

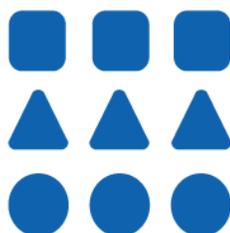
DEVELOPING AND IMPLEMENTING STANDARDS AND GUIDELINES IN REPRODUCTIVE HEALTH PROGRAMS

JHPIEGO's Training in Reproductive Health (TRH) Project has worked in 27 countries worldwide to develop and disseminate up-to-date, reproductive health (RH) standards and guidelines on issues such as family planning, cervical cancer screening and prevention, and essential maternal and newborn healthcare. Standards and guidelines are critical elements in RH training programs and their development leads to improved quality of RH service delivery and, ultimately, the reduction of long-term disability and death in the most vulnerable populations.

POLICY GUIDELINES

Two types of guidelines exist at the national level: policy guidelines and service delivery guidelines (SDGs). Policy guidelines describe:

- which services are to be offered;
- who may receive these services (e.g., any health restrictions, income considerations);
- who will deliver the services (i.e., categories of healthcare providers);
- where these services will be delivered (i.e., at what level of the healthcare system);
- how often certain services are to be delivered (e.g., how often a woman using oral contraceptives should return for followup); and
- what the minimal acceptable level of performance is for each service offered.



Policy Guidelines Improve Health Services Delivery in Malawi

From 2000–2001, the TRH Project worked with key partners in Malawi to develop, finalize, and officially approve RH service delivery guidelines, which included clinical standards as well as RH policy guidelines. The policy guidelines helped to improve community access to important RH services, because they influenced a change in national policy that allowed registered nurse/midwives to provide Norplant® implants and comprehensive postabortion care (PAC) services, including manual vacuum aspiration. This change in policy moves long-term family planning (FP) and lifesaving PAC services closer to the women who need them. The guidelines also identify which health professional cadres can perform specific services, including FP provision, antenatal care, and PAC, and at which levels of the service delivery system those specific services can be provided. This important document, an essential tool for the planning and delivery of healthcare services, is referenced in Malawi's national RH policy and has been disseminated through several RH guidelines workshops and distributed to preservice education and inservice training sites throughout the country.

SERVICE DELIVERY GUIDELINES

SDGs are a tool for achieving quality standards; they provide the detailed, technical information needed to implement the national policy guidelines. Healthcare workers throughout the system use them as a source of specific, up-to-date information about RH services offered in a country, as well as a source of general information to provide high quality care. SDGs complement policy guidelines by:

- describing the components of RH services, including protocols on how to perform those services;
- introducing related components needed for providing high quality services, such as the principles and procedures for infection prevention practices;
- explaining how healthcare providers should relate to clients;
- recommending how RH services should be organized at the various levels of the country's healthcare system; and
- serving as the basis for RH learning and resource materials, the RH component of curricula for preservice education, and evaluation systems for training and healthcare delivery.

The Successful Design and Use of Service Delivery Guidelines in Turkey

In Turkey, the first edition of the National Family Planning Service Delivery Guidelines (NFPSDGs) was developed and published with technical assistance from the TRH Project in 1995. By 1996, the document, which incorporated JHPIEGO, World Health Organization (WHO), and other international standards, was disseminated by the Ministry of Health to every healthcare facility in the country. The NFPSDGs have been a key element in the improvement and standardization of training programs and service delivery approaches throughout Turkey, helping to establish uniform training from one region to another, and giving healthcare providers consistent instructions related to patient care. With the assistance of key stakeholders, the NFPSDGs were updated, printed, and disseminated countrywide in 2000.

STANDARDS

Standards serve as benchmarks upon which to make judgments and ensure that provider training and performance are consistent and supported at all levels of the healthcare system. Standards, which are a key component in performance improvement programs, must be evidence-based, achievable, observable, desirable, and measurable. Standards of care are the basis for:

- content for training and education curricula/manuals, clinical care protocols, and guidelines;
- identification of gaps in technical or organizational performance for quality programs;
- supervisory and management systems;
- essential equipment, supplies, and drug lists;
- job descriptions and deployment of personnel;
- essential level of care and referral criteria; and
- measurable outcomes.

The Development and Implementation of Operational Performance Standards in Brazil

The pilot phase of PROQUALI, a primary health service recognition program implemented in northern Brazil by the Bahia and Ceará State Secretariats of Health, the TRH Project, the Center for Communication Programs, and Management Sciences for Health produced dramatic service delivery results within only 18 months. By the end of this period, four of the five participating clinics were officially recognized and functioning to provide high quality RH services consistent with state-designated RH standards. As a result of these achievements, PROQUALI was expanded to 25 primary care facilities and the performance improvement process used by PROQUALI was expanded to the family health program in Ceará State. One of the keys to PROQUALI's success was the development and implementation of operational performance standards with verifiable, objective quality criteria that were used to assess the RH services at participating health facilities. These standards formed the basis for the formal recognition process and were used for self-assessment, self-improvement, and monitoring/evaluation. As part of implementation, local and regional quality improvement support teams were trained in the performance improvement process focusing on change management, quality criteria and how to achieve them, and how to mobilize resources to produce results. Now clinics that meet the defined standards receive the PROQUALI logo, which clients recognize to be a sign of quality as a result of an associated information, education, and communication campaign.

INTERNATIONAL RESOURCE MATERIALS

Well-developed international resource materials bring together global lessons learned, international evidence, and diverse perspectives, to serve as a "one stop shop" for collective global experience from which individual countries can benefit. Use of these materials by national ministries of health helps to ensure countries have up-to-date information upon which to base their standards and guidelines. Materials that have been formulated as prototypic manuals or guidelines can be adapted easily to become national SDGs. The WHO and JHPIEGO, working both independently and in collaboration with each other, have developed a considerable body of evidence-based material that sets global standards and defines appropriate protocols and procedures for reproductive healthcare in even the lowest resource settings. An example of a key JHPIEGO resource material is the *PocketGuide for Family Planning Service Providers*.

PUTTING POLICIES INTO ACTION

Development and implementation of national guidelines is a complex process, involving many levels of the healthcare system. There is no one approach that will

work in all countries; instead, the process of guidelines development must be tailored to suit each country in which it is undertaken. In a logical framework, RH health policy would be set first and national SDGs would be developed based on that policy. In reality, SDGs are often developed first and then used to influence national RH policy. In countries with limited political commitment to RH, it may be effective to begin policy development by first building consensus among leaders in the healthcare community on the need to standardize the way services are provided and change the way clinical training is conducted.

Guidelines Development

Although the following steps may not occur in the sequence in which they are presented (or even at the same level of the healthcare system), they are a set of activities that are essential for implementation of guidelines at the healthcare provider level.

- Identify stakeholders and gain consensus on the need for change.
- Form a national advisory group and identify “RH champions” to advocate for and expedite the guidelines revision process.
- Facilitate an RH knowledge update for key stakeholders using international resource materials.
- Identify and reach consensus on necessary changes to be made to current RH standards and guidelines if they already exist.
- Develop and revise draft national policy guidelines.
- Develop and revise draft national SDGs.
- Validate draft documents through review by key stakeholders external to the advisory group.
- Officially endorse the policy document and SDGs.

Once standards and guidelines are officially adopted, their words must be translated into action through the effective dissemination of the documents. Dissemination and promotion of the completed documents to regional and district levels does not happen just by sending the documents out; it requires strategic planning and the commitment of adequate human and financial resources at both national and peripheral levels.

Implementing Guidelines

Dissemination of the guidelines at the national level can begin by a variety of mechanisms. In many countries, dignitaries launch the new guidelines at a large, formal meeting attended by a diverse audience of politicians, healthcare professionals, consumers, and the media. This event has the added benefit of increasing the public’s awareness of the content, purpose, and significance of the guidelines. Additionally, more targeted channels of communication are often used specifically to inform decision-makers, healthcare providers, women’s health advocates, community groups, preservice educators, clinical trainers, and supervisors about the guidelines.

Dissemination and promotion of the completed documents to regional and district levels are the next step in the implementation process. For this part of the process to be successful, the material must be distributed to, and understood by, all levels of critical users. At least one copy of the guidelines should be placed in each appropriate healthcare facility. Suggested steps in effective dissemination of standards and guidelines include:

- Designing a standards and guidelines dissemination strategy
- Developing standards and guidelines dissemination materials
- Training key stakeholders and trainers to disseminate the updated standards and guidelines using newly developed orientation materials
- Disseminating policies and guidelines at the national, regional, and district levels
- Ensuring that systems are in place to support provision of high quality care
- Motivating providers and ensuring that they have required knowledge and skills
- Ensuring involvement of the community in quality RH services

Effective Dissemination of Service Delivery Guidelines in Kenya

The TRH Project in Kenya, in collaboration with the Kenyan Ministry of Health, Family Health International, and the Population Council, developed a strategy for guidelines dissemination that proved to be extremely effective and can be applied as an approach worldwide in projects to disseminate service delivery guidelines. This new strategy, which was designed to disseminate technical information to the facility level in a timely, cost-effective fashion, includes preparation of providers to update fellow staff, the use of job aides, and support supervision. A study to test the effectiveness of this dissemination plan was carried out. The results overwhelmingly showed that if healthcare providers are prepared with a short update and materials to orient their colleagues to new information, they are more likely to have an impact on staff at their service delivery site. Additionally, when support supervision is provided to sites, positive changes in providers’ retained knowledge and stated practices are dramatic. This proven intervention to maximize access and quality demonstrates an effective strategy to disseminate and implement revised RH guidelines, which can be applied or adapted on a global scale.

The dissemination process works most effectively when a variety of appropriate strategies are implemented either together or sequentially to ensure both adequate distribution and understanding of the guidelines. The method used may involve creative dissemination techniques such as radio dramas, workshops, fliers that highlight important aspects of the guidelines, the Internet, audio cassettes for distance learning and updates, posters and logos promoting sites that use the guidelines, and modeling by respected colleagues. Other methods include incorporating the materials into workshops, training programs, service manuals, job aids, supervision and monitoring tools, and client materials.

Finally, regular updating of guidelines based on new scientific evidence, monitoring their use, and making clients aware of their rights under the guidelines are crucial to improving access to and quality of RH service delivery.

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