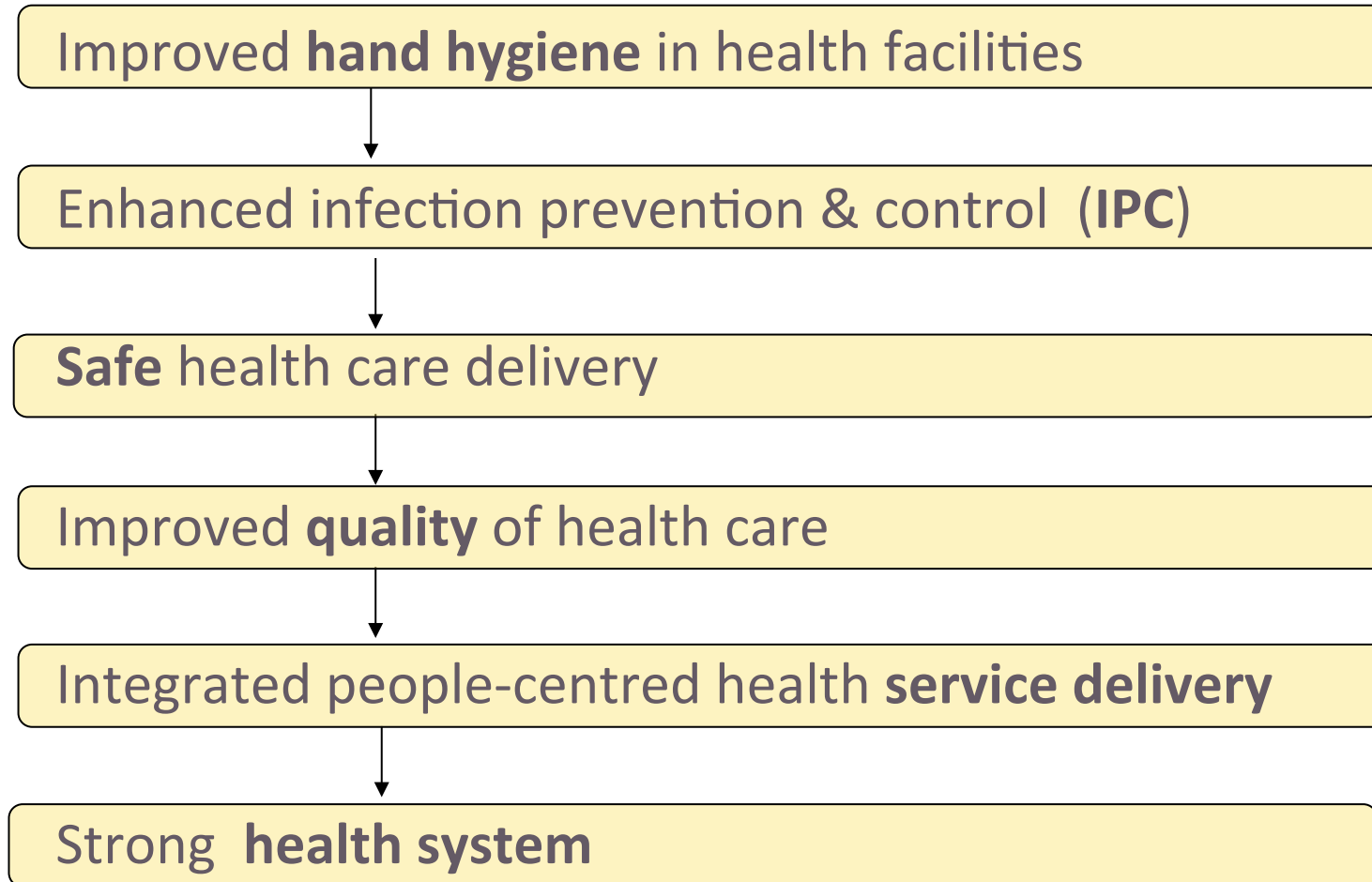
- **Encourage** Member States to embed quality within national efforts to move towards UHC.
- **Build** the global knowledge-base for national quality policy & strategy development.
- **Cooperate with** Member States to activate quality policy & strategy.

Point 5: Develop a Global Learning Laboratory



- Capture, share and activate best approaches in achieving quality UHC from front-line.
- Co-develop thinking within and across countries for "knowledge activated systems".
- Engagement of front line providers, administrators, advocates & experts.
- **"Learning Pods" on specific triangulations e.g. UHC-quality-WASH**

The improvement continuum...focused clinical intervention to strong health systems

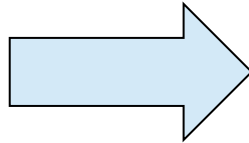
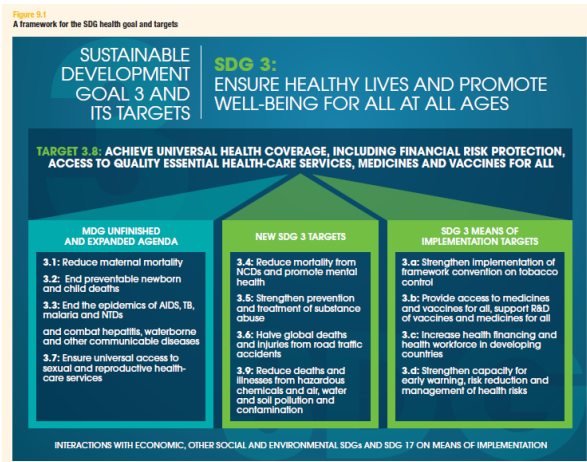


WASH



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UHC & Quality at WHO



New WHO Unit on UHC & Quality

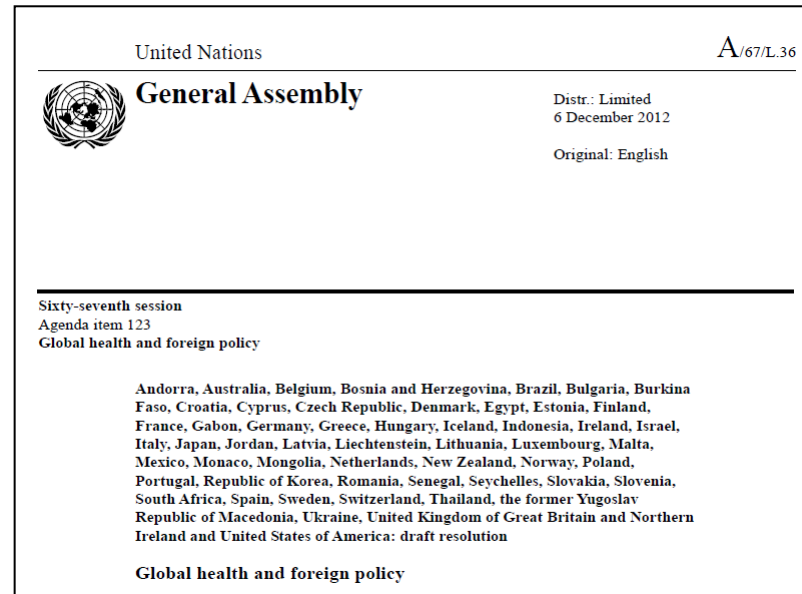
Within the WHO Department of Service Delivery & Safety in the Health Systems & Innovations Cluster

To work on three technical areas:

- Area 1:
Country engagement & global frameworks
- Area 2:
Health service resilience
- Area 3:
Partnerships for improvement



....utilizing political will at the highest level



21. *Encourages* Member States, in collaboration with other stakeholders where applicable, to plan or pursue the transition of their health systems towards universal coverage, while continuing to invest in and strengthen health-delivery systems to increase and safeguard the range and quality of services and to adequately meet the health needs of the population;



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