Compassionate, respectful and caring health system for HSTP success

October 2019

21st ARM

Human Resources for Health Directorate



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Outlines

- Background
- HSTP plan on CRC
- Success to date
- Major Challenges
- Research evidences and Recommendations
- Major discussion points



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Background



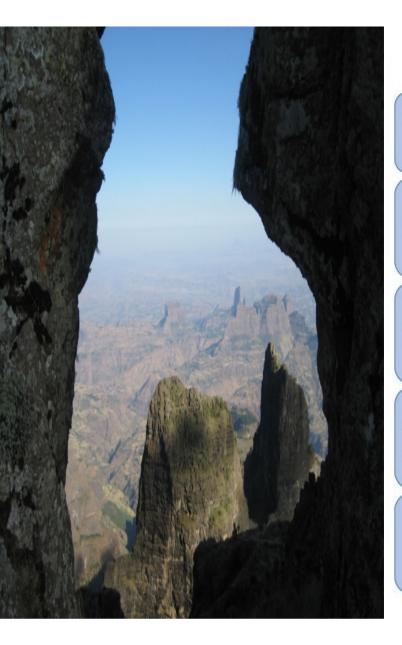
- Compassionate and Respectful Care (CRC) is one of the Federal Ministry of Health's (FMOH) four key Health Sector Transformation Plan transformation agendas
- CRC identified as one of transformational agenda to produce competent, skilled, dedicated and serving professionals to the population at large.



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Current CRC landscape In Ethiopia



Drivers of CRC

Health system prioritizes holistic, quality care

Providers are selected based on passion, trained to cultivate capacity and practical skills

Facility and structure of care address patient and provider needs

Patients are aware of their rights and responsibilities

Supportive and trusting provider-patient relationships

Methods of Intervention

- Cascade throughout the decentralized health system
- Prioritize systemic reform
- Recognition and role models
- · Outcomes-driven, not inputs-driven
- Medical students selected on passion and academic achievement
- CRC should be an element of professional competency
- · Mentorship and training of providers
- Resources for effective care
- Team communication
- Support and compassion for providers
- Build health system literacy for patients and their attendants
- Patients are involved in healthcare decision-making
- Space for feedback from patients and communities
- Open communication between provider and patient
- Accountability

Objective

COMPASSIONATE, RESPECTFUL, AND CARING HEALTH SYSTEM

- Mission-driven
- Moral obligation
- Rooted in spirituality
- Treating mind and body
- Contextualized interventions to facilities, communities
- Support from all sectors

QUALITY

Outcomes

COMMUNICATION

RESPONSIVENESS

EFFECTIVENESS

Background

 "Humanizing Health Care is a call from the heart to transform our health care system into a system that cares about people's health and about the health of the people who work in it.





Creating a culture of Compassion, Respect and Care

- The way HP interact with clients is of key importance
- Staff need to be encouraged to "do the right thing" as well as "doing things right"
- Leaders should show staff the purpose and meaning in their work and act as "hosts"
- Staff need to develop a new mindset and move from care "delivery" to the coproduction of care through relationships



HSTP Plan on CRC

- Reforming the recruitment of students
- Improving the curriculums of various disciplines
- Effective management of health professionals that are already practicing
- Ownership and engagement of leadership at d/t level of the system & Inspirational leadership
- Model professionals(as ambassadors)
- Include patients and families, and citizens as partners of the movement
- Advocacy campaign through mass media
- Annual health professionals recognition
- Enacting a Patients' Rights and Responsibilities law



Success to date

- There is increasing commitment and interest in implementing the CRC initiative in the country. A CRC council, which included major stakeholders including the MOE, professional associations, and the private sector has been established.
- Introduction of short term training manual that enhanced awareness and practice of to health workers at all levels. To date, more than 27, 000 health leaders and health workers throughout the country trained on CRC.
- Development and introduction of generic curriculum in preservice education has been another important milestone.
- The establishment of well-functioning 16 CRC incubation centers including national referral and regional hospitals.



Continued... Success to date

- Improved recognition of models health professionals those that have been able to consistently put CRC into practice in their daily work.
- Increased participation and involvement of professional associations
- CRC is being considered as an essential component of the health service quality improvement initiative
- The Ministry of Education has an important stake in the implementation of CRC in preservice education.



Continued... Success to date

- The integration of CRC issues in the Continuous Professional Development (CPD) and national examinations.
- Provision of volunteer service becoming a culture in health facilities
- Recognition of models become a culture in different health institutions
- Financial support, more than 200mlnETB



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Challenges

- Lack of Regional and institutional ownership
- Lack of ownership and engagement of stakeholders at all levels
- Unavailability of systematic CRC program performance monitoring and evaluation systems
- Lack of structure to lead sustainably at regional and lower levels
- Lack of uniformity of implementation among regions and health facilities
- Resource limitations towards addressing the issue in different areas of intervention



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...Challenges

- Lack of documented experience on implementation, monitoring and research of CRC.
- Attitudinal aspects among the health workforce
- Comparing CRC with benefit packages delivered
- Lack of comprehensiveness on the implementation
- Ensuring HPs stay compassionate
- Lack of adequate partnership (stakeholders)
 engagement



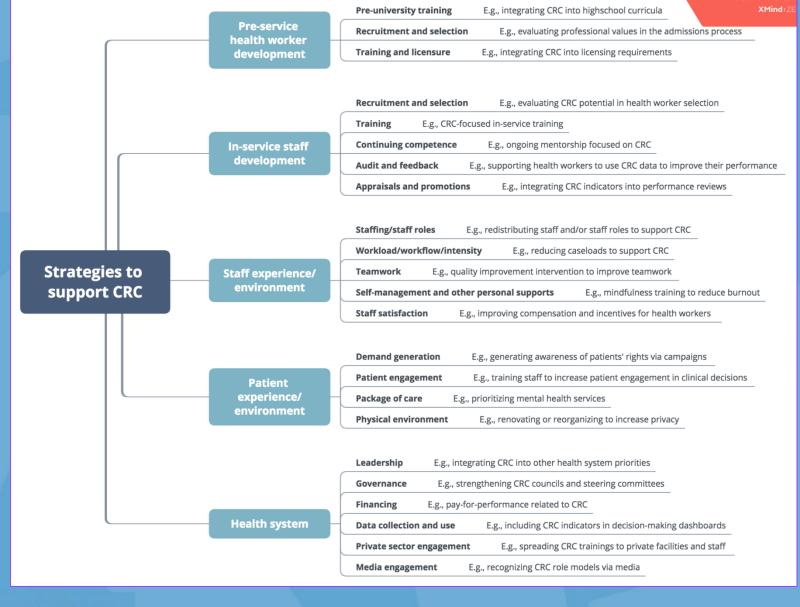
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Research evidences & Recommend ations



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HEALTHIER CITEZENS FOR PROSPEROUS NATION!

Major discussion points

- Lessons learnt (Success & Challenges) in CRC implementation
- Major areas of improvement in CRC implementation and new modalities to consider in new HSTP
- Role of stakeholders on CRC implementation



Thank you! Care matters!



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