

Healthcare Systems Strengthening Medical Mission Proposal

Submitted to:

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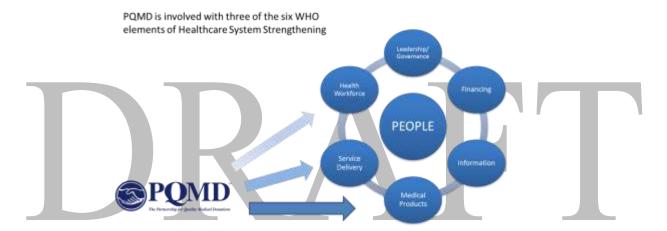
Global Need - Healthcare System Strengthening

Improving healthcare systems is a major global priority. Weak health systems, like we saw in the Ebola epidemic in West Africa, threatened global security and pushed more people into poverty¹. While disasters are very serious and make front-page news, improving healthcare systems provides people with essential healthcare so that everyone can live with dignity and achieve their human potential.

Improving healthcare systems is an emphasis of many organizations:

- WHO has established Healthcare System Strengthening(HSS) as a major initiative (2007)
- USAID has developed its Vision for Healthcare System Strengthening (2015-2019)
- Corporations and NGOs have established HSS as their humanitarian focus

The Partnership for Quality Medical Donations (PQMD) is also committed to Healthcare System Strengthening and has established HSS as one of its fours pillar (along with Disaster Relief, Humanitarian Development and Standards).



Major HSS Challenges

Improving healthcare systems is very difficult. Healthcare systems are complex and involve many interrelated variables. Significant funds have been spent to improve health systems and while progress has been made, the health of people living in developing countries and resource-poor settings remains in jeopardy².

There are many challenges to improving health systems. For example, the 2010 McKinsey study on Sub-Saharan Africa Health Systems (Primary Care) revealed three major challenges:

- 1) Insufficient health access (shortage of facilities, medical supplies and skilled staff)
- 2) Shortage of health workers (3 to 5 times the current number is needed)
- 3) Systemic Weaknesses (lack of money, weak management practices, demoralization)

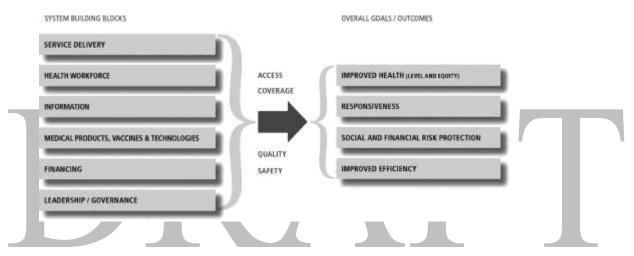
Other reports³ highlighted process challenges - including lack of a coherent conceptual framework, lack of coordination with other organization efforts, and the lack of standardized measurements (thus creating multiple reporting, taxing the already overburden local staff).

¹² Alfonso Lenhardt USAID acting Administrator September 2015 – USAID's Vision for Health Systems Strengthening

³ The 2012 US GHI report on Healthcare System Strengthening, and the 2011 WHO report on Current Trends and Challenges of Healthcare System Strengthening and the 2009 World Bank Study on Capacity Development Result Framework

<u>Medical Missions Role – Healthcare System Strengthening</u>

Medical Missions currently play an ancillary role in Healthcare System Strengthening. While Medical Missions provide valuable short-term clinical services, unless Medical Missions become better coordinated with the long-term efforts of government and local NGOs, they are not contributing to Healthcare System Strengthening. However, when Medical Mission Programs are well defined and understood by all stakeholders they have the capacity to improve patient safety and effectively utilize health resources and can have impact on the longer term healthcare system needs. Quality Medical Mission programs which are properly coordinated can overcome factors such as cost, issues of trust and lack of support from minister of health policies. Well-designed Medical Mission Programs will be viewed by governments and local healthcare systems executives as potential resources for service delivery, training and quality product donations. Therefore, quality Medical Mission programs can provide significant support for the top four building blocks of the WHO Healthcare System Strengthening initiative.



Medical Mission Challenges

The challenges associated with Medical Mission Programs are well documented. For example the 2015 study on Short Term Medical Missions conducted by Catholic Health Associations, identified three key challenges:

- <u>Local Input</u> Medical Mission training is only valuable if well designed for the host country (poorly designed Medical Missions increase dependency and cause harm).
- <u>Better Focus</u> 95 percent of the respondents (recipients) surveyed in the CHA study indicated that capacity building is equal or more important than clinic care. Respondents consistently reiterated the need for training and capacity building (rather than just clinical).
- <u>Product Quality</u> The majority of respondents received support with medical products, vaccines, and technology. But over half of respondents either didn't have or didn't know about product quality guidelines, leading to donations that were inconsistent with the greater need or unusable.

Need Statement

Theses challenges indicate a significant need for clarified strategies that ensure that medical missions are part of an overall strategy to strengthen and sustain local health systems. Once clarified, improved guidance and standards - to ensure impactful technical assistance - can be provided by the short term inputs of Medical Missions. There is a need for Medical Mission programs support combining training

and capacity building as a core rationale for product donations. PQMD recognizes this need and recommends a comprehensive HSS/Medical Missions Program.

Program Goal and Objectives

The overall goal of the program is to formalize and improve the practices of Medical Missions to better support Healthcare System Strengthening.

The primary objectives are:

- 1) To bring together key groups involved with Medical Missions to provide in-depth understanding of current practices and provide advice for best practices in the future.
- 2) To develop a framework for Medical Mission best practices based on:
 - a. The needs of the local population
 - b. The needs of local hospitals and clinics
 - c. The needs of local medical practitioners
 - d. Improving the structure of the healthcare system overall
 - e. Providing needed equipment product and medical supplies
- 3) To formalize the role of Medical Missions by convening a coalition of stakeholders and facilitating a community in which they can engage in discussion, policy dialogue and consultations around improving the quality and impact of Medical Missions.
- 4) To draft a code of practice creating guidance and standards and impact metrics to ensure quality programming and implementation.
- 5) To incorporate the role of Medical Missions into current HSS initiatives —combining training and capacity building with product donations.
- 6) To advocate for the continued advancement of Medical Missions in support of Healthcare System Strengthening.

The overall result will be the establishment of an organization/entity that enhances the value of Medical Missions and increases the quality and sustainability of the service they provide.

PQMD Experience and Expertise

PQMD is in a unique position to help improve the Medical Mission/healthcare systems effort – having elevated product donations practices from the problematic and inappropriate product practices prevalent in the 1990s. PQMD and its members understand the challenges and opportunities of Medical Missions due their extensive experience across healthcare systems. In addition, PQMD has the convening power across its members and local partners, as well as the expertise in developing guidance and measurement standards. PQMD could also help coordinate programs in healthcare systems strengthening and facilitate access to and development of capacity building and training programs targeted to support medical missions.

<u>Cross-Sector Collaboration – Broad Experience</u>

PQMD has the advantage of being a cross-sector collaboration. PQMD brings together 18 major medical corporations and 17 leading healthcare NGOs to advance humanitarian efforts worldwide. This collaboration also provides extensive knowledge across the entire spectrum - from product production to delivery of humanitarian service to the most rural communities. This extensive knowledge and the spirit

of cross-sector collaboration provide PQMD with the capabilities to address the complex aspects involved with healthcare systems.

Training and Capacity Building Experience

Training and Capacity Building is a major component in healthcare system strengthening. Historically PQMD has focused on product donations; however, in recent years PQMD members are also placing greater emphasis on training and capacity building. Many PQMD members now provide training and capacity building along with product donations in the following four areas:

- 1) <u>Medical Missions</u> (short-term volunteer and employee engagement programs providing transferable skills with related products, procedures, as well as health systems strengthening)
- 2) <u>Training Centers</u> (providing capacity development with surgical and medical supply products)
- 3) <u>Disease Specific Programs</u> (providing clinical training with PD and vaccine products)
- 4) <u>Community Health Programs</u> (providing health education with OTC products)

Standards and Guidance Expertise

The most important benefit that PQMD provides to its' members and to the global policy arena is its experience in establishing standards and guidance. PQMD is a standards organization committed to bringing measurable health impact to under-served and vulnerable people. PQMD has developed product donations standards including needs assessments, appropriateness of donations, quality, logistics, disposal, monitoring and evaluation. Furthermore, PQMD works on behalf of its members to collectively promote best practices worldwide.

PQMD HSS/Medical Mission Initiative

PQMD recognizes the lack of Medical Mission standards, guidance for best practice, and measurements. Therefore, building on its' experience and expertise, PQMD is committed to taking a leadership role in addressing this gap. To achieve this, PQMD proposes the following:

- PQMD will convene key Medical Mission and HSS stakeholders to consider the productive role of donations and Medical Missions as a significant contributor to HSS strategies.
- PQMD will create an initiative to develop Medical Missions that better support the WHO HSS
 initiative knowledge and direction based on conducting extensive research and analysis of
 HSS activities including needs and gap analysis and a comprehensive segmentation study and
 discuss options for metrics and pilots.
- PQMD will select key pilot circumstances and serve as an "incubator" for HSS research, standards and development specifically focused on the needs of Medical Missions. PQMD will serve as grounds for internal germination and testing of best practices.
- The HSS/Medical Missions initiative will involve creating frameworks, policies and procedures, guidance and standards of measurement. PQMD will seek external input from corporations, NGOs, government agencies, universities, multilaterals and medical associations, etc. The overall directive is based on collaboration and support at the local level in partnership with the US or European funder/donor perspective.

The Initiative will function on an "open platform" to share learnings and help advance process
and policies with all interested parties. PQMD will also advocate for formal adoption of best
practices and quality standards. The PQMD standards and guidance will be a free and living
document that would be available to all and updated based on ongoing consultation and
dialogue

Note: PQMD is not a regulatory agency therefore it will not enforce compliance but instead will encourage, advocate and promote best practices.

- In keeping with the incubator approach, it is possible that the HSS/Medical Missions initiative could be spun-off as an independent entity if that would be most beneficial for long-term sustainability. However, given the number of PQMD members involved with Medical Missions (9 corporations and 11 NGOs) and the amount of donated product and services that support Medical Missions worldwide, the option to continue to be supported by PQMD is one that will be considered going forward and as the initiative evolves.
- The initiative will be developed with a revenue model focused on exploring opportunities for sustainable financing. Possible options for revenue streams will be membership dues, fees for training, workshops and conferences. We will explore options to underwrite, sponsor, charge or ask for fees-for-service depending on the elements of the initiative as they evolve as well as the appetite and the ability of the participants to pay.

PQMD believes that by this open and inclusive approach the best solutions can be developed. So while PQMD is not the recognized leader in HSS/Medical Missions practices today, its' membership is heavily engaged in managing, running and providing large quantities of products, devices and services to health systems particularly in fragile and underserved communities worldwide. As such, PQMD is in a unique position to grow the Medical Missions/HSS initiative and make a major contribution to this very important priority for improved global health.

<u>PQMD Community of Practice (CoP) as a tool to bring those involved with Medical Missions together</u>

The PQMD Community of Practice is very important platform on which the stakeholders and participants in the HSS/Medical Missions initiative will gather. The PQMD CoP is an interactive environment where experts can share ideas, expand learning and help create better solutions for humanitarian health programs. There are currently four pillars of activity being established within the PQMD CoP: 1) Humanitarian Assistance; 2) Disaster Response; 3) Health Systems Strengthening; and, 4) Guidelines. The PQMD CoP will be a combination of virtual interaction (online discussion forums, consultations, training), face to face interactions (conferences, workshops, capacity building) and mobile participation (mobile phone input from the field) for engagement and contribution.

The Community of Practice will help facilitate interaction with universities, multilateral and government entities, and other organizations with training and capacity building practices and processes. So while HSS is only one of our four strategic pillars, the CoP will provide the ability to reach far beyond and create a diverse and active membership including other organizations, individuals, experts and consultants to better address issues related to health systems and Medical Missions.

It should also be noted that the CoP is dynamic and organic in nature. Therefore the information and ideas will evolve and activities will remain relevant. The interaction from various experts will also likely elevate and expand issues and find synergies for more holistic solutions.

PQMD HSS/Medical Mission Initiative - Summary

PQMD will develop the HSS/Medical Missions Initiative over a 3-year horizon.

- Year 1 Establishment of the PQMD HSS/MM organization to investigate Medical Mission practices and development the initial draft of standards, guidance and measurement

 – at a cost of \$270.000
- Year 2 Verification of the draft standards and guidelines via extensive in-county input leading to the official PQMD Standards, Guidance and impact metrics—at a cost of \$360,000
- Year 3 -Implement the PQMD Medical Mission Standards and advocate for the advancement of Medical Missions in support of Healthcare System Strengthening – at a cost of \$510,000

HSS/Medical Mission - Year 1 (2016) Investigation

Year 1 will involve hiring one individual with program experience to investigate Medical Missions and HSS trends and dynamics. Year 1 deliverables include convening thought leaders across Medical Missions, HSS, and PQMD to frame the appropriate role of missions and donations as a strategy for sustainable health systems.

Once developed and defined through this collaboration, we will conduct an analysis of Medical Missions programs currently on offer. This analysis will be done using the PQMD Community of Practice as a platform for engaging a wide variety of participants. The research will include a needs assessment with stakeholders and partners, engaged through a series of consultations – virtually and in person (budget depending) and an extensive evaluation of Medical Mission efforts including segmentation, gap and situation analysis. Thereafter, we will create the initial draft of standards, guidance and metrics for Medical Missions – likely including aspects such as:

- Tools to engage local stakeholders and connect mission input in the context of local health policy and targets
- Tools to capture results over time
- Recruitment and Orientation of the individuals for Medical Missions
- Preparation for Clinical Outreach
- Preparation for Training and Capacity Building Outreach
- Guidance of Product, Device and Service Donation Utilization
- Partnership with Local Organizations
- Program Implementation
- Monitoring and Evaluation
- Review and Re-entry of Individual Volunteers
- Ongoing in-country Development
- Fundraising and continuing to engage members and stakeholders

The deliverables in year 1 include:	Completion Dates
- Convene PQMD HSS/MM stakeholders	by Month 2
- Research current Medical Mission practices (including in-country efforts)	by Month 4
- Conduct evaluation segmentation, gap and situation analysis	by Month 6
- Draft PQMD standards, guidance and measurements (Initial Review Session) by Month 6
- Develop a formal structure for the PQMD HSS/MM organization	by Month 7
- Ongoing evaluation of HSS/MM practices (especially in-county programs)	by Mouth 10
- Finalize the draft of PQMD standards, guidance and measurement	by Month 11

HSS/ Medical Mission - Year 2 (2017) Verification

Year 2 will involve continued support for the development of a sustainable coalition of Medical Mission practitioners and policy makers. Working with a group of engaged organizations and individuals, develop a governance structure and management team to support the ongoing work of the group. A top priority for the group will be to work with PQMD on verifying the PMQD standards, guidance and metrics via a comprehensive review of the Medical Mission programs of at least 20 organizations. This review will evaluate activities pre and post Medical Mission trips including assessment of measurement and evaluation practices. This will include field visits (budget depending) to observe programs first hand. Based on the result of the program reviews and field visits, the finalized PMQD Medical Mission Standards and Guidance of best practices will developed. Comprehensive measurement will also be developed including health and product impact metrics.

The Year 2 efforts will also involve extensive collaboration with WHO and other multilateral organizations (again using the PQMD CoP platform as the functional hub for all those engaged). To assist in this aspect a person with multilateral experience will be hired on a year contact. Year 2 will also include the identification of training gaps and ways PQMD can contribute to filling the gaps, either through partnerships or alternate options. Year 2 will include the creation of development plan for the conferences and other promotional activities.

The measure of success for year 2 will be the development of a group of stakeholders committed to working together in the interest of quality Medical Missions and their contributions to health systems strengthening. In addition, completion of the PQMD Medical Mission Standards after being vetted and accepted by major Medical Mission and HSS organizations. Year 2 will also include the establishment of a fully functional PQMD HSS/MM organization.

HSS/Medical Mission - Year 3 (2018) Implementation

In Year 3 will involve the implementation of the Medical Mission Standards and Guidance Framework. This will be done via conferences and advocacy efforts. These efforts will be coordinated in conjunction with external organizations (now fully involved through the PQMD CoP) which have specific expertise in different specialty training and capacity building aspects. The successful implementation of the Medical Mission program will help raise the image of PQMD and its members and position PQMD as a "thought leader" regarding Healthcare System Strengthening

The measure of success for year 3 will be progress towards overall acceptance of Medical Missions as a viable mechanism to contribute to HSS. In addition, year 3 will include general acceptance of PQMD measurements for Medical Mission programs – health and product impact metrics.

Sustainability and Business Plan for PQMD HSS/MM Initiative

Given the important of the PQMD HSS/Medical Missions Initiative, this effort will be managed on an ongoing basis by a consultant to PQMD with the title Director of Healthcare System Strengthening. The HHS/Medical Missions will become a key pillar of PQMD and it will be supported by PQMD and the members directly involved with Medical Missions and HSS activities. Continued funding and support for the HSS/MM initiative will evolve as more organizations and institutions become involved in the initiative. While there will be some funds available within PQMD's budget, we will be seeking cost-sharing arrangement and partnerships to support the ongoing programs.

Medtronic Involvement

PQMD appreciates the consideration and support of Medtronic and we are looking forward to working together on the Medical Mission program. We welcome Medtronic's active participation in the development of the Medical Mission/Healthcare System Initiative. This involvement can take many forms including providing expertise, relationships, and funding.

Please note that the total cost for the Medical Mission program is itemized below. PQMD also intends to incubate the idea of making the Medical Mission Program revenue generating with the idea that it would be some, if not fully, self-sustaining within three years.

Thanks again for your consideration and support. If you should have any questions regarding this proposal please feel free to contact Elizabeth Ashbourne Tel: (202) 468-3640 or eashbourne@pqmd.org.

<u>Medical Mission Program – Budget</u>

The cost for year 1 is \$270,000 as itemized below:

Compensation of Initiative Director	\$ 110,000
Administration	\$ 20,000
Travel related to research effort	\$ 40,000
Support for Community of Practice Platform	\$ 100,000
Total:	\$ 270,000

The cost for Year 2 is \$360,000 as itemized below

Compensation of Initiative Director	\$ 110,000
Administration	\$ 50,000
Travel related to field research	\$ 50,000
Legal cost - PQMD Standards	\$ 20,000
Multilateral Person (1 year contract)	\$ 70,000
Support for Community of Practice Platform	\$ 60,000
Total:	\$ 360,000

The cost for Year 3 is \$510,000 as itemized below

Compensation of PQMD HSS Initiate Director	\$ 110,000
Administration	\$ 50,000

Conference and Promotional Manager	\$ 80,000
Travel related advocacy and promotion	\$ 40,000
Cost of Conference and Advocacy	\$ 150,000
Support for Community of Practice Platform	\$ 80,000
Total:	\$510,000

Total costs (3 Years) Medical Mission and Community of Practice \$1,140,000

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