

Swiss Agency for Development and Cooperation (SDC)

Accessible Quality Healthcare Project:



Rahovec

2016-2018-2023



**Accessible
Quality
Healthcare**

Kvalitná zdravotnícka starostlivosť pre všetkých
Pristupačno i Kvalitetno Zdravstveno Zaštitilo

SDC project implemented by Swiss TPH



Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra

Swiss Agency for Development
and Cooperation SDC

Swiss TPH



Swiss Tropical and Public Health Institute
Schweizerisches Tropen- und Public Health-Institut
Institut Tropical et de Santé Publique Suisse


Associated Institute of the University of Basel

Swiss Agency for Development and Cooperation (SDC)

**Accessible Quality
Healthcare Project:
Rahovec**
**Quality of Care
in Primary Health Care
Trends across**

2016-2018-2023

Contacts

Swiss TPH 
 Swiss Tropical and Public Health Institute
 Schweizerisches Tropen- und Public Health-Institut
 Institut Tropical et de Santé Publique Suisse
 Associated Institute of the University of Basel

Swiss Tropical and Public Health Institute

P.O. Box
 Kreuzstrasse 2
 4123 Allschwil
 Switzerland

www.swisstph.ch

Dr. Jana Gerold
 Project Director
 Swiss Center for International Health (SCIH)
 Tel: +41 61 284 87 61

Email:
jana.gerold@swisstph.ch



SDC project implemented by Swiss TPH

AQH Accessible Quality healthcare Project (AQH)

Tirana str. Prime Residence, C
 4/3 Entrance D, Flats no. 15, 16,
 17 & 18, 10000
 Pristina
 Kosovo

<https://aqhproject.org/>

Shegë Bahtiri
 M&E Data Analyst
 AQH
 Email:
shege.bahtiri@aqhproject.org

Acknowledgements



Contributions

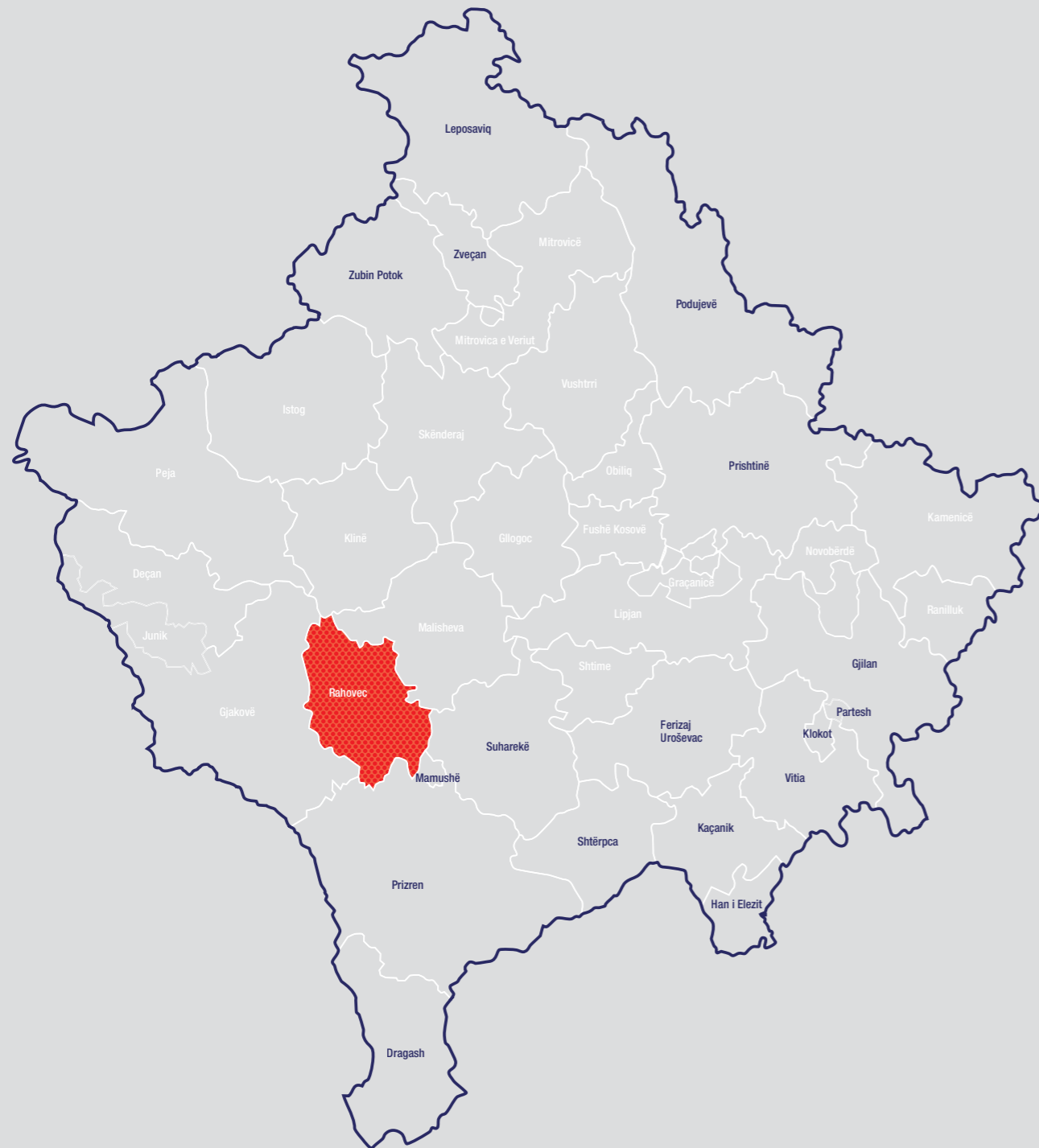
Dr. Ariana Bytyci-Katanolli and Shegë Bahtiri conducted the data analysis, results and visualization.

Valid Apuk interpreted and wrote the findings. Dr. Siddharth Srivastava and Dr. Jana Gerold critically reviewed and edited the reports.

Acknowledgements

We are very thankful to Nicu Fota, Dr. Qamile Ramadani and Dr. Merita Shehu and all the AtQH staff for providing overall support to the study. We warmly thank our local study coordinators Dr. Pranvera Krasniqi and Dr. Myvedete Tershnjaku from the National Institute of Public Health Kosovo for their commitment and support in the implementation and quality assurance of the study.

Further, we are grateful to Applicable Research Solutions and its staff for ensuring a smooth implementation of data collection and field supervision. Specifically, we would like to highlight the excellent work from our data collectors. Lastly, we would like to express our gratitude to all participants in our survey including facility managers, doctors and patients.



This study assessed the three dimensions of Quality of Care in health facilities:

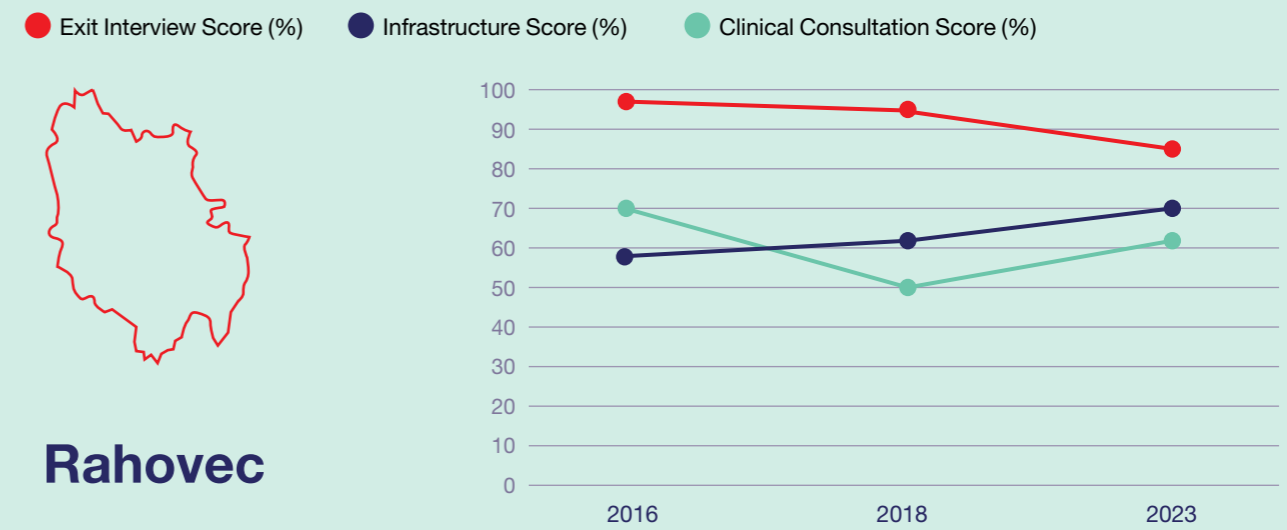
- i Quality of the facility infrastructure (structural attributes)
- ii Quality of provider-patient interactions (process attributes); and
- iii Patient satisfaction after consultation (outcomes)

To cover these three dimensions, data was collected through the following approaches:

- i At the health centre through a health centre assessment tool;
- ii At the health care provider through provider-client observations; and
- iii Patients exiting a health facility reporting satisfaction through exit interviews.

Results

For details of the methodology and the country-wide comparative results, please refer to the main report. ¹



Infrastructure score metric exhibits a consistent incline over the period, starting near 60% in 2016 and going up to around 65% in 2018, with a further increase by 2023. This persistent upward trend suggests that issues continue to be addressed in the facility’s physical infrastructure.

Contrasting the trend of the infrastructure, the Clinical Consultation Score shows an overall decrease.

Beginning at approximately 70% in 2016, there is a clear decrease to about 50% in 2018, and the score ascends by 2023 but still settling below 2016 level. This positive movement in 2023 could reflect improvements in the quality of clinical interactions, patient management, or improvement in the skills of healthcare providers.

Starting from a high point of around 90% in 2016,

¹ Rajkumar S, Knoblauch AM, Ramadani Q, Bytyci-Katanolli A, Fota N, Shehu M, Gerold J. Quality of Care Study 2023. Summary Report of AQH Phase I and II Project Municipalities. Accessible Quality Healthcare Project, Basel: Swiss Centre for International Health, 2023. <https://aqhproject.org/publications-2/for-health-providers/>

there is a minor decrease in exit interview score by 2018. However, by 2023, the score marginally further reduces though maintains still high levels. The slight drop could indicate a change in patient satisfaction or expectations that warrants attention.

The overall performance for MFMC Rahovec indicates a mixed outcome between 2016 and 2023. Since the Clinical Consultation Score shows an improving trajectory from 2018, suggesting enhanced clinical services or patient-clinician engagement, the

Infrastructure Score presents an incline, signaling improvements to the physical healthcare environment over the years. The Exit Interview Score, after a slight decrease, suggests stability in patient satisfaction levels. In summary, MFMC Rahovec’s leadership with collaborative efforts between municipal directorates, health staff, and citizens, along with support from the AQH project appears to be effectively contributing to better care provision.

1. Infrastructure assessment: Status of general medical equipment

The infrastructure available at key facilities in Rahovec has also shown mostly positive improvements within the project time frame with equipment being available and in functional condition.

Equipment	Facility type (Availability, Functionality) ²					
	MFMC Dr. Fahredin Hoti		FMC Village Qifllak		FMC Village Krushe e Madhe	
	2016	2023	2016	2023	2016	2023
Microsurgery	↑↑	↑↑	↑↓	↓	↓	↑↑
Nebulizer	↑↑	↑↑	↑↑	↑↑	↑↑	↑↑
Ambu mask	↑↑	↓	↑↑	↑↑	↓	↑↑
Strong source of light in good condition (portable)	↑↑	↑↑	↓	↑↓	↓	↑↑
Nasal speculum	↑↑	↓	↓	↑↑	↓	↓
Otoscope	↑↑	↑↑	↓	↑↑	↓	↑↑
Ophthalmoscope	↑↑	↑↑	↓	↓	↓	↑↑

² ↑ = Available; ↑ = Functional, ↓ = Not available, ↓ = Not functional

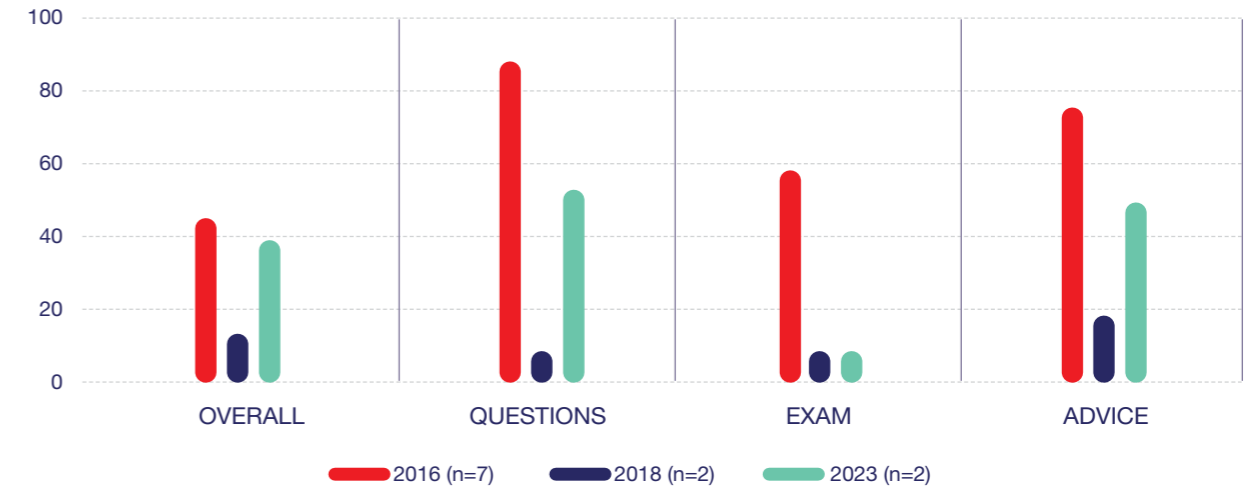
Doppler	↑↑	↓	↓	↓	↑↑	↓
Glucometer	↑↑	↑↑	↓	↑↑	↑↓	↑↑
Peak flow meter	↓	↑↑	↓	↓	↓	↓
Tape measure	↑↑	↑↑	↓	↑↑	↓	↑↑
Pen light	↑↑	↓	↓	↑↑	↓	↑↑
Head light	↓	↓	↓	↑↑	↓	↑↑
Neurological hammer	↑↑	↑↑	↑↑	↓	↓	↑↑
Weight scale for adults	↑↑	↑↑	↑↑	↑↑	↑↑	↑↑
Weight scale for children (over 2 years old)	↑↑	↑↑	↑↑	↑↑	↓	↑↑
Weight scale for infants and toddlers (up to 2 years old)	↑↑	↑↑	↑↑	↑↑	↓	↑↑
Sphygmomanometer for children	↑↑	↑↑	↓	↓	↓	↑↑
Sphygmomanometer for adults	↑↑	↑↑	↓	↑↑	↑↑	↑↑
Stethoscope for children	↑↑	↑↑	↓	↓	↓	↑↑
Stethoscope for adults	↑↑	↑↑	↓	↑↑	↑↑	↑↑
Obstetrical stethoscope/ Fetoscope	↑↑	↓	↓	↓	↓	↓
Pelvimeter	↑↑	↓	↓	↓	↓	↓
Sterilization equipment and anti-septical protocol	↑↑	↑↑	↑↑	↑↑	↑↑	↑↑
Pulse oximeter	↑↑	↑↑	↑↑	↑↑	↑↓	↑↑
Refrigerator	↑↑	↑↑	↑↑	↑↑	↑↑	↑↑

Vaccine refrigerator/portable	↑↑	↑↑	↑↑	↑↑	↑↑	↑↑
Height meter board for children (up to two years old)	↑↑	↑↑	↓	↑↑	↓	↑↑
Meter for height measuring (children over two years of age)	↑↑	↑↑	↓	↑↑	↓	↑↑
Thermometer	↑↑	↑↑	↓	↑↑	↓	↑↑
Tuning fork	↓	↓	↓	↓	↓	↓
Table for vision testing	↑↑	↓	↑↑	↓	↓	↓
Ear syringe	↑↑	↓	↓	↑↑	↑↑	↓
Scissors	↑↑	↑↑	↑↑	↑↑	↑↓	↑↑
Timer	↑↑	↑↑	↓	↑↑	↓	↑↑
Snellen eye chart	↑	NA	↑	NA	↓	NA
Children growth chart	↑	NA	↓	↑↑	↓	NA
Tongue depressor	↑	↑↑	↑	↑↑	↑	NA

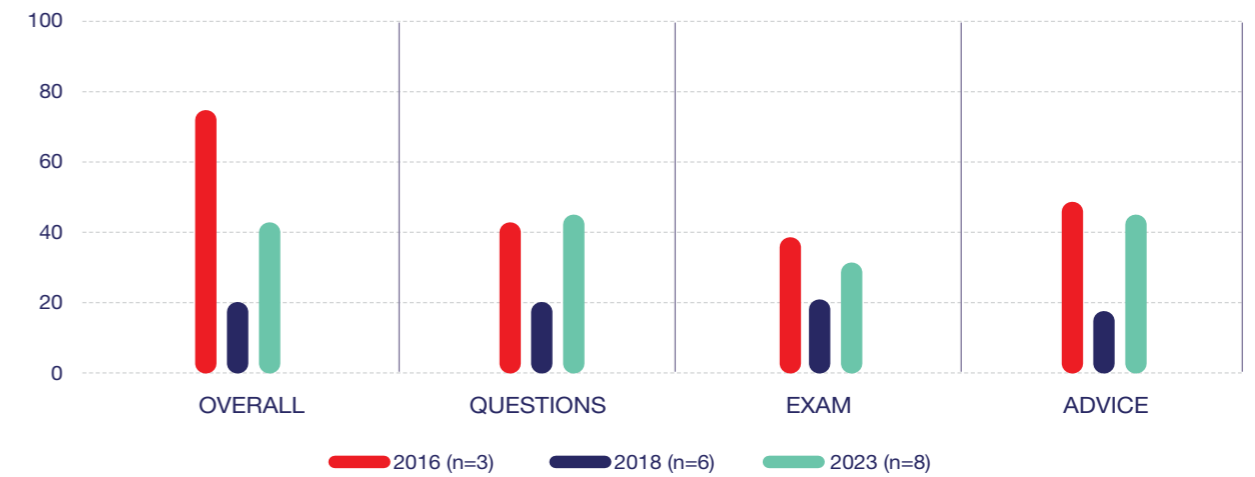
2. Clinical Observations

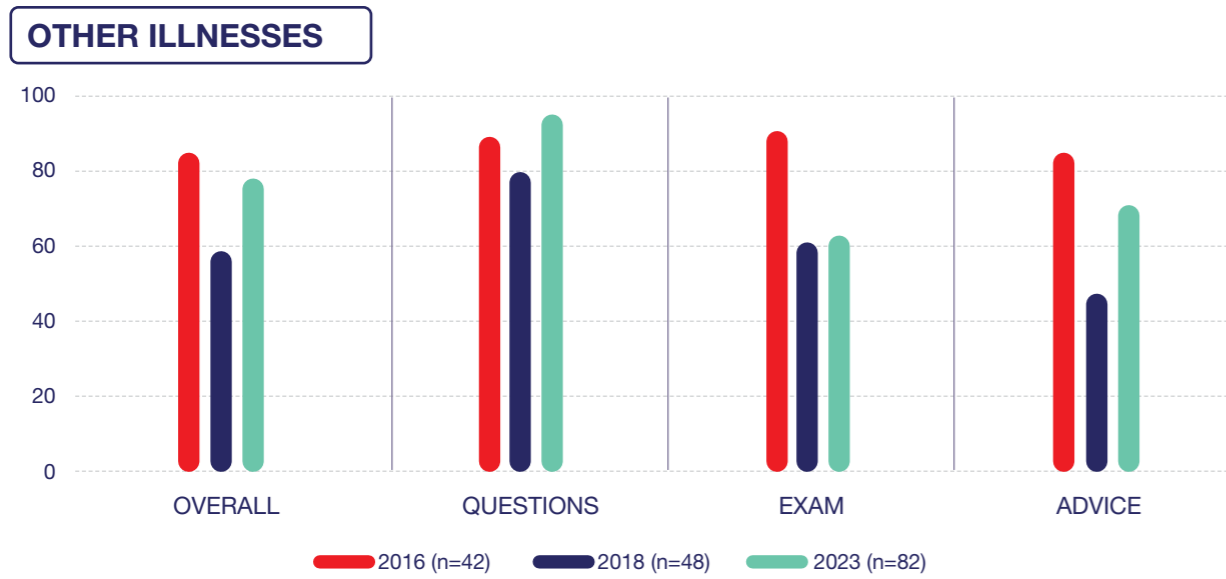
The bar graphs for MFMC Rahovec show performance across three health conditions: Diabetes, Hypertension, and Other illnesses, with data points for the years 2016, 2018, and 2023. They assess four areas of healthcare service: Overall, Questions, Exam, and Advice.

DIABETES



HYPERTENSION





For diabetes and hypertension, we observe an initial decrease in all categories from 2016 to 2018, however, by 2023, there is a marked increase, coming closer to 2016 levels.

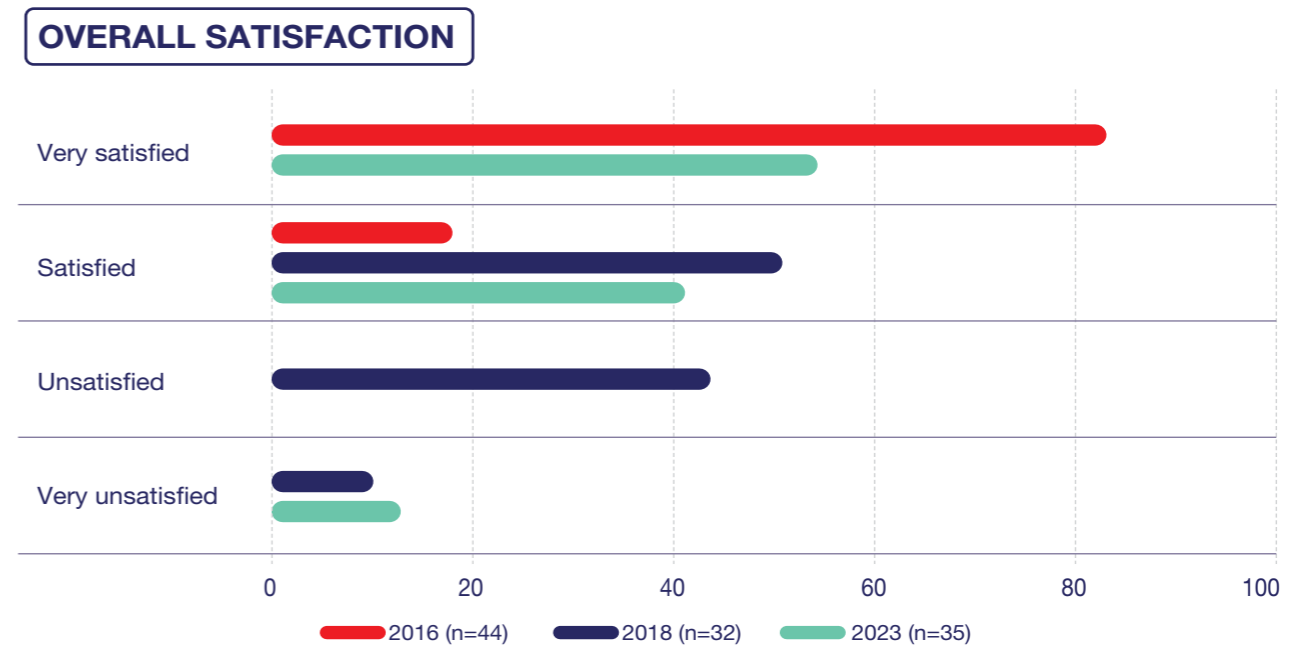
The overall category for diabetes in 2023 shows an increase following a dip from 2016 to 2018. However, the categories—questions, exams and advice—exhibit a significant dip in 2018 before rising again in 2023 but not close to the original 2016 levels.

In hypertension services, the trend is somewhat similar, with an initial decline followed by a recovery in 2023. Interestingly, the ‘Overall’ and ‘advice’ categories show more fluctuation than the other categories, implying varying degrees of performance on different aspects of the clinical consultation process with “Exam” having the least scores.

Regarding other illnesses, the data displays a relatively stable trend, with a minor decrease in 2018 followed by a notable increase in 2023, getting scores back closer to original 2016 levels. Exams is the lowest scoring category by 2023 amongst all other categories.

Overall, MFMC Rahovec’s service utilization pattern reflects an institution responding to the shifting health needs of its community. The initial reduction across services in 2018 followed by an increase in 2023 may highlight the facility’s adaptability and growth in addressing various health issues. The consistent upward trend in 2023 underlines an improvement in clinical practices, positioning MFMC Rahovec as a progressively crucial player in the region’s healthcare landscape.

3. Exit Interviews

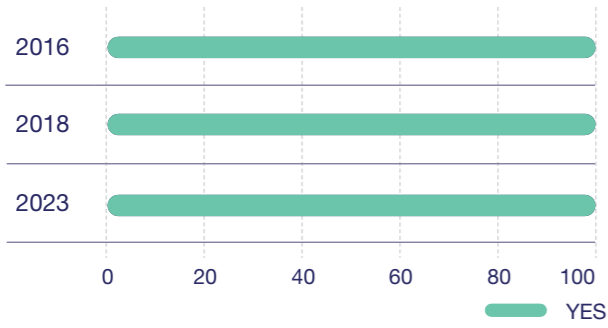


This graph points to an evolving performance at MFMC Rahovec. Initially in 2016, most patients felt their experiences were positive (“Satisfied” or “Very satisfied”). Over time (in 2018), the responses have shifted to the “Satisfied” as well the “Unsatisfied” and “Very Unsatisfied” category. The expansion in the “Very satisfied” responses by 2023 indicates an improvement in the patient experience. The decrease in the “Unsatisfied” responses to none in the same year suggests effective addressing of previous concerns could have led to improved client perception. The presence of “Very Unsatisfied”, although reduced, signifies that while

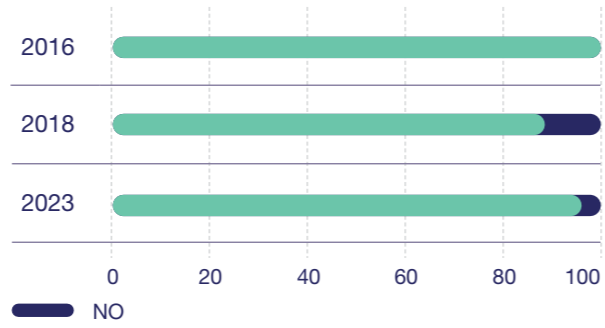
performance is likely improving, there are still areas requiring attention. For MFMC Rahovec, the priority might lie in maintaining and improving the satisfaction levels by continuing to minimize the “Unsatisfied” and “Very unsatisfied” experiences, thus striving for excellence in patient care and service satisfaction.

Despite the overall improvement in self reported patient satisfaction in Rahovec, a variation in the patient experience during the consultations were observable, as shown below in more detail.

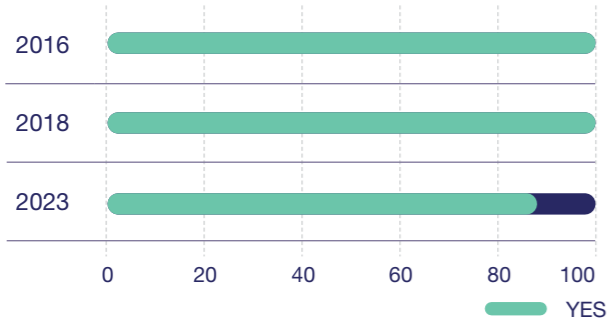
Patient given the opportunity to explain the health problem



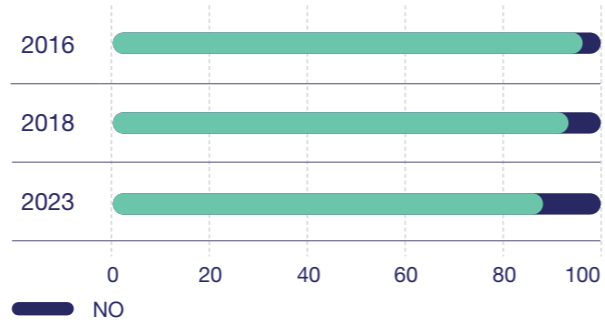
Medical doctor/nurse ensured privacy during the visit



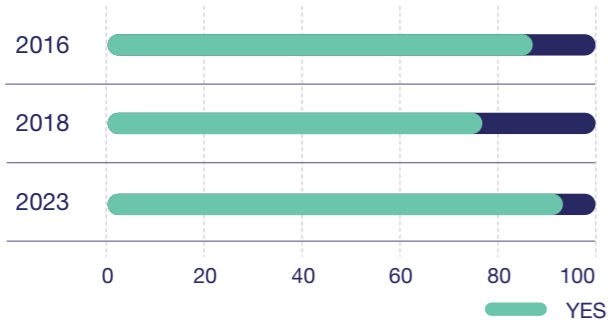
Medical doctor explained the questioning, physical examinations and health problems



Medical doctor clearly explained the intake of prescribed medicines



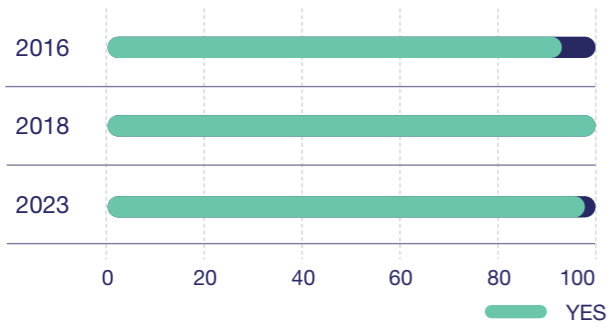
Medical doctor asked the patient if they are currently taking any prescriptions



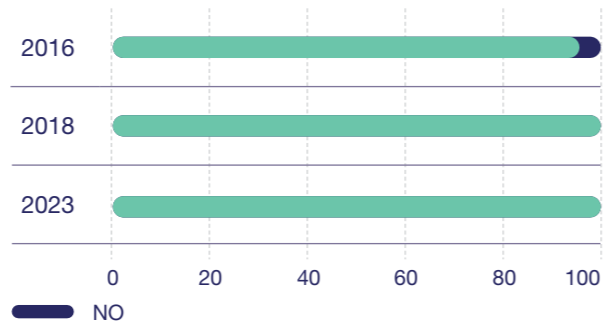
During consultation the patient had a chance to ask questions about the investigations, the health problems and treatment

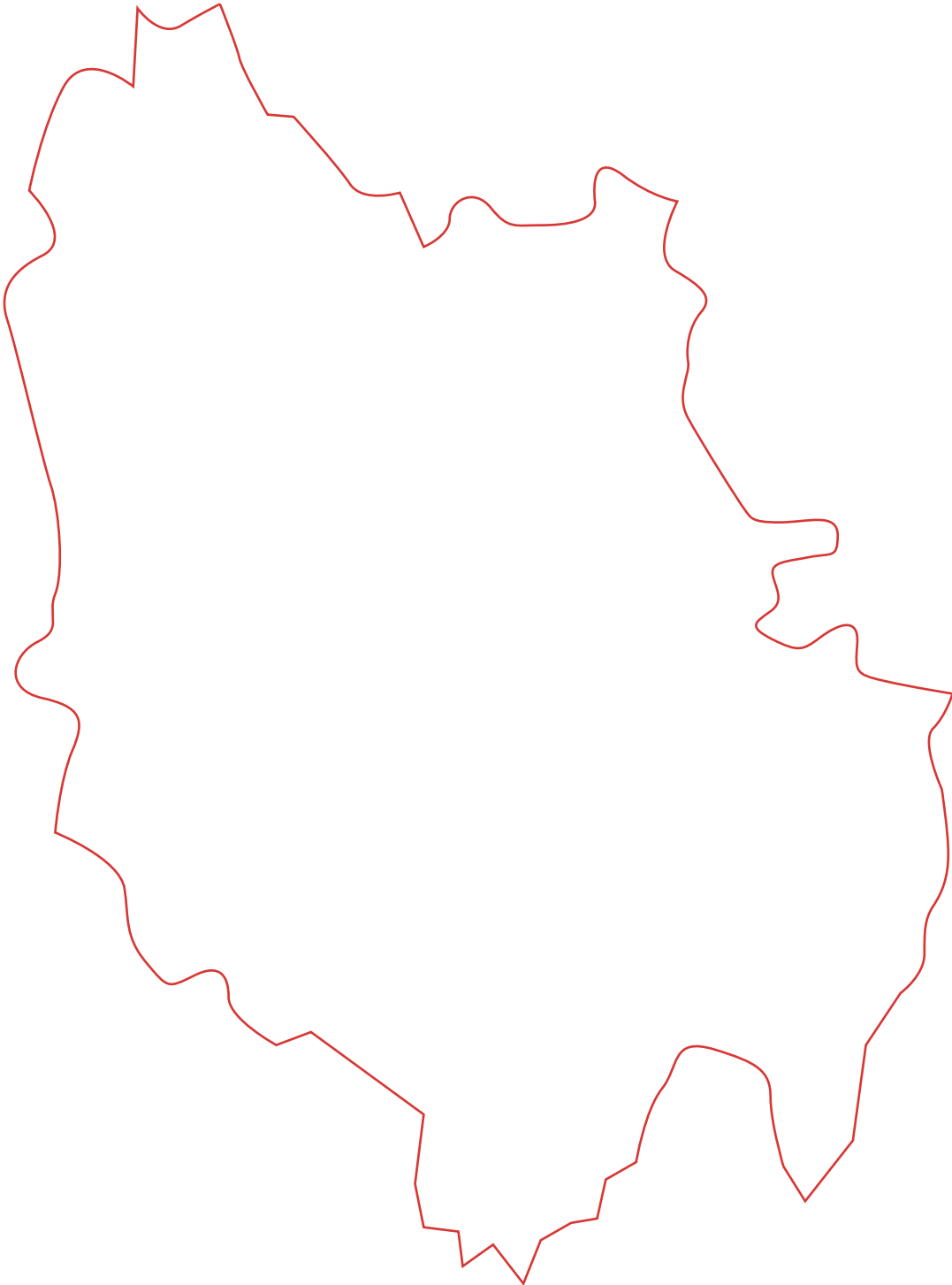


Medical doctor listened carefully to patient concerns and questions and gave satisfactory answers



Medical doctor/nurse was in general polite during consultation





**Rahovec – Quality of Care in Primary Health Care
Trends across 2016-2018-2023**