



**Elizabeth Glaser  
Pediatric AIDS  
Foundation**

*Until no  
child has  
AIDS.*

# QUALITY IMPROVEMENT (QI)- FOCUSED STANDARD OPERATING PROCEDURES FOR SUPPORTING DISTRICTS AND SITES 2016-2017

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ACCELERATING ELIMINATION OF PEDIATRIC AIDS PROJECT



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## SECTION A: BACKGROUND AND PREPARATION FOR COACHING ACTIVITIES

### 1. OVERVIEW

This Standard Operating Procedure (SOP) was developed by the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) Zimbabwe technical team in consultation with the Ministry of Health and Child Care (MOHCC) quality improvement (QI) team to guide and provide standards for the expanded, QI-oriented district and site level support provided by district focal persons (DFPs) and EGPAF technical officers. The materials used in preparing this SOP included the site support tool that the DFPs used in the preceding program, nationally-approved QI coaching, training and documentation tools, and various EGPAF and MOHCC program documents. This revised SOP presented here has been aligned to reflect updated guidelines and national program priorities, in particular the heavy emphasis on QI. The SOP is in near-final version, and has been reviewed by the EGPAF technical team and the MOHCC QI team, and adopted by the EGPAF-Zimbabwe program for use across all its projects, by all 29 DFPs in 62 districts. As the coaching function is transitioned to MOHCC structures, this SOP

will serve as an important capacity building tool for MOHCC officers. All DFPs working in the EGPAF-Zimbabwe program and the country office technical officers will be trained on the use of this SOP.

Although this SOP enables DFPs to provide quality-oriented support to health care providers across the whole spectrum of HIV services, deliberate focus has been placed on strengthening provision of these services within the maternal child and newborn health (MNCH) settings, which remains a priority for the MOHCC. The SOP is specifically designed to support the Accelerated Action Plan for scaling up pediatric ART (AAP), the roll-out of point-of-care early infant diagnosis services (POC EID) and the World Health Organization (WHO) elimination of mother to child transmission (eMTCT) pre-validation processes.

## 2. PURPOSE OF DISTRICT AND SITE COACHING

The EGPAF-Zimbabwe program aims to support national progress towards elimination of new pediatric HIV infections and control of the HIV epidemic within the general population through quality-focused and family-centered interventions. To achieve this goal, EGPAF-Zimbabwe supports intensified multidisciplinary quality management (QM)/quality improvement (QI) coaching of district and site level health care providers to raise the quality of preventive, diagnostic and therapeutic services for individuals and communities infected or affected by HIV and AIDS. Coaching builds the capacity of health care providers to focus on correcting systems and processes underlying HIV service provision to improve program performance and outcomes, as well as to optimize client satisfaction.

This SOP sets the standard for conducting QI coaching activities.

## 3. SCOPE OF THIS SOP

The purpose of this SOP is to provide DFPs and DFP coordinators with guidelines on procedures for QI coaching including:

- Preparation for QM/QI coaching activities for HIV care and treatment services;
- Identification of health care service gaps and challenges;
- Conducting QM/QI coaching activities; and
- Provision of effective feedback and follow up of recommendations and action plans.

The goal of this SOP is to ensure all QI coaching activities are conducted in a standardized, systematic and efficient manner.

## 4. INTENDED USERS OF THIS SOP

This SOP primarily assists the QI coach to conduct and document district and site level coaching activities/visits in line with nationally-recommended QI approaches. It can also be used by national level EGPAF and MOHCC technical officers when supporting district and site teams. District health teams and individual facilities may also use this SOP to internally assess and improve program performance and to prepare for supportive visits by national level teams.

## 5. PREPARATION FOR COACHING ACTIVITIES

- Review the annual quality management plan for the district and draw up a provisional schedule for coaching activities/visits for the quarter.
- Share the prepared provisional quarterly QI/QM coaching schedule with all the sites.
- Ahead of the coaching activity, review findings of previous coaching visits and district program performance data to finalize site(s) and focus for this planned visit/activity.
- Identify appropriate team members to support the coaching activity/visit and sensitize them.
- Prepare relevant material including copies of the coaching tools and relevant site data.

- Notify site staff of planned visit at least one week prior to the visit. Remind the site staff again three days and one day prior to the visit to confirm the availability of targeted staff.
- Make arrangements for transport.

## 6. CONDUCTING THE COACHING VISIT/ACTIVITY

- Report to site's senior manager and request to meet the QI/QM teams.
- Explain the purpose of the visit according to the scope of the planned visit to the district/site team.

Record background details for this Coaching Activity in the table below:

**Table 1: Background Data**

Date of visit/coaching activity		
Level of coaching activity	District [ ]	Facility [ ]
Name of facility(ies)		
District		
Province		
Full name of QI Coach		
Coach Supervisor ( <i>if present</i> )		
Names of MOHCC supporting technical staff ( <i>indicate name and designation</i> )		
Site staff coached ( <i>if more than 10 staff members are coached attach participants list</i> )	Name	Designation

<i>(For facility level coaching only)</i> Is the site formally trained in Quality Improvement Planning and Implementation (QI) and/or Performance Management (PM)?	PM trained [ ]	QI trained [ ]
Date and type of last QI coaching <i>(site level coaching)</i>	_____/_____/_____ Type of coaching session :  Coach visited the facility [ ] Remote [ ] Specify: _____	
Key issues and recommendations from last QI coaching visit/activity	1. _____  2. _____  3. _____	
Main Objectives of This Coaching Visit/Activity	1. _____  2. _____	

	3. _____
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## SECTION B: ASSESSMENT OF QUALITY MANAGEMENT STRUCTURES

This section of the SOP should be administered when the coach meets the district/facility leadership, upon entering a district or facility for coaching activities.

### 1. REVIEW OF QM/QI PLANNING AND COORDINATION

- a. Is/Are there (a) staff person(s) responsible for QM/QI in the Facility/District?  
Yes [ ] No [ ]
- b. Does the District/Facility have a functional QM committee? Yes [ ] No [ ] (If no skip to d)
- c. If yes, review minutes of QM/QI committee meetings. Assess the following:
- i. Number of meetings in the past quarter: \_\_\_\_\_  
(**Standard:** the committee should meet at least once per month. These do not have to be stand-alone meetings but can be part of other district/facility level meetings where quality issues are discussed e.g. DHE or HOD meetings)
  - ii. Issues discussed in the meetings:

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(Assess the minutes for use of data to improve program performance, development and implementation of action plans to improve HIV priority program areas and development of key QM/QI components such as peer learning and consumer involvement)

- d. Does the District/Facility have an overall plan for implementing/supporting QM/QI activities?  
Yes [ ] No [ ] (If no, skip to Table 2 below)
- e. If yes, assess the plan for the following:
- Adequacy of plan against District/Facility targets for implementation of QM/QI
  - Presence of all the components of QM/QI (peer learning, coaching and mentoring, consumer involvement, support for QM committees and QI teams)
  - Feasibility of planned QI projects/activities

Record your findings in the table below.

**Table 2: Summary of Findings from QM Planning and Coordination Assessment**

QM/QI Aspect	Summary of Findings	Root Causes for Observed Gaps (where applicable)
QI Person and QI/QM Committee		
Annual Quality Management Plan (including coaching and mentoring)		
Peer Learning		
Consumer Involvement		


## SECTION C: REVIEW OF PM/QI IMPLEMENTATION (SYSTEMATIC COLLECTION AND USE OF DATA TO IMPROVE

*This section begins the coaching process, and should be done together with the team being supported.*

### 1. PERFORMANCE MEASUREMENT ASSESSMENT AND PROGRAM GAP DEFINITION

Review available routine and QI performance district/site level data to identify and define service gaps in priority service delivery areas. In the review, assess for:

- Completeness
- Accuracy
- Timeliness (*remember different datasets and indicators have different reporting timelines*)

The following indicators contained in Table 3 are the part of the nationally-recommended set of indicators that constitute the National QI performance measurement framework. The selected indicators measure progress in key program aspects and should be reviewed before improvement planning can be done. Record findings of the performance measurement review in Table 3 below.