Supreme Council of Health - General Secretariat
Directorate of Policy Affairs

National Health Strategy 2011-2016
Monitoring and Evaluation
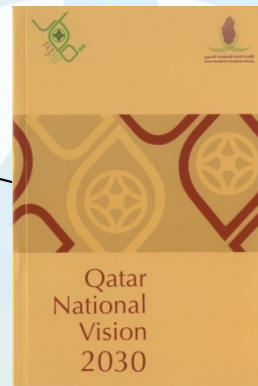
Dr Faleh Mohamed Hussain Ali
Assistant Secretary General for Policy Affairs

03 June 2012

الاستراتيجية الوطنية للصحة
National Health Strategy
2011-2016

Supporting Delivery of the Qatar National Vision through Healthcare

The NHS and QNDS both developed from the QNV.

The NHS is explicitly focused on supporting the QNV goals

Qatar National Vision 2030

Qatar National Development Strategy 2011~2016

National Health Strategy 2011-2016

Strong alignment between the NHS and the QNDS

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The National Health Strategy

The National Health Strategy 2011-2016 (NHS) sets out 7 goals which will allow the healthcare sector to make its contribution to realizing Qatar's National Vision.
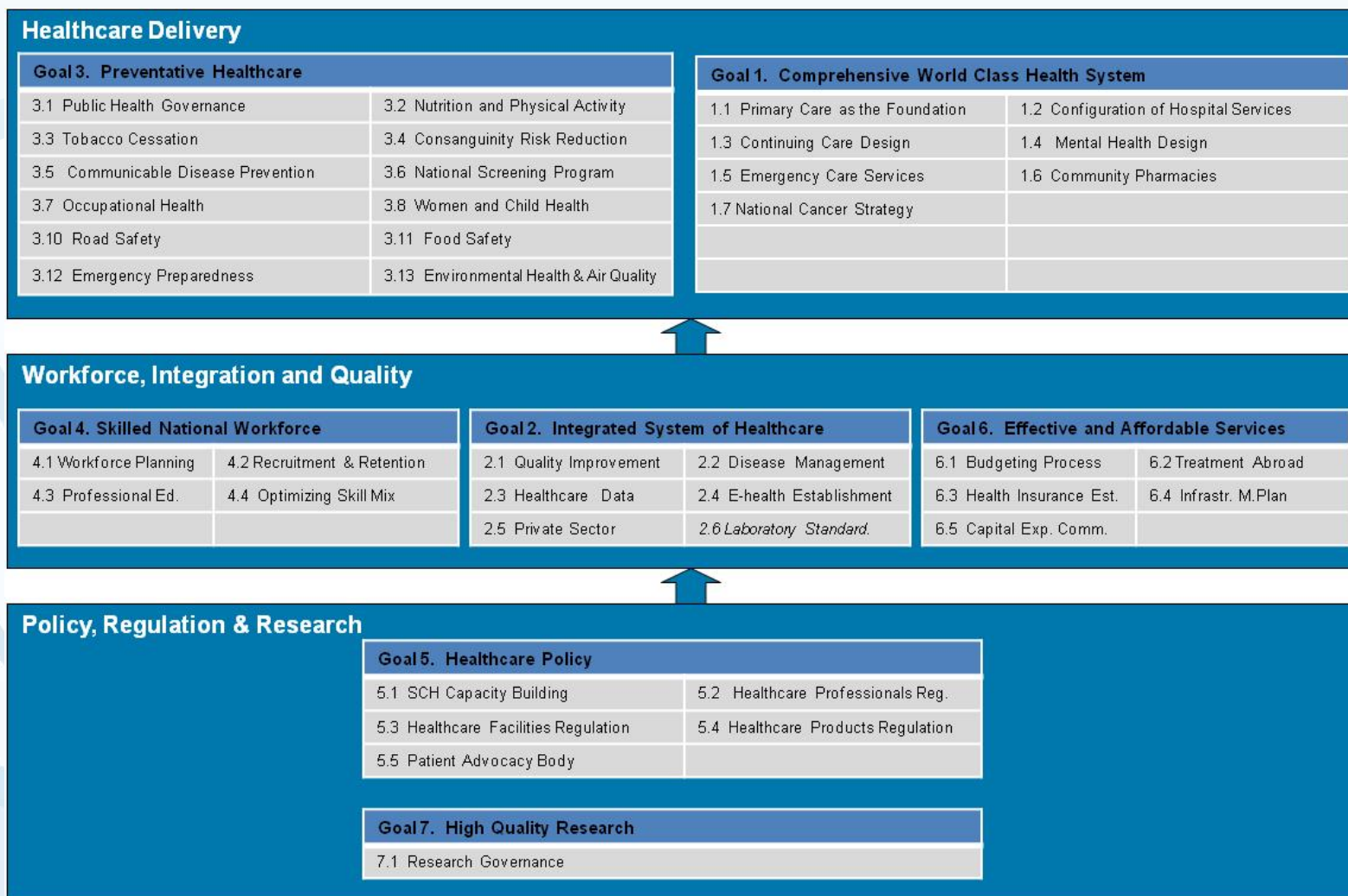

The NHS Goals:

1. A comprehensive world-class healthcare system whose services are accessible to the whole population
2. An integrated system of healthcare offering high-quality services
3. Preventive healthcare, taking into account the differing needs of men, women, and children
4. A skilled national workforce capable of providing high-quality health services
5. A national health policy that sets and monitors standards
6. Effective and affordable services in accordance with the principle of partnership in bearing the costs of healthcare
7. High-caliber research directed at improving the effectiveness and quality of healthcare
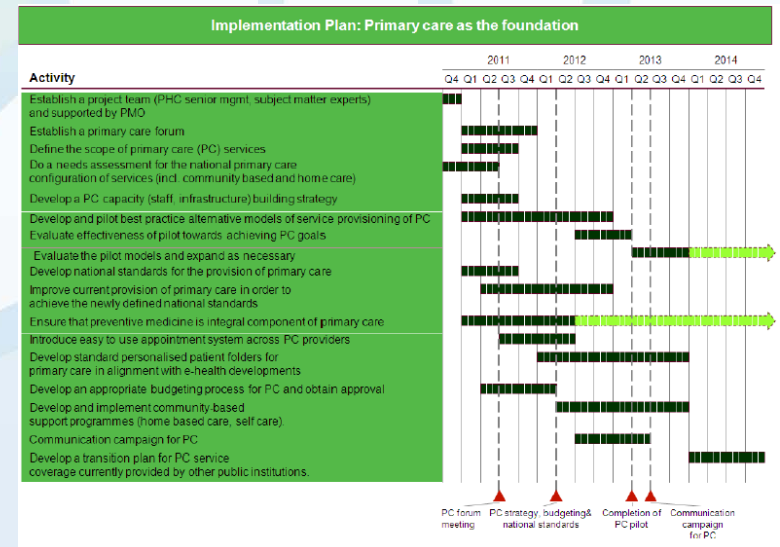
Each Goal is Supported By Projects – 40 in Total

Healthcare Delivery

Goal 3. Preventative Healthcare

3.1 Public Health Governance	3.2 Nutrition and Physical Activity
3.3 Tobacco Cessation	3.4 Consanguinity Risk Reduction
3.5 Communicable Disease Prevention	3.6 National Screening Program
3.7 Occupational Health	3.8 Women and Child Health
3.10 Road Safety	3.11 Food Safety
3.12 Emergency Preparedness	3.13 Environmental Health & Air Quality

Goal 1. Comprehensive World Class Health System

1.1 Primary Care as the Foundation	1.2 Configuration of Hospital Services
1.3 Continuing Care Design	1.4 Mental Health Design
1.5 Emergency Care Services	1.6 Community Pharmacies
1.7 National Cancer Strategy	

Workforce, Integration and Quality

Goal 4. Skilled National Workforce

4.1 Workforce Planning	4.2 Recruitment & Retention
4.3 Professional Ed.	4.4 Optimizing Skill Mix

Goal 2. Integrated System of Healthcare

2.1 Quality Improvement	2.2 Disease Management
2.3 Healthcare Data	2.4 E-health Establishment
2.5 Private Sector	2.6 Laboratory Standard.

Goal 6. Effective and Affordable Services

6.1 Budgeting Process	6.2 Treatment Abroad
6.3 Health Insurance Est.	6.4 Infrastr. M.Plan
6.5 Capital Exp. Comm.	

Policy, Regulation & Research

Goal 5. Healthcare Policy

5.1 SCH Capacity Building	5.2 Healthcare Professionals Reg.
5.3 Healthcare Facilities Regulation	5.4 Healthcare Products Regulation
5.5 Patient Advocacy Body	

Goal 7. High Quality Research

7.1 Research Governance

The NHS Sets Out a High Level Project Plan for Each Project

Includes, for each project, the background and justification, international best practice, outcomes, outputs, benefits, estimated budget, risks and mitigations

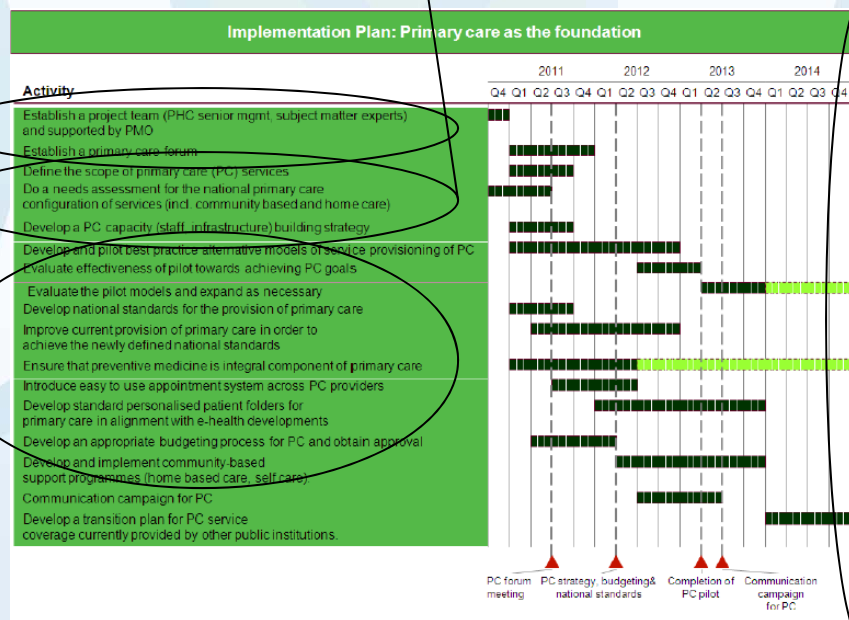Also includes a high level list of activities and implementation timetable

NHS 'Projects'

'Projects' generally comprise a range of distinct activities designed to bring about significant transformational change

Structural changes to provide appropriate governance, management and expert input.

Strategic and operational planning to define and manage the service changes required.

Transformational change and service improvements delivered as set out in the NHS. Project becomes 'business as usual'.

Specific **service improvements** to achieve the project goal.

Implementation Plan: Primary care as the foundation

Activity	2011 Q4	2011 Q1 Q2 Q3 Q4	2012 Q1 Q2 Q3 Q4	2013 Q1 Q2 Q3 Q4	2014 Q1 Q2 Q3 Q4
Establish a project team (PHC senior mgmt, subject matter experts) and supported by PMO					
Establish a primary care forum					
Define the scope of primary care (PC) services					
Do a needs assessment for the national primary care configuration of services (incl. community based and home care)					
Develop a PC capacity (staff, infrastructure) building strategy					
Develop and pilot best practice alternative models of service provisioning of PC					
Evaluate effectiveness of pilot towards achieving PC goals					
Evaluate the pilot models and expand as necessary					
Develop national standards for the provision of primary care					
Improve current provision of primary care in order to achieve the newly defined national standards					
Ensure that preventive medicine is integral component of primary care					
Introduce easy to use appointment system across PC providers					
Develop standard personalised patient folders for primary care in alignment with e-health developments					
Develop an appropriate budgeting process for PC and obtain approval					
Develop and implement community-based support programmes (home based care, self care)					
Communication campaign for PC					
Develop a transition plan for PC service coverage currently provided by other public institutions.					

PC forum meeting PC strategy, budgeting & national standards Completion of PC pilot Communication campaign for PC

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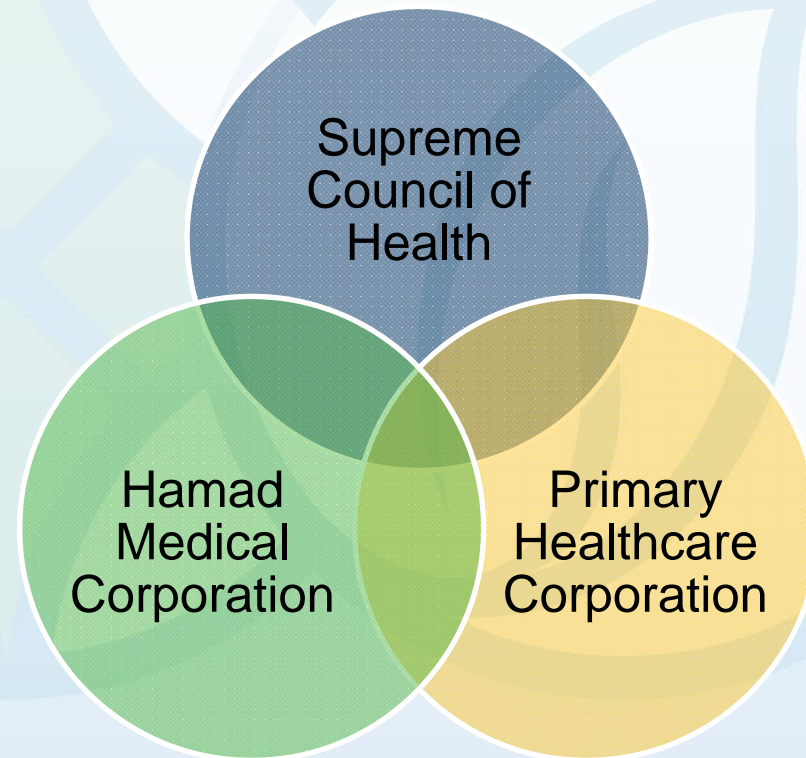2011-2016

Program Managing the NHS

Named project managers appointed for each NHS project and held to account for delivery.

A cross-organizational approach:

    o Projects led from each of the 3 partner organizations
    o Project managers appointed from each organization as appropriate.
    o Project managers given named support managers from each partner where project requires action from more than one body.

Supreme Council of Health

Hamad Medical Corporation

Primary Healthcare Corporation

An Integrated Governance Structure

The Supreme Council of Health Executive Committee

National Health Strategy Ministerial Program Board

National Health Strategy Program Steering Group

National Health Strategy Program Management Office

NHS Project Governance

Leaders from each organization represented at each level of Governance.

Each level of governance has agreed terms of reference and clear understanding of how they hold projects and the overall strategy to account

The NHS Program Management Office

A dedicated Program Management Office (PMO) in place to support, communicate and integrate the NHS Projects.

The NHS PMO has been tasked with:

- Program monitoring, control and Quality Assurance;

- Technical support to Project Managers and their teams;

- Enhancing project management capability and capacity within the SCH; and

- Communication and engagement with the stakeholder communities
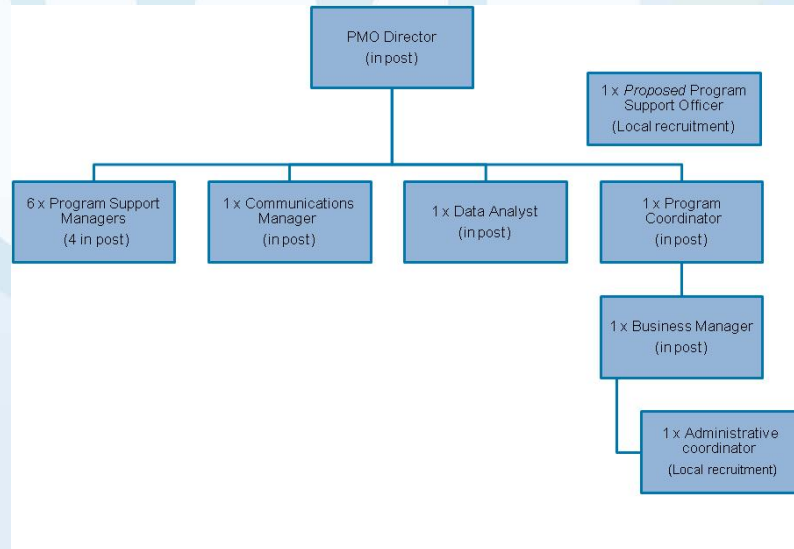
Name	Role Title	Project area	Contact
Robert Moorhead	PMO Director		Rmoorhead@sch.gov.qa
Katie Ratcliffe	Program Coordinator	(PMO / Governance)	Kdiane@sch.gov.qa
Anupama Natarajan	Program Support Manager	(SCH / Finance & Administration)	Anatarajan@sch.gov.qa
Azher Mirza	Program Support Manager	(PHCC / Primary Healthcare)	AMirza@sch.gov.qa
Charlie Ratcliffe	Program Support Manager	(SCH / Public Health)	CRatcliffe@sch.gov.qa
Huw Davies	Program Support Manager	(SCH / Regulation)	01.04.12
Masood Khaliq	Program Support Manager	(HMC / Secondary Care)	MKhaliq@sch.gov.qa
Matt Tagney	Program Support Manager	(SCH / Health Planning)	Mtagney@sch.gov.qa
Nikki Hawes	Communications Manager	(NHS / All)	N.Hawes@sch.gov.qa
Paul De Ponte	Data Analyst	(All / IT & Informatics)	PdePonte@sch.gov.qa
Helen Cullen	Business Manager	(PMO / Governance)	HCullen@sch.gov.qa
	Administrative Coordinator	(PMO / Office Management)	TBC
	Proposed Program Support Officer	(PMO / Communications)	TBC

Regular, Effective and Proportionate Monitoring of Progress

Risks, issues, interdependencies, progress against plan and outcome measures considered regularly and at the appropriate level to take the action required.

SCH Board of Directors Report (Twice Yearly)

SCH Executive Committee & NHS Ministerial Program Board Update Reports (Quarterly)

NHS Program Ministerial Report and Steering Group Papers (Monthly)

Project Status Reports (Monthly)
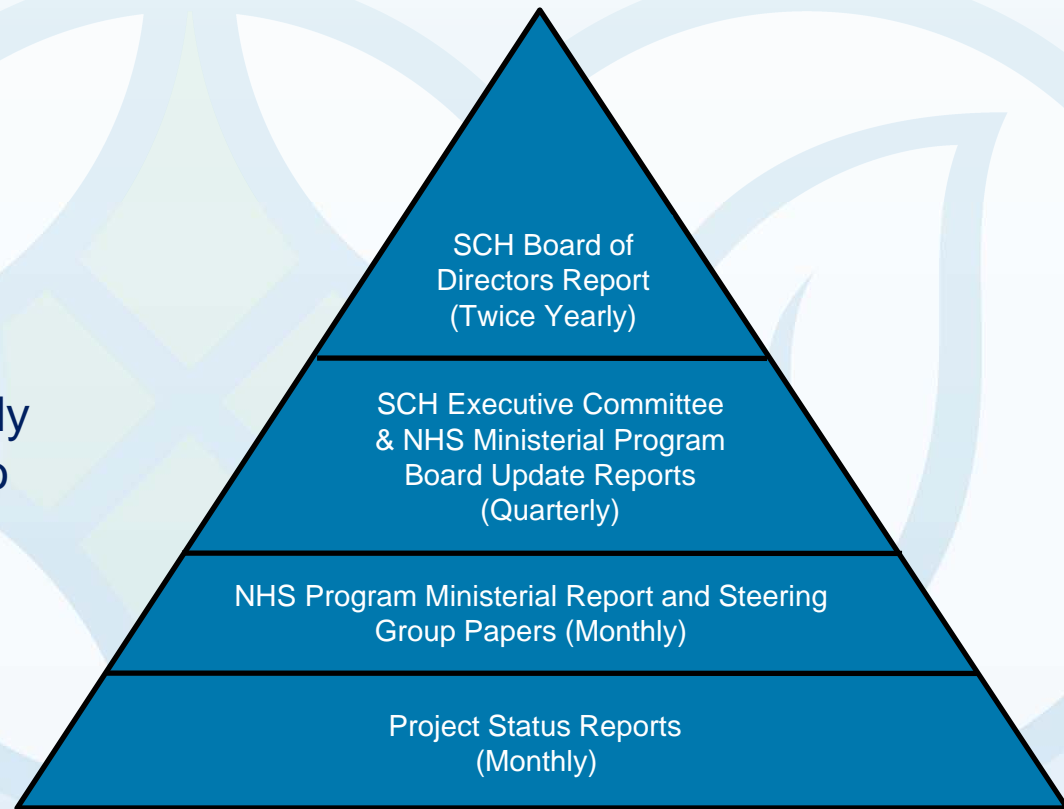
Consistent, Monthly, Project Status Updates

Monthly reporting cycle implemented with simple but specific and detailed templates reporting against the NHS project plan.

Dedicated PMO Program Support Managers to offer bespoke package of assistance to Project Managers on each project.

Monthly Reporting Cycle
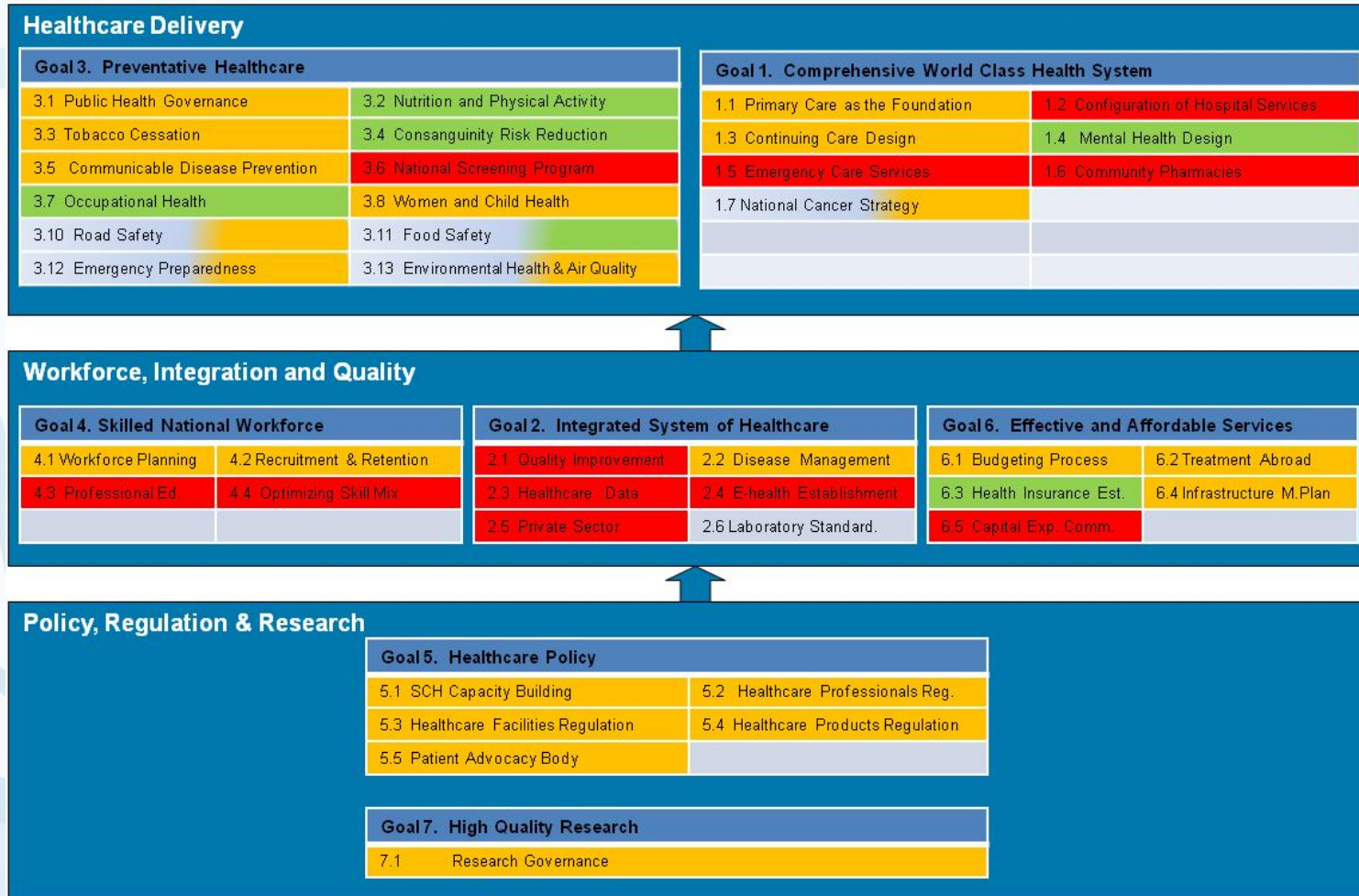

Step 1 (Day 1)
NHS PMO Commission status reports and provide NHS Steering Group feedback

Step 2 (Day 15)
Project Managers return status report

Step 3 (Day 21)
NHS Steering Group receives papers

Step 4 (Day 28-31)
NHS Steering Group advises on issues for projects

Week 1

Week 2
NHS PMO discuss status reports with project managers and produce papers for NHS steering group and monthly ministerial report

Week 3

Week 4
Projects act on the advice

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Clear and Unambiguous Monitoring and Feedback for Each Project

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Importance of Stakeholder Communications

NHS gives boost to healthcare
Peninsula, Thursday, 31 May 2012

www.NHSQ.info

A dedicated website and regular communications events to engage the full stakeholder community in a transparent and responsive manner

Monitoring Information

- QNDS defines targets for each NHS project.

- Indicators being reviewed to ensure they are measurable & appropriate.

- Indicators are a mix of outputs and outcomes – we are currently much stronger on outputs than outcomes.

- Baseline data needs to be established for some indicators – significant information gaps exist.

- Targets are being reviewed by relevant stakeholders.

- Indictors to be reported monthly through the NHS Governance to ensure visibility.

Key Challenges

- Maintaining the correct project leadership.

- Adjusting the number and scope of projects to meet the required outcomes

- Managing the complexity:

- Simultaneous activity in SCH, HMC, PHCC etc

- Building and maintaining momentum.

- Building capacity – training and development of the project managers

- Re-baselining the timeline and scope of projects where required

GULF ⚓ TIMES

Timeline to achieve health strategy goals being redefined
31 May 2012

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Questions