



USAID ASSIST Project Five-year Cooperative Agreement in the USAID Office of Health Systems

APPLYING SCIENCE TO STRENGTHEN AND IMPROVE SYSTEMS

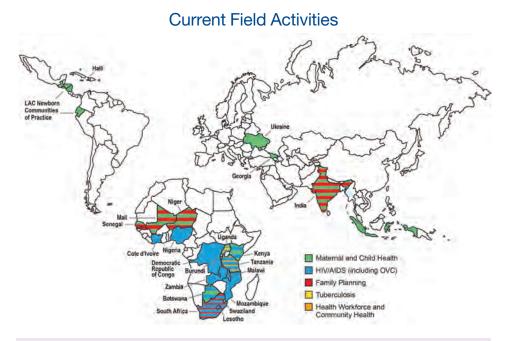
The Challenge for Health Systems

espite the availability of evidence-based, simple, high-impact interventions capable of saving lives and alleviating suffering, many patients and clients are not benefiting from them. Evidence-based care is not reaching the people who most need it, despite an abundance of evidence-based guidelines and consensus on what should be done.

Much of this implementation gap is related to weak health systems and processes of care delivery. Such weakness manifests itself in various aspects of the quality of care, including effectiveness, efficiency, patient/client-centeredness, equity, safety, accessibility, timeliness, community involvement, and inability to achieve targets set for the Millennium Development Goals.

The USAID Applying Science to Strengthen and Improve Systems (ASSIST) Project is a five-year project of the Office of Health Systems of the USAID Global Health Bureau designed to address this challenge by improving health care in USAID-assisted countries, strengthening their health systems, and advancing the frontier of improvement science. USAID ASSIST builds on the work of the USAID Health Care Improvement Project (HCI) and addresses weaknesses in the delivery of the following services:

- Care and support for vulnerable children and families
- HIV and AIDS
- Maternal, newborn, and child health
- Non-communicable diseases and chronic conditions care



Objectives of USAID ASSIST

he overall objective of the USAID ASSIST Project is to foster improvements in a range of health care processes through the application of modern improvement methods by host country providers and managers in USAID-assisted countries. The project's central purpose is to build the capacity of host country systems to improve the effectiveness, efficiency, client-centeredness, safety, accessibility, and equity of the services they provide. In addition to supporting the implementation of improvement strategies, the project seeks to generate new knowledge to increase the effectiveness and efficiency of applying improvement methods in low- and middle-income countries.

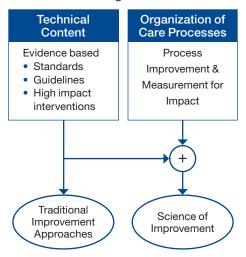
The power of existing interventions is not matched by the power of health systems to deliver them to those in greatest need, in a comprehensive way, and at an adequate scale.

WHO Director General Margaret Chan

APRIL 2014

The USAID Applying Science to Strengthen and Improve Systems (ASSIST) Project is funded by the American people through USAID's Bureau for Global Health, Office of Health Systems. The project is managed by University Research Co., LLC (URC) under the terms of Cooperative Agreement Number AID-OAA-A-12-00101. URC's global partners for USAID ASSIST include: EnCompass LLC; FHI 360; Harvard University School of Public Health; HEALTHQUAL International; Institute for Healthcare Improvement; Initiatives Inc.; Johns Hopkins University Center for Communication Programs; Women Influencing Health Education and Rule of Law, LLC; and the World Health Organization Service Delivery and Safety Department. For more information on the work of the USAID ASSIST Project, please visit www.usaidassist.org.

Improvement Science Applied to Health Care Integrates Technical Content and Organization of Care



Adapted from Batalden and Stoltz, 1993.

- Nutrition assessment, counseling and support
- · Reproductive health and family planning
- Tuberculosis, malaria, and other infectious diseases

The project also works to strengthen the performance of the health workforce as well as community-based services and community linkages with facility-based care.

What Is Improvement Science?

he science underlying modern improvement draws on psychology, organizational behavior, adult learning, and statistical analysis of variation and is grounded in a systems understanding of work. The fundamental concept underlying all improvement is that "Every system is perfectly designed to achieve exactly the results it achieves" (Batalden).

Improvement requires change in the way we do work, though not every change is an improvement. The following core principles underlie the science of improvement:

- The work of delivering health care happens in processes and systems.
 Understanding them and changing them in ways to produce better results is at the heart of improving health care.
- Working in teams of different providers involved in delivering care is key to making changes work and fostering ownership of the changes to enhance sustainability.

USAID ASSIST Knowledge Portal

he project web portal, www.usaidassist.org, will be the central repository of improvement knowledge that is generated by every project activity and country program. The knowledge generated through improvement activities supported by USAID ASSIST will be used in each country in the form of knowledge packaged and disseminated locally through coaching visits, learning sessions, knowledge-sharing events, local websites, resource repositories in local institutions, competency development, and local publications. The USAID ASSIST Knowledge Portal will organize this packaged knowledge to make it available globally and add to it knowledge developed through project-level activities and research. Just as important as the knowledge repository features of the web site, the USAID ASSIST Knowledge Portal will seek to connect implementers through communities of practice, discussion forums, subscriptions to topical listservs, and social media. USAID ASSIST will also seek contributions from partners and other implementers outside the project so that the site serves as a global resource on health care improvement.

- Testing changes to determine whether they yield the desired results is at the heart of improvement. Data are used to analyze processes, identify problems, determine whether the changes have resulted in improvement, and act accordingly.
- Care should meet the needs and expectations of clients, patients, and communities.
- Shared learning, where multiple teams work on common aims and exchange what worked, what did not, how it worked, and why, is an essential part of improvement, producing better results in a shorter period of time.

USAID ASSIST builds the capacity of host country implementers to apply the science of improvement to health care and other services for vulnerable populations, to ensure that high-impact interventions reach every patient or client, every time, and improve outcomes.

A Learning Agenda for Improvement

earning is a fundamental part of improvement. Knowledge management activities will be built into each USAID ASSIST country program to more effectively and efficiently capture and disseminate learning about what improves outcomes. Evaluation activities will help show country programs how and why investment in improvement adds value to their work. Research activities will answer specific questions needed to enhance the scale-up and

sustainability of results and accelerate the achievement of improvement objectives.

As a global project, USAID ASSIST's learning agenda also seeks to contribute to global U.S. Government initiatives and inform the larger field of health care improvement. Research supported under USAID ASSIST will address key implementation challenges for the **Global Health Initiative** (GHI), such as how to better meet the needs of women and girls and strengthen country ownership and local partnerships. Each program will also document how the improvement strategy has addressed gender issues.

To enable learning at the local level, USAID ASSIST will incorporate knowledge management strategies and approaches in each country program. Each improvement effort will emphasize systematic documentation of what teams learn as they find better ways to deliver care and will make use of technology to share improvement experiences supported by the project, other implementers, and the literature. USAID ASSIST will also facilitate connecting implementers—in conversation, on the web, and through social media—to transfer knowledge learned from their experiences.

Another aspect of the USAID ASSIST research and evaluation agenda is to build up the body of evidence of what works and what does not in terms of improvement methods. The project will test and evaluate ways to improve the rigor of data and the cost-effectiveness of interventions.

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Current Activities

Botswana: USAID ASSIST is supporting the Ministry of Health in pursuing its national level goal of reducing maternal mortality from 160 to 80 per 1000 live births (MDG 5), setting a clear implementation schedule with explicit delegation of responsibilities and aligning activities at all levels to meet the national level goal.

Burundi: The project is working with the Ministry of Health (MOH) to improve the uptake of prevention of mother-to-child transmission of HIV (PMTCT) services for mothers, their partners and their infants in four regions and improve retention of mothers and infants along the PMTCT cascade.

Cote d'Ivoire: The project is supporting the Ministry of Health and HIV to address key challenges in the delivery of antiretroviral therapy (ART) and PMTCT services, build the capacity of providers and implementing partners to improve the quality of HIV and improve the strategic information system. USAID ASSIST is also supporting the WHO-CDC laboratory accreditation program.

Democratic Republic of Congo: The project is supporting the Ministry of Health to improve nutrition services for HIV clients through integration of nutritional assessment, counseling and support into HIV care and treatment, in coordination with other implementing partners.

Georgia: The project builds on work implemented under HCl to improve the quality, consistency and continuity of medical care in Georgia in a demonstration region, improve access and use of evidence-based medical information by Georgian physicians, and enhance the availability of modern, evidence-based treatments in private and publically funded care settings.

Haiti: The project is assisting the Ministry of Social Affairs and implementing partners to improve the quality of services offered to vulnerable children and families affected by HIV.

India: USAID India has invited USAID ASSIST to enhance improvement capability in the Indian health system by engaging national and state level health structures to conduct improvements in the reproductive healthmaternal newborn child health-adolescent (R-MNCH+A) continuum in both public and private facilities.

Kenya: The project is supporting the Ministry of Gender and Women's Affairs and implementing partners across the country to improve the quality of services offered to orphans and vulnerable children (OVC) and their caregivers. USAID ASSIST is also advising the MOH on rolling out its framework for improving health care through standards of care, pre-service/in-service training, and quality improvement. We are also working with the MOH to improve nutrition services for HIV patients and to improve the quality of antenatal care and its integration with PMTCT services.

Latin American Communities of Practice for Newborn Care: The project is collaborating with the Regional Newborn Health Alliance and Ministries of Health to disseminate and spread best practices in implementing Helping Babies Breathe and Kangaroo Mother Care.

Lesotho: The project is supporting the Ministry of Health and other partner for the implementation of the Partnership for HIV-Free Survival (PHFS).

Malawi: The project is building the capacity of the Ministry of Gender, Children and Social Welfare, districts, and USAID partners to implement national standards to improve services for vulnerable children and working with the PHFS initiative to improve the quality of nutrition services for people with HIV.

Mali: The project is working with the MOH to apply improvement methods at the health facility and community levels to improve the quality of

essential obstetric and newborn care (EONC) in one region. We are also supporting the MOH to improve anemia prevention and control in one demonstration district and supporting implementation of the WHO Safe Childbirth Checklist (SCC) in a sample of maternities, including post-partum family planning.

Mozambique: The project is providing technical assistance to the Government of Mozambique and implementing partners to improve the quality of services offered to vulnerable children and families affected by HIV and to implement approved standards. USAID ASSIST is also piloting draft standards for home-based care and supporting PHFS activities at the community level.

Niger: USAID ASSIST is supporting the Ministry of Public Health to test models to improve the integration of postpartum family planning (FP) services into one urban and one rural district. A primary purpose of the project is to demonstrate scalable, cost-effective approaches to achieve effective coverage of postpartum FP services.

Nigeria: The project is building the capacity of the Federal Ministry of Women and Social Development and implementing partners to improve the quality of OVC services and integrate standards of care in OVC programming in 12 states.

Senegal: The project will support implementation of the WHO SCC in a small sample of maternities, including post-partum family planning.

South Africa: The project is working with provincial and district health authorities in five provinces to increase the quality of HIV prevention, care, and treatment services and to build capacity at all levels in strategic planning, supervision, program review, training and mentorship, development of clinical skills, and, policy development.

Swaziland: The project is strengthening the implementation of the WHO-recommended strategy for detection and cure of tuberculosis (TB), integration of TB and HIV services, high-quality DOTS expansion, TB infection control, and multidrug-resistant TB case management. We are also supporting the MOH and implementing partners to institutionalize modern quality improvement approaches.

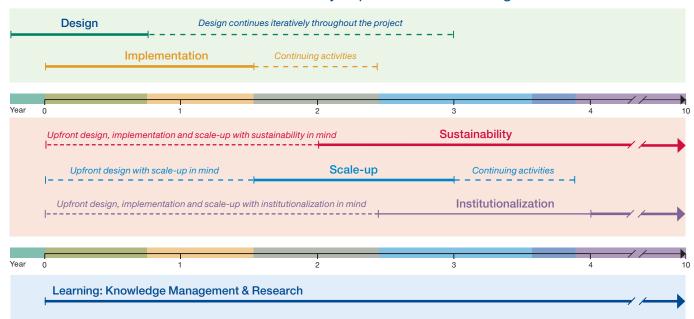
Tanzania: The project supports the Ministry of Health and Social Welfare and implementing partners to apply improvement methods to increase the effectiveness of PMTCT, ART, vulnerable children services and protection, and community home-based care services. USAID ASSIST is also collaborating on PHFS activities to eliminate HIV infection in children and reduce deaths among HIV-infected mothers and supporting the field testing and scaling up of PMTCT Option B+.

Ukraine: The project is assisting Ukrainian partners to reduce alcohol and tobacco use among pregnant women through the implementation of standardized counseling protocols known as brief physician interventions in two oblasts.

Uganda: The project is supporting the MOH, districts, implementing partners, and health facilities to improve the HIV continuum of response, improve the quality of Safe Male Circumcision services, improve TB care, and implement the PHFS initiative. The project also supports the MOH to apply improvement methods to improve maternal, newborn, and child health services in primary care and referral facilities and apply lessons from pilot facilities to other sites. The project is also working with the Ministry of Gender, Labor and Social Development, the MOH, and OVC implementing partners to apply standards to improve services for vulnerable children.

Zambia: The project is working with the Ministry of Health to integrate nutrition services into HIV care to improve nutritional status of HIV clients.

USAID ASSIST Country Improvement Plan Design



USAID ASSIST Services

SAID ASSIST can accept field support and strategic element group funding to apply improvement science to achieve better outcomes in support of USAID objectives. The project's country-level technical assistance emphasizes not only better results, but sustained improvement at scale and institutionalizing improvement through competency development at the pre- and in-service levels as well as engaging with host-country governments at the policy level.

Country programs developed under USAID ASSIST use a deliberate, up-front design strategy to systematically address key questions related to the evidence base for achieving improvements in the focus area of the work and the implementation strategy for the work planned, including technical content, improvement strategy, human performance factors, linkages to other health systems strengthening efforts, and gender considerations. As depicted in the figure below, the deliberate design of country improvement programs under USAID ASSIST also address:

- How the improvement strategy will create the conditions for sustaining results after the project's support is completed
- Scaling up the improvements in care to the rest of the health system
- Building capability within host country institutions to be able to conduct other improvements without external assistance making improvement a permanent,

institutionalized part of delivering health services.

USAID ASSIST country improvement strategies also address the deliberate design of the learning that will be accomplished through the work and how knowledge management, research, and evaluation activities will be incorporated into each country program.

The project will enable the flexible application of evidence-based improvement approaches within a given context to increase the likelihood of achieving the best possible outcomes while building the improvement competencies of host-country partners. The project's strategy is to align evidence-based interventions in technical content areas—such as maternal, newborn, and child health, HIV/AIDS, and care for vulnerable children and families—with evidence-based approaches in improvement, including collaborative improvement, human performance technology, standards, and regulatory strategies.

USAID ASSIST country programs are designed with host-country leadership at the forefront to ensure context appropriateness and local ownership and will be in alignment with the goals of USG and global initiatives, including the GHI, USAID Forward, Partnership for HIV-free Survival, The Child Survival Call to Action, and Saving Mothers, Giving Life. Aligning with these priorities and policies ensures that considerations for marginalized and underserved populations and gender, age, and social differences are taken into account at all levels of implementation.

How to Obtain Services of USAID ASSIST

he USAID ASSIST cooperative agreement is designed to provide USAID Missions, Strategic Element Groups and Bureaus with a streamlined process for obtaining services in health care and other program improvement. USAID ASSIST services can be obtained quickly and easily, without the need for an extended procurement process. URC and its pre-approved team of partners are ready to support country institutions in meeting their improvement aims. A USAID Mission, Strategic Element Group or Bureau wishing to access technical support through USAID ASSIST may do so by contacting the Agreement Officer's Representative, Dr. James R. Heiby, Medical Officer, Office of Health Systems, Global Health Bureau, USAID/Washington.

USAID ASSIST Partners

Global Partners

University Research Co., LLC (URC)

The World Health Organization Service Delivery and Safety
Department

The Institute for Healthcare Improvement (IHI)

The Johns Hopkins University Center for Communication Programs

EnCompass LLC

FHI 360

Harvard School of Public Health

HEALTHQUAL International

Initiatives Inc.

Women Influencing Health Education and Rule of Law (WI-HER)

Regional Partners

Center for Family Welfare – Universitas Indonesia Regional Center for Quality of Health Care, Kampala, Uganda Regional Psychosocial Support Initiative (REPSSI), Johannesburg, South Africa