

The Abortion Quality Index: A new metric to monitor programme quality

KEY LEARNINGS

The MSI Abortion Quality Index (MS AQI) was developed with the aim of measuring the quality of MSI's programmes for safe abortion and post-abortion care globally and to drive continuous quality improvement.

The MS AQI recognises five key components that are needed no matter how clients access care or the method of abortion they choose. The metric was informed by WHO definitions of abortion safety and quality, and developed through a review of existing indicators and consultation across teams and functions.

Between 2018 and 2020, MS AQI scores were generated in 31 MSI programmes where safe abortion and/or post-abortion care is provided, in Africa, Asia and Latin America. Since launching, we have seen significant improvements in scores across our programmes, including due to greater adherence to new product quality assurance standards for self-testing, and through new continuum of care mechanisms.



THE CHALLENGE

Measuring quality across diverse models of care

Access to high quality, client-centred abortion care is a fundamental human right. Globally, MSI programmes increase access to high quality care, and we use a range of monitoring tools to ensure service quality. There is variation in the [indicators](#) used to measure quality in abortion care across the sector, but we wanted to develop one simple tool that could be used to measure and motivate a culture of continuous quality improvement across our global partnership.

At the same time, it is increasingly common globally for medical abortions (MA) to be self-managed outside of facility settings via a pharmacy. Growing [evidence](#) is showing that pharmacies can provide safe and effective pathways to care. However, we know that not all women receive adequate advice and support when accessing medical abortion via a pharmacy. We sought to include the quality of self-managed MA from pharmacies within our global quality metrics.

WHAT WE DID

Development of a simple metric: the MS AQI

MSI has developed the Abortion Quality Index (MS AQI) - a metric to monitor the quality of care across all our programmes and models of care. The metric was developed in 2018 based on WHO definitions of safety and quality, a review of existing monitoring tools and quality indicators, consultation across different teams, and through a process of ongoing feedback across the partnership. To ensure the metric could be rapidly and efficiently rolled out, we focussed on using indicators that could be readily extracted from our existing monitoring systems.

Data were extracted for the first time in 2018 and the MS AQI was calculated for each country and region, and for the global partnership. Results were reviewed by each country or regional team, and an interactive dashboard of results was developed for annual updates. The MS AQI has been integrated into our annual performance review processes.

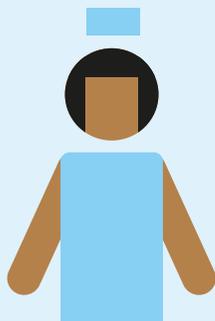
WHAT WE FOUND

The key components of care

The MS AQI recognises five key components that are needed across different types of care or method of abortion. AQI indicators measure whether MSI programmes meet the following standards:

Competent provider

[% of providers meeting MSI's Level 1]



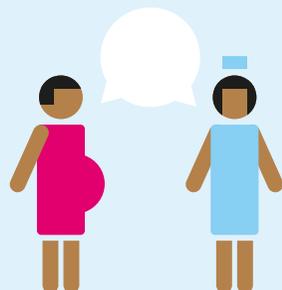
Quality products

[QARMA approval and shelf-testing status]



Client-centred services

[service quality audit score]



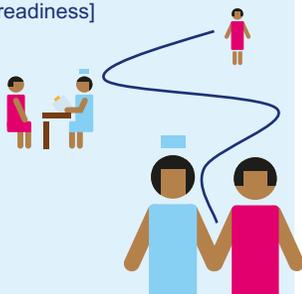
Accurate information

[a multi-pronged assessment of how the programme ensures women self-managing MA have access to comprehensive information through a contact centre, user-friendly instructions, or other client- or pharmacy-facing mechanisms]



Continuum of care

through follow up mechanisms [as assessed by service quality audits and/or contact centre readiness]



Indicators vary by location and type of safe abortion or post-abortion care service (see Figure 1), but each type of abortion is assessed by three of these indicators. For example, the quality of surgical safe abortion or post-abortion care service delivery is measured by provider competency, service quality, and the continuum of care. Medical abortion that may be accessed from a pharmacy is monitored in terms of product quality, availability of information, and the continuum of care.

Figure 1

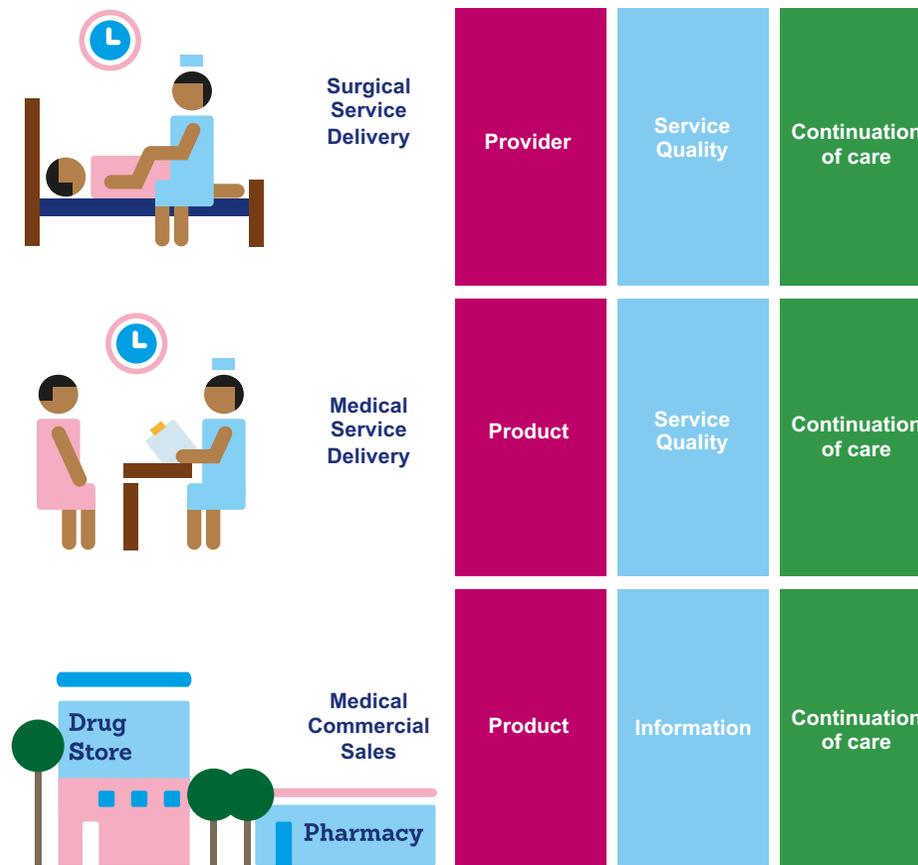


Figure 1: The MSI AQI measures three indicators for each type of CAC/PAC

WHAT WE FOUND

A measure of programme quality

The MS AQI is a measure of overall programme quality, rather than the quality of one individual service or client experience. To enable effective implementation, indicators are drawn from MSI's existing systems, including clinical quality audits, provider competency assessments, contact centres data systems, and product quality trackers.

By categorising each indicator at a value between 0 and 3 (from 'safe' to 'gold standard'), we generate overall standardised scores from 0-9 for each type of abortion (see Figure 2). These scores are then weighted by the number of services provided through each model of care in a country or region.

The metric enables MSI programmes to closely monitor their overall performance and strive towards the 'gold standard' in quality.

Figure 2



Figure 2: The maximum score is 3 out of 3 per indicator, and 9 out of 9 per service delivery type.

WHAT WE FOUND

Driving quality improvements

Between 2018 and 2020, MS AQI scores were generated in 31 MSI programmes where safe abortion and/or post-abortion care is provided. From 2018 to 2020 we noticed significant improvement in scores, mainly due to greater adherence to new product quality assurance standards for shelf-testing and improvements in continuum of care mechanisms.

In 2020, **MSI Mongolia** experienced the greatest improvement in score from the previous year and achieved a gold standard of quality across the programme. Driven by the guidance of the AQI standards, the country programme was able to make improvements in all 5 standards of quality, in accordance with the regulatory requirements. This improvement was driven by ensuring that a client phone line was included in MA product packaging, developing a new script to provide advice on safe abortion or post-abortion care provision via the phone line and appointing 24-hour focal points to answer client calls. In addition, knowledge and skill sharing for provider competency-based training was adopted from the MSI Nepal programme, helping MSI Mongolia to increase the proportion of their providers that are competency assessed at Level 1 (meaning they do not require direct supervision).

As standards improve, we are also able to shift the goal posts, ensuring a culture of continuous quality improvement across our global programmes.



Above: contact centre staff in Mongolia provide advice to clients over the phone



MORE INFORMATION

For more information on MSI Reproductive Choices and the work that we do, please contact:
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 Alternatively, visit our website: www.msichoices.org.

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