Executive Summary
The Institute for Healthcare Improvement’s South African country programme was started in 2005. Over the past five years, the IHI-SA team has worked closely with a growing group of local partners and the Department of Health to support the national health system efforts to save South African lives and improve the patient experience of care. The IHI-South Africa programme is a strong group of linked projects seeking results across a large and diverse country. Each of the following pages contains a summary of the progress and results from the IHI-SA supported projects.

Results this Quarter
In this section, we describe progress towards achieving two of our clear goals: increasing the number of patients on life-saving HIV therapy and decreasing the number of babies born with HIV. Our aims are simple: save the most lives in the shortest possible time. To achieve these results, IHI partners closely with local, regional and national health system leaders in the Department of Health and with a dynamic group of South African non-governmental organizations (NGOs).

We can report that 93% of all patients eligible for HIV treatment in IHI-supported projects are now receiving life-saving antiretrovirals through the hard work of all the partners. This surpasses the National Strategic Plan targets (80%) and is well-ahead of the rest of the country. Across the Prevention of Mother-to-Child HIV Transmission (PMTCT) programmes, four of the 12 districts where IHI has actively supported partners can now report consistent transmission rates below 5% (the national goal).

Project Design
Over the past year, the IHI-SA team has nurtured several strategic partnerships with organizations that have emerged as fore-runners of the health systems improvement movement in South Africa. These “Centers” of QI support for the health system have become the pillars of partnership around which the IHI-SA’s plans revolve. In addition to consistently striving to support the National Department of Health, we now work with four organizations: Reproductive Health Research Institute (RHRI), the Best Care Always! Campaign, the 20,000+ Partnership at University of Kwa Zulu Natal and more recently, South-2-South. With each of these organizations, IHI-SA provides support for design and execution of specific health systems improvement projects, strategic advising for programme leadership, capacity building for quality improvement and expertise in analysis and dissemination of results.
**Highlights**

- IHI’s partners launched a QI network aimed at sharing best practices and knowledge with each other with the primary objective of trying to build sustainable capacity for QI throughout SA.
- IHI-SA welcomed Lindsay Ryan, a 3rd year Harvard Medical student who is spending the year working with the 20,000+ partnership at the University of Kwa Zulu Natal.
- Best Care...Always! formally launched its engagement with the public sector in an exciting new initiative working with the majority of public sector hospitals in Gauteng Province.
- RHRI (formerly RHRU) has prioritized quality improvement and health systems strengthening (HSS) approaches for its future services and has launched its new “HSS” unit.
- 20,000+ participated in the First Global Symposium on Health Systems Research in Montreux, Switzerland and showcased their results in multiple forums.
Reproductive Health and Research Institute

Overview of the Partnership
The Reproductive Health & HIV Research Institute (RHRI) of the University of Witwatersrand is one of the largest training and research units in the country. RHRI is a world-recognised leader in HIV/AIDS and reproductive health research, and has been designated a WHO Collaborating Centre. Since 2005, IHI and RHRI have worked together to improve access and quality of HIV care and treatment services in Johannesburg’s Inner City. These efforts resulted in a major increase in clinical care capacity and accelerated efforts to achieve universal HIV coverage in the region. Building on these successes, RHRI expanded its efforts to the neighboring Ekurhuleni health District (population 2.6 million) in 2009.

Highlights from this Quarter
- RHRI completed its internal reorganization and initial orientation of staff to focus on quality improvement and health systems strengthening methodologies.
- RHRI’s new HSS/QI unit formed to serve as catalyst for driving improvement activities across the organization’s supported Districts and across SA (coordinating USAID PEPFAR partners and advising NDoH).
- Enrolment of patients on HAART continues its trajectory of rapid increase in Inner City Johannesburg surpassing government targets (see results below).
- RHRI leadership staff participate in IHI’s 2-day partner retreat in Magliesburg formulating plans for a joint network of collaborating partners focusing on using QI to strengthen the SA health system.

Key Results

Next Steps
- Assist with developing a clear vision and objectives for RHRI’s independent HSS/QI unit for provision of ongoing QI capacity building throughout SA
- Revise RHRI’s aims to move beyond getting patients on treatment to now provide high quality, full-spectrum HIV care services
- Provide on-going training for new RHRI staff on improvement methodologies and leadership skills
- Build on-going QI capacity within HSS/QI unit through formulation of professional development program
- Assist with design and agenda setting for upcoming USAID PEPFAR partners QI collaborative
- Provide the NDOH with strategic advice and assistance to establish a National Quality Programme
**University of Kwa Zulu Natal (KZN) – 20,000+ Partnership**

**Overview of the Partnership**

The 20,000+ Partnership is a health systems strengthening project which aims to improve the quality of prevention of mother-to-child transmission (PMTCT) services in 222 public health facilities in three districts of KZN serving a population of 5.5 million people. 20,000+ is a partnership between the KZN Department of Health, the University of KZN and the Institute for Healthcare Improvement which aims to decrease perinatal transmission of HIV to less than 5% by 2011—a target set by the SA National Strategic Plan.

**Highlights from this Quarter**

- Ethekwini district reaches its target - 100% counseling coverage.
- Ugu sustains its improvement, achieves a PCR testing rate of >90%, and decreases PCR positivity to 5% (DHIS data).
- 20,000+ spreads its methods to work on MDR-TB care at King George V hospital in Durban and has in six months improved TB/HIV integration. HIV treatment initiation for TB/HIV co-infected patient rose dramatically from 59% to 93%.
- Members of the 20,000+ project team participate at the First Global Symposium on Health Services Research and present their results at the World Health Organisation in Geneva.

**Key Results**

![Chart showing Mother to Child Transmission Rate decline](chart1)

Since the beginning of the project, we estimate that the mother-to-child HIV transmission rate has decreased from 21% to less than 5%! The project celebrates, for the first time, the achievement of 100% counseling rate in all 3 districts in which we work. Massive rise in referral rates for pregnant women across the three districts. The next phase of work focuses on ensuring that all pregnant women who have been referred are rapidly initiated on HAART.

**Next Steps**

- Develop sustainability plans for PMTCT core activities and accomplishments in all three districts.
- Develop a quality improvement and health systems strengthening “resource center” with the capability of serving the Department of Health and others with QI skills and knowledge.
- Expand QI efforts to infant and young child feeding.
- Engagement with DOH on issues surrounding improvement of tuberculosis treatment services.
Best Care...Always!

Overview of the Partnership
The “Best care...Always!” (BCA) campaign is an initiative aimed at supporting South African hospitals to implement evidence-based interventions to reduce healthcare associated infections (HAI) and ensure the judicious use of antibiotics. Patterned after the IHI’s “100K lives” campaign, the Canadian “Safer Healthcare Now” initiative, and WHO’s World Alliance for Patient Safety, BCA was launched in August 2009 to support SA’s private hospitals, and spread in May 2010 to include public sector hospitals.

BCA seeks to enhance patient safety and improve quality in hospital care through partnership with major public and private healthcare providers, funders and professional societies.

Highlights from this Quarter
- Since the start of the initiative, 192 Hospitals have joined the BCA Campaign. These represent 85% of all private-sector hospital beds in South Africa and 14 hospitals in Gauteng’s public sector.
- Over 600 active interventions have been implemented: Ventilator Associated Pneumonia – 143 hospitals; Surgical Site Infections – 150 hospitals; Central Line Associated Blood Stream Infections – 144 hospitals; Catheter Associated Urinary Tract Infection – 154 hospitals. These have been implemented across 3000 beds and 1000 operating rooms, largely in the private sector.
- This quarter also saw the launch of the campaign in public hospitals:
  - A public sector hospital collaborative in Gauteng Province started with IHI’s direct support.
  - Public sector hospitals in Free State Province joined the campaign and have begun implementing the bundles independently of IHI’s direct support
  - Initial agreement to extend BCA-support to public hospitals in two provinces (KZN and WC)
- Three scientific abstracts were submitted to the International Forum on Quality and Patient Safety.

Key Processes
- Four learning sessions have been held for the Gauteng hospital collaborative
- Measurement has begun in 12 of the 14 hospitals

Main Results

Hospitals Enrolled & Committed: (July 2010)

192 Hospitals total

This quarter saw the rise in the number of hospitals joining BCA to a total of 192. In addition, Life Healthcare has started to see dramatic drops in the rate of CLABSI from a median of 5.2 infections/1000 line days to 2.5 infections/1000 line days since the introduction of the Campaign.

Next Steps
- Design for learning collaboratives in public hospitals in two additional provinces.
- BCA will begin to support hospitals in both KwaZulu Natal and the Western Cape in the next quarter.
Other Efforts

New Partnerships
South-2-South: A new strategic partnership is under development between IHI-SA and South-2-South an important NGO focused on improving HIV care and treatment services to pregnant women and their newborns. This relationship will be profiled in the next quarterly report.

Publications from IHI-SA

Improving a Mother to Child HIV Transmission Programme through Health System Redesign: Quality Improvement, Protocol Adjustment and Resource Addition
Michele S. Youngleson, Paul Nkurunziza, Karen Jennings, Juanita Arendse, Kedar S. Mate, Pierre Barker
Available at: http://dx.plos.org/10.1371/journal.pone.0013891

Delivering interventions for newborn and child survival at scale: a review of research evidence
Pierre Barker, Zoe K. Sifirim, Kedar Mate, Charles Larson, Betty R Kirkwood, Stefan Peterson, Jose Martinez, Nigel Rollins
Available at: http://www.hsr-symposium.org/index.php

Antiretroviral Drugs in the Cupboard Are Not Enough: The Impact of Health Systems’ Performance on Mother-to-Child Transmission of HIV
Pierre M. Barker, MBChB, MD, Wendy Mphatswe, MBChB, MPH, and Nigel Rollins, MB, MD
Available at: http://www.jaids.com

Achieving the HIV and AIDS National Strategic Plan: A practical calculator for local target setting in district health facilities
Nicholas G Leydon, Francois Venter, Patricia D Webster, Winnie Moleko, Regina Osh, Pierre M Barker

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