Quality of Care (QoC) Framework for Self-Care

MHO	Conceptual framework for self-care interventions	Self-care for health & well-being Key principles • Places of access • Enabling environment • Accountability					
	Elements critical for QoC in self-care	Digital technologies and platforms					
		Healthcare clients		Trained health workforce		Regulated quality products and	Health sector
	QoC Channels ¹	Client capacities	Client communication tools	Health provider/worker capacities	Health provider/worker communication tools	interventions	accountability
	QoC Domains ²	QoC Standards					
	Technical Competency	Standard 1.1 Client demonstrates the knowledge and skills needed to competently self-manage care (e.g. through self-screening, self-testing, self-referral, etc.).	Standard 1.2 Client communication tools effectively instructs the client how to self- manage their care.	Standard 1.3 Health provider/worker or digital application exhibits the appropriate level of knowledge and clinical skills needed to effectively transmit information and skills to a client so that they can safely and effectively self-manage their care.	Standard 1.4 Communication tools effectively build the skills needed to instruct a client in how to self- manage their care.		Standard 1.5 Services or support is provided by licensed and registered health professionals who are authorized to perform the procedures by national laws. Standard 1.6 A supportive supervision system assesses client's and/or health provider/worker's skills, documents quality gaps and progress towards rectifying identified quality gaps.
	Client Safety	Standard 2.1 Client, understands how to safely use the product and can adequately assess if they are medically eligible to use the product to self-manage their care. Standard 2.2 Client can comply with waste disposal standards as per national protocols. Standard 2.3 Client can accurately determine if they are experiencing a side effect or complication.	Standard 2.4 Communication tools are medically accurate, contain information on correct dosage and side effect management, and are in line with national, international/WHO guidelines.	Standard 2.5 Health provider/worker or digital application effectively assesses if a client can safely self manage their care which includes properly screening clients for medical eligibility according to national service delivery protocols.	Standard 2.6 Communication tools are medically accurate, contain information on correct dosage and side effect management, and are in line with national and international/WHO guidelines.	Standard 2.7 Products are registered in- country and are WHO or stringent regulatory authority (SRA) approved. Standard 2.8 Products are non-expired and stored according to manufacturer requirements.	Standard 2.9 National protocols or guidelines that support self-care exist and are updated to reflect international guidelines and best practice for self-care.

QoC Framework for Self-care (continued)

РO	Conceptual framework for self-care interventions	Self-care for health & well-being Key principles • Places of access • Enabling environment • Accountability					
ΗM	Elements critical for QoC in self-care		Digital technologies and platforms				
		Healthcare clients		Trained health workforce		Regulated quality	Health sector
	QoC Channels ¹	Client capacities	Client communication tools	Health provider/worker capacities	Health provider/worker communication tools	products and interventions	accountability
	QoC Domains ²	QoC Standards					
	Information Exchange	Standard 3.1 Client can access comprehensible information that responds to their expressed needs and preferences and includes a range of options. Standard 3.2 Client can access information regarding benefits, risks and side effects of a chosen self-care product prior to receipt.	Standard 3.3 Communication tools are accurate, comprehensable, and available in an accessible/ local language.	Standard 3.4 Health provider/worker or digital application elicits input from the client and provides counseling/ consultation that responds to the client's expressed needs and preferences. Standard 3.5 Health provider/worker or digital application gives information regarding benefits, risks and side effects of a chosen service prior to receipt.	Standard 3.6 Communication tools support health providers/workers to elicit input from the client and provide accurate, comprehensible information in support of self-care.		Standard 3.7 There is a mechanism to assess if a client can access comprehensible information that is responsive to their expressed needs and includes information regarding benefits, risks and side effects. A review of progress towards improving the client's experience occurs on a consistent basis and results in an action plan.
	Interpersonal Connection & Choice*	Standard 4.1 Client's experience of care during all self-care interactions is dignified, empathetic, and respectful. Standard 4.2 Client accesses care in a setting where visual and audio privacy is assured. Standard 4.3 Client accesses care or information that does not vary in quality because of their personal characteristics such as age, marital status, gender, disability, ethnicity, geographic location, and socioeconomic status. Standard 4.4 Client exercises choice, is not pressured or coerced, and gives consent to use a self-care product intervention.	Standard 4.5 Client communication is respectful, empathetic, non- judgmental, and free from coercion.	Standard 4.6 Health provider/worker or digital application provides information or care in a respectful, empathetic, non- judgmental way that is free from coercion and facilitates the client's agency.	Standard 4.7 Communication tools support the health provider/ worker to interact with the clients in a way that is empathetic, non-judgmental and respects their choice and agency.		Standard 4.8 There is a mechanism to assess whether a client's experience of care is empathetic, respectful, non-judgemental, and facilitates choice and agency. A review of progress towards improving the client experience occurs on a consistent basis and results in an action plan.

QoC Framework for Self-care (continued)

OHM	Conceptual framework for self-care interventions	Self-care for health & well-being Key principles • Places of access • Enabling environment • Accountability					
	Elements critical for QoC in self-care	Digital technologies and platforms					
		Healthcare clients		Trained health workforce		Regulated quality	Health sector
	QoC Channels ¹	Client capacities	Client communication tools	Health provider/worker capacities	Health provider/worker communication tools	products and interventions	accountability
	QoC Domains ²	QoC Standards					
	Continuity of Care	Standard 5.1 Client can accurately determine if they are experiencing a side effect, complication, or an adverse event. Standard 5.2 Client knows how to access or where to go for support/ follow-up care with questions, concerns or after experiencing a complication or adverse event. Standard 5.3 Client has the ability to access follow-up support or care if they have questions, concerns or in the event of an emergency.	information on follow-up care, including circumstances under which a client should seek follow-up care and where to seek care.	Standard 5.6 Health provider/ or digital application gives information on follow-up care, including circumstances under which a client should seek care and where to seek care. Standard 5.7 Health provider/worker recognizes, manages and reports complications and adverse events according to program or national guidelines.	Standard 5.8 Communication tools support the health provider/worker to properly inform a client about follow-up care options and the recognition of side effects or danger signs.	Standard 5.9 Product is available and accessible including if the client desires continued use.	Standard 5.10 Mechanisms exists so that clients and health providers / workers can report complications and adverse events. Standard 5.11 Mechanisms exist to verify that referrals and follow-up systems are functioning.

* "Choice" in this framework refers to a client's choice to engage in self-care as a way of meeting their health needs. If the self-care intervention involves a contraceptive method, the following standards should be applied within the Interpersonal Connection and Choice domain:

- Health provider/worker is not subject to targets or quotas for the number of family planning acceptors, or acceptors of a particular contraceptive method or service.
- Client does not receive any incentives for becoming a family planning acceptor.

¹ Quality of care channels refer to the mechanisms through which quality is delivered and monitored in any setting.

² QoC Domains are based on the "Bruce/Jain Quality of Care Framework." Bruce, Judith. 1990. "Fundamental elements of the quality of care: A simple framework," Studies in Family Planning 21(2): 61–91.