

Training of Trainers for Community QI NGO Facilitators

SPRING/Ghana

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Session 1: Goals and Objectives of Training

Goal: To develop a pool of trainers within four NGOs to implement Community Quality Improvement in seven SPRING districts.

Objectives:

1. Develop skills in conducting CQI training for NGO staff
2. Assist health facility staff to:
 - Select CQI team:
 - Selection of appropriate team members
 - Establish well functioning CQI team:
 - Manage 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, measure improvement.
 - Conduct continuous implementation (PDSA cycle) of testing change idea and measure improvement.
 - Document lessons learned from testing change ideas and measuring improvement.



Session 2: What Is Quality? What Is Improvement?

Think of a time when you bought something of high quality – what made it high quality?

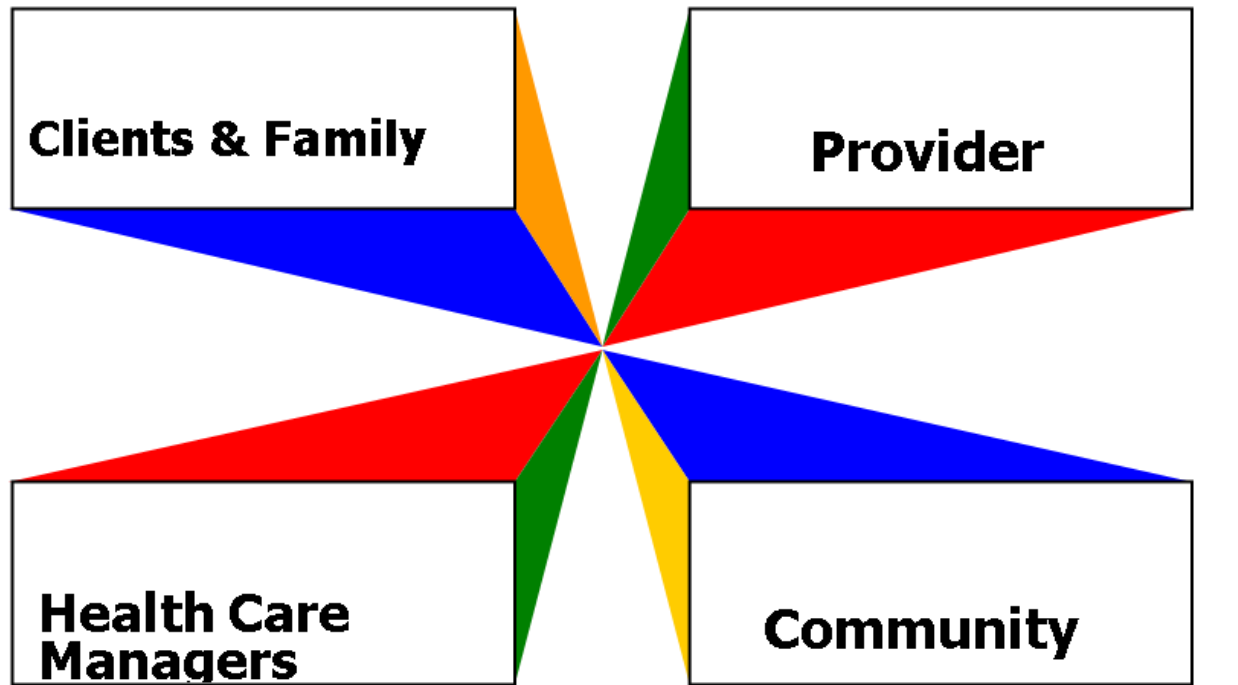
- Brand
- Cost
- Materials
- Durable
- Color.

Think of a time you had high quality service – what made it high quality?

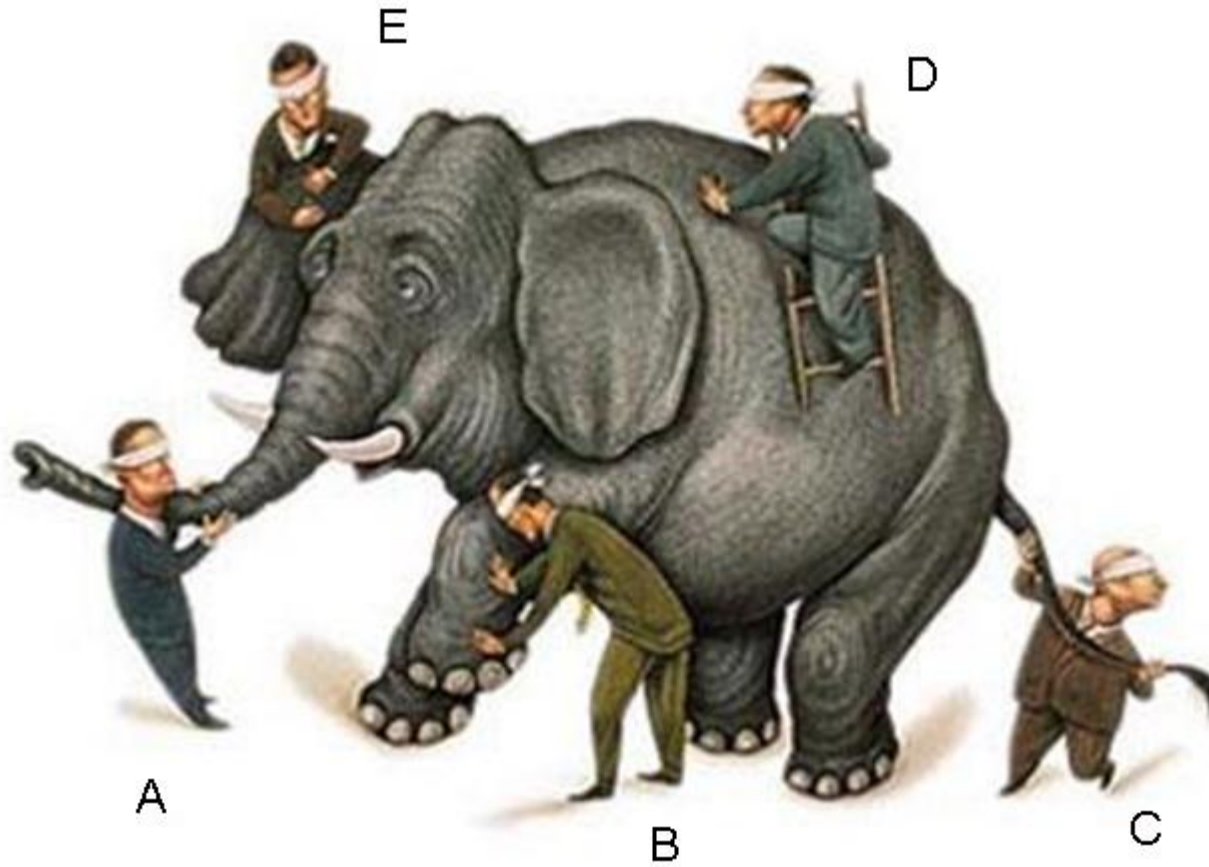
- Good reception (welcoming)
- Smile
- Polite
- Respectful
- Prompt service
- Provide information.



Quality from which perspective?



What Is Quality?



Quality from a Systems View

Inputs (Resources)	Processes (Activities)	Outcomes (Results)
<ul style="list-style-type: none">• People• Equipment• Supplies• Infrastructure• Information• Technology	<ul style="list-style-type: none">• What is done?• How is it done?	<ul style="list-style-type: none">• Health services delivered• Change in health behaviour• Change in health status• Client satisfaction



Dimensions of Quality

- Care must be safe.
- Care must be effective and reliable.
- Care must be patient centered.
- Care must be timely.
- Care must be efficient.
- Care must be equitable.



Main Points

- Definition of quality services is different for different people.
- People become dissatisfied with the health services they receive at a health facility because it is not their standard of quality.
- It is important to create awareness of the dimensions of quality of health care services among patients when defining quality of services.
- If you want to improve the quality of service you have to look at the system (inputs, processes, and outputs) of health services.
- Patients should understand the different levels of health care services provided at different levels of health facilities (hospital, health center, and CHPS compound).
- Some dimensions of quality require support from clients, families, and communities to improve.



Session 3: What Do We Mean by Improvement?

Think of a time when you changed a way of doing something that lead to an improvement.

Faster?

Better?

More efficient?



Ball Game

- GOAL: To pass the ball around the whole group in the fastest time.
- Time keeper records the time.
- First attempt : No talking. Last person starts passing ball. Each person will pass ball to another person.
- After first attempt, the group will discuss and use **four different approaches** to pass ball in the least amount of time.
- Record time taken for each attempt.
- Plot a run chart of number of attempts vs. time taken to pass the ball.



Ball Game Cont.

- Select time keeper to record time for each attempt.
- First attempt: Follow the rule of no talking.
- Last person starts passing the ball through each person to the first person in the row.
- Test four more different strategies (attempts). Try to improve on each attempt.
- From second attempt: Brainstorm ideas for improvement—encourage all ideas.
- Measure time taken to pass the ball so that they know which one was the most effective.

Attempt	Initial/Change Idea	Time
1 st		
2 nd		
3 rd		
4 th		
5 th		



Case Study - Joyce

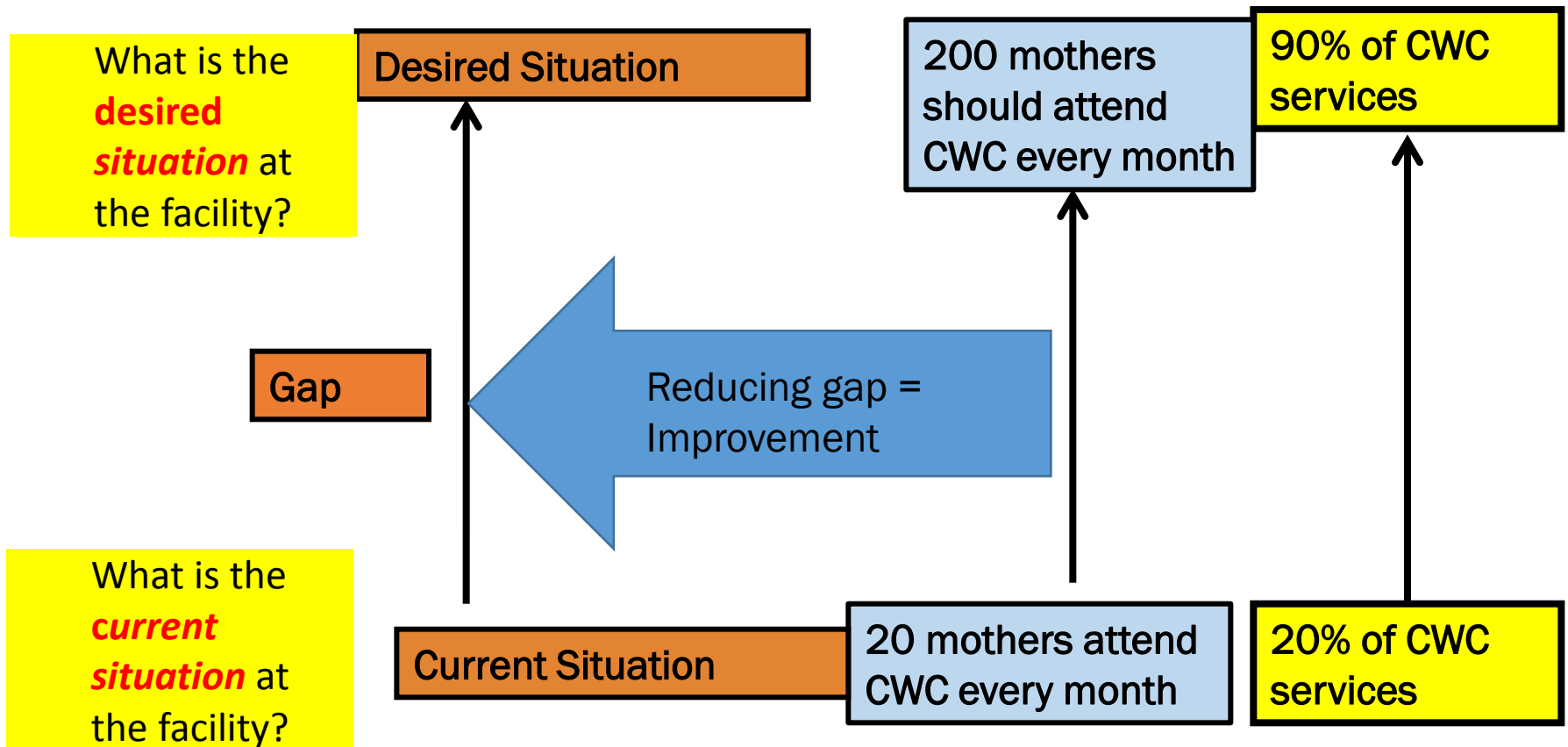
Joyce is the in-charge of the RCH unit in Karaga district. She was just transferred from the Bongo district. She has worked in the RCH clinic in Karaga for more than four months. According to CHV's records, there are more than 200 pregnant women in the community. But, the ANC register shows only 15 pregnant women received ANC services last month. Joyce does not know what to do. Her colleagues are fine with providing ANC services to only 15 pregnant women.

Answer the following questions:

- What is the situation at the facility? What should be the situation at the facility?
- How can you show this using an improvement diagram?
- What change ideas could improve the attending of pregnant women at the ANC clinic?



What is and should be the situation at the facility?



Steps for Improvement

Improvement requires the following steps:

- To find out the gap between what is your coverage now and what coverage you would like to achieve —
 - Find out the causes of the gap.
 - Find out the root cause of the gap.
 - Find out the solution for the root cause.
 - Brainstorm solutions (change ideas).
 - Select one solution or change idea to test.
 - Test the change idea for a period of time.
 - Measure the improvement.
 - Plot improvement.



Session 4:

Case study - Adongo

Adongo visited his groundnut farm and realized that they 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 agreed on the need to ask some 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. Adongo was very happy. He had 40 bags of groundnuts, compared with 15 bags last year, because of improved seeds and an early harvest.



Case Study–Maggie

Maggie received QI training last month in Accra. After she returned, she called a staff meeting to share what she had learned:

- According to QI approach, first we have to develop a QI team whose membership should represent xx each unit of the health facility because quality of services is interrelated with all units. Second, the team has to understand the process of the xxx health service delivery system. Understanding xx the steps of the health service delivery helps measure the gaps in the steps or processes. Third, the health service should xx focus on making clients satisfied (i.e., the service should be client centered). This helps the provider maintain the quality of services.
- Finally, she told the staff that quality service requires constantly measuring improvement. If we do not measure, we do not know if there is an improvement. She mentioned that the QI training highlighted that the QI approach requires the above mentioned elements to improve the quality of services.
- Question: What are the essential elements of the QI approach? Explain those elements.



Principles of Quality Improvement

1. Understanding systems and processes
2. Teamwork
3. Focus on patients
4. Use of data



Model for Improvement

Application of Model of Improvement approach comprises two steps:

1. Ask three questions:

- Develop aim. (What are we trying to accomplish?)
- Measure improvement. (How will we know a change is an improvement?) (Indicator)
- Develop change idea. (What change can we make that will result in improvement?)

2. Implement PDSA cycle:

Plan a change, Do the change, Study the results, Act on the result.



Model for Quality of Improvement

Ask three questions before testing change ideas:

1. What are we trying to accomplish?

Develop, Improvement, Aim

2. How will we know that a change is an improvement?

Measure Improvement (to identify appropriate measures that track improvement).

3. What change can we make that will result in an improvement?

Change Idea to test (identify key change Ideas to test).

- Plan: How to test change ideas.
- Do: Implement change idea.
- Study: Measure improvement (collect data).
- Act: Make decision: Based on improvement result: adopt, adapt, or abandon the change idea.

Use the process of the ball game, change idea tested, and data measured to explain the modern model for improvement.



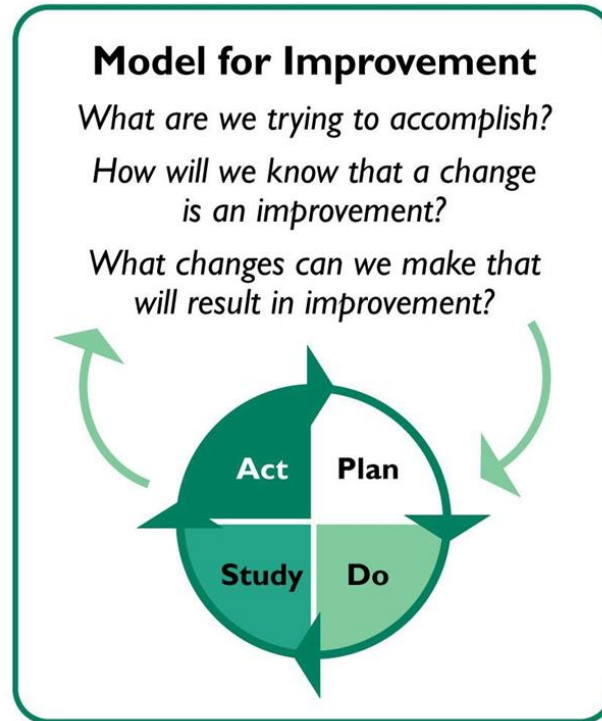
The PDSA Cycle

Act:

- Take action based on results.
- What changes are to be made?
- Next cycle?

Study:

- Complete the analysis of the data (impact of intervention?).
- Compare data to predictions.
- Summarize what was learned.



Plan:

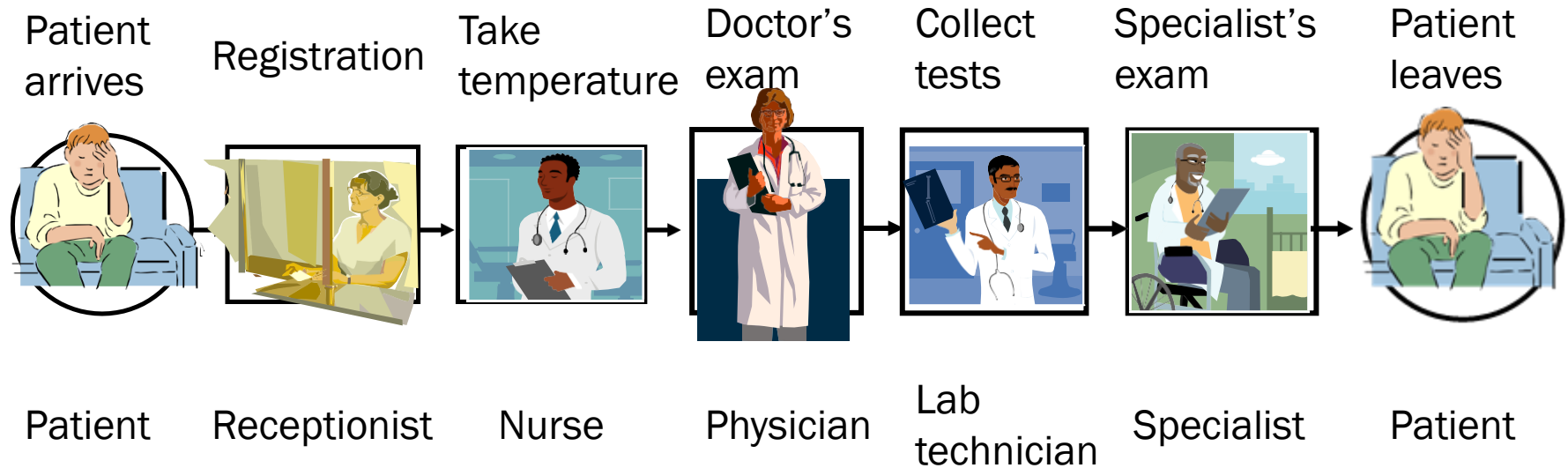
- Objectives.
- Questions and predictions (why?).
- Planning (who, what, where, when).
- Plan for data collection.
- Communicate the change, engage stakeholders.

Do:

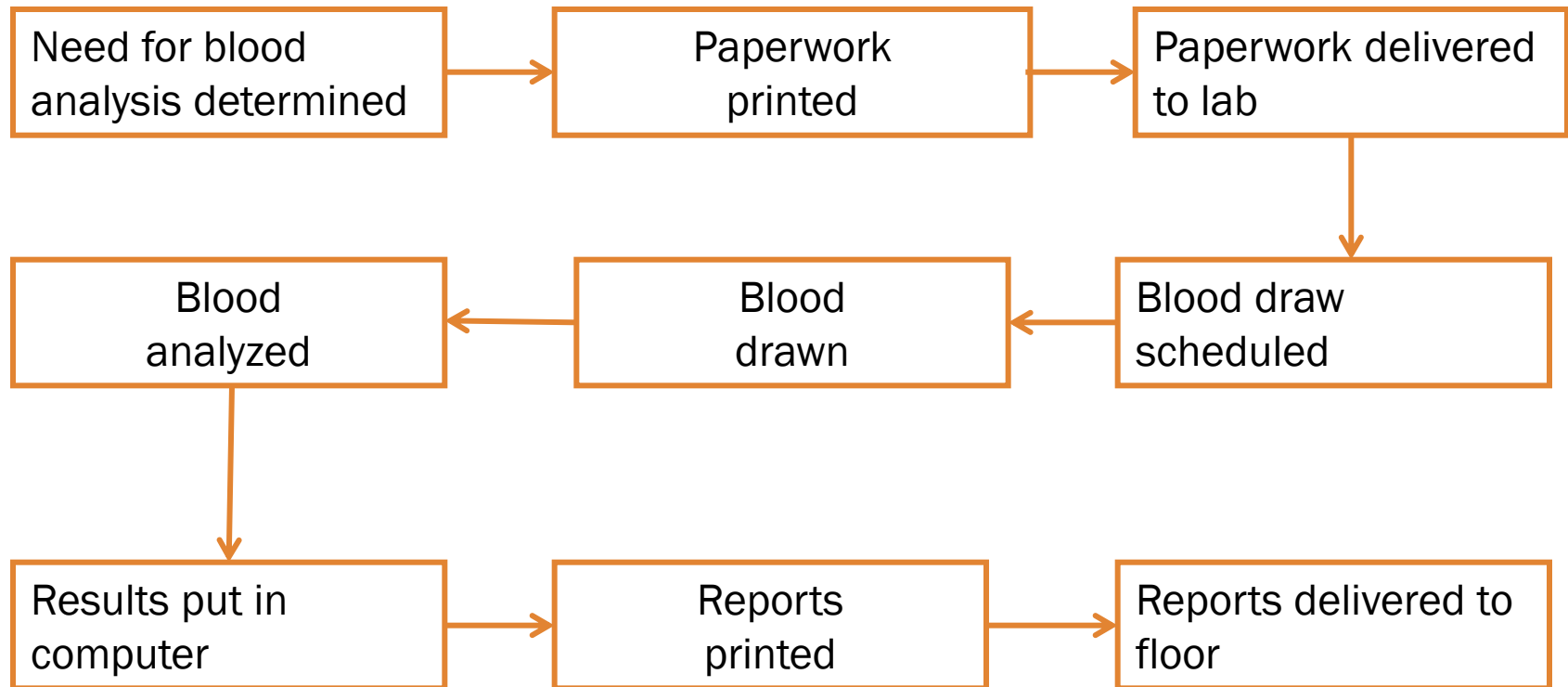
- Carry out the plan.
- Document problems and unexpected observations.
- Begin data analysis.



Session 5: Steps and Participants in the Community Health Service Process



Work As a Process



Adapted from Langley, et al., *The Improvement Guide: A Practical Approach to Enhancing Organizational Performance*. Jossey Bass, 1996.



Session 6: Indicators

Indicators:

- Indicators measure the level of performance/achievements/outcome.
- Indicators indicate the position/state/level of program achievement (position where you are—indicated in number).
- Indicators also help show measurement of progress/improvement.



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 ANC clinic. The home visits recorded by the CHV show that 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 on the number of pregnant women attending ANC clinics every month.



Indicator Components

1. Numerator
2. Denominator
3. Source of data
4. Frequency of data collection



Case Study 2

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



Steps in Developing Indicators

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



Creating Indicator from GMP Processes/Steps/Activities

Main GMP activities during the CWC:

1. Register child
2. Weigh child
3. Plot weight of child on the growth chart
4. Triage caregivers for counselling
5. Provide targeted counselling to caregivers
6. Measure growth of child

Indicators:

1. Percentage of children registered for GMP
2. Percentage of children weighed
3. Percentage of children's weight plotted on the growth chart
4. Percentage of caregivers triaging for counselling
5. Percentage of caregivers received targeted counselling
6. Percentage of children with improved growth



Source of Data

- Total number of children <2
- Total number of children weighed
- Total number of children with growth chart completely filled
- Total number of children with weight plotted
- Total number of children with weight plotted and joined
- Total number of caregivers counselled
- Total number of caregivers triaged
- Total number of caregivers given interactive education
- Total number of children with growth not faltering



Creating Indicators of Family Planning Services

Steps/process in providing family planning services:

- Identify target women for family planning services.

Indicators:

- Number of reproductive-age women identified and targeted for family planning services.



Sources of Data

Number of reproductive-age women targeted for family planning services



Creating Indicators of ANC Services

Steps/process in providing family planning services:

- Identifying pregnant women.

Indicators:

- Number of pregnant women identified.



Session 8: Coaching

Coaching is a process of helping others develop skills and confidence to achieve a goal.

The trainer is called a coach and learner is called a coachee.

In coaching, the coach will train a person or group of people with the aim to achieve the same goal or specific skill.

During coaching, the coach uses an interactive learning technique in which the coach explains and shows the stages and their sequences for carrying out a procedure or an activity.

The coaching steps are—

- Coach demonstrates the entire procedure from beginning to end.
- If the processes are long, the coach divides the procedure into parts and allows the participants to work on the individual stages.
- Finally, the coach demonstrates the entire process again and allows the coachee to practice the entire processes from the beginning to the end.



Roles of a Coach

Roles of a coach:

- Facilitator
- Trainer
- QI expert.

Coaching requires the following skills to play the above roles:

- Communication skills
- Encouraging all team members to share relevant information
- Facilitation skills
- Promoting decision making by consensus
- Training skills
- Coaching is not synonymous with training; training can be one component of a larger coaching initiative.
- Quality improvement skills
- Increase the performance on the task for which they receive coaching or mentoring.



Responsibilities of a Coach

Assist to—

- **Form a QI team:**
 - Understand current system and processes.
 - Conduct orientation for QI team.
- **Establish a well-functioning QI team:**
 - Understand stages of developing well performing team:
 - Team forming
 - Team storming
 - Team norming
 - Team performing.
- **Run a well-functioning QI team meeting**
 - Understand (draw) processes of health delivery system (at CWC).
 - Determine the gap in steps—from documents (register, notebook, tally sheet, forms, etc.), comparing denominator and numerator.
 - Develop indicator.
 - Steps should to follow during the QI meeting:
 - Member present data (numerator and denominator)
 - Find out gap/problem (difference in denominator and numerator).
 - Find out root cause of the problem.
 - Brainstorm possible solution/change idea of the root cause.
 - Select one change Idea.
 - Test selected change idea (at CWC).
 - Study/measure improvement (at CWC).
- **Conduct continuous implementation by using the PDSA cycle to test change ideas.**
- **Document lessons learned by testing change ideas and measuring improvement.**



Coaching Summary

1. Coaches play a critical role in supporting QI teams to effectively implement QI approaches.
2. A coach is not a member of the QI team.
3. Coaches routinely attend QI team meeting in their catchment area.
4. During coaching, the coach should demonstrate and discuss the processes of improvement and observe the team carrying out the new activity.
5. As a QI expert, the coach is a guide for understanding the QI principles and tools like teamwork, drawing process diagram, identifying change ideas, collecting and analyzing data, and measuring improvement.
6. The role of the coach is not to solve problems, but to help the QI team to run smoothly.
7. Coaches should help the team stay focused on the discussion of the selected indicator(s).
8. Coaches can guide the QI team on use of QI tools in data collection, identifying causes and root causes, and solutions to problems.
9. Coaches help QI team summarize meetings, suggest next steps, and provide the team with feedback on their progress.
10. Coaches use a checklist to find the gaps in QI team member's knowledge and skills, use of QI tools in identifying gaps, analyzing the causes and root causes of the problems, brainstorming solutions (change ideas), and measuring improvement.
11. After finding out the gaps in knowledge and skills coaches carry out a 30 or 40 minutes coaching session for the QI team.



Session 9: Quality Improvement Team

Selecting a QI team:

Criteria for forming a QI team:

- Select a functioning village committee/well-functioning community group.
- Village committee should meet regularly (i.e., either every two weeks or every month).
- Village committee should be willing to spend one hour after their regular meeting to discuss health problems of their family members.
- Village committee should represent each community group.
- If a community group does not have a member representation on village committee, the CHN/CHV should ask the village to include a committee member from the community group for only the health discussion hour.
- The village committee should have at least one representative from the five community groups.



Community Health System Case: Process for Forming CQI Team

Hazia attended a three-day CQI training in Kumbungu. After returning from training she wanted to form a CQI team. She found a village health committee that meets every month and discusses the health issues of the community. The village health committee has 11 members, but six of the 11 members do not come from community groups that she selected for the community QI. During the training, she was advised to form a QI team with community group representatives. But, there was no other village committee, so she decided to use the village health committee to improve the quality of services.

- If you were her CQI coach, what suggestions would you give her?
- Would you agree with her decision?
- If not, what would you suggest she do?



Session 10: Roles and Responsibilities of QI Team Members

Role of Chairman

1. Support QI team secretary to prepare for meeting: invitation, place, time, agenda, and other necessary materials.
2. Conduct QI team meeting:
 1. Start QI meeting by welcoming members.
 2. Ask secretary to present previous action plan.
 3. Ask members to share the experiences (problems, challenges, and successes) of implementing change ideas.
 4. Ask members to report information/data collected after implementing change ideas.
 5. After reporting data by all members, chairman will facilitate the following activities:
 1. Determine the gaps/problems.
 2. Determine the causes and root causes of the problem.
 3. Brainstorm solutions for the problem.
 4. Select simple, easy, and doable solutions with locally available resources.
 5. Prepare an action plan.
 6. Fix date for the next meeting.
 7. Adjourn the meeting.



Role of Secretary

1. With the support of chairman, prepare for the QI team meeting.
2. Send invitation or inform QI team members about the time and place for meeting.
3. Before meeting starts, ensure that the meeting place is available, minute register is available and complete, and all members are reminded about the meeting, etc.
4. During meeting, take notes or assign somebody to take notes and collect the notes at the end of the meeting, and write up the minutes.
5. For discussion, report on the previous meeting's action plan.
6. Take part in team discussion.
7. Prepare action plan with other members, and read the final action plan.
8. Share minutes and action plan with the coach.



Roles of CG Representative 1 (QI Team Members)

During community group meeting—

- Help CG members record information/data collected by each member.
- Help CG members compile all the data submitted by each CG group member.
- Assist CG members to understand the purpose of collecting data, educating, counseling, etc., family members.
- Conduct training for CG members to develop knowledge and skills of collecting data, conducting counselling, and education sessions for the family members.
- Assist CG members in selecting one change idea, carrying out process of testing change idea at home, and collecting data.
- Help CG members develop forms to record information collected from the family members.
- If CG members report that family members do not pay attention, then CG representative would pay a visit and help family members understand the importance of testing change ideas if the CG member requests it.



Roles of CG Representative 2 (QI Team Members)

During QI team meeting:

- Bring information/data compiled by CG members during the CG meeting.
- Record information/data on QI team register.
- Present compiled data to QI team when **determining** the gaps/problems.
- During the implementation of the change idea, share experiences and lesson learned by CG members in their home.
- Participate actively during the *following* activities of QI team meeting:
 - Determine the gap.
 - Determine the main cause of the problem.
 - Determine the root *cause* of the problem.
 - Brainstorm the possible solutions for the problem.
 - Select simple, easy, and doable solutions.
 - Prepare action plan.
- Each QI team member shares the problem, root cause, and selected change idea to test at the CG member's household. During the community group meeting, the members should discuss and agree to the process of implementation for the change idea.



Session 12: QI Team Meeting

Scenario for Role Play

Selection of Chairperson and Secretary

- CHN/CHV invites QI team to a meeting.
- CHN/CHV: Welcome all QI team members. We are happy that you volunteered to be a member of a team that will improve the quality of service. We know that CHNs and CHVs are trying to provide service in the community, but we are unable to visit or provide information to most of the families because of distance, workload, and shortage of staff. There is evidence that this problem can be addressed by involving community group members.
- 3. As each of you represent a community group and have more than 10 to 15 members, through a monthly meeting we can pass new information to each member's household; and, at the same time, we can get information back from each household that HF needs. By training CG members, we can give education and counselling sessions to family members. This system will help CHPs facility and help us (CHN and CHV) provide quality service to women and children in our community.
- To conduct a meeting, we need a chairman who will guide, as well as, facilitate the activities of meeting. In addition, we need a secretary who will help the chairman manage and administer the meeting.
- Read the roles of the chairman and secretary, then, elect a chairman and secretary democratically.
- Use the first QI team meeting slide.



First QI Team Meeting

The QI team selects the chairman and secretary.

Chairman:

- Welcomes all members.
- Asks everyone to introduce themselves:
 - Give their name.
 - Name of representing community group or organization.
 - Number of members in CG.
- Tell members the purpose of QI team.
- Outline the roles and responsibilities of the secretary and member.
- Decide which indicator the team would like to improve. The selection of the indicator is based on the health problem the HF is trying to improve in the community.
- Assign task to CHVs/CHN to bring the data that shows the existing gap.
 - Numerator (how many people are receiving that service)
 - Denominator (total number of people who should receive the service).
- Prepare action plan (problem, list more of action plan contents?).
- Fix the date for next meeting.
- Adjourn the meeting.



Role Play on How to Select New Indicator

Scenario: Kumbungu RCH ANC clinic QI team successfully improved the percentage of people's attendance at ANC services in the RCH clinic within four months. Now the QI team would like to improve the percentage of pregnant women taking a IFA tablet daily. During the QI team meeting, the chairman proposed to focus on a new indicator (i.e., percentage of pregnant women complying with consumption of IFA tablet). All QI team members agreed to it, but Secretary Rashida asked if we knew how big the gap was between pregnant women attending ANC services and those consuming iron tablet regularly (daily). The chairman said that we do not have that data. Therefore, let's make an action plan for this problem. The chairman asked the secretary and members to make action plan.

- Problem: Lack of data to show the percentage gap.
- Solution: Find out the percentage gap in ANC attendance .
- How?:
 - Numerator: From ANC register (every month pregnant women bring iron package blister or iron container and midwife will count the number of iron tablet not consumed).
 - Denominator: From ANC register (i.e., the number of pregnant women attending ANC services).
- Who: Midwife/community health nurse.
- When: By April.



Second QI Team Meeting

Chairman:

- Welcomes all members.
- Asks secretary to read the action plan prepared during the last meeting.
- Secretary presents the action plan.

Chairman:

- Asks secretary to present the data.

Team members:

- Look at the data and identify the gap.
- Develop improvement aim.
- Discuss the possible causes of the problem (gap).
- Select one cause and determine the root causes of the problem.
- Select one root cause and brainstorm possible solutions.
- Select one solution (easy, doable, can be done with local resources etc.).
- Develop action plan to implement the solution (test change idea).

Chairman:

- Fix date for the next meeting.
- Adjourns the meeting.



Third and Subsequent QI Team Meeting

Chairman:

- Welcomes all members.
- Asks secretary to read the action plan prepared during the last meeting.

Secretary presents the action plan.

Chairman:

- Asks secretary to present the data.

Team members:

- Look at the data and measure the improvement.
- Determine the remaining gap.
- Discuss whether to continue testing the same change idea (solution) or select another solution brainstormed in the previous meeting (easy, doable, can be done with local resources etc.).
- Develop action plan to implement the solution (test change idea).

Chairman:

- Fix date for the next meeting.
- Adjourn the meeting.



Session 13: Stages of Developing Well-Functioning QI Team

In quality improvement, a QI team is a group of people who work toward common goals. The objective of these teams is to solve an identified problem, and team members must develop a feeling of trust and honesty to fully accomplish their objective.

Developing a team involves four basic stages:

1. Team formation
2. The storm
3. Norm acceptance
4. Performance.

A team may develop normally from the first to the fourth stage, just as it can fall backward or skip stages. Knowing these functional stages is useful for coaches, because they can quickly assess the team and find solutions to problems before the team falls apart. The following table displays the behaviour of team members at each stage, and the corrective actions to be taken.



Stages

Meaning

Member Reaction

Team formation

- Identify the members.
- Assign roles.
- Prepare workplan.

- Enthusiasm
- Optimism
- Politeness
- Effort to identify tasks

Storming

Conflict of all types.

- Resistance
- Changing attitude
- Disputes
- Defensive behavior
- Competition
- Doubts about the goals

Norm acceptance

- Everyone accepts the working norm.
- Conflicts are settled.

- Acceptance
- Relief
- Commitment to overcome differences
- Happy interactions

Performance

Team productivity.

- Satisfaction
- Trust
- Commitment to continue



Summary

- Every team goes through the stages of development:
 - Forming
 - Storming
 - Norming
 - Performing
- Each stage is a critical part of ensuring the team is well functioning and reaching its goals.
- Coach and QI team leader should understand these stages and the process of team development. The QI team should assess the stages of their team and should be prepared to tackle the problems at that stage.
- Coach and team leader should also remind team member of the stages of team development.



Summary of Establishing a QI Team

- Health care consists of interdependent steps that are executed by different people.
- Quality gaps occur in services when information does not communicate clearly in the hand-over between people.
- Staff knows system and process of health facility services well, so they are right people to find out the problems and generate ideas for local solutions that will be doable and affordable.
- Each team members' confidence increases when they achieve results working together.



Thank you!

For more information, please contact:



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