Clinics in North West Improve Compliance with National Core Standards

Ten primary health care (PHC) clinics in the Ngaka Modiri Molema (NMM) district in the North West province recorded an average 44 percent overall improvement in compliance with the National Core Standards (NCS) for provision of pharmaceutical services. This improvement was achieved between September and December 2012, contributing to the overall quality of care that patients receive at these facilities.

Health facility compliance with national quality standards for health establishments is recognized as a critical component for the successful delivery of health services. With this as a backdrop, a team of pharmacists working in the district, set out to improve compliance with NCS relating to pharmaceutical services at the 10 clinics. The project was implemented as part of the Pharmaceutical Leadership Development Program (PLDP) provided by the USAID-funded Systems for Improved Access to Pharmaceuticals and Services Program. The PLDP presents a unique approach to leadership development

combining technical pharmaceutical knowledge with sound management practices. The aim of this approach is to respond to challenges in the work environment and improve service delivery.





Before intervention

After intervention

The team started by assessing compliance at the clinics. Data collected was evaluated according to the standard risk classification method used in the NCS. Vital measures are those that ensure the safety of patients and staff to prevent unnecessary harm or death. Essential measures are those fundamental to the provision of safe, decent, quality care. Developmental measures are those to which management should aspire to achieve optimal care.

Working with personnel from the PHC facilities, the team identified gaps in compliance, explored the root causes for these gaps, and developed and implemented quality improvement plans. Key strategies included:

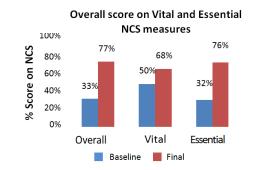
- Training clinic personnel on Good Pharmacy Practice standards, proper storage of medicines, cold chain management, and setting minimum/maximum stock levels
- Introducing an interim service level agreement between hospital pharmacies and clinics for supply of medicine
- Developing and implementing standard operating procedures on medicine supply management



Systems for Improved Access to Pharmaceuticals and Services



A follow-up assessment was conducted three months later. The overall improvement in compliance with the NCS relating to the provision of pharmaceutical services was 44%. Vital and essential measures showed an improvement across the 10 facilities from 50% to 68% and 32% to 76%, respectively.



The positive impact this project had at the selected clinics provided a starting point for pharmaceutical services within the district. These interventions will be rolled out to all the clinics in the district. All stakeholders need to work toward improving adherence to NCS in line with the primary health care reengineering focus of the National Department of Health.

