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# Addressing Quality in Nigeria's Health Sector Reforms

Lessons from PharmAccess SafeCare Initiative

## The Quality Situation in Nigeria's Health System

Quality healthcare is, according to the WHO, "the degree to which health services for individuals and populations increase the likelihood of desired health outcomes." [1] Quality care is a critical component of universal health coverage (UHC). Yet, while there is much focus on access to healthcare, this UHC component is often deprioritised. A report by the Lancet Global Health Commission on High-Quality Health Systems estimates that 5 million people die every year because of poor-quality health care in low and middle-income countries (LMICs). This is significantly more than the 3.6 million people who die from not having access to healthcare [2] and represents about 15% of overall deaths in LMICs. Beyond this, quality of care is directly related to trust, the degree of confidence people have in the health system – a key driver of care uptake.

Nigeria continues to work towards achieving UHC. However, it ranks poorly based on the World Bank's Universal Health Coverage Service Index, scoring 38 out of 100 points. [3] Amongst the many challenges of health care delivery and achieving UHC in Nigeria are quality and concomitant trust of the people. The Health Care Quality Index, which measures quality and health systems performance, ranks Nigeria 142 out of 195 countries in health system performance based on healthcare access and quality. [4] Nigeria had an aggregate score of 39 out of 100 on the indicator of adverse medical treatment between 1999 and 2015. [5]

Nigeria's poor healthcare standards are evident in the shortage of health personnel, decrepit health facilities, non-functional or insufficient basic medical equipment, poor attitude of some healthcare workers towards patients and long waiting time at health facilities.

Studies have noted in Nigeria and other African countries, quality problems with attendant adverse effects on patient safety and patient trust, such as high levels of surgical complications, overcrowding in health facilities, poor hand hygiene and infection control practices causing high rates of hospital-associated infections, poor surveillance capabilities, counterfeit medicines, weak compliance with related protocols, policies and procedures, limited knowledge and implementation of ethics by health professionals etc [6] amongst others. [7]

Poor quality health care in Nigeria can be attributed to broader systemic factors, including poor financing for health care, financial hardship of patients, frequent strikes and absenteeism by healthcare workers, cost of healthcare services, non-compliance with existing standards, erratic power supply, poor infrastructural development, and limited quality assurance and measurement systems. [8] The impacts of poor-quality healthcare can be far-reaching, ranging from iatrogenic harm, lack of trust in the healthcare system, wasted resources, economic loss and increased mortality.

Under the leadership of Prof. Muhammad Pate, the Coordinating Minister for Health and Social Welfare, the current Government has indicated that quality is a key consideration for ongoing health reforms. Under the Nigeria Health Sector Renewal Initiative, quality is a major thrust. Quality of care is a core component of one of the four pillars on which this Initiative is anchored and has often been reemphasised by the Minister in public statements. [9]

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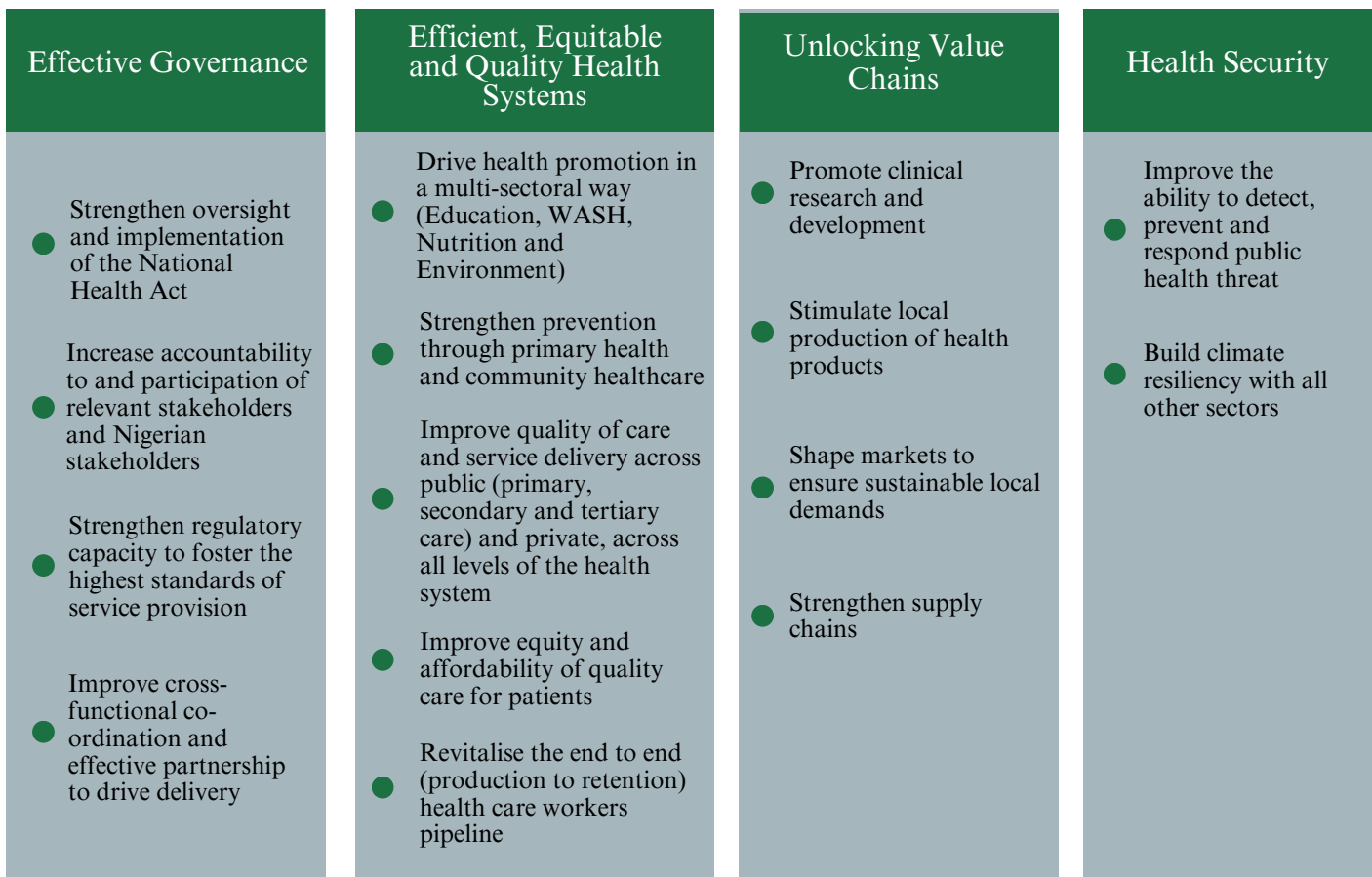


Figure 1: Nigeria's Strategic Vision for the Health Sector (2023 - 2026)

## Measuring quality

Quality in healthcare can be measured in terms of effectiveness; therefore, the provision of evidence-based healthcare services to those who need them, safety and people-centred care that responds to individual preferences, needs and values[10]. Other factors are timeliness, equity, efficiency, and provision of care, which make a full range of health services available throughout life.

**One of the major challenges to improving quality standards is the lack of quality measurement mechanisms. How do we measure quality? What are the indicators or metrics for measuring quality? Being clear about how we measure quality is essential because that allows us to identify the components of quality care and puts us on a path to achieve it. You cannot improve on what you don't measure.**

While several quality improvement methodologies exist, and a few private hospitals in Nigeria have adopted international certification and accreditation standards, these are by no means common or utilised across the country.

Furthermore, while some States monitor quality in healthcare facilities through the Ministry of Health and other agencies, quality metrics are often unknown. Moreover, existing international accreditation programs are frequently unachievable within reasonable timeframes in environments with underdeveloped healthcare infrastructure, unstable supply chains and chronic shortages of human and material resources. [11] The costs and likelihood of failing accreditation programs deter healthcare providers from embarking on a quality improvement program. Therefore, a contextual approach to quality measurement and improvement that considers resource limitations and capacity challenges in quality management and the timeframe required to attain global standards is a more feasible approach to achieve real, if incremental, change.

To address these quality-related challenges, PharmAccess, an international non-profit organisation has supported public and private health facilities to implement SafeCare Standards in low- and middle-income countries including Nigeria for over a decade.



**A review of the SafeCare initiative, its achievements and challenges can provide insights into measuring and improving the quality of care in Nigeria.**

**The SafeCare Initiative**

SafeCare was launched in 2011 as a collaborative initiative of PharmAccess, The Council for Health Services Accreditation of Southern Africa (COHSASA), and Joint Commission International (JCI).[12] The internationally accredited standards enable the measurement, rating and benchmarking of the level of quality, safety and risk of healthcare facilities with severe shortages in equipment and infrastructure to achieve improvements.[13] The SafeCare standards are the first healthcare standards accredited for resource-restricted settings by the International Society for Quality in Health Care External Evaluation Association (IEEA) (formerly ISQua). The SafeCare standards aim to "create a common language and ensure quality is measured against international standards while leaving room for more local adaptations." [14] The SafeCare standards are designed to take into consideration the infrastructural and environmental context, focusing on primary and secondary healthcare facilities that offer diverse and often basic services. The standards take into account existing contextual challenges such as limited resources for managing waste, water and energy, amongst other issues. SafeCare implements a rating system that allows for benchmarking the quality of care between healthcare providers of similar size and scope.[15]

The SafeCare Standards are holistic and assess clinical and non-clinical aspects of healthcare in terms of structure, process and outcome of health service delivery.[16] The standards are divided into 13 service elements, namely: management and leadership, human resource management, patient and family rights and access to care, management of information, risk management, primary health care services, inpatient care, operating theatre and aesthetic services, laboratory services, diagnostic imaging services, medication management, facility management, and support services.[17]

During a facility assessment, criteria under each standard are scored fully compliant, partially compliant, or non-compliant. The health facility is awarded a quality score and level ranging from Level 1 (lowest quality) to Level 5 (highest quality).

A customised quality improvement plan outlining corrective actions for non-compliant criteria that pose high risks regarding safety, quality or financial sustainability is developed for the health facility. The management of the health facility also receives a detailed assessment report and certificate indicating both quality score and level. Facilities are given a sustainable roadmap towards excellence and are re-evaluated based on their quality improvement plan. [18] Facility quality teams upload evidence of completed improvement activities and progress is monitored via SafeCare's Quality and Analytics platforms.

Management	Clinical	Clinical Support	Ancillary
Governance & Management	Primary Healthcare (Outpatient) Services	Laboratory Services	Facility Management Services
Human Resource Management	Inpatient Care	Diagnostic Imaging Services	Support Services
Patient & Family Rights and Access to Healthcare	Anesthesia Services	Medical Management	
Management of Information			
Risk Management			

Figure 2: SafeCare Service Elements

Thus, SafeCare standards address a missing component in the quality landscape in Nigeria by providing a measurement tool with key indicators and a pathway to improvement. The scoring and stepwise approach incentivises facility quality teams and healthcare providers and has been proven practicable in the Nigerian context.

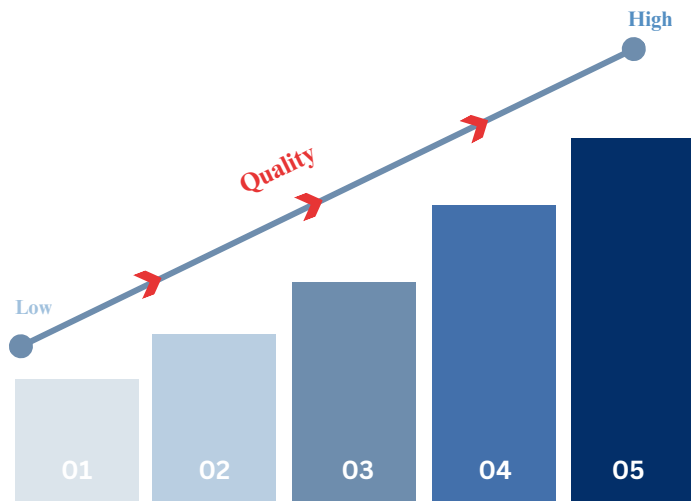


Figure 3: SafeCare Quality Levels

### SafeCare Implementation in Nigeria

PharmAccess has implemented SafeCare across public and private health facilities in Nigeria. For instance, the Lagos State Health Management Agency (LASHMA), which oversees the Lagos State Health Scheme (Ilera Eko), a public health insurance scheme developed to facilitate access to health insurance for over 25 million people, adopted SafeCare Standards for its network of 156 currently empanelled on the network. This is significant, not only for the number of potential enrollees in the state scheme but also because LASHMA onboards both public and private facilities.[19] Health facilities seeking to be empanelled under the scheme must apply to LASHMA and participate in a mandatory quality improvement program based on the SafeCare Standards.[20]

In May 2022, LASHMA commissioned SafeCare to assess 220 health facilities. By the first quarter of 2023, a team of Certified Assessors assessed 156 currently empanelled on the network. Each facility received an assessment report, a customised quality improvement plan to address identified deficiencies and a certificate.[21]

A detailed report of the quality assessment results for the 156 health facilities and recommendations was submitted to LASHMA by PharmAccess.[22] Some of the findings, for instance, revealed a need for stronger incentives to sustain improved patient-centred quality care by healthcare providers in Lagos State. Based on the findings and recommendations, LASHMA introduced a new quality-based performance incentive system whereby healthcare providers on SafeCare levels 4 and 5 or with international accreditation will receive higher tariffs.[23]

In Lagos State, facility quality teams are supported in implementing their quality improvement plans by a team of LASHMA Quality Officers and State Quality Facilitators under the Global Fund RSSH program. The Lagos State Quality Team comprises 20 Assessors and over 85 Quality Facilitators who mentor healthcare facilities in implementing their quality improvement plans.[24] Health facilities undergo periodic auditing, which informs the yearly empanelment renewal for those that meet the performance targets.[25]

Kwara State has 236 health facilities implementing SafeCare Standards under the State Health Insurance Scheme and the Basic Health Care Provision Fund (BHC PF) program. In May 2023, Kwara State won the PHC Leadership Challenge Fund (PHC-LCF) award for the North-Central zone in Nigeria. This significant milestone was partly attributed to the capacity-strengthening support of PharmAccess.

Similar to Lagos and Kwara States, PharmAccess had previously 2016 supported the Ogun State government in setting up a SafeCare Quality Assurance Unit. The State was the first to adopt the SafeCare Standards as its quality improvement methodology.[26] PharmAccess trained the State Quality Assurance Unit to be able to undertake quality assessments of facilities and develop improvement plans.[27]

PharmAccess has expanded the use of SafeCare Standards in Nigeria by introducing a licensing model allowing private organisations to use its SafeCare Standards brand under a licensing agreement while the government can customise its brand using the state logo and name. This has made it possible for healthcare facilities, payer and patients to adopt the Safe are standards

An example is a licensing agreement with Africa Holdings Limited, a leading health service provider in Nigeria and other African countries with at least 38 facilities under its portfolio. [28] Other entities licensed by PharmAccess in Nigeria include PurpleSource Healthcare Ltd, Pathfinder International, FHI360 and Solina Group.

### **SafeCare's Impacts on Quality in Service Delivery in Nigeria**

With the increasing use of SafeCare standards, a good question to ask would be: what are the impacts? Is quality improving? Early reports on the implementation of SafeCare in Nigeria showed that 75% of facilities improved in Nigeria as a whole, with some facilities going as far as changing management to meet healthcare quality targets. [29] The statistics are corroborated by PharmAccess' 2022 progress report, which highlights that out of 226 healthcare facilities implementing SafeCare in Nigeria, 75% of them improved in quality score at follow-up assessment.

More specifically in Lagos State, data has shown that implementing SafeCare Standards has resulted in informed decision-making and resource allocation. This, in turn, boosts clients, investors, and insurers' confidence in the desire and capacity of healthcare providers to steadily enhance their capacity. For example, Subol Hospital in Lagos, Nigeria since 2012, moved from SafeCare level 1 and 2, to SafeCare level 3 and 4, which ultimately increased public patronage, leading to an increase in revenue. [30]

A review of the SafeCare initiative, its achievements and challenges can provide insights into measuring and improving the quality of care in Nigeria.

The Medical Director of Subol Hospital has this to say; "the impact of implementing SafeCare standards has been very rewarding. It has boosted the confidence of both clients and our staff. It has also brought recognition to private companies that now want to partner with us." [31] Other facilities that attained SafeCare Level 4, include Alimosho General Hospital following its fourth assessment in 2021.[32]

The Federal Medical Centre, Ebute-Metta Lagos, adjudged to be one of Nigeria's best public tertiary hospitals implemented the SafeCare Standards over 18 months. The hospital had a baseline score of 45% and a follow-up assessment score of 69%.[33] The hospital with a SafeCare Level 4 certification clinched the 2021, SafeCare Facility of the Year award for its dedication to sustaining quality of health care and the most compliant public health facility by the state regulatory agency, HEFAMAA. [34]

Paelon Memorial Hospital in 2016 became the first hospital to attain SafeCare level 5 in Africa, having enrolled in SafeCare Quality Improvement Program in 2014 at Level 2.[35] It was also awarded the most compliant private health facility by the state regulatory agency, HEFAMAA in 2022.

Evercare Hospital Lekki, arguably the biggest private hospital in Lagos became the second hospital in Nigeria to be awarded SafeCare Level 5 certification for its outstanding healthcare delivery services and quality improvement measures. [36] A plethora of evidence exists to show that implementing SafeCare Quality Standards across Nigeria improves the quality of healthcare service with only about 25% of facilities in Nigeria failing to make any reasonable progress.

Nigeria has unacceptably high maternal and newborn mortality rates. Implementing SafeCare Standards can amplify maternal and child health quality of care interventions, as highlighted by Pathfinder International at a presentation on the "Effectiveness of SafeCare Methodology in Improving Quality of Maternal and Newborn Care: Case Study from Saving Mothers Giving Lives (SMGL) 2.0 Project in Kaduna, Nigeria" at the International Maternal Newborn Health Conference (IMNHC) conference in South Africa in May 2023. The figure below shows improvements from baseline and follow-up assessments on four key indicators.

Key recommendations from Pathfinder include (1) Quality improvement programs that provide platforms for benchmarking among facilities, including learning across facilities can improve maternal and newborn health outcomes (2) An innovative QI program like SafeCare—when used with focused support in the form of mentoring and supportive supervision and other initiatives like maternal and perinatal death surveillance response (MPDSR)—can sustainably improve quality of care and health of mothers and newborns.

## Results

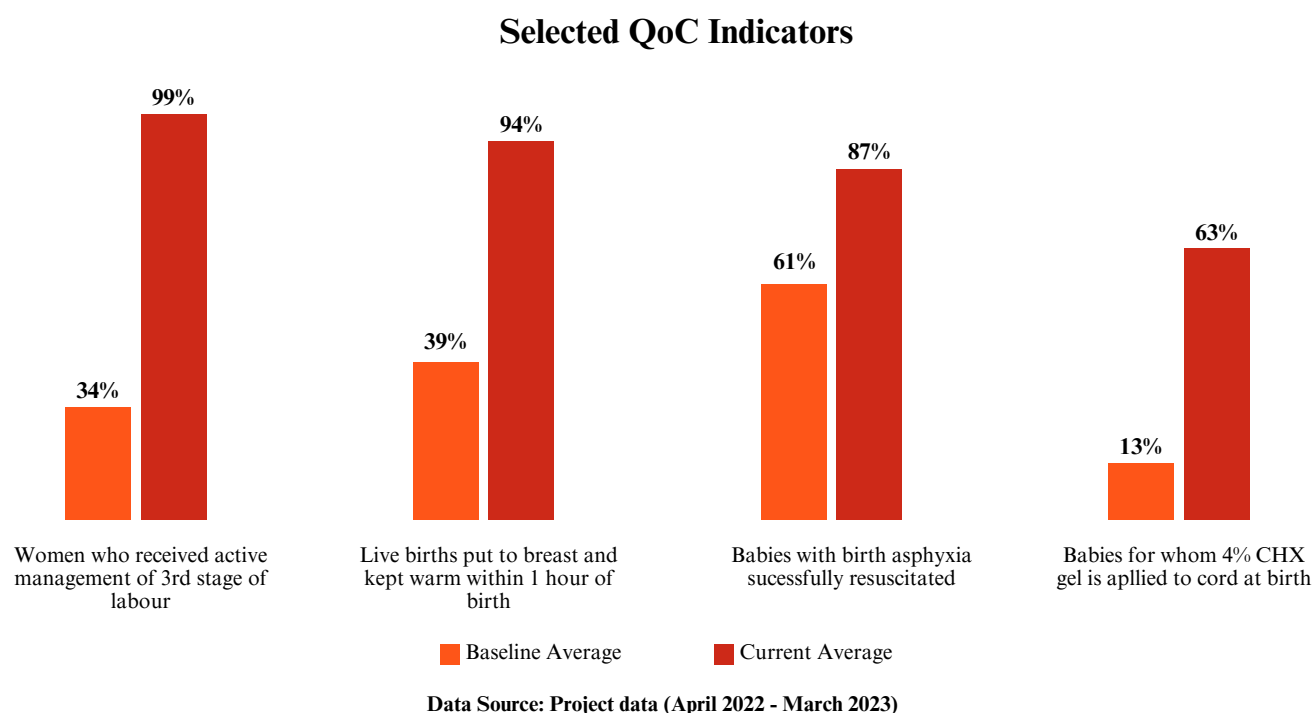


Figure 4: Comparison of MNH quality indicators at baseline and follow-up assessments

Much of the impacts of SafeCare, largely beneficial in increasing the quality of service delivery, are documented by PharmAccess. Understanding the successes of the programme requires the Government and others (academia, research think tanks, etc) to study its methods and results. In light of ongoing reforms, understudying the implementation of these standards can inform replication.

### **Moving Forward**

Quality cannot be overlooked in the efforts towards UHC in Nigeria. The emphasis on quality as a key pillar in the ongoing health reforms by the Government portends better health outcomes. This must not remain mere words on paper but must be actively realised. One of the ways to achieve quality improvement is a consideration of systematic, contextualised approach to measure quality. The SafeCare initiative, which has been implemented for over a decade, with key insights from public and private health care facilities in Nigeria, embodies this approach. Understanding this initiative is one step towards implementing quality improvement in health service delivery across the country.

One of the key strengths of the SafeCare initiative is the political buy-in evident in Lagos, Ogun, Delta and Kwara States, with explicit improvements in quality attested to by the facilities. Replicating SafeCare Quality Standards across other States and at the Federal level would most likely not only improve quality across the country but engender greater uniformity and result in better outcomes and greater confidence in the national health system. SafeCare's appeal and effectiveness are underscored by the growing interest from additional states, such as Gombe, Yobe, and potentially those under the IHP, who are keen on adopting SafeCare methodologies to elevate the standard of healthcare services.

Furthermore, it is noteworthy to highlight how SafeCare's insights have been instrumental at the federal level, specifically in informing the revision of the National Health Insurance Authority's quality tools and the development of bespoke digital platforms, which have now been deployed in all the States of the Federation. This collaboration emphasises SafeCare's pivotal role in shaping healthcare quality improvement strategies across various governmental tiers. The Government may help address existing quality challenges and promote the implementation of SafeCare standards by adopting them as a national quality standard for healthcare facilities.

Quality costs money. Improvements to infrastructure, healthcare provider remuneration, and measurement of quality outcomes require funds. As already noted, implementing the SafeCare Standards has beneficial impacts but requires strong leadership, investments, and commitment to continuous quality improvement. Achieving long-term sustainability will require leveraging existing funding interventions like the Basic Health Care Provision Fund (BHCPF) to support quality improvements.

As highlighted by PharmAccess, there is a need for stronger incentives to sustain improved quality care by healthcare providers. State Health Insurance Schemes across the Federation in adopting the SafeCare Standards can replicate LASHMA quality-based performance incentive system where healthcare providers on SafeCare level 4 and 5 or with international accreditation receive higher tariffs. This will provide additional incentives to sustainability efforts.



While evidence has shown that implementing SafeCare Standards, particularly in the urban areas, has led to elevated quality in healthcare, some evidence suggests that SafeCare Standards will work as well in rural and hard-to-reach communities where facilities are more lacking. The 15 health facilities in hard-to-reach riverine communities of the Niger Delta and Bichi Excellence Hospital and Maternity located in a rural community in Northern Nigeria were examples of best-performing providers implementing SafeCare Standards under the Access to Finance program and FCDO Lafiya project respectively.

The Government may help address existing quality challenges and promote the implementation of SafeCare standards by adopting them as a national quality standard for healthcare facilities.

Outside of Government, increased collaboration with the private sector and development partners will help extend quality efforts such as SafeCare. PharmAccess is already collaborating with the private health sector through the Healthcare Federation of Nigeria (HFN), an umbrella body of private health sector entities. But more can be done. For instance, the Adopt a Primary Health Care Facility initiative supported by the Private Sector Health Alliance of Nigeria (PSHAN), which aims to support the Government in providing essential primary health services to communities in Nigeria could benefit from implementing the SafeCare initiative. Public-private partnerships aimed at improving healthcare infrastructure could also benefit from implementing SafeCare standards. This will require further engagement with other stakeholders, including in the development sector, to extend the impacts of SafeCare in Nigeria.

As is increasingly evident, quality is as important as access. Adopting an initiative such as SafeCare may provide a tried-and-tested approach to improving quality and, ultimately, health outcomes in Nigeria.

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