

Benin Quality Improvement

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iCCM 2014

**Integrated Community Case Management (iCCM):
Evidence Review Symposium**
3–5 March 2014, Accra, Ghana

Background: Benin BASICS Project

Departments where CHS BASICS works
DEDRAS Local NGO



- Basic Support for Institutionalizing Child Survival (BASICS)
- USAID funded
- National level
- 5 health zones
- 2009-2012

BASICS BENIN by numbers

5 health zones
93 health facilities
972 Community Health Workers

202,116 under-five children served what amounts to 16-20% of total population of under-five children in Benin

5 Local NGOs involved

Time of operation
July 30, 2009 – July 29, 2012

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Challenge: Weaknesses in quality of care

Weaknesses in quality of care were identified during the community health workers' (CHW) post-training assessment



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Intervention: Quality improvement through supervision

Objective:

- Improve community health worker (CHW) performance through improved technical support

Dates:

- October 2011 – March 2012

Location:

- 1 district (Copargo)

Participants:

- Supervisors (Nurses)
- CHW
- Health center supervisor
- Community members



How BASICS Benin improved CHS performance



Components of the intervention

- Group supervision
- Individual on-site coaching for each CHW
- Encouraged supervisors to become more involved and interested in CHW tasks
- Established six local quality improvement teams (QITs), composed of the CHWs, the health center supervisor, and community members

Results: Improved CHS performance

N°	Indicators	Performance		
		Post-training assessment	3 month follow up	6 month follow up
1	CHWs ask patients appropriate questions to determine presence of danger signs and severity of illness	79%	93%	98%
2	CHWs correctly calculate breathing rates for children seen with cough	71%	85%	100%
3	CHWs classify rapid breathing as pneumonia	71%	92%	100%
4	CHWs correctly treat children under five with pneumonia	57%	75%	100%
5	CHWs comply with at least 80 percent of cough treatment standards for children 2 to 59 months of age	50%	91%	100%

Best Practices

- Nurses should monitor and supervise CHWs
 - When the nurses are sufficiently motivated and truly interested in the supervision process, they do what is necessary to assure that CHWs' work is up to standard.
- Provide individual coaching to CHWs
 - Putting CHW into groups based on their learning capacity improves their abilities
- Provide CHWs with opportunities to share their experiences and challenges
 - This helped improve their performance.



Lessons Learned

The motivation of CHWs and the supervisory strategies developed through the collaborative approach are crucial for the future of ICCM.

Data from the project reveal that CHWs are capable of performing these tasks when there is appropriate and on-going follow up.

There is need for clear health system engagement and a suitable structure to support this kind of activity from the outset.

Lessons Learned, continued

This collaborative approach helped strengthen team skills by working toward a shared objective.

Tools should be tailored for CHW's level of education; in this case, less information and better illustrations.

Quality assurance teams should also test these tools to make sure that they fulfill the CHWs' needs and they are appropriate

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