



SAFETY YOU CAN TRUST:

CLINICAL QUALITY REPORT 2023

Working Hours:
MON-FRI.
8.00AM-5.00PM
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CONTENTS

Introduction from the Global Medical Director	3
Introduction from the Chair of the Board of Trustees	4
Ensuring clinical quality through mutual support	6
Clinical achievements: 2023 goals and how we measured up	8
Our continuous commitment to improving the client experience	9
Ensuring the integrity of self-reported data	11
Quantifying clinical risk: from data to decision making in 2024	12

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INTRODUCTION

FROM THE GLOBAL MEDICAL DIRECTOR

Living in a health system where clinical and pharmaceutical quality is assured is a precious luxury, one that only a fortunate few can truly appreciate. For them, patient safety is a constant, unspoken assurance. Tragically, this is not the reality for billions of people worldwide, including the majority of MSI's clients across Africa, Asia, and Latin America. At MSI, we are passionately committed to not only delivering essential reproductive healthcare services but also ensuring that these services and products meet the highest standards of quality and safety, measured through objective and transparent methods.

We are acutely aware that the millions of clients who turn to us each year seek reproductive freedom and choice. These are healthy individuals entrusting us with their well-being, and this trust places an immense responsibility on our shoulders. We strive to ensure that every clinical service, pharmaceutical product, and contraceptive device we offer enhances their lives and futures. We have no room for avoidable clinical harm, and we embrace this responsibility with the utmost seriousness.

To achieve this, we have developed a comprehensive network of clinical quality systems that gather crucial data, feeding into our overarching clinical risk profiling system. These include meticulous clinical audits of our facilities and mobile surgical teams, rigorous competency assessments of our service providers, detailed reporting and learning from clinical incidents, thorough pharmaceutical testing, and careful evaluation of each MSI team's quality assurance capabilities. Each step generates objective scores that contribute to our clinical risk profiling system, helping us calculate what we refer to as "clinical risk mitigation scores" for each of our 110 service channels across the countries we serve.

These scores are more than mere numbers; they are a reflection of our unwavering commitment to excellence. They reveal which service channels excel in clinical quality assurance and which need our focused attention. When improvements are necessary, the system precisely identifies the areas to concentrate on. This targeted approach allows us to use our resources wisely, ensuring our quality assurance efforts are both impactful and cost-efficient.

We go to these lengths because we believe that every MSI client, no matter where they are, deserves to trust in the quality and safety of the care they receive. When our clients walk through our doors, we want them to feel safe and valued, knowing they are receiving the best care possible. As a client-centred reproductive healthcare provider, we are driven by the belief that every person who turns to MSI has earned the right to expect nothing less than the highest standards of care and safety. We are here to honour that right with all our heart.

Dr Dhammika Perera, MBBS MPH FFPH PhD

Global Medical Director

"AS MSI CONTINUES TO EXPAND, WE REMAIN COMMITTED TO ENSURING THAT OUR GROWTH IS COMPLEMENTED BY OUR COMMITMENT TO CLIENT SAFETY."

DR DHAMMIKA PERERA MBBS MPH FFPH PHD

INTRODUCTION

FROM THE CHAIR OF THE BOARD OF TRUSTEES

At MSI, the well-being and safety of our clients are at the heart of everything we do. We take immense pride in delivering top-notch services, and we are deeply committed to ensuring our clinical standards are upheld in every country we serve.

We believe that every clinical service must be delivered safely and governed by robust clinical processes. We spare no effort or resources in protecting MSI's cherished standards. At the same time, we strive to ensure our quality assurance practices are efficient, because we know that every resource saved is a resource that can directly benefit our clients.

Last year, MSI touched the lives of over 23 million women and girls across 36 countries on six continents. We not only provided essential reproductive health services but also ensured that each service met our rigorous quality standards. Every medicine, commodity, and piece of equipment we use adheres to MSI's clinical benchmarks.

We also brought our clinical standards to government health systems in over 20 countries, demonstrating how quality reproductive healthcare can be both cost-effective and scalable. We continue to collaborate with state health systems, training thousands of nurses, midwives, and doctors every day.

I am incredibly proud of MSI's unwavering dedication to quality. I am grateful for every MSI clinician who adheres to our standards and every clinical director and supervisor who safeguards our clinical governance. Together, we foster a culture that respects our clients, upholds the excellence of our services, and maintains MSI's reputation as a leading provider of quality reproductive health services. We will always strive for excellence in the services we provide and in the way we hold ourselves accountable to the clinical standards we have established.

Frank Braeken

Chair of the Board of Trustees

"I AM INCREDIBLY PROUD OF MSI'S UNWAVERING DEDICATION TO QUALITY. I AM GRATEFUL FOR EVERY MSI CLINICIAN WHO ADHERES TO OUR STANDARDS AND EVERY CLINICAL DIRECTOR AND SUPERVISOR WHO SAFEGUARDS OUR CLINICAL GOVERNANCE."

FRANK BRAEKEN



YOUTH CENTRE
Adolescent friendly services offered here:

- Sexual Reproductive Health
- HIV & AIDS, Other STIs testing and treatment
- Gender-based violence counselling and referral
- Non-communicable diseases - physical and mental health issues
- Drug and substance abuse counselling

MSI REPRODUCTIVE CHOICES | UNFPA | STOPES

2023 AT A GLANCE

23.2m
client visits

96,955
clinical competency
assessments carried out

133
external clinical quality
assessments conducted
across **700** sites
and teams

12,885
providers were
competency assessed in
every service provided
during 2023

7,093
internal clinical
quality assessments
conducted

44
abortion medication
samples tested for
quality assurance

ENSURING CLINICAL QUALITY THROUGH MUTUAL SUPPORT

From peer-led clinical quality assessments that allow for the sharing of best practice, to business-to-business (B2B) trainings delivered from one country to another, the MSI partnership is harnessing the power of internal expertise to improve clinical quality across all of our programmes. A total of 33 peer clinical quality assessments, 9 trainings and 18 technical support sessions were provided through the B2B model in 2023.

CASE STUDY 1 Nepal to India FRHS



In May, Dr Abdul Raif of the Nepal programme, accompanied by another clinical trainer, endeavoured to support India FRHS with a clinical training in implant insertion and removal to improve their competencies. Following the training, both participants were assessed as having level 1 competency in this service.

“As a trainer, I have gained various insights on effective training methods and learning styles. Since participants are able to closely interact, there is ample opportunity for learning. I believe countries supporting one another is a very useful way to transfer knowledge and skills where needed. Overall, the implant training went well, and was a success!”

Dr Abdul Raif, Clinical Service Manager, MSI Nepal

CASE STUDY 2 Bangladesh to Papua New Guinea



In July, Bangladesh’s Dr Fawad Mallik virtually supported Papua New Guinea (PNG) with provision of tubal ligation services. Conducting this competency assessment virtually proved to be highly advantageous for both parties, offering both efficiency as well as saving costs by utilizing existing resources.

“This training has had a profound impact on tubal ligation (TL) services for PNG. Upon receiving feedback after assessing a TL, the trainees then performed another and were able to complete it to MSI standards, by finetuning their steps. This experience has afforded me substantial opportunities for learning and personal development. This initiative enhances the capacity development process among MSI partners, reinforcing the bond between us.”

Dr Fawad Mallik, Quality Assurance Manager, MSI Bangladesh

KEY

- Peer QTA
- Training
- Technical Assistance

CASE STUDY 3 Senegal to the Democratic Republic of the Congo



Senegal’s Quality Training Manager Kiné Mendy virtually supported Democratic Republic of Congo (DRC) with a clinical trainer endorsement for long-acting reversible contraceptives (LARC).

“The training went very well despite encountering difficulties such as connectivity issues. The impact of B2B enabled me to share my experience as a trainer, but also allowed me to diversify my training techniques. I think it is very important for country programmes to support each other as it allows such experiences to be shared.”

Kiné Mendy, Quality Training Manager, MSI Senegal

CASE STUDY 4 Myanmar to Afghanistan



In February, Myanmar’s Quality Assurance Manager Zaw Zaw Win virtually conducted a clinical trainer endorsement in Medical Emergency Management (MEM) from Myanmar, for clinicians from MSI Afghanistan.

“Upon completion, I have successfully endorsed both trainees. I believe it had a positive impact, and has also heightened my training techniques. I was able to share my challenges and provide feedback to the trainees to learn from. I also believe that it is very important for the country programmes to support each other as it allows us to achieve MSI standards under the mother MSI umbrella, and also provides a chance to learn and share updates based on MSI guidelines and policies.”

Zaw Zaw Win, Quality Assurance Manager, MSI Myanmar

CLINICAL ACHIEVEMENTS

2023 GOALS AND HOW WE MEASURED UP

The role of MSI's Medical Development Team is to develop and maintain the in-country clinical capacity needed to uphold the quality of service provision across the partnership. Each year, we set several goals in order to achieve this. Here's how we performed against these in 2023.

Complete external clinical quality assessments of 130 MSI service delivery channels, including at least 15 larger public sector strengthening channels

With 133 clinical quality assessments carried out by our network of Senior Clinical Support Specialists and trained peer assessors, we exceeded this target in 2023. A total of 21 public sector strengthening channels were assessed as part of this number, reinforcing our commitment to improving collaboration with the public health sector.

Ensure that at least 25 peer assessors lead external clinical quality assessments

Our peer assessor programme, in which in-country clinical staff are trained up in conducting assessments for other country programmes, is paramount to ensuring that we can complete as many external clinical quality assessments as possible. In 2023, 27 individual peer assessors completed 50 of the 133 assessments, which accounted for 42% of all assessment days.

Maintain clinical technical capacity and expertise across the partnership by endorsing 57 Master Trainers

A robust clinical training cascade is crucial to ensuring that MSI services are provided in a standardised, high-quality manner, and this would not be feasible without our network of endorsed Master Trainers; high-calibre clinicians who are able to conduct trainings of trainers. In 2023, we expanded our network to 57 Master Trainers.



Roll out respectful maternity care training to all obstetrics channels

In obstetrics, there is an overriding focus on safety over patient experience. This can lead to obstetric violence, such as coercion into procedures such as Caesarean sections or inductions, or the unnecessary separation of mothers and babies. These negative experiences can cause physical and emotional trauma, resulting in higher rates of postpartum depression, anxiety, bonding issues, breastfeeding difficulties, and loss of trust in health systems.

MSI is committed to zero tolerance towards obstetric violence, and developed a training toolkit to help providers identify and prevent obstetric violence. In 2023, this toolkit was rolled out across 31 maternities in seven countries.

The impact was measured from both healthcare providers' and patients' perspectives and showed significant improvements. Providers became more confident and aware of respectful practices, leading to better experiences for women. MSI maternities are adopting client feedback mechanisms to monitor respectful maternity experiences routinely.

Support 100% of eligible programmes to fulfil field testing requirements for mifepristone and misoprostol

Our field testing initiative entered into its fifth year in 2023, wherein our programmes send samples of mifepristone or misoprostol that have been at a service delivery point for at least 6 months for testing at a WHO-prequalified laboratory. Twenty-seven programmes were requested to send samples; of these, all but one was able to fulfil their requirements. Forty-four samples were tested in total, with all falling within acceptable limits for all parameters tested. We will continue working in 2024 to ensure that all programmes can safely send samples for testing.

Meet 100% of all technical assistance requests from country programmes

Our global training team works hard to ensure that all requests for support from our country programme teams are met throughout the year. We were able to achieve this in 2023, with technical assistance requests ranging from training and endorsing Master Trainers, to sourcing quality sexual and reproductive health products, to supporting the set up of new clinics and teams.

OUR CONTINUOUS COMMITMENT TO IMPROVING THE CLIENT EXPERIENCE

At MSI, the client is at the core of our service provision. Our clinical quality assurance systems are designed to ensure a positive and respectful experience, meeting clients' needs in the most efficient and effective way possible.

Our teams exceeded expectations in 2023 through their professional approach to client experience and unwavering passion for clinical excellence. Below are just a few examples of the innovations we saw through the year in improving client care.

- **Nigeria** and **Sierra Leone** are utilizing technology to improve client care, developing apps to build provider capacity, monitor service volumes, and update records promptly and accurately.
- There is a continued focus on client experiences of pain, with **Mexico** piloting new pain management options, and **Zimbabwe** creating a new innovative system for clients to best describe their pain.
- Both **Kenya** and **Timor Leste** teams have focussed on gender equality, disability and social inclusion (GEDSI), through training for providers, and implementation of adolescent-friendly initiatives, respectively, leading to an increase in uptake of services.

- A waiver system has been implemented in **Cambodia**, preventing clients who are facing financial difficulty from being turned away from safe abortion care.
- **Zimbabwe** have expanded their service offering, treating clients with menstrual disorders and menopause, ensuring they are cared for throughout their reproductive cycle.
- The **Afghanistan** team are now able to offer psychosocial support to their clients, in addition to identifying their own teams' mental health and well-being needs.

The case study on page 11 takes a deep dive into how our team in Zimbabwe has improved clients' experiences of pain during service delivery.



SPOTLIGHT ON: ZIMBABWE

Our team in Zimbabwe has invested in improving clients' experience and satisfaction by managing pain and discomfort during and after service provision. In addition to Vocal Local (a non-pharmacological approach to pain management) and pain medication, which were introduced as per MSI guidelines, the clinical team took an additional step ensure that these interventions were working. Pain management stickers, based on the Wong Baker FACES scale, were introduced to ensure clients also vocalize their experience in terms of the pain felt during and after procedures. These are primarily used during the provision of long-acting and permanent contraceptive methods, as well as safe abortion and post-abortion care.

According to Clinical Quality Manager Mavis Mabedhla, "the pain stickers were introduced as reminders for providers to ask clients about their experience. After introducing the pain stickers, the programme saw an increase in client satisfaction based on the client feedback collected through all channels. The static centres have also introduced diclofenac suppositories as a way to respond to the client feedback on the pain stickers, where the client's level of pain was above 3 or 4 out of 10.

The stickers have also made work easier for providers, as they are now asking about pain during post-procedure counselling, and have improved the documentation of client records. After the introduction of the pain management stickers, the clinical quality team arranged informal interviews with service providers to see how well the stickers had been working. Most of the providers saw this as something useful for both clients and the providers in working together to ensure client satisfaction. Some also said this was instrumental in improving pain management through Vocal Local, as they wanted the clients to be comfortable during services, knowing they will need to evaluate the pain later. Most providers felt that this was good, as the clients were involved in their treatment and care."

"WE HAVE INVESTED A SIGNIFICANT AMOUNT OF EFFORT TO ENSURE THAT OUR TEAM CONTINUES TO MEET THE CLIENTS' EXPECTATIONS AND IMPROVING CLIENT EXPERIENCE."

MAVIS MABEDHLA, QUALITY ASSURANCE MANAGER, POPULATION SERVICES ZIMBABWE

The effect of pain management stickers on client expectations and experience:

- The pain sticker empowered clients to actively participate in their own pain management, giving them a voice to express their pain levels.
- Clients may feel more heard and understood, as their pain is acknowledged and addressed using the standardized pain scale.
- The pain sticker improved clients' trust in the healthcare providers, as they see the effort being made to address their pain concerns.

The effect of pain management stickers on providers:

- The pain sticker serves as a visual cue, prompting nurses to be more attentive to the client's pain levels and actively address them.
- It helped nurses understand the client's pain experience better, allowing them to tailor pain management strategies more effectively.
- The pain sticker helped in improving nurses' confidence in their ability to manage pain, as they have a standardized tool to assess and monitor the client's pain.
- Nurses now feel more empowered to advocate for appropriate pain medication and adjust dosages based on the client's feedback.
- The pain sticker enhanced nurses' communication with clients, fostering a more collaborative approach to pain management.



ENSURING THE INTEGRITY OF SELF-REPORTED DATA

By the end of 2023, 13,610 providers were listed by country programmes in their competency and training databases (CTD). Currently, the self-reported data from country teams shows that in each channel, over 90% of providers have been competency assessed for each service they provide in the last 12 months. But how can we be sure that these observations are accurate?

We use this data to monitor the accuracy of self-reported provider competency by triangulating the competency levels observed during external clinical quality assessments with those reported in the CTD. During the triangulation, the competency levels of providers observed by external assessors during clinical quality assessments are compared against the provider competency reported in the programme's own database.

For example, if 20 out of 25 competency levels recorded in the CTD match with competency levels observed during the clinical quality assessment, then the accuracy of the programme's competency assessment would be 80%.

By carrying out data triangulations, we can identify whether a provider scored as "level 1" competent (the highest of 3 levels) by the programme's assessors are truly level 1. In other words, triangulations are conducted to determine the accuracy of competency assessments carried out by country programmes.

Our goal is for country programmes to achieve 80% competency assessment accuracy in each of their service delivery channels. We will continue to monitor this over the coming year.

SPOTLIGHT ON: SENEGAL

In Senegal, assessor accuracy, consistency and objectivity are key to making sure that internal observations match those conducted during external assessments.

"We use the clinical guidelines alongside the competency assessment checklists to ensure that the full team understands and is aligned on the indicators," says Fatou Kiné Ndoeye, Clinical Director. "This reassures us that our internal assessors have the necessary skills to lead objective evaluations. We host quarterly meetings with the quality team to discuss the gaps in findings between internal and external audits. This promotes a culture of accountability; at the end of the day, we're all responsible for the quality of services received by our clients."



QUANTIFYING CLINICAL RISK FROM DATA TO DECISION MAKING IN 2024

In 2023, we worked on a new clinical risk profiling system in order to accurately capture clinical risk across MSI. The new system was introduced to the partnership at the end of the year, and aims to update and improve on the previous risk profiling system by adding indicators on data integrity and clinical incident reporting.

Using the scale and the types of services provided, we are able to calculate the inherent clinical risk of each service channel across every country programme. This supports us to identify higher-risk channels, and tailor our support in specific areas.

We then meticulously calculate the percentage of this inherent risk that has been mitigated on the ground, using routine data collected across the partnership. The calculation takes into account many areas of clinical quality including our clinical governance systems, the competency of our service providers, the reporting of critical incidents, infection prevention practices, and our ability to handle medical emergencies. The higher the risk mitigation score of the channel, the more assured we are that the critical components of client safety are in place and adhered to.

We calculate these figures for every country and channel on a quarterly basis, which gives us visibility on where our risk lies, and use the resources that are available for clinical quality assurance to the maximum effect. Programmes received their first “new format” risk scorecards at the end of Q1 2024, and are currently implementing improvements to further reduce residual clinical risk.

USING DATA FROM OUR CLINICAL QUALITY ASSURANCE SYSTEMS, WE CALCULATE CLINICAL RISK MITIGATION AND RESIDUAL RISK IN EVERY SINGLE MSI SERVICE CHANNEL EVERY QUARTER.

SPOTLIGHT ON: MEXICO

Our new clinical risk profiling system has enabled us to identify strong performing channels with excellent risk mitigation.

Mexico not only leads the partnership for strongest risk mitigation, but also provides a large number of high-risk services (i.e. those requiring more complex clinical skills) leading to a high inherent risk. Strong clinical governance systems have been implemented across all of Mexico’s centres, and teams are held accountable for continuously improving services and ensuring high quality care.

We see teams conducting thorough and accurate internal quality assessments every year, and ensuring the findings from these audits are acted on. Staff across all centres are supported as providers and are competency assessed for the services they provide. Across the programme, a strong no blame culture has been established to encourage incident reporting.

All clinical teams have an in depth understanding of incident management, from identifying and reporting, to learning from incidents that occur. All of these successes and implementations have contributed to the high risk mitigation we see in the Mexico programme.



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