

USAID/INDIA NQAS Implementation Update

SEPTEMBER 2022

USAID/INDIA HEALTH INVESTMENTS SUMMARY

coverage

Goal To improve the health and wellbeing of India's most vulnerable \rightarrow Support innovations and establish proof of concept **Strategic** \rightarrow Scale successful models across the continuum of care Approach \rightarrow Technical assistance to build institutional capacities **Global Health** Maternal & Child. Health **Key Health** Security (GHS) **Tuberculosis HIV/AIDS** Systems Adolescent Family Planning (including Covid-Areas Strengthening Health 19) Cross Gender and Social Inclusion, Digital Solutions, Private Sector Engagement, Innovative Financing, Learning Cutting and Global Knowledge Exchange, Cross Sectoral Coordination, Climate Change **Themes** * Government- National, State and municipal- State health dept; District Health Societies, Block PHCs; CM office, etc **Stakeholders** Communities Implementing partners Public and private healthcare providers Private businesses, business associations, professional associations, tech startups Agency, Mission, Interagency * Development partners, NGOs, education and research institutions Geographic States-28, UTs- 8; Investments 45; Partner organizations – 29; Portfolio value- \$417.6 million

OUR FOCUS

MAXIMUM PRIVATE SECTOR ENGAGEMENT

- Innovate with financing
- Raise private capital to support health outcomes
- Create and engage private sector platforms
- •Harness private sector technical expertise and innovations

PUTTING INCLUSIVE DEVELOPMENT AT THE CORE OF PROGRAMMING

 Focus on vulnerable groups (e.g. the urban poor, youth, tribal populations, women and girls)



INVESTING IN LOCAL SYSTEMS

- Ensure country ownership
- Develop strong state and municipal partnerships
- Increase pool of local implementing partners
- Empower local communities to be part of the solution
- Build resilient health systems centered around the user

EMPHASIZING SCALE

- Demonstrate, operate, and transfer
- TA for scaling evidence based interventions

HEALTH SYSTEM STRENGTHENING - HIGHLIGHTS PARTNERS: 6

GEOGRAPHIC FOCUS: National, 13 states, select cities

- Support national and state governments to implement Gol's vision of CPHC and other flagship health initiatives through effective and responsive technical assistance.
- Create a resilient urban ecosystem to provide comprehensive healthcare for the urban poor.
- Healthcare innovative financing platform to mobilize private capital and improve efficiency focused on development outcomes.
- Collaborative of civil society, private sector, academics, foundations and governments to respond to the COVID-19 pandemic.
- Technical Assistance to tertiary and secondary 5/5/2021 healthcare institutions for critical care management.



USAID INDIA'S RESPONSE TO GOI'S FLAGSHIP INITIATIVES



Integrated Government Online Training (I-GOT)

Public and Private S ector Financing

> Integrated Health Information Platform eSanjeevani Platform For Telemedicine

Technical support to states for operational planning and developing roadmap to meet the target

Support in Identifying Potential HWCs to be nominated for NQAS certification

Key Areas of Support for NQAS certification of HWCs

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Capacity Building of Stakeholders and Primary Care Teams on Quality Assurance

Preliminary gap assessment of identified HWCs

Handholding support to primary care teams to address the gaps

Development of NQAS toolkit to support primary care teams in NQAS certification

QA/QI in RISE

Critical Care

- Development of standardized Learning Resource Packages in respiratory critical care in collaboration with various medical colleges including AIIMS Delhi and regional AIIMS
- Development of ICU & Critical Care Block Design and Operationalization toolkit

• Phygital Skill Labs -Development of Model Techenabled Skills labs in 5 states; Facilitation support using state resources in remaining states

- •Critical care Skill Mapping and Competency based Performance Tracking – OSCEs & Development of Case Based Learning Platform (DishA)
- •Periodic Infrastructure, HR and Equipment assessment for preparedness in ICU

Oxygen Management

- Development of standardized learning resource packages for oxygen management to ensure quality of training in collaboration with PATH
- •Oxygen Demand assessment and Tracking
- Development of facility demand assessment tool and state preparedness tool.
- •Demonstration of **Oxygen purity** assessment
- •Demonstration of **Operationalization and maintenance** of oxygen equipment.

Laboratory Strengthening

 Development of standardized learning resource packages for Molecular Testing & Next generation sequencing to ensure quality of training in collaboration with FIND

- Development of Molecular Testing Lab
 Operationalization Toolkit
- Development of Videos on utilization of various Laboratory equipment under IPHL
- Periodic Infrastructure, HR and equipment assessment for preparedness in Molecular Testing Labs

Vaccination

•Quality Standards developed for Model vaccination centers across ten areas of concern including infrastructure, human resource, cold chain, AEFI management, communication, etc

•Post Vaccination Safety Monitoring - Conducted in collaboration with 3 Analytics; Enhance reporting of AEFI cases- Reducing numbers of Silent districts for AEFI reporting; Operationalized in Madhya Pradesh (MP) & Goa and internalized for Routine Immunization in MP

Biomedical Waste Management

•Development of standardized learning resource packages for Biomedical Waste Management in collaboration with AIIMS Delhi

- •Development of periodic review mechanism in collaboration with AIIMS Delhi
- Ensuring inclusion of IPC/BMW in all trainings
 Participation in Kayakalp assessments in few states

Key areas of support for LaQshya

| | Key Inputs |
|----|--|
| 1 | Planning for development of road-map and implementation plan of LaQshya |
| 2 | Orientation of stakeholders |
| 3 | Coordination with State Mentoring Group for monitoring & review mechanism |
| 4 | Facilitating assessment of facilities (Baseline, Validation and External) |
| 5 | Advocacy for facility specific improvement plan for prioritized facilities |
| 6 | LaQshya dashboard a decision-making tool to prioritize activities |
| 7 | Harmonization and standardization of LaQshya protocols and posters |
| 8 | Institutionalization of Safe Delivery App across the LaQshya facilities |
| 9 | Development of quality audit tool, process mappings |
| 10 | Coordinating improvement at prioritized facilities |

MNH Resource Center

- MNH Resource Center is a Quality Improvement (QI) initiative that promotes standardized clinical MNH care in high case load delivery points and FRUs.
- It links a center of clinical excellence, the mentor (a medical college) with mentee facilities (selected District Hospitals and high case load FRUs) using a hub and spoke model.
- The hub is Rajendra Institute of Medical Sciences (RIMS), Ranchi, Jharkhand state with experience of supporting the state RCH, Facility Based Newborn Care and the LaQshya. Four district hospitals (Latehar, Giridih, Palamu and Ranchi) which are also FRUs were identified as the initial mentee facilities. Labor rooms and SNCUs were the focus of the initiative.
- Results 52% Increase in scores for practices during 2nd Stage of labor 30% increase in score for practices during 3rd Stage of labor. 3.5% Increase in score for information to mother at discharge about her newborn.

QUICK model: Quality Upgrade by Improving Accountability & Community Knowledge (Demonstration model in Uttarakhand)

Newer initiatives like call centers are being set up with the objective of improving reach with the beneficiaries and to exchange information and gather feedback.

QUICK is a technology driven

solution (built on existing call center) developed to address the weak links.

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Despite the efforts, 3 weak links remain – Community Participation, Accountability and use Data for Action It provides opportunity for improvement by enabling use of data including beneficiary feedbacks during review & planning meetings

District Hospital Quality of Care Index (DQCI) and SNCU Quality of Care Index (SQCI)

- DQCI and SQCI are innovative dashboards that collate and present analysis of public health system data to promote evidence-based decisions and actions for improving quality of care in District Hospitals.
- A digital dashboard was developed that consolidated information on critical issues of human resources, equipment and drugs and infrastructure as well as service delivery components of maternal and child health
- The tool aims to promote regular performance review of a DH specifically to measure and track the performance of critical MNCH services and help in identifying gaps and derive actions for improved overall performance



Questions???