

Ghana: Quality Improvement Curriculum for Community Health



ABOUT SPRING

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a seven-year USAID-funded cooperative agreement to strengthen global and country efforts to scale up high-impact nutrition practices and policies and improve maternal and child nutrition outcomes. The project is managed by JSI Research & Training Institute, Inc., with partners Helen Keller International, The Manoff Group, Save the Children, and the International Food Policy Research Institute.

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DISCLAIMER

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Acronyms

ANC	antenatal care
CHPS	community-based health planning and services
CHV	community health volunteer
CWC	child welfare clinic
CQI	Community Quality Improvement
FBP	faith-based provider
GMP	Growth Monitoring and Promotion
HC	health center
MUAC	mid-upper arm circumference
NGO	nongovernmental organization
PDSA	plan, study, do, act
QI	quality improvement
UDS	University for Development Studies

About This Curriculum

This curriculum is meant for Community Quality Improvement (CQI) trainings where participants are the coaches for CQI teams or are the CQI team members. This training is designed to be implemented at the community level, and relates to corresponding PowerPoint Slides.

Materials Needed for the Course

1. Flipchart stand and paper
2. Markers
3. "Cardboard" picture aids
4. Masking tape
5. Name tags or tents
6. Writing paper and pens
7. Pictures for session 5
8. Small treats like candy
9. Slide projector and power cords
10. Slides for all sessions
11. Note pad and pen for each participant
12. Sign-in sheet
13. Office stationary (stapler, scissors, paper clips, etc.).

Session 1: Introduction

Session Objectives

By the end of the session, participants will be able to—

- Identify the other participants in the training.
- Apply group norms that will be followed during the training.
- Explain the goals and objectives for the course.

Time: 60 minutes

Materials

- slides for session
- name tags, name tents, and markers
- pen for each participant
- note pad for each participant

Flipcharts

1. Instructions for Group Activity
2. Years of Experience (title only)
3. Group Norms (title only)

Trainer Preparation

- Review the trainer notes several times.
- Gather and familiarize yourself with any needed materials.
- Anticipate questions and prepare answers.
- Ensure the *Year of Experience*¹ and *Group Norms* flipcharts remain posted throughout the workshop; they will be referred to regularly throughout the workshop.

Learning Activities Summary

Title	Type	Time
1. Welcome Remarks and Introductions	Lecturette and group activity	40 mins
2. Group Norms	Interactive lecturette	5 mins
3. Goals and Objectives	Interactive lecturette	15 mins

¹ Throughout this manual, you will see references to flipcharts and PowerPoint presentations. If you do not have a projector available, you can create flipcharts from the slides. If you have a limited amount of flipchart paper, you can reduce or eliminate some of the flipcharts. This one, “Years of Experience,” is nice to have, but is not mandatory.

Learning Activities

Name Tag and Tent

As participants enter the training room, one facilitator should greet each person and ask them to make a name tag to wear and a name tent for their seat. Make sure they use a marker so the facilitators can easily see the writing.

1. Welcome Remarks and Introductions – Lecturette and Group Activity – 40 minutes

Welcome

Start the workshop by welcoming participants and introducing yourself and the other facilitators. Tell participants that if they have any administrative questions, concerns with the venue, or problems, to please contact the workshop administrator (introduce them).

Introductions

Tell participants that we will introduce ourselves by going around the room; each person will address what is written on this flipchart.

Display the poster Instructions for Group Activity.

1. Name
2. Title
3. Place of Work
4. Years of experience working in nutrition
5. What skills or experience do you bring to the workshop?
6. Your activity other than work.

Note: As participants introduce themselves, the facilitator should write on—**Flipchart 1: Years of Experience**—the number of years of community-level work for each participant. Facilitators should also note the responses to question 5 about the special skills and knowledge that participants brought to the training.

Summarize this activity by telling the participants the total number of years of experience represented in the room.

Tell participants that each person has special skills and experiences that they should share with the others during the workshop. The facilitator should highlight several skills and experiences that were mentioned during the presentations.

2. Group Norms – Interactive Lecturette – 5 minutes

Display the flipchart—**Group Norms**. Tell the participants it will be helpful if we can establish some “ground rules” for working together effectively and without distractions.

Ask the participants to propose rules or guidelines for the training.

For each norm proposed, determine if there is a consensus; then note the norm on the flipchart. Seek clarification (if needed) to reach a group consensus. However, do not spend more than five minutes generating this list or reaching consensus. These rules should include—

- Wear name tags every day.
- Do not sit in the same place every day.
- Start trying to name everyone in the room.
- Listen carefully to everyone's ideas.
- Turn mobile phones on silent or off.

When the list is complete, post the sheet near the entrance/exit door where it can be seen easily and referred to, as needed, during the workshop.

Ask the participants if they have any questions.

3. Goals and Objectives – Large Group Discussion – 15 minutes

Ask participants why they came to the workshop. Some may not know why they came and some may not know, in any detail, what the workshop is about.

Display slide—Goal and Objectives. Ask one participant to read the goal. Ask another participant to read the first objective. Ask other participants to read each of the remaining objectives. After all the objectives are read, ask the participants if they have any questions about the goals and objectives for this workshop.

Goal: To develop a pool of trainers within the four nongovernmental organizations (NGOs) implementing Community Quality Improvement (CQI) in seven SPRING working districts.

Objectives:

1. Develop skills in conducting CQI training for the NGO staff.
2. Assist NGO staff to—
 - Select the CQI team:
 - Select appropriate team members.
 - Establish a well-functioning CQI team:
 - Manage the stages of team development.
 - Select community groups.
 - Develop well-functioning CQI meeting:
 - Find gap/problem, causes of problem, root cause of problem, brainstorm possible solutions (change ideas), prepare action plan, test change idea, and measure improvement.
 - Conduct continuous implementation (plan, study, do, act [PDSA] cycle) of testing change idea and measure improvement.
 - Identify what an indicator is, does, and how to create one.
 - Document lessons learned by testing change ideas and measuring improvement.

Session 2: What Is Quality?

Session Objectives

By the end of the session participants will be able to—

- Define the quality of a thing.
- Define the quality of services.
- Define the quality of health services.

Time: 155 minutes

Materials

- slides for session
- projector
- markers
- A4 paper

Trainer Preparation

The facilitator should—

- Be ready to explain the desired role play scenarios.
- Review the trainer notes several times.
- Gather and familiarize themselves with needed materials, including slides.
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Introduction	Lecturette	20 mins
2. Role Play	Exercise	30 mins
3. Story Telling Case Study	Exercise	90 mins
4. Review of Quality Slides	Lecturette	15 mins

Learning Activities

1. Introduction – Type of Activity – 20 minutes

Show slide—**What is Quality/What is Improvement?**

Explain that we should try to get the best out of everything we do. If you decide to purchase anything, there is always a reason. Today, we will discuss some of the reasons why we like certain things.

Show slide—**Think of a time.**

Divide participants into pairs and ask them to answer the questions on the slide.

When participants finish, guide them in a discussion on the issues of quality and quality service.

Example:

What did you buy in the market?

Why did you buy that item?

Can you describe what a quality item is?

2. Role Play – 30 minutes

Set up a role play to reveal what the participants consider to be quality services. Divide participants into two groups.

- Ask one group to show a scenario that demonstrates purchasing and using something of good quality.
- Ask the second group to demonstrate the purchase and use of something of poor quality.
- Conduct both role plays.
- Ask the participants to discuss the two scenarios.
- Summarize by helping them appreciate quality services by asking them—
- Last week, did you receive any service?
- What service did you receive?
- Did you like the service?
- Why do you like the service?

3. Storytelling Case Study – 90 minutes (with conclusion)

- The timing is based on an expected number of 24 participants.
- Divide participants into groups of four; ask them to share personal stories related to health service delivery (15 minutes).
- Each group member has three minutes to share a personal experience.
- Each small group agrees on one story to share with the whole group.
- Each small group takes five minutes to share their one story with the whole group (30 minutes)
- Ask participants what level of service they expect at immediate facilities—CHPs, health centers—and bigger facilities (15 minutes)
- Use QI knowledge to guide participants' understanding of the dimensions of quality health service through a system view, levels, and ability of health facilities (15 minutes).

4. Review of Quality Slides – 20 minutes

Show and discuss each of the following slides:

Quality from Which Perspective?

What is Quality?

Quality from a Systems View

Dimensions of Quality

Main Points

Answer any questions from the participants.

Conclusion

People become satisfied with a service, depending on their standard of quality. What is quality for one person may not be quality for another person. It is important to always discuss the dimensions of quality and improve on them, taking into consideration the input, process, and output.

Key Information

- The definition of quality of services is different for different people.
- People become dissatisfied with the health services they receive at the health facility because it is not their standard of quality.
- It is important to create an awareness of the dimensions of quality of health care services among patients when defining the quality of services.
- If you want to improve the quality of service, look at the system (Inputs, processes, and outputs) of the health services.
- Patients should be aware of the different levels of health care services provided at different levels of health facilities (hospital, health center, and community-based health planning and services [CHPS] compound).

Session 3: Making Improvements

Session Objectives

By the end of the session participants will be able to—

- Define improvement.
- Identify the steps/processes of quality service improvement.

Time: 100 minutes

Materials

- slides for session
- flipcharts
- markers
- masking tape
- A4 paper
- balls
- timers

Flipcharts

- Guiding Questions

Trainer Preparation

- Review the trainer notes several times.
- Be prepared to run “ball game” exercise.
- Gather and familiarize yourself with any needed materials.
- Anticipate questions and prepare answers.
- Prepare flipcharts.

Learning Activities Summary

Title	Type	Time
1 Making Improvements	Exercise	100 mins

Learning Activities

1. Making Improvements – 100 minutes

We recently looked at our understanding and perspective of quality.

Now, we will look at how we can do things differently. When we do health-related tasks, to try to improve our actions as we do them again, we should ask several questions.

Show slide—**What Do We Mean by Improvement?**

The facilitator shares a personal story or scenario on improvement. This should be an example for what the participants should model in their exercise.

Divide participants into groups and ask them to share improvement stories. Tell them that after they share, they should pick the best story to present in the plenary discussion.

Post the flipchart—**Guiding Questions**—to help them with the exercise.

Answer any questions about the exercise before they start.

Tell them they have 20 minutes.

Guiding Questions:

- What challenge or problem have you had before?
- How did you know it was a problem?
- What did you do?
- What was the result of what you did?

When time is up, ask each group to present their stories.

After each story is presented, guide the participants to identify the initial and the desired situation of each story. Help participants identify a gap from where they are to where they want to be or are now.

Encourage the rest of the participants to share ideas on how to reduce the gap (creating change ideas).

Summarize and share ideas to improve the situation.

Ball game: Show the two slides for the—**Ball Game**—and review the goals and rules. Start the game when ready. (Takes approximately 45 minutes). Note the progression of improvement (or not) and discuss why. Draw the parallel to their own health work.

Show slide **Case Study—Joyce**—and discuss in the context of making improvements.

Continue the session by showing slide—**What is and Should be the Situation at the Facility**—and review.

Show slide—**Steps for Improvement**.

Reinforce the improvement process by reviewing the following points.

Improvement requires the following steps:

- Determine the gap between what is your coverage now and what coverage you would like to achieve.
- Determine the causes of the gap.
- Determine the root cause of the gap.
- Determine a solution for the root cause—brain storm solutions (change ideas).
- Select one solution or change idea to test.

- Test the change idea for a period of time.
- Measure the improvement.
- Plot a way to improve.

Ask participants if they have any questions and respond, as appropriate.

Conclusion

Improvement can only be made if there is a gap or problem. After it is identified, we need to focus on how to resolve the gaps. Share the key information below.

Key Information

Improvement is a process of becoming better and delivering a high quality of service. It is measured by a gap between what is and what is desired.

Improving the processes of health care service results in a better outcome, as well as reducing the waiting time and cost.

Session 4: Principles of Quality Improvement

Session Objectives

By the end of the session participants will be able to—

- Describe the four principles of quality improvement, which are—
 - team work
 - data-driven
 - client-centered
 - understanding systems and processes.

Time: 90 minutes

Materials

- flipchart
- markers
- masking tape
- slides for session

Flipcharts

- Guiding Questions

Trainer Preparation

- Review the trainer notes several times.
- Gather and familiarize yourself with any needed materials.
- Anticipate questions and prepare answers.
- Prepare flipcharts.

Learning Activities Summary

Title	Type	Time
1. Introduction to Problem Solving	Discussion	30 mins
2. Principles of Quality Improvement	Lecturette, Discussion	60 mins

Learning Activities

1. Introduction to Problem Solving - 30 Minutes

Introduction:

We are going to talk about the principles that relate to quality improvement and will ensure that improvement is maintained, because we know that quality can change over time.

Ask participants if they have ever jointly tried to solve a problem.

- If yes, what was the problem?
- Ask participants how they solved that problem (consider the people present, the number of people, and the contributions made towards solving the problem).
- Go step-by-step in the scenario to find the necessary information related to the principles of QI. Write the steps on the flipchart or board. Use the guiding questions below to help the process.

Post the flipchart—**Guiding Questions.**

- What was the problem?
- What was the evidence?
- What was the desired situation?
- How did you arrive at the desired situation?
- What were some of the lessons you learned?

Next show the slide—**Case Study—Adongo.** Review the slide.

Adongo visited his groundnut farm and realized that his crops were mature and ready for harvest, but monkeys were destroying them. Considering the four-acre size of the farm, he decided to consult his wife and other family members. They all agreed on the need to get other community members to help them harvest the groundnuts. He contacted the opinion leaders who mobilized the people. Two days later, the community members came and harvested the groundnuts. He was very happy. He had 40 bags of groundnuts instead of the 15 bags last year. This was because of improved seeds and an early harvest.

Ask participants to answer the following:

- What was the problem?
- What was the desired situation?
- How did Adongo harvest his big farm?
- What do you think he will do differently next year?

Review the scenario and pull out the necessary information related to principles of quality improvement.

2. Principles of Quality Improvement - 60 Minutes

Next review the slide—**Case Study—Maggie.** Discuss the scenario and question at the end.

Show slide—**Principles of Quality Improvement.** Discuss the links between these two slides.

Show slide—**Model for Improvement**—which introduces Act, Plan, Study, and Do. Explain that this is an ongoing cycle that we repeat to create continuous improvement.

Show slide—**Model for Quality Improvement** and review. Notice how *Plan* is the first step in this slide.

Close by showing slide—**PDSA Cycle**. This reinforces the other slides and provides new details. Encourage participants to write this in their notes. Discuss how this can apply to many learning situations. They have probably done this many times when learning something new, but without realizing it. Ask if there are any questions about these principles and respond, as needed.

Session 5: Understanding Systems and Processes

Session Objectives

By the end of the session participants will be able to—

- Explain how health facilities consist of systems and identify these systems.
- Identify the various process (steps) within the health facilities.

Time: 90 minutes

Materials

- PowerPoints for session
- flipcharts
- markers
- masking tape
- pictures
- cardboard to demonstrate various processes in health facilities

Trainer Preparation

- Review the trainer notes several times.
- Gather and familiarize yourself with any needed materials.
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Introduction to Systems and Processes	Role Play and Discussion	90 mins

Learning Activities

1. Introduction to Systems and Processes - 90 minutes

Explain that, in this session, we will look at health care systems and processes. Ask the following question: Where do you start when accessing health care service in your community? Write down some answers to be sure participants are on track with the goal of the session.

Next, divide the participants into groups of four or five and ask them to draft how they receive services within a specific health facility from the point of arrival to the point of exit. Ask them to write the information on paper. (Give them 30 minutes.)

Next, ask each group to create a role play from the process they developed. (Give them 20 minutes.)

When they finish, ask each group to role play the processes they go through when accessing health services in the community. (Give them about 60 minutes.)

Sketch the steps in each role play on a flipchart or the board.

When all the groups have finished, refer to the flipcharts and identify the different systems and processes that were talked about or demonstrated during the role plays. You may need to help participants identify these. You can even mention ones that were missed, but should be included in regular care. Establish a common understanding on systems and processes.

Use pictures/cardboards to highlight salient points on systems and processes.

Show slides:

Steps and Participants in the Community Health Service Process and Work as a Process.

Discuss the following guiding questions:

Where do you start in accessing health care service in your community?

What happens next up to the end?

How do you describe the processes involved in accessing health services that you have just mentioned (system)?

Conclusion

- Repeat the main objectives of the session.
- Review the systems and the processes covered in this session.
- Explain why it is important to understand them.
- Tie these to the overall purpose of the training.
- Ask if there are any questions and respond, as needed.

Session 6: Understanding Indicators

Session Objectives

By the end of the session participants will be able to—

- Explain what an indicator is.
- Identify types of indicators.
- List the components of an indicator.
- List steps to create an indicator.

Time: 2 hours

Materials:

- slides for session
- projector
- flipchart paper and stand
- markers

Trainer Preparation

Facilitator should—

- Be familiar with the case studies.
- Review the trainer notes several times.
- Gather and familiarize themselves with needed materials, including slides.
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Introduction	Interactive Lecturette	20 mins
2. Case Study 1	Interactive Lecturette	20 mins
3. Case Study 2	Interactive Lecturette	20 mins
4. How to Create an Indicator	Exercise	60 mins

Learning Activities

1. Introduction – 20 minutes

Ask participants the following questions:

- What tells you the speed of the motorcycle?

- What do you call it?

Write down all the responses from the participants.

Agree on the local name that shows the level of speed.

Similarly, ask the following questions:

- What tells you the level of petrol that you have in your motorcycle?

As before, write down all the responses from the participants. Discuss, comment, and agree on the local name that shows the level of petrol.

Explain that these are types of indicators because they provide important information. More specifically, indicators show: (Show slide—**Indicator** [with the yellow band].)

- a measurement of the level of performance/achievements/outcomes
- the position/state/level of program achievement—position where you are, through either a number or percentage
- the measurement of progress/improvement

2. Case Study 1 – 20 minutes

Show slide with **Case Study #1** about the indicator. Ask participants to volunteer to read the case study.

After the participant finishes reading the case study, the facilitator highlights the main points.

Case Study 1

Margaret is a midwife working in a health center. Because the national program has focused on improving maternal health services, she decided to start measuring the attendance of pregnant women at the antenatal clinic (ANC). The home visits recorded by the community health volunteer (CHV) shows there are 100 pregnant women in the community, but only 20 attended any ANC services. She has a plan to increase the number of pregnant women attending her clinic from 20 to 50, within two months. She introduced a few motivational interventions. She started collecting data of the number of pregnant women attending ANC clinics every month.

Next, read the following questions and ask participants to respond (answers are in parenthesis):

1. What indicator did she decide to measure? (attendance of pregnant women at the ANC clinic).
2. What is the numerator of the indicator? (20)
3. What is the denominator of the indicator? (100)
4. What is the percentage of women attending ANC clinic? (20%)
5. What is the frequency of data collection? (monthly).

To understand indicators, summarize that we need the following four pieces of information (put on flipchart):

1. What do we want to find out?
2. What is the numerator?
3. What is the denominator?

4. What is the frequency of data collection?

Can anyone explain the components of an indicator? What is needed to make an indicator?

Write the answers on a flipchart.

Summarize by explaining that the following are needed to make an indicator (what we are measuring):

Show slide—**Indicator Components**.

1. numerator (how many pregnant women received services)
2. denominator (In total, how many pregnant women should receive services)
3. source of data (Where do you find the above records)
4. frequency of data collection (record collected weekly or monthly or quarterly, etc.).

Explain each of these components:

- Numerator/denominator: Show a fraction like 5/100 and point to the numerator (5) and the denominator (100). This information comes from the source of data.
- Source: Ask, what should be considered when choosing a source of data? Participants should respond—ease of getting the data, reliability/trustworthiness of the data, cost of data (time, money, distance), etc.
- Frequency of data collection: How often do we need to collect data to have a reliable indicator? When is the best time to collect this, considering the costs involved and the needs of the program?

Facilitator: We mentioned before that to decide which part of the system requires improving, we look at the system of a program. To improve the system of health programs, indicators can be divided into four types:

- input indicators
- process indicators
- output indicators
- outcome indicators

Ask if anyone can explain what any of these indicators measure. Take responses and provide hints, as needed.

As needed, explain each as—

- Input indicator: Deals with changes that are put into the system.
- Process indicator: Looks at the patients as they go through the system (measure the performance of key *processes* that affect patient expectations).
- Output indicator: Examines what the system produces.
- Outcome indicator: A specific, observable, and measurable characteristic or change that represents achievement of the outcome.

3. Case Study 2 – 20 Minutes

Show slide—**Case Study 2**—and ask one participant to volunteer to read the case study aloud.

Case Study 2

Rashida works in Kumbungu community health facility. Last year, six out of 11 staff were trained in how to conduct targeted counseling. After receiving training, only three out of the six trained staff have practiced counselling because the other staff were busy doing clinical work. Within nine months, the six trained staff conducted targeted counselling for 50 mothers. A survey conducted last month showed that only 10 counseled mothers are practicing behaviour that was negotiated during counselling.

When the participant finishes reading the case study, ask other participants to answer the following questions that are written on the flipchart:

- What indicator can we measure in this case study?
- What different types of indicators can we measure in this study?

Participants: Discuss, comment, and provide suggestions.

Facilitator: Show the following table either on the flipchart or slide, and explain the types of indicator for a system.

System in a Health Facility

Input	Process	Output
Health staff who were trained for targeted counseling	Trained staff conducted targeted counseling to patients and mothers	Mothers who were counseled by trained staff practiced agreed-to behavior

4. How to Create an Indicator – 60 minutes

Start the activity by brainstorming on the following question: “What steps are used to develop an indicator?” Write down all the participants’ responses on the flipchart and let them interact with each other by providing comments and suggestions.

Next, write down the steps on the flipchart and then explain the steps for developing indicators (see below).

Show slide—**Steps in Developing Indicators**—and explain:

1. Draw a processes/steps map of activities used to accomplish a service.
2. Find the gap between the expected level and the current level of performance for each step.
3. Express the gap in a percentage or a number.
4. Show the sources of all data/information. This percentage/figure shows the indicator of each of the steps/activities.

Ask if anyone has a question.

Next show slide—**Creating Indicator from GMP Process/Steps/Activities**—and review.

Next review slide—**Source of Data**—and review.

Note: There are three additional slides for creating indicators for family planning and ANC services.

Exercise: After finishing the activities above, the facilitator shows tables of steps/processes of health services—child welfare clinic (CWC), ANC, HIV, family planning, etc.—and ask participants to provide indicators for each step.

Session 7: Understanding a Community System

Session Objectives

By the end of the session participants will be able to—

- Describe community systems.
- Explain the purpose of clear communication channels.
- Identify the role of communication and information in community health processes.

Time: 135 minutes

Materials

- flipcharts
- markers
- masking tape
- piece of material

Trainer Preparation

- Review the trainer notes several times.
- Gather and familiarize yourself with any needed materials.
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Introduction	Large group activity	10 mins
2. Community Maps	Small group activity	50 mins
3. The Importance of Information Sharing	Small group activities	75 mins

Learning Activities

1. Introduction - 10 minutes

Introduction:

We recently discussed systems and processes. Next, we are going to bring them closer to us and look at what happens in our communities. Do we have systems?

- Choose a participant and blindfold them.
- Randomly choose another participant.

- Ask the blindfolded participant to identify the chosen person without touching anyone.
- Ask the entire group to identify the chosen random participants after the blindfolded person has identified them.

Explain that this exercise helps them see that they have things in the community that help and binds them together. A blind person is like a stranger who has entered a community for the first time. Without support, the stranger may not know the community as well as the community members. Systems and processes exist in every community that may not be easily seen by an outsider, but are visible to community members.

2. Community Maps – 50 minutes

Ask participants to divide into groups of four; give them the following instructions:

- Draw a community map to identify existing groups in your community.
- Discuss the roles of these groups in your community.

(Give them 15 minutes.)

When the groups finish, ask everyone to come back together and ask them to share their maps and the roles of the selected community groups (30 minutes: six groups × five minutes each).

Conclusion

We all need to know the systems in our communities and how to use them effectively. When systems are working properly, the challenges and problems are drastically reduced. Thus, we all need to protect and improve our systems.

Importance of information sharing – 75 minutes

Part 1. In every system, as we discussed, there are ways to deal with information, both within and outside. Now, we will look at how we communicate within the systems in our communities.

Divide participants into various groups, depending on the size of the group (e.g., village savings and loan association [VSLA], food processing, farmers, women groups, youth groups).

Ask participants to—

- Think about how they send and receive information within and outside their groups.
- Identify the support they get from both within and outside the community that help them do their work.
- Be prepared to share this in a large group discussion.

(Give them 30 minutes.)

When time is up, ask everyone to come back together to share and discuss.

- What processes work best for sharing information and why?
- What support do they get from inside and outside the community that help them with their work?
- What role does accurate and timely information play in these processes?

Conclusion

Cover the following points: (1) every community has systems and processes, (2) the system has channels of communication, (3) the community has inherent support systems, and (4) being transparent and sharing accurate information in a reasonable time is key to building strong relationships between individuals and organizations.

Part 2. Next divide participants into two groups.

Ask group 1 the following:

- How do you organize an outdooring in your community?
- Determine the communication and support links for doing this.

Ask group 2 the following:

- How do you do communal farming in your community?
- Determine the communication and support links for doing this.
(Give them 15 minutes.)

Call the groups together and, using a flipchart, map out the communication and support links in each scenario.

Ask participants what they see on the flipchart.

Briefly discuss the communication and support links and how they form a system.

Conclusion

In every system, clear communication channels are needed. This enables us to identify where information is distorted or blocked. We can always improve our health issues if processes in community systems are effective.

Key Information

- Every community or unit has a system and the people within that community know and respect the systems.
- In communicating from one end to the other, there is a flow from 1, 2, 3, and so on until the information reaches the last destination.
- Processes are the ways we follow to get things done.

Session 8: Coaching

Session Objectives

By the end of the session, participants will be able to—

- Describe a coach and identify their roles and responsibilities.

Time: 45 minutes

Materials

- PowerPoints for session
- flipcharts
- markers
- masking tape
- pictures portraying football coaching (see attached images at end of this session)

Trainer Preparation

- Review the trainer notes several times.
- Gather and familiarize yourself with any needed materials.
- Prepare images of football coaching (two images are provided at the end of the session. Use if helpful).
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Identifying what a coach is and does	Interactive lecturette	45 mins

Learning Activities

1. Identifying what a coach is and does - 45 minutes

Introduction

We have always had people who suggest ideas on how to improve what we are doing. Others lead and make us follow their steps. Today, we are going to discuss whether we have these types of people in our communities.

- Divide the participants into two groups and give them pictures portraying stages in coaching (e.g., coaching a footballer).
- Ask participants to discuss the elements of coaching and tell what they see in the pictures.

Facilitator notes key issues in the presentation.

- Probe participants to describe the person guiding in the pictures.

- Help participants identify the roles and responsibilities of the person identified.

Ask the following questions:

- What do you see in this picture?
- What can you tell about the picture?
- What is the person doing in the picture?
- Do you know a person who performs such a role? What do you call such a person?
- What are some of the things they do?

Next, review and discuss the four coaching related slides:

- **Coaching**
- **Roles of a Coach**
- **Responsibilities of a Coach**
- **Coaching Summary**

Guiding questions for slide review:

What kind of coaching support did you had in the past?

Which of the coach's roles would/does best help improve health services in your community?

Which of the coach's responsibilities would/does best help improve health services in your community?

What are the most important elements of the **Coaching Summary** slide?

Conclusion

A coach supports and guides the QI team meetings. Thus, the coach will always attend the meetings of the QI team and observe the session. The coach may occasionally add information, or correct a statement, when the issues under discussion are not being followed.

Key Information

- Coaching guides people to improve their skills.
- Coaches do not impose their ideas.



A



B

Session 9: How to Select CQI Team Members

Session Objectives

By the end of the session participants will be able to—

- Identify potential CQI team members in their community.
- Determine who would be the best CQI team members in their community.

Time: 90 minutes

Materials

- flipcharts
- markers
- masking tape

PowerPoints

1. Selection of a QI Team
2. Community Health System

Flipcharts

- Guiding Questions

Trainer Preparation

- Review the trainer notes several times.
- Gather and familiarize yourself with any needed materials.
- Prepare possible scenarios for the role play part of the activity.
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Choosing CQI Members	Group Discussion	90 mins

Learning Activities

1. Choosing CQI Members - 90 minutes

Every community has community groups. Next, we are going to discuss the groups we have in this community and how we see them in the community.

- Ask participants to identify groups in the community.
Probe: Which groups are active or functional: how many times do they meet in a month?
- Ask if there is an existing health committee in the community.
Probe: Is it an active or functional committee that meets at least once a month?
 - If **yes**, ask if any of the members belong to any other active groups.
Advise/recommend that health committees include representatives from other functional groups who do not originally form part of the health committee.
 - If **no**, arrange a meeting with various groups in the community to discuss the CQI concept.

Role play: Next, ask for volunteers to perform a role play on how to select CQI members. Give them a few minutes to prepare; tell them that you will ask the group the questions below when they finish.

Let them perform the role play. When they finish, ask the whole group following questions:

- What qualifications should CQI team members have? Ask the participants to brainstorm on the desired qualifications and write their responses on the flipchart. The facilitator should add any critical ones that may be missing.
- Review the list and ask which qualifications are most important. Put this new list on the flipchart and share the following guidance:
 - CQI team's membership should not exceed 20 members.
 - If groups of over 20 are functioning, allow them to continue and slowly reduce their numbers.
 - Maintain the existing structures to ensure sustainability.
- Ask participants to consider these nominees and representatives for the CQI committee. Put the names on the flipchart.

Review with the following guiding questions:

- Among the groups in this community, do any focus on health?
- If yes, which groups and who are the members?
- What do the various groups do?
- How many times do the various groups meet?
- Who would make the best CQI committee members?

Next, show slides: **Selection of a QI Team** and **Community Health System**, and discuss.

Conclusion

It is important for everyone to be involved in trying to improve the health of people, especially children in our families. Thus, we need messengers to encourage and promote health care delivery.

Session 10: Roles and Responsibilities of CQI Members

Session Objectives

By the end of the session participants will be able to—

- Conduct a proper CQI meeting.
- Explain the roles and responsibilities of the chairman, secretary, and community group representative on the CQI committee.

Time: 90 minutes

Materials

- PowerPoints for session
- flipcharts
- markers
- masking tape

Flipcharts

- Guiding Questions

Handouts

- Conducting Meetings
- Minute Taking and Distribution

Trainer Preparation

- Review the trainer notes several times.
- Gather and familiarize yourself with any needed materials.
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Conducting a CQI Meeting	Exercise and discussion	90 mins

Learning Activities

1. Conducting a CQI Meeting - 60 minutes

Introduction: Earlier, we discussed various community groups and proposed forming a CQI committee. Next, we are going to discuss the roles and responsibilities of this committee. Each person has, in one way or another, been involved in such a group's work. Let's list all the roles we play in our groups.

Question:

Have you conducted a meeting before?

What were the steps involved? (Listen to responses and put on flipchart.)

Select six volunteers from the group and ask them to role play the scenario below.

- Scenario: Participants role play how to organize and run a successful group or committee meeting.
- The role play should include roles and responsibilities of the chairman, secretary, and two committee members.
- Help volunteers develop the scenario and give them a few minutes to prepare.
- When they are ready, ask them to show their role play.

After the role play thank the volunteers and ask the following:

- What were the key positions in the role play?
- What were the specific responsibilities of the mentioned positions?

Help participants fill in the gaps and streamline any mistakes or unrealistic elements of the role play.

Next review the following slides:

- **Role of Chairman**
- **Role of Secretary**
- **Role of CG Representative 1**
- **Role of CG Representative 2**

Next, ask the following guiding questions for each role:

(You can write these on a flipchart for easier discussion.)

- Which are the most important elements of each role?
- What type of person is best suited for this role?
- Is there anything else this person should do to help reach the team's goals?
- What should this person do after each meeting?

Next, go step-by-step and summarize the specific roles and responsibilities of the chairman, secretary, and community group representative.

Guiding questions:

- Who are the key people we find in groups? What are their positions?
- What role do each of them play in a group?
- In the groups that you have attended, who calls for the meeting?
- Who sets the agenda? Can anyone suggest topics? If so what is the process?
- Who takes notes?
- Who leads the meeting?

- How are action items handled?
- Who distributes the notes?

Summary: Following the instructions below, conduct the web game to conclude the session. See the cover page of the slides sessions 1–6 for an image of the game. This exercise takes about 30 minutes.

Ask the participants to form as close a circle as possible.

Pass out a rope rolled into a ball to one of the participants; give the following instruction:

1. The first person with the ball of rope states their name, community name, favourite food, and best experience contributing to a team.
2. They pass the ball to the next participant directly opposite.
3. The participant who catches the ball repeats the steps 1 and 2.
4. The process continues until all participants in the circle are covered.

Ask participants to describe the web created with the rope.

Summarize the session by highlighting the following:

- Non-visible linkages exist in every team, which ensures good team work.
- Everybody in the team is important for the team to succeed.
- Good communication fosters good team work.

Note: The handouts on the following pages are helpful in reviewing how to conduct meetings. Use if appropriate.

Handout A. Conducting Meetings

Policy

Conduct meetings in a way that maximises meeting outcomes and does not waste time.

Definitions

The **meeting chairman person** is the person who chairs the meeting.

A **quorum** is the minimum number of participants required to make decisions at a meeting.

The **minute taker** is the person responsible for recording meeting actions and preparing the meeting minutes.

The **secretary** is....

The **community representative** is....

Procedure:

Responsibilities of meeting chairperson

- Ensure enough people are at the meeting to make a quorum.
- Run the meeting according to the order of items on the agenda.
- Ensure all participants have an opportunity to contribute.
- Encourage open and constructive discussion.
- Discourage destructive discussion.
- Ensure all or most agenda items are covered.
- Before closing, review key decisions, state action items, including who will take them.
- Close the meeting.
- Edit meeting minutes and distribute to all relevant staff and partners.
- At the next meeting, review action items and key decisions from previous meetings.

Minutes of Meeting

- In the minutes, the minute taker must provide an accurate record of the participants, motions, actions, and important points raised.
- Use the same template for the minutes, whenever possible.
- The chairperson must approve the meeting minutes before they are distributed.

Handout B. Minute Taking and Distribution

Policy

Meeting minutes should accurately reflect the discussions and decisions; they should be distributed within a reasonable time.

Procedure

- The *agenda* specifies what is planned to be discussed at the meeting.
- The *meeting minutes* specify what was discussed and decided at the meeting. The minutes are a permanent record of the meeting proceedings for future reference.

Taking meeting minutes

- Record the minutes by—
 - taking notes
 - typing directly into the computer, if possible
 - tape the recordings when there will be a lot of important details; ask meeting participants permission before taping any discussions.
- Make notes of—
 - people present (tick off on a copy of previous minutes of the meeting)
 - amendments to previous minutes
 - major discussion points and decisions made
 - actions to be taken and/or motions passed.

Preparing draft meeting minutes

- The minute taker usually prepares the minutes.
- The minutes should provide an accurate record of participants, important points of the meeting, motions, and actions.
- Prepare minutes as soon as possible after the meeting.
- Use the agenda and previous minutes of the meeting to prepare them.
- Action items should be specific:
 - List what needs to be done, who is responsible, and when the task needs to be done.

Obtaining approval for meeting minutes

- Provide a copy of the draft minutes to the chairperson (or determined person).
- Amend the minutes as directed by the chairperson (or determined person).
- Distribute the minutes to the meeting attendees and those who sent representatives.

Distribution of minutes of meeting

- Distribute the minutes within a week of the meeting—unless the meeting attendees agree on another date—to all meeting participants and other identified stakeholders.

Session 11: Using Community Systems to Share Information between Households and Health Facilities

Session Objectives

By the end of the session participants will be able to—

- Identify community systems.
- Use the community systems to collect data and exchange information between households and health facilities.

Time: 90 minutes

Materials

- flipcharts
- markers
- masking tape
- cardboards

Flipcharts

- Guiding Questions

Trainer Preparation

- Review the trainer notes several times.
- Gather and familiarize yourself with any needed materials.
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Using Community Systems to Share Information between Households and Health Facilities	Exercise and discussion	90 mins

Learning Activities

1. Using Community Systems to Share Information Between Households and Health Facilities
- 90 minutes

Introduction

We are going to talk about information flow through a community system. For the past few days, we have discussed committees and their roles and responsibilities. Now, we are going to see how information moves between homes and health facilities and back to the households.

- a. Guide participants in sketching a community map on cardboards; indicate all the functioning community groups.
 - Ask participants to locate their households on the community map.
- b. Ask participants to mention instances when they received and sent information on health issues.
 - Who sent the information?
- c. Ask participants to indicate how information is sent and received from the household and health facility on the community map.
- d. Using the community map, summarize the identified community systems and how data is collected and sent from the household to and from the health facility.

Put up the flipchart with these guiding questions:

- Have you ever received information from the health facility?
- Have you ever sent information to the health facility?
- How did you send and receive the information on a specific health issue?
- Who received the information?

Conclusion

Every community has a system and already-existing channels of communication. We need to recognize the relevance of these community systems and the flow of information.

Making good use of these systems will help improve the health and well-being of all community members.

Session 12: How to Conduct a QI Team Meeting

Session Objectives

By the end of the session participants will be able to—

- Describe the process for a QI team meeting.
- Conduct a successful QI team meeting.

Time: 90 minutes

Materials

- flipcharts
- markers
- masking tape

Flipcharts

- one for each of the three Information meetings (leave space between points to allow for input from participants)
- Steps for Running QI Information Meetings 1, 2, and 3

Handouts

- Steps for Running 3 QI Information Meetings (if not practical, use flipcharts)

Trainer Preparation

Facilitator should—

- Review the trainer notes several times.
- Review the slides for this session to prepare for conducting the role plays.
- Gather and familiarize yourself with any needed materials.
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Conducting a QI Team Meeting	Role play and discussion	90 mins

Learning Activities

1. Conducting a QI Team Meeting - 60 minutes

In previous sessions, we discussed the roles and responsibilities of chairman, secretary, and other members of the QI team. Next, we will talk about how to successfully conduct a QI team meeting.

Ask: Has anyone conducted a QI meeting before? What were the steps involved?

Review with participants the steps involved in conducting a QI team meeting.

Role play exercise—Divide participants into groups. Each group is expected to role play one of the three QI team meetings. Scenarios for the groups are provided on the **Session 12** slides.

Follow the instructions below:

Role play

- Form a volunteer team to role play a QI team meeting.
- Briefly discuss the needed elements before asking participants to practice.
- Ask volunteers to conduct the role play using the scenarios on the slides.
- Divide participants into groups to discuss the role play.
- Ask groups to come together in plenary and share their thoughts on the role play.

Guiding questions

- What was the role of the chairman?
- What did the secretary do in the meeting?
- What was the role of the coach?
- Did the team identify any issues, problems, and/or ideas to solve the problem?
- Were members assigned roles after the meeting?
- What were the action items and which people were responsible for them?
- Do they have the resources and authority to carry out the tasks?

Review

- Next, review the steps for the QI meetings.
- Put up the flipchart for meeting 1 and review the steps for the meeting.
- Do the same for meetings 2 and 3, in turn.
- As these are being reviewed, ask for participant's input and add their suggestions, if appropriate.
- Explain that there is no one right way to run a meeting, but by following these steps, they will ensure the most important points are covered and that minimal time is wasted on unnecessary items or procedures.

Steps for Running QI Information Meetings:

First meeting:

- Select a chairman and secretary.

- Pick a gap/problem.
- Determine the cause of the problem.
- Select the best change idea to implement.
- Select the data that will be collected.
- Select how to collect the data.
- Select who will collect data and how often.
- Decide when to have the next meeting.

Second meeting:

- Review decisions made during the first meeting.
- Update on progress being made.
- Check in with data collectors.
- Review the data.
- Troubleshoot any problems.
- Discuss any needed changes.
- Continue implementing that change idea, or select another.
- Decide when to have next meeting.

Third meeting:

- Review decisions made during previous meeting.
- Check in with data collectors.
- Review the data.
- Troubleshoot any problems.
- Continue implementing the change idea, or select another.
- When to have next meeting (note that they are to have monthly meetings).

Summary: Follow every one of these steps. Practice following these steps in meetings; they will ensure that it becomes a habit and it will feel strange to hold a meeting without the steps.

Session 13: Stages of QI Team Development

Session Objectives

By the end of the session, participants will be able to—

- identify and explain the stages involved in developing a QI team.

Time: 60 minutes

Materials

- PowerPoints for session
- flipcharts
- markers
- masking tape

Handouts

- Stages in Team Development

Trainer Preparation

Facilitator should—

- Review the trainer notes several times.
- Gather and familiarize yourself with any needed materials.
- Anticipate questions and prepare answers.

Learning Activities Summary

Title	Type	Time
1. Stages of QI Team Development	Stages of QI Team Development	60 mins

Learning Activities

1. Stages of QI Team Development - 60 minutes

The nature of a group or team can be compared to a boat on a river. Sometimes, it is calm and peaceful, but other times it can be rainy and stormy. You will have to row hard and bail water to avoid sinking and possibly drowning. We will now talk about the stages of QI team development.

Briefly explain the four stages of team QI team development. These include forming, storming, norming, and performing.

Show the following slides and review each individually:

- **Stages of Developing a Well-Functioning QI Team**
- **Stages – Meaning – Member Reaction**
- **Summary**
- **Summary of Establishing QI Team**

Ask if the group has any questions.

Next, select five participants from the group:

- Orient them on their specific roles in the role play.
- Guide participants to act a four-stage role play on QI team development.
- After each stage of the role play, stop and ask participants to describe what they observed in the role play.
- Ask leading questions for clarification and how to manage challenges in each stage of QI team development, as observed in the role play

Guiding questions

- What did you observe in the role play?
- How will you solve the challenges observed in the role play?

Conclusion

Stages may not occur as they are presented and they may all occur at one time. Coaches and leaders should be prepared. At the forming stage, there are high hopes and positive feelings. At the storming stage, there are damaging negative feeling. At the norming stage, there is appreciation of positive feelings. At the performance stage, there is stability and progress.

Stages in Team Development

B. W. Tuckman, who studied the behaviour of small groups, published a model suggesting that all teams go through four distinct stages during their development:

Forming. The first stage in a team's development is *forming*. During this stage, the team members are unsure about what they are doing. Their focus is to understand the team's goal and their role. They worry about whether the other team members will accept them. Team members frequently look for clarification from their leader. The team leader plays a key role in helping team members understand their roles and responsibilities.

This stage can last for some time, as people start to work together, and as they try to get to know their colleagues.

Storming. The second stage in a team's development is *storming*. During this stage, the team members try to get organized. This stage is marked by conflict among the members and between the members and the leader. Through this conflict, the team attempts to define itself.

Storming often starts when there is a conflict between team members' natural working styles. People may work in different ways for all sorts of reasons but, if different working styles cause unforeseen problems, they may become frustrated.

Or, if they haven't clearly defined how they will work together—also a big part of the leader's responsibilities—people may feel overwhelmed by their workload; or, they could be uncomfortable with the leader's approach.

Team members who stick with the task at hand may experience stress, particularly if they don't have the support of established processes, or strong relationships with their colleagues.

Norming. After the team members have resolved their conflicts, they gradually move into the norming stage. This is when people start to resolve their differences, appreciate colleagues' strengths, and respect the authority of the leader. They now feel more secure with one another and with their leader. They effectively negotiate the structure of the team and the division of labor.

A prolonged overlap between storming and norming is normal, because, as new tasks come up, the team may relapse into behaviour from the storming stage.

Performing. The fourth stage in a team's development is *performing*. The team reaches the performing stage when hard work leads, without friction, to the achievement of the team's goals. The structures and processes that were set up support this. During this stage, the team members behave maturely and focus on accomplishing their goals. This stage is marked by direct, two-way communication among the team members.

Annex 1: Training Agenda

DAY ONE		
Time	Sessions	Topic
8:00-9:00am	Session 1	Introduction
9:00-11:35am	Session 2	What Is Quality?
11:35-11:50am	Tea break	
11:50-1:30pm	Session 3	Making Improvements
1:30-2:30pm	Lunch break	
2:30-4:00pm	Session 4	Principles of Quality Improvement
4:00-5:30pm	Session 5	Understanding Systems and Processes
5:30pm	Closing	

DAY TWO		
Time	Sessions	Lessons/Topic
8:00-8:15am	Recap of day one topics	
8:15-10:15am	Session 6	Understanding Indicators
10:15-10:30am	Tea break	
10:30-12:45pm	Session 7	Understanding a Community System
12:45-1:45pm	Lunch break	
1:45-2:30pm	Session 8	Coaching
2:30-4:00pm	Session 9	How to Select CQI Team Members
4:00-4:15pm	Tea break	
4:15-5:45pm	Session 10	Roles and Responsibilities of CQI Members
5:45pm	Closing	

DAY THREE		
Time	Sessions	Lessons/Topic
9:00-9:15am	Recap of day two topics	
9:15-10:45am	Session 11	Using Community Systems to Share Information between Households and Health Facilities
10:45-11:00am	Tea break	
11:00-12:30pm	Session 12	How to Conduct a QI Team Meeting
12:30-1:30pm	Lunch break	
1:30-2:30pm	Session 13	Stages of QI Team Development
2:30-2:45pm	Summary of day's lessons	
2:45pm	Closing	

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