

Innovative Approaches to Assess Preparedness of Health Facilities on Infection Prevention and Control of and Management of Emerging Infectious Diseases

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ABSTRACT

Recently, the world has seen the emergence of many new infectious agents, for example, the novel coronaviruses and Ebola, which are virulent, with high mortality, thus a significant public health threat, especially in resource-constrained countries. Measuring performance gaps in Infection Prevention and Control (IPC) and clinical management can rationalize resource allocation towards system strengthening. PharmAccess has been working in close collaboration with various stakeholders in Tanzania to implement health system strengthening initiatives. During 2017 -2019, the London School of Hygiene and Tropical Medicine (LSHTM), working in collaboration with PharmAccess and private sector stakeholders, carried out a survey on IPC practices in more than 200 health facilities. The results informed managers on areas for improvement. At the time of the COVID 19 outbreak, healthcare managers needed information about the preparedness of individual facilities to provide safe and effective care to patients and minimize the potential transmission to frontline workers to mobilize and rationalize resource allocation. Developing a self-assessment approach that healthcare managers could remotely access was necessary as a visit to facilities by external assessors posed a risk for infection transmission. PharmAccess has developed a mobile-based COVID 19 facility preparedness self-assessment tool, the 'SafeCare4Covid app' based on the WHO guidelines and focuses on the availability of IPC resources and clinical management COVID 19 generates a prioritized quality improvement plan at the end of the assessment. This application is freely available and can be adapted to fit stakeholder requirements. The self-assessment tool has been used by more than 100 facilities in Tanzania mainland, and Zanzibar. Results show that most facilities performed poorly in terms of IPC practices and resources. These observations are similar to those made during the IPC practices survey and highlight the need to mobilize and target resources to improve IPC at the facility level.

