Implementation process and quality of a primary healthcare system improvement initiative in a decentralized context: A retrospective appraisal using the Quality Implementation Framework

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Background: Effective implementation processes are essential in achieving desired outcomes of health initiatives. Whereas many approaches to implementation may seem straightforward, careful advanced planning, multiple stakeholder involvements and addressing other contextual constraints needed for quality implementation are complex. Consequently, there have been recent calls for more theory-informed implementation science in health systems strengthening.

Aim: This paper applies the Quality Implementation Framework (QIF) developed by Meyers, Durlak and Wandersman to identify and explain observed implementation gaps in a primary healthcare system improvement intervention in Nigeria.

Methods: We conducted a retrospective process appraisal by analysing contents of 39 policy document and 15 key informant interviews. Using the QIF we assessed challenges in the implementation processes and quality of an improvement model across the tiers of Nigeria’s decentralized health system.

Results: Significant process gaps were identified which may have affected subnational implementation quality. Key challenges observed include inadequate stakeholder engagements and poor fidelity to planned implementation processes. Although needs and fit assessments, organizational capacity building and development of implementation plans at national level were relatively well carried out, these were not effective in ensuring quality and sustainability of DIVA at the subnational level

Conclusions: Implementing initiatives between levels of governance is more complex than within a tier. Adequate pre-intervention planning, understanding and engaging the various interests across the governance spectrum are key to improving quality.