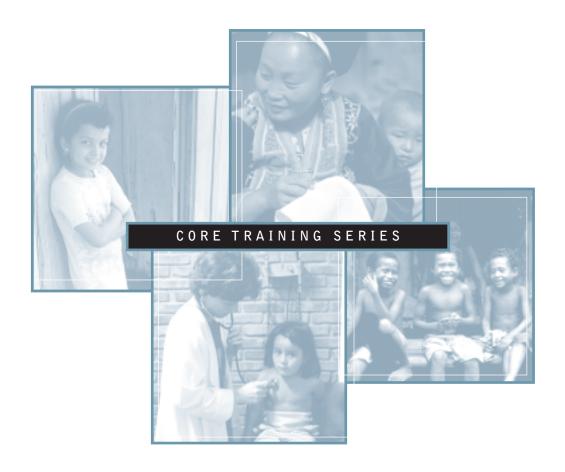
QUALITY

ASSURANCE

PROJECT



Monitoring the Quality of Primary Care Participant Manual

The Quality Assurance (QA) Project is funded by the U.S. Agency for International Development (USAID), under Contract Number HRN-C-00-96-90013. The QA Project serves countries eligible for USAID assistance, USAID Missions and Bureaus, and other agencies and nongovernmental organizations that cooperate with USAID. The QA Project team consists of prime contractor Center for Human Services; Joint Commission Resources, Inc.; and Johns Hopkins University (including the School of Hygiene and Public Health [JHSPH], the Center for Communication Programs [CCP], and the Johns Hopkins Program for International Education in Reproductive Health [JHPIEGO]). The QA Project provides comprehensive, leading-edge technical expertise in the design, management, and implementation of quality assurance programs in developing countries. Center for Human Services, the nonprofit affiliate of University Research Co., LLC, provides technical assistance and research for the design, management, improvement, and monitoring of health systems and service delivery in over 30 countries.

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OVERVIEW

BEFORE STARTING THIS TRAINING COURSE

This training course is different from traditional classroom training. First of all, it is based on the assumption that people participate in training courses because they:

- Are **interested** in the topic
- Wish to **improve** their knowledge or skills and thus their job performance
- Desire to be **actively involved** in course activities

For these reasons, all of the course materials focus on the participant. For example, the course content and activities are intended to promote learning, and the participant is expected to be actively involved in all aspects of that learning.

Second, in this type of training, the trainer and the participant are provided with a similar set of educational materials. The trainer by virtue of her/his previous training and experiences works with the participants as an expert on the topic and guides the learning activities. In addition, the trainer helps create a comfortable environment and promotes those activities that assist the participant in acquiring the new knowledge and skills.

Finally, this training focuses on what the participant will do as a result of the training, not what the participant will be capable of doing. In this course the participant will create an action plan for monitoring in a facility back home and will implement this action plan upon returning to the facility. Participants will actually perform the step by step skills in developing a monitoring process and will practice these skills in a facility setting as part of this training.

TRAINING APPROACH

The **mastery learning** approach to training assumes that all participants can master (learn) the required knowledge and skills provided there is sufficient time and appropriate training methods are used. The goal of mastery learning is that 100% of those being trained will "master" the knowledge and skills on which the training is based.

COMPONENTS OF THE TRAINING PACKAGE

This course is built around the use of the following components:

- Need-to-know information contained in a Reference Manual, The Health Manager's Guide For Monitoring the Quality of Primary Care
- A **Participant Manual** containing an overview of the course, a validated questionnaire used to assess knowledge at the start of the course, exercises to build the skill of organizing a monitoring process and an action plan for implementing a monitoring process in the participant's work site.
- Competency-based performance evaluation

In addition to the reference manual the following monograph will be available at specific times during the course for participant's use: *Achieving Quality Through Problem-Solving and Process Improvement*, Franco, et al.

USING THE TRAINING PACKAGE

In designing the training materials for this course, particular attention has been paid to making them "user friendly" and to permit the course participants and trainer the widest possible latitude in adapting the training to participants' (group and individual) learning needs. For example, at the beginning of this course an assessment is made of each participant's knowledge related to monitoring. The results of this pre-course assessment are then used jointly by the participants and trainer to adapt the course content as needed so that the training focuses on acquisition of **new** information and skills.

A second feature relates to the use of the reference manual and participant manual. The **reference manual** is designed to provide all of the essential information needed to conduct the course in a logical manner. Because it serves as the "text" for the, participants and the "reference source" for the trainer, special content handouts or supplemental materials are not needed. (Participants will receive handouts of items, which are returned to the trainer, such as evaluations.) In addition, because the manual **only** contains information that is consistent with the course goals and objectives, it becomes an integral part of all classroom exercises.

The **participant manual**, on the other hand, serves a dual function. First and foremost, it is the road map which guides the participant through each phase of the course. It contains the course syllabus and course schedule as well as all supplemental printed materials (pre-course questionnaire, individual and group assessment matrix and monitoring action plan materials).

In keeping with the training philosophy on which this course is based, all training activities will be conducted in an interactive, participatory manner. To accomplish this requires that the role of the trainer continuously change throughout the course. For has example, he or she is an instructor when presenting a classroom demonstration; a facilitator/coach when working with teams or helping participants practice a specific skill; and an evaluator when objectively assessing participant performance.

In summary, the Competency-Based Training approach used in this course incorporates a number of key features. **First**, it is based on adult learning principles, which means that it is interactive, relevant and practical. Moreover, it requires that the trainer facilitate the learning experience rather than serve in the more traditional role of a teacher or lecturer. **Second**, it involves use of behavior modeling to facilitate learning a standardized way of performing a skill or activity. **Third**, it is competency-based. This means that evaluation of the participant is based on **how well** he or she performs the procedure or activity not just **how much**. Results of evaluation guide adaptation of the training to allow each participant to practice new skills until he or she becomes competent. By the time the training is complete, **every** participant should be able to perform **every** skill or activity competently. **This is the ultimate measure of training.**

INTRODUCTION

COURSE DESIGN

This course is designed to help mid-level health managers develop skills in monitoring in the ambulatory health care setting. The course builds on each participant's past knowledge and takes advantage of her/his high motivation to accomplish the learning tasks in the minimum time. This training emphasizes **doing**, not just knowing and uses competency-based evaluation of performance.

This course consists of three components:

- **Provision of monitoring knowledge.** Participants learn about monitoring in the ambulatory care setting. A building block approach is used in this course whereby each concept builds on the previous concept taught.
- **Provision of monitoring skills.** Participants learn about and practice monitoring skill in the classroom and in an ambulatory care site.
- **Practice in designing a monitoring activity.** Throughout the course participants are provided the opportunity to immediately apply new knowledge and skills through the completion of an action plan which develops a monitoring activity for the participant's work site.

Successful completion of the course is based on mastery of both the knowledge and skills components.

EVALUATION

This course is designed to develop competency in monitoring skills for mid-level health care managers. Competency is attained through successful completion of all course activities.

Competency does **not** imply certification. Personnel can be certified only by an authorized organization or agency.

Competency is based on the participant's achievement in three areas:

• **Knowledge** – Satisfactory performance on the post-course questionnaire, in-class, and takehome quizzes

- Skills Satisfactory performance of all activities in class in organizing a monitoring process.
- **Practice** Demonstrated ability to plan and conduct a monitoring activity in an ambulatory health care setting.

The participant and the trainer share responsibility for the participant's being considered competent.

The evaluation methods used in the course are described briefly below:

- Post-course Questionnaire. This knowledge assessment will be given on the last day of the
 course after all subject area has been presented and practice in each area has been
 accomplished.
- **Skills.** Satisfactory performance of monitoring skills assessed during the course. The trainer will observe participants as they complete assignments during the course
- **Practice.** Demonstrated ability to conduct monitoring. This activity will take place at a local health center and will be supervised/observed by the training staff of this course.

COURSE SYLLABUS

Course Description

This competency-based training course is designed to prepare the participant to develop skills in monitoring in a primary health care facility.

Course Goals

To provide mid-level health managers the knowledge and skills needed to design and implement a monitoring process in a health facility. This monitoring system will assess the quality of health service provision over time.

Participant Learning Objectives

By the end of the training course, the participant will be able to:

- Select a priority health service which will be monitored
- Identify the standard of care for the priority health service
- Identify the process of care for the health service to be monitored
- Identify the health care provider's performance standards which will be monitored
- Develop performance indicators for each standard selected
- Design monitoring tools to collect information
- Collect the necessary information successfully
- Tabulate and display the collected information
- Analyze and interpret the information
- Design a strategy to feed back the results of the data gathering to the staff of the facility in a way that will support change and improve quality of services

Training/Learning Methods

- Illustrated lectures and group discussions
- Individual and group exercises, including case studies
- Completion of Action Plan for home facility application
- Guided practice in developing and using a monitoring tool at a local facility

Training Materials

The training materials for this course include the following:

- Reference Manual: The Health Manager's Guide for Monitoring the Quality of Primary Care by Dr. Bruno Bouchet, Quality Assurance Project.
- **Participant Manual** containing the work sheets needed to complete a monitoring activity here in this course and in a back-home facility setting
- "Part II: Tools for Quality Improvement" in *Achieving Quality Through Problem-Solving and Process Improvement* by Franco, Newman, Murphy and Mariani, Quality Assurance Project. This book is listed because it has an excellent tools section (including run charts and bar graphs), in case a review is needed. One copy will be shared among the participants.

Participant Selection

Participants for this course may be mid-level health managers (district level supervisors) with Quality Assurance awareness, math skills, and the ability to draw and interpret bar graphs and run charts (if participants cannot draw and interpret bar graphs and run charts, the instructor will provide help). In addition, participants will have an awareness of standards (implicit and explicit) and their work will require them to visit facilities and draw conclusion about the quality of services rendered at the facility level. This course is for those managers who want to develop and apply indicators in real time and experience a monitoring process from beginning to end.

Methods of Evaluation

Participant

- Pre- and Post-Course Questionnaires
- Daily quiz: in-class and/or take home
- Completion of Action Plan for organizing a monitoring process at participant work site

Course

• Course Evaluation (Participant Reaction form to be completed by each participant)

Course Duration

• 5 sequential days of training

Agenda

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5
 Welcome Course Overview Goals, Objectives Participant/Trainer Expectations Pre-Course Questionnaire Individual & Group Matrix 	 Warm Up Review Take Home Quiz Review Indicator Development Data Collection Methods Insuring Successful Data Collection 	 Warm Up Review Take Home Quiz Tabulate and Display Data Aggregated and Disaggregated Data Group Work using simulated data 	 Final Preparation for Facility Visit Travel to Facility Facility visit to determine focus of monitoring activity 	Data Collection at Facility
BREAK 15'	BREAK 15'	BREAK 15'	BREAK 15'	BREAK 15'
Review Course Materials Important Issues In Quality Assessment	Designing Monitoring Tools	 Groups create run chart, bar chart & individual grouped bar charts Analyze & Interpret the Information 	Return from facility	Return from facility
LUNCH 60'	LUNCH 60'	LUNCH 60'	LUNCH 60'	LUNCH 60'
 Introduction to Monitoring Choose Health Service to Monitor Identify Process of Care 	 Special Issues: Monitoring Tools Testing Monitoring Tools Insuring Successful Data Collection 	Groups report to total group Storage, Retrieval & Dissemination of Information	 Develop Monitoring Tool for Data Collection Participants design data collection tool for facility 	 Debrief Data Collection Activity Tabulate & Display Data Analyze Tabulated Information
BREAK 15'	BREAK 15'	BREAK 15'	BREAK 15'	BREAK 15'
 Select a Standard to Monitor Input, Process & Outcome Standards Implicit & Explicit Standards Select Health Care Provider to be Monitored Introduction to Developing Indicators 	 Insuring Successful Data Collection (continued) Evaluation of the Day Take Home Quiz 	 Preparation for Site Visit to local facility to Collect Data Group work to prepare for visit Daily Quiz Review Quiz 	 Test and revise tools Plan for having tool typed and reproduced for next day Review of Day 	 Post-Course Questionnaire Course Evaluation Wrap Up and Adjourn
Review of DayDistribute Take Home Quiz		Review of Day		

PRE-COURSE QUESTIONNAIRE

HOW THE RESULTS WILL BE USED

The main objective of the **Pre-course Questionnaire** is to assist both the **trainer** and **participant** as they begin their work together in the course by assessing what the participants, individually and as a group, know about the course topic. This allows the trainer to identify topics which may need additional emphasis during the course. Providing the results of the pre-course assessment to the participants enables them to focus on their individual learning needs. In addition, the questions alert participants to the content that will be presented in the course.

The questions are presented in a true-false format. A special form, the **Individual and Group Performance Matrix**, is provided to record the scores of all participants. Using this form, the trainer and participants can quickly chart the number of correct answers for each of the questions. By examining the data in the matrix, the group members can easily determine their collective strengths and weaknesses and jointly plan with the trainer how to best use the course time to achieve the desired learning objectives.

For the trainer, the questionnaire results will identify particular topics which may need additional emphasis during learning sessions. Conversely, for those categories where 85% or more of participants answer the questions correctly, the trainer may elect to use some of the allotted time for other purposes.

For participants, the learning objective(s) related to each question and the corresponding page number in the reference manual are noted beside the beginning of each item on the questionnaire. To make the best use of the limited course time, participants are encouraged to address their individual learning needs by studying the designated material in the reference manual.

HOW THIS PARTICIPANT MANUAL IS ORGANIZED

The remainder of this Participant Manual is organized by each day of the course.

Each day participants will complete activities which build the skills to plan, organize and implement a monitoring process.

"CHOOSING THE HEALTH SERVICE TO MONITOR"

1)	Name of facility where monitoring will be conducted			_	
2)	List the priority health services delivered at the facility in left hand column.				
	Health Service	High Volume	High Risk	Problem Prone	Т

Health Service	High Volume	High Risk	Problem Prone	TOTALS

- 3) For each service on the left, each small group will rate (score) one service at a time on each of 3 criteria. Assign a value of 1, 2, or 3, with 1 being the lowest and 3 being the highest. If the group disagrees on the rating for a criterion, then each person will vote and the votes will be averaged.
- 4) After all services have been rated, add each score across to get the totals.
- 5) The health service with the highest total score is selected.

If there is a tie, you may decide to "weight" the most important criterion and tally the totals again. For
example, if volume is the most important criterion, multiply each number in the High Volume column by 2
and then add up the totals again.

HEALTH SERVICE SELECTED TO N	MONITOR:

"IDENTIFY PROCESS OF CARE TO MONITOR"

Health service selected to monitor
In the space below, construct high-level flow chart of the care related to this health condition. List the key steps underneath each "box." Consider activities related to treatment.
The questions in Table 3, "Checklist to Identify the Process of Care," in the reference manual may be helpful in the mapping process.

"SELECT A STANDARD TO MONITOR"

For a standard to be monitored, it needs to be written explicitly. This process will help you identify standards that need to be made explicit or that need revision or clarification, or both.

Using the flowchart from Action Plan, Part 2, review the steps using the four statements below to determine the status of standards for the care process at your facility:

to (determine the status of standards for the care process at your facility:
1)	Those standards that are clear in the facility
2)	Those standards that exist but have not been communicated
3)	Those standards that are implicit and have not been formalized in writing
4)	Those standards that exist and need revision
Foi	r this activity, select one area of the process of care and write an explicit standard for it.

"DEVELOPING INDICATORS TO MONITOR"

Health service selected to monitor
For the standard you wrote for Action Plan, Part 3:
Develop 5 indicators—1 input, 3 process, and 1 outcome—and answer the following questions for each indicator:
1) Which part of the system does it monitor? (input, process, outcome?)
2) Where will the data come from?
3) How will data be easily gathered?

TAKE HOME QUIZ - DAY ONE

INSTR	RUCTIONS:	You may use your manual and notes to complete this quiz. Please do not consult with other participants about the answers. It should not take more than 45 minutes to complete. Please bring the completed quiz to class with you in the morning. Thank you.
1.	List four of the	e Dimensions of Quality of Care and give a brief explanation of each.
2.	What is the ba	sic principle of monitoring of quality of care?
3.	What is monit	oring?
4.	List the three s	steps of the quality monitoring process and briefly describe each step.

5.	What are the 3 criteria used to determine which health services or issues should be given priority when establishing a monitoring program?
6.	Briefly define:
	-Input standards
	-Process standards
	-Outcome standards
7.	What is a standard of care?
8.	What are the four characteristics of a good standard?
9.	Give an example of a standard of care for a health condition at the facility where you work.
10.	What is an indicator?

11.	For the standard you listed in #9 above, write two indicators.

"CHOOSING DATA COLLECTION METHODS"

Health service selected to monitor _	
_	

INSTRUCTIONS: Determine what data collection methods you will use for your monitoring activity. Give rationale for the methods you selected, and give rationale for those methods you have chosen not to use.

Indicator	Method	Use it? (Y/N)	Rationale

"DESIGNING MONITORING TOOLS"

INSTRUCTIONS: Create the data collection form you will use at your worksite monitoring activity by creating a title for the activity, an administrative section, the technical data that will

be collected, and a coding system.	nicai data that Will
TITLE OF MONITORING ACTIVITY	
ADMINISTRATIVE SECTION:	
TECHNICAL DATA:	CODING SYSTEM

"PLANNING THE IMPLEMENTATION OF THE MONITORING ACTIVITY"

Health	service selected to monitor
	RUCTIONS: For each of the following items give a brief description of how you plan to a successful implementation of your monitoring activity.
1)	How and when do you plan to alert the health service managers and providers information on the purpose and benefits of the monitoring activity and the date on which it will occur?
2)	If the monitoring activity will require transportation list the plans you need to make to ensure it is available-consider vehicle inspections, gas and oil, spare tire and tools in good shape, driver available, routes and maps available, time required for travel.
3)	What forms and office supplies will be required?
4)	If a team of observers are to be used, what are the roles and responsibilities for each? Is a team leader required? How will that role be assigned?
5)	How will the observers be informed of the detailed agenda for the monitoring visit?
6)	What arrangements have been made to provide support for observers and other staff members in case there are any problems that develop during the data collection activity?

7)	How will you prepare the observers to be respectful of the health providers and the patients during the monitoring activity?
8)	How will you prepare the observers to be unobtrusive and non-threatening during the monitoring activity?
9)	How will you prepare the observers to handle situations in case of a disagreement with the management of the case being observed?
10)	What preparations are required to provide the required salutes to local authorities?
11)	What plans are required for the end of the monitoring visit? Thanking the staff for their cooperation, providing feedback on the performance observed and a description of the next steps of the monitoring process.

TAKE HOME QUIZ - DAY TWO

INSTRUCTIONS: You may use your manual and notes to complete this quiz. Please do

not consult with other participants about the answers. It should not take more than 45 minutes to complete. Please bring the completed

quiz to class with you in the morning. Thank you.

- 1. List the 4 most frequently used methods of data collection.
- 2. Select one method from question 1 and list the advantages and disadvantages of that method.
- 3. What information is collected in the administrative part of the data collection form?
- 4. What 3 things can be done to make sure data collection tools are properly used?
- 5. The frequency of data collection in practice depends on three things. What are they?
- 6. What are the strengths and limitations of collecting data by peer assessment?
- 7. Briefly describe the two levels of validation to consider for data being collected.

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For Days Three and Four of this course, all materials (except for the following page) will be distributed by the instructor.

MATRIX TO BE ENLARGED AND COPIED ONTO NEWSPRINT AND POSTED AT FRONT OF ROOM TO BE COMPLETED BY PARTICIPANTS DURING THE BREAK AFTER COMPLETING PART ONE OF THE TABULATION EXERCISE

(TO BE INCLUDED IN THE INSTRUCTOR AND PARTICIPANT MANUAL)

Dis-aggregated data (total number possible for each cell is 10)

DATA ITEM		DATA	ITEM #1		TOTAL DATA ITEM 1	DATA ITEM #2		TOTAL DATA ITEM 2	DATA ITEM#3			TOTAL DATA ITEM 3			
	RN 1	RN 2	MD 1	MD 2		RN 1	RN 2	MD 1	MD 2		RN 1	RN 2	MD 1	MD 2	
1		6	9	4		9		7	5		9	6	7		
2		5	8	6		8		8	5		8	7	10		
3		2	5	1		4		6	4		6	4	5		
4A		0	4	0		10		8	7		10	7	10		
4B		0	0	0		2		1	3		10	7	10		
5		0	0	0		10		10	10		10	10	10		
6		0	0	0		10		7	10		10	10	10		
7		3	8	5		10		9	8		10	10	10		
8		5	7	5		10		10	10		10	10	10		
9		2	7	4		4		6	5		3	2	4		
10		7	8	6		9		9	7		9	7	9		
11		4	6	3		10		7	4		10	6	9		

INSTRUCTIONS: You have just finished your monitoring activity in the facility and prepared the data for presentation. Take some time now to consider what you will need to do at your worksite after you have gathered your data. Complete the following areas in your Action Plan. Include as much detail as you can while the information is still fresh in your mind.

Includ	de as much detail as you can while the information is still fresh in your mind.
1)	Tabulation and display of data: How will you tabulate and display your data? Will you use more than one method for data display? For the methods you have not selected you may want to enter your rationale for not choosing those.
2)	Analysis and interpretation of data: For the analysis and interpretation of your data, can you think of any special needs your problem might require? Are there resources in your area to help with the analysis and interpretation of your data?
3)	Dissemination and feedback from data: Are there special issues you need to consider when you are planning feedback on observations made? What are they, and how can you address them? For disseminating the data, are there any standing meetings at which the information may be shared? Is there a special line of communication which you will need to follow to get your information to others?
4)	Storage and retrieval of data: Are there computers available to use for data storage and retrieval? If so, what will need to be done to prepare to use them? If computers are not available, what mechanism is available at your site that can be used? Will there need to be special procedures developed for this? Will new personnel need to be secured? If yes, what will their job description contain, and what special training might be

necessary?