

Improving Human Resources Capacity through Evidence-based Training

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ECSA/DJCC19/R4: Scaling up best practices and high impact interventions

Recommendations to member states:

7. Improve infrastructure and diagnostic capacity at HIV service delivery points to include standardized screening tools and standard TB indicators in national HIV data reporting systems;

9. Identify successful pilots that foster change within the health sector for expansion and scaling up;

10. Implement or apply available evidence–based approach to quality improvement;

11. Support operations research to support scale efforts for quality improvement efforts.

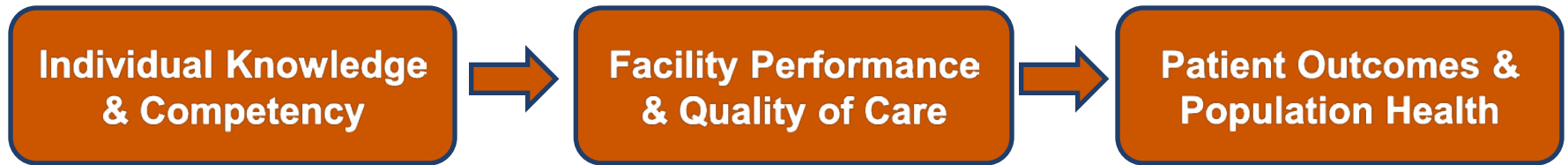
Building a Stronger Case for Capacity-Building for Health

- Importance of demonstrating progress
- Challenges in measuring the impact of capacity-building efforts
- Training as an essential vector for other powerful interventions ... most fundamental aspect of capacity-building... and among easiest to evaluate!

Improving the Standards of Evidence for Professional Training

- Currently, little beyond anecdote to compare one form of training to the next
- Must move beyond inappropriate current proxies for evidence:
 - The impact of training programs being described by the number trained
 - Innovations judged by novelty or technical appeal
 - Cost savings interpreted as cost-effectiveness

What is Ultimate Impact of Professional Training?



- Transfer of knowledge, skills, experience creates a better prepared individual
- Better prepared individuals provide higher quality healthcare services
- High quality services lead to better health outcomes for all

IDCAP Intends to Advance Field of Training Evaluation

- Goal: Evaluate the cost-effectiveness of a promising method to build capacity among mid-level health practitioners in sub-Saharan Africa for the treatment and prevention of infectious diseases
- Surveillance system of 36 health facilities to measure the impact on clinical performance and health outcomes
- Randomized facility-based study design

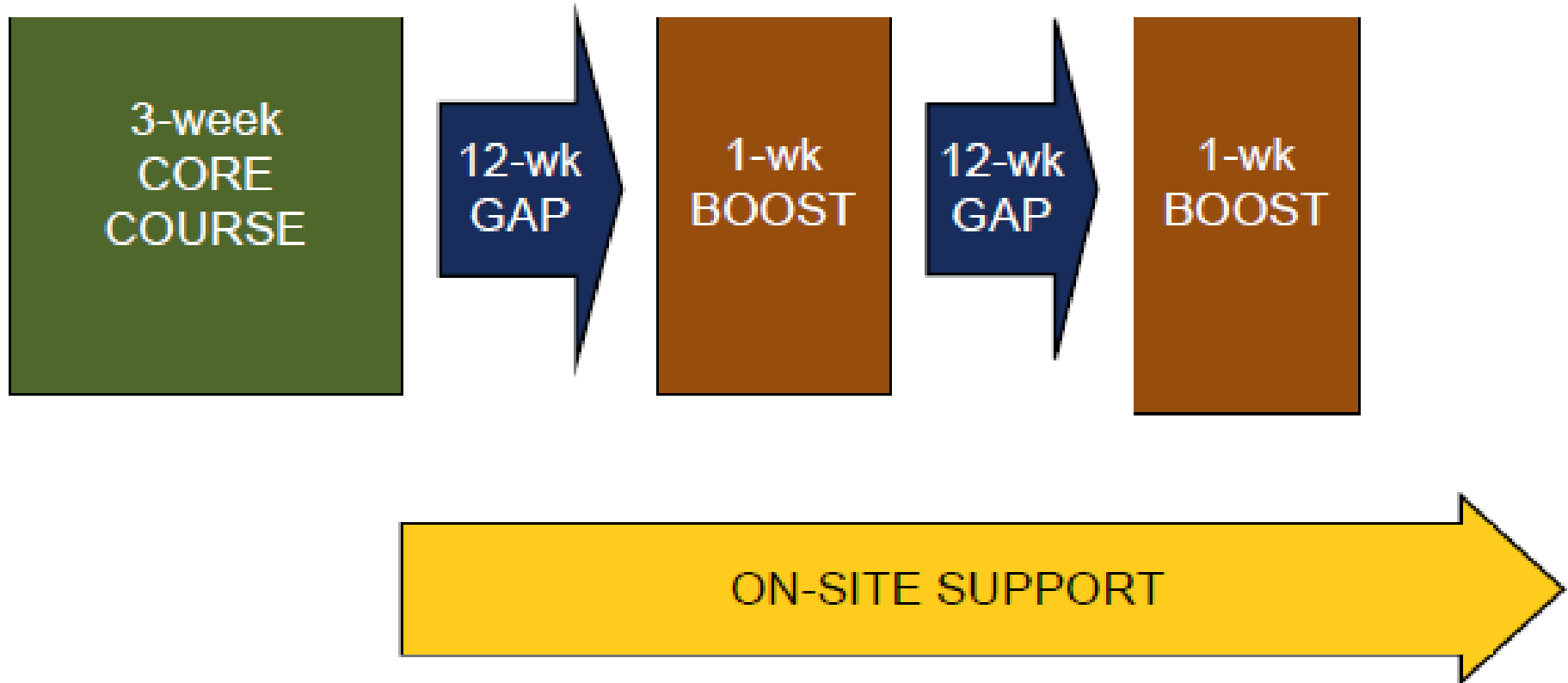
IDCAP's Innovation in Training

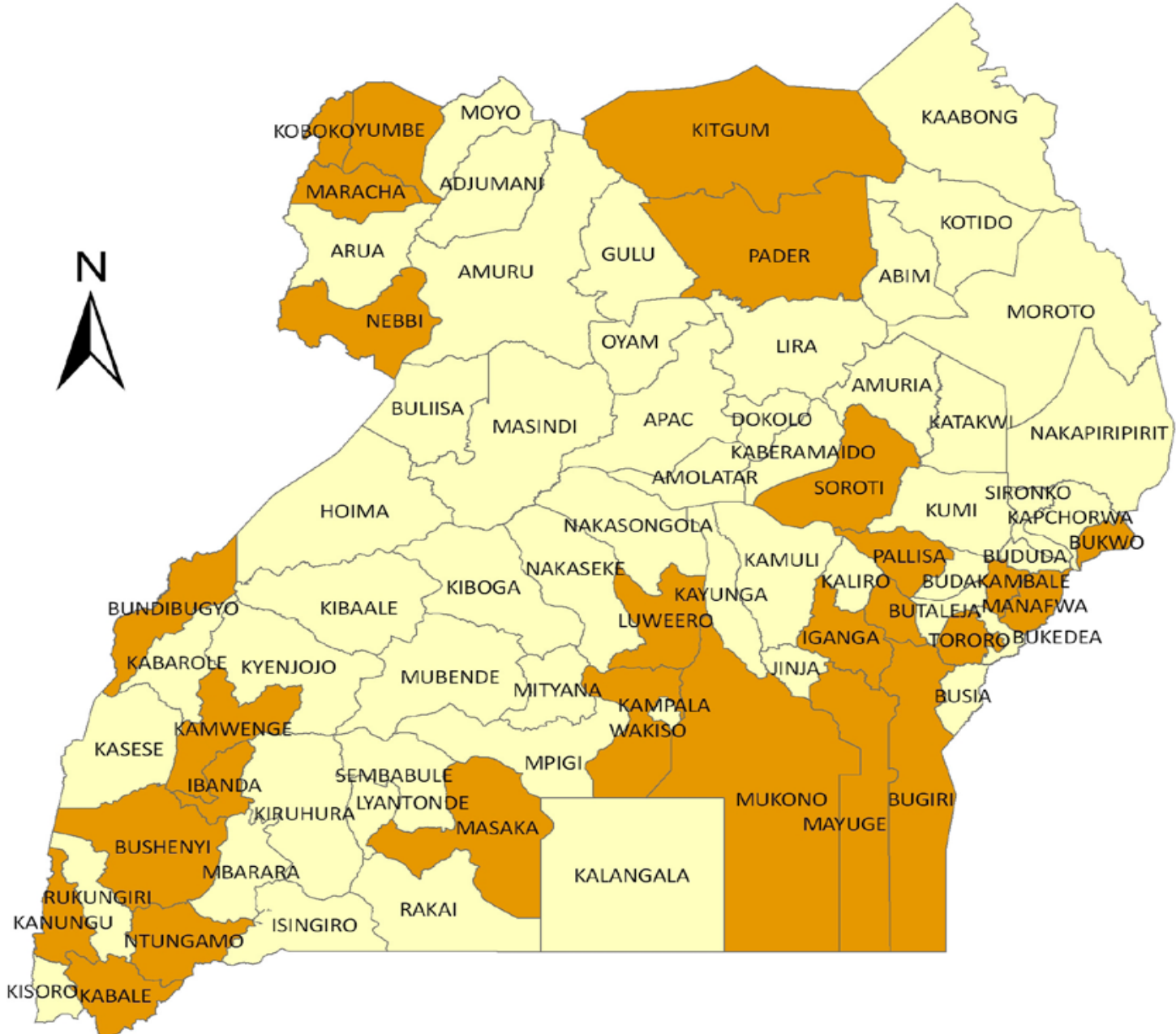
The IDCAP Capacity-Building Package

- Focus on mid-level practitioners
- Integration across infectious disease
- On-site support component



IDCAP Design: Structure of Infectious Disease Training





IDCAP Innovation in Evaluation

Impact on the Individual



- **72 trainees attend 3-week course and boost session**
- **Evaluation pre- and post training, and after 9 months**
 - **Classroom Case Scenarios** are written examinations that overcome some limitations of multiple choice exams, while preserving the advantages
 - **Clinical Assessment Tool** allows comprehensive evaluation of clinician practice

IDCAP Innovation in Evaluation Impact on Service Delivery



- Facility Surveillance System (existing, improved, new)
- Data Collection System (centralized and distributed)
- 54 indicators of emergency treatment and infectious disease service delivery
- Randomized facility-based trial with staggered introduction of on-site support

IDCAP Innovation in Evaluation Impact on Health Outcomes



- **Patient Cohorts** to determine complete information about long-term and chronic care patients known for loss to follow up
- **Mortality Survey** of households in populations surrounding IDCAP facilities, to determine impact on < 5 mortality rates

IDCAP Products for Dissemination

- Integrated Management of Infectious Disease training course for mid-level practitioners
- On-site support model and multidisciplinary team training materials
- Clinical decision-making guides for field use
- Evaluation tools and findings

Results will be available in 2011

IDCAP

Partnership with Ministry of Health

- Support the Uganda Ministry of Health's Quality of Care Initiative
- Training and on-site support are based on Ministry guidelines for TB, HIV and malaria, as well as child health and treatment of malnutrition and include a district team member at each site for each visit
- Training of district health team members on HIV Care Card and Ministry guidelines at IDCAP sites
- Evaluation uses Ministry cards, registers and indicators, and strengthens the Health Management Information System (HMIS)
- Representatives of the Ministry serve on IDCAP the management team and steering committee

