



# **KENYA HARMONIZED HEALTH FACILITY ASSESSMENT FOR UHC (KHHFA 2018)**

---

**Dr. Helen Kiarie- Head, Health Sector Monitoring & Evaluation Unit**  
**Ministry of Health**  
**Kenya**



# Outline of Presentation

- Background
- Purpose of HFA
- Rationale for conducting HHFA in Kenya
- Approach
- Measurement methods
- Anticipated output of HHFA in Kenya



# Background

- The Harmonized Health Facility Assessment (HFA) is the collective effort of multiple Health Data Collaborative partners at the global level including:
  - The Global Fund, The World Bank, USAID, GAVI, PEPFAR/CDC, UNICEF, UNFPA, UN MDG, Health Envoy, WHO
  - Brought about by the **HDC Health Facility Survey working group** of technical experts from partners, countries, academia, civil society as a key deliverable of the HDC Operational Workplan 2016-17.



# Background

- Kenya has drawn the Roadmap towards accelerating implementation of UHC agenda, determining the level of Service Availability, Readiness and quality of care across the sector is paramount.
- In order to provide a comprehensive assessment of the functioning of a health system and its impact on health, data from health facilities are needed.
- Such initiative will provide baseline information needed for costing the health investments in Kenya UHC Roadmap and the Kenya Health sector strategic and investment plan 2018- 2023.



# Background

- Past initiatives to provide information on the degree of preparedness of health facilities to offer services were conducted through the SARAM in 2013, SDI 2012 and SPA in 2010 among others.
- These surveys provided information that assisted devolved units setup health departments in the counties.



# Background

- Kenya's health system devolved in 2013. Several health surveys have been implemented since then including the KDHS in 2014, STEPS in 2015, Mid-term review of the KHSSP in 2016, the Mini-SARA 2016 among other 'smaller' surveys.
- All these have focused on different facets of service availability and readiness with varied level of details to establish progress.



# Background Cont.....

- The Kenya Harmonized Health Facility Assessment 2018 will be implemented by the Kenya's Ministry of Health in collaboration with the Development Partners, who will provide funding and technical support
- The content consists of five HFA modules and data collection tools developed in response to input from technical and program experts



# Purpose of HHFA

- Fill critical data gaps in health service availability and readiness of facilities to offer care
- Understand quality of care including adherence to standards and patient outcomes, and critically assess quality of care in the 4 pilot counties by assessing patient records
- Provide reliable information on management of health facilities including financing





# Purpose of HHFA

- Generate the evidence base to feed into the ongoing UHC roadmap and strategic developments & annual health reviews
- Assess equitable and appropriate distribution of services and resources
- Get baselines that will be used to Plan and monitor scale up of interventions key to achieve UHC and SDGs
- Assess availability and affordability of pharmaceutical products in the market



# HFA Modular Approach

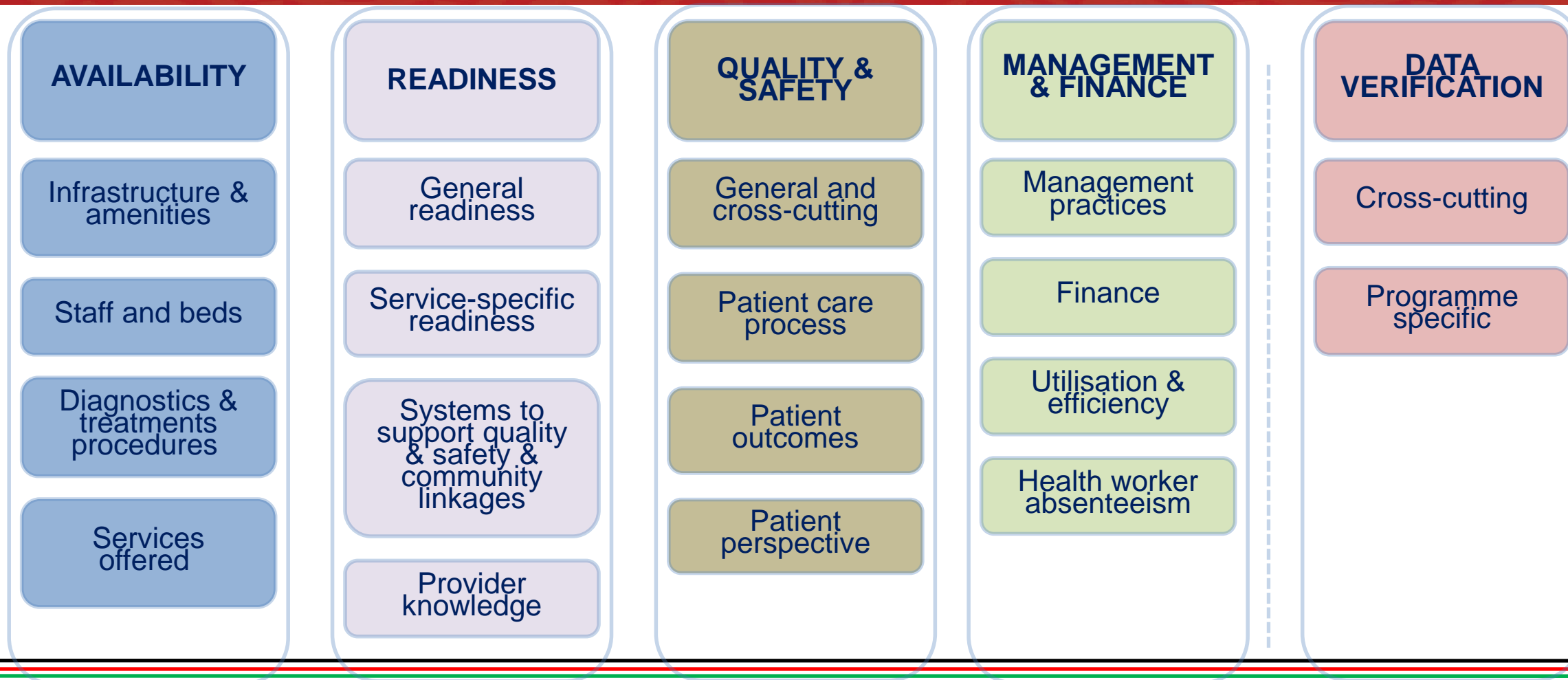
The modules that will be deployed for the HFA include;

1. **Availability:** Information relating to the physical presence of facilities, resources, and services
2. **Management & finance:** Practices to support continuous service availability and quality.
3. **Readiness:** Capacity of facility to provide specific services
4. **Quality & safety of healthcare:** Includes indicators of the receipt of appropriate, effective and timely care by patients under safe conditions.
5. **Community Unit:** A qualitative assessment of the community structures via key informant interviews with Community Health workers and focus group discussions with clients in all 47 counties



# A harmonized module approach to HFA

(building on existing surveys)





# HFA Modular Approach

- As part of this harmonized approach, existing indicators have been brought together with a standard set of indicator definitions and recommended assessment methods
- Diverse data collection methods have been compiled into a comprehensive set of modules and a question bank, both organized by subject.



# Sample

## **Facility Assessment:**

- Size: 3,335 for facility assessment

## **Community module:**

- Two community units will be sampled per county.
  - FGD with mothers
  - FGD with either the CHEWs or the CHVs.
  - 5 KIIs, 4 with CHVs and 1 with a CHEW.



# Measurement Methods

Data collection methodology will include any of the following;

**Facility audit-** The data collector walks through the facility and collects information **by interviewing the most knowledgeable person available** on the day of the survey for the subject. Reported information on availability of equipment, commodities, documents, and systems are validated by observation of the items in the vicinity where they are needed to reasonably assume usage for the service in question

**Provider interview-** A provider is interviewed on their knowledge on clinical practices in specific service areas through a checklist or vignettes (can include one or more providers)

**Record review** -The data collector draws **a sample from registers/records** for eligible patients and then reviews registers and records for documentation of specific elements in the patient care process. If records are not maintained at the facility, the sample may be persons who received services the day of the survey whose patient card is reviewed on exit.



# Rationale for conducting HHFA in Kenya

- I. Provide external validation in evaluating information gaps critical for delivery of UHC roadmap;
- II. Assess community unit's functionality
- III. Comprehensive information from the 4 pilot counties
- IV. Laboratory services availability in timeliness and scope
- V. Infrastructure availability and functionality
- VI. Provide Information on strategic planning, health sector priority investment
- VII. Availability of basic commodities
- VIII. Human resource availability and density
- IX. Public health interventions
- X. Finance, flow of funds to facilities
- IX. Provide a basis for accountability for financial resources in health facilities & counties
- X. Provide updated Health Facility information including geocodes and services available at the facilities.



# Anticipated output of HHFA in Kenya

1. A comprehensive harmonized health facility assessment report 2018;
2. Service availability and readiness report 2018;
3. Updated service provision information for full set of services as proposed in KHP 2014-2030 / KEPH/ UHC, as a baseline service provision for UHC;
4. Quality & safety of Care Report 2018;
5. Management & Finance Report
6. Established database on availability of key HR (numbers, cadres and basic qualifications) and infrastructure (numbers, and ages);
7. Reliable baseline information to inform UHC planning
8. Policy brief products for each module;





# Progress so far

- Sample determined
- Tools have been adapted to country setting
- Tools pretested
- Next immediate steps are to customize changes in the electronic versions
- Train Trainers followed by Research assistants
- Data collection expected to start in Mid-October for a period of 24 days



# Resources

- In country development partners in Kenya have been instrumental in planning the HFA ---Technical and financial support
- USAID & WHO have supported the initial parts of the HFA– mostly tools development
- Currently the country is mobilizing support for the remaining elements of the survey
- Indicative support from USAID and WHO
- Resource gaps for key elements of the survey still exist, especially post data collection work.



# THANK YOU

---