

Coming Together for Quality Care Community-Provider Partnerships

As part of the Performance Improvement (PI) approach, the PRIME II Project integrates consumer perspectives into activities designed to improve primary-level family planning and reproductive health (FP/RH) care. PRIME and its partners began introducing this concept to Rwandan counterparts in May 2002 and adapted a strategy for Rwanda, *Partenariat pour l'amélioration de la qualité* (PAQ), that complements PRIME's assistance to the Ministry of Health (MOH), especially in supporting community-based mutual health organizations (*mutuelles*) and scaling-up prevention of mother-to-child transmission (PMTCT) of HIV services.



Linking Quality with Community Mobilization

Building on PRIME II supporting institution Save the Children's Partnership Defined Quality methodology, the PAQ approach links quality assessment and improvement with community mobilization. After exploring consumer and provider definitions of quality, PAQ brings the two perspectives together to solve the most pressing problems and develop functioning partnerships between primary providers and the communities they serve.

Defining Quality Services

PRIME and Save the Children have used PAQ for problem-solving at four pilot health centers: Byimana, Bungwe, Mukoma and Munyinya. After training district supervisors to apply PAQ and monitor its impact, PRIME assisted MOH staff at the sites to explore community members' and health care providers' definitions of quality services. The exercise revealed agreement on the majority of clinical and social issues related to quality services:

- Greater access and availability
- Improved communications and collaboration
- Safety
- Availability of equipment, supplies and drugs
- Effective systems and procedures for management
- Enhanced provider-client relationships
- Cultural compatibility
- Technical competency.

After consolidating their perspectives, teams of community members and providers began working together to implement solutions to resolve selected problems. "If we had used the PAQ approach earlier, we would never have had the problems we experience now with poor treatment of health center

Rwanda Program

- Primary Providers, Performance Improvement
- Policy and Training
- *Mutuelles*
- PMTCT
- Consumer Perspectives

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clients,” remarked Agnès Uzabakiriho, a member of the PAQ team at Byumba. “This is the first time we have ever sat around a table together to discuss what quality of care really means to the health care providers and to the community.”

Positive Changes

A process evaluation conducted in January 2003 found significant accomplishments since implementation of the PAQ approach:

- Increased collaboration among different cadres of health volunteers and between the health sector and local government
- Specific improvements at each health center resulting from problem-solving and work plans developed through PAQ
- Increased utilization of services (although this cannot be verifiably attributed to PAQ)
- A shift in the mentality of both providers and clients to a partnership approach: a major change in a society conditioned to top-down authority.

Replicating the PAQ Approach

Through the final year of PRIME II, MOH and Project staff will continue to foster improved relationships among health care providers and communities, working to replicate and institutionalize the PAQ approach in order to:

- Involve community advocates to influence efforts to improve service quality in ways that reflect and respond to community needs, wants and preferences
- Strengthen both national efforts to improve health care quality and district-level strategies to increase *mutuelle* enrollment rates through community involvement
- Increase awareness of positive health practices and the benefits of using health care services by enhancing community interest in and ownership of health services.



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