Strengthening Capacities for High-Quality Post-COVID-19 ICU Care
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Context
From the outset of the COVID-19 pandemic in March 2020, the USAID-funded Local Health System Sustainability (LHSS) Project (USAID/LHSS) worked to strengthen and adapt programs of the Jordanian Ministry of Health (MOH) to improve the patient experience, particularly its capacity to manage emergencies. In response to the pandemic, the project focused on strengthening the capacity of health care personnel (HCPs) to provide quality care during critical situations, including COVID-19 services. To achieve this objective, LHSS developed a competency-based framework (CFW) for the interdisciplinary ICU teams to update required qualifications and scopes of practice to ensure continuous capacity development at national and sub-national levels. LHSS worked closely with multiple stakeholders from the public health sector, private entities and councils and private sector entities to design and implement the new system.

Activity Description
To strengthen the Jordanian health system and improve the quality of care provided in ICUs, LHSS worked with the MOH and its hospitals, professional associations, and private sector stakeholders to institutionalize capacity strengthening activities aimed at improving the quality of care provided in these environments. This included developing and implementing a competency framework (CFW) for the interdisciplinary ICU teams, creating and piloting a competency-based training program for ICU teams in three geographically representative hospitals, and establishing a digital platform to expand access to CPD offerings, using a systems thinking approach to strengthen the capacity of ICU services with targeted interventions, identified by evidence assessments, and facilitated cross-sectoral partnerships.

Activity Impact
Human resource development
- LHSS facilitated the creation of new positions in the MOH hospital to develop programs, including job descriptions that clarify responsibilities and qualification requirements for respiratory therapists and ICU nurses.
- LHSS supported the MOH in adapting a competency-based framework for ICU providers, introducing new training modalities, and competency assessment tools, which is expected to improve the quality of ICU services.
- Capacity strengthening
- LHSS is partnered with the Jordanian American-Physician Association to establish the MOH’s first intensive fellowship program. Graduating fellows will be trained to conduct interdisciplinary teamwork to improve the quality of service and patient outcomes in ICUs.
- LHSS collaborated with the MOH in creating the first competency-based framework for interdisciplinary ICU teams composed of ICU nurses, pharmacists, nutritionists, and respiratory therapists.
- LHSS collaborated with the MOH in establishing an accredited Continuing Education (CE) program for ICU teams. The MOH now allocates $0.1 million annually for the development of competency-based training and logistics and a digital platform for efficient and effective management of critical patients.
- LHSS initiated leadership training programs, including the implementation of the interdisciplinary teamwork approach to strengthen the ICU management capacity to implement the process of decision making in critical situations.
- The capacity of multidisciplinary ICU teams and institutionalized accredited CPD training programs, ICU health workers in MOH hospitals will be able to provide a broader range of specialized critical care services and improved overall quality of care.

Digital Health
- LHSS supported the launch of two digital platforms at the MOH and a private sector partner, where intensivists access accredited CPD courses. Creating virtual learning platforms will enhance remote access to specialized training among non-ICUs, including female providers and those remote from the digital platform.
- LHSS supported the MOH in developing a legislative framework to facilitate and operationalize accreditation of health personnel, whether it be in the public sector or private sector.
- LHSS initiated leadership training program for ICU leaders implementing the interdisciplinary teamwork approach will strengthen the ICU management capacity to implement the process of decision making in critical situations.

Evidence
- Final draft of job descriptions for the regulatory therapists and the interdisciplinary specialists that regulate the qualifications required for candidates applying for these positions. These references will ensure those with the skills to deliver high-quality ICU services.
- Local ownership and coordination
- LHSS supported the formation of an advisory committee of ACCFP directors from different entities (MOH, IRMC, Jordan University Hospital, King Hussain Cancer Center). The committee was tasked with triaging and collaborating and integrating among different programs.

Lessons Learned
- LHSS established national competency standards for the MOH and for the private sector E Jawda training platform with free accessible training including two digital platforms.
- LHSS fostered MOH ownership by supporting the creation of national committees such as the ICU Competency Framework national committee, the Respiratory Unit Management Committee, and the ICU Competency Framework national committee.

Facilitators
- Creating National Ownership: LHSS fostered MOH ownership by supporting the creation of national committees such as the ICU Competency Framework national committee, the Respiratory Unit Management Committee, and the ICU Competency Framework national committee.
- Utilizing the private sector: LHSS utilized other national leaders and partners to support the MOH’s interest in continuing education by developing a partnership with the national CPD Committee to ensure CPD accreditation of all training programs.

Challenges
- It was initially difficult for LHSS to identify training facilities and national expertise to train intensivists for the new COVID-19 services created in MOH hospitals. To address this issue, LHSS partnered with international organizations and contracted with organizations such as the Jordanian American-Physician Association to fill the gaps.
- Interdisciplinary teamwork requires significant behavioral change on the part of providers and managers. When implementing the interdisciplinary approach, many of the positions were not available in the ICUs, such as the pharmacist and nutritionist. LHSS worked with the MOH to ensure that these functions are available in the MOH pilot hospitals where the interdisciplinary team is implemented.
- Frequent leadership changes at the MOH highlights the importance of having internal champions to support the transformation process.

Questions:
1. What are effective and sustainable mechanisms or processes to integrate local, community, sub-national, national, and regional voices, priorities, and contributions into health system strengthening efforts?


3. Utilizing the private sector: LHSS utilized the Jordanian American-Physician Association to support the MOH’s interest in continuing education by developing a partnership with the national CPD Committee to ensure CPD accreditation of all training programs.