



PRESENTS
**REPRODUCTIVE HEALTH
INTEGRATION
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*FOCUS: PERFORMANCE IMPROVEMENT REVIEW FOR
QUALITY ASSURANCE*

Reproductive Health Integration *Issues* is a publication of Initiatives Inc. designed to support the integration of reproductive health into the portfolios of community based organizations currently addressing other development concerns. In quarterly installments, *Issues* addresses the complex programmatic, managerial and evaluative questions that arise in planning and implementing RH integration strategies.

The newsletter is a by-product of the USAID-funded SEATS Project, Reproductive Health Integration Initiative (RHII), which is based on the premise that integration provides a cost-effective and efficient method of extending services, giving women and men the opportunity to make informed choices about their pregnancies, ensure their reproductive health and help their children to survive.

THE IMPORTANCE OF MONITORING

Monitoring assists programs to determine whether their strategy is effective. Effective programs establish program objectives stating what they want to achieve and indicators that provide a measure to track progress and achievements. Indicators can measure both qualitative and quantitative changes. Careful and periodic monitoring reveals whether the program is progressing towards its objectives, and assists managers to assess progress, identify problems and initiate program changes.

MONITORING AND INTEGRATION

As NGOs integrate family planning services into their ongoing programs, they encounter new and challenging issues related to program quality, sustainability, management and community participation. These community-based programs are often small, reliant on community volunteers and lack resources for more formal FP program reviews. Yet monitoring is essential to help NGOs assess the effectiveness of their FP strategies and develop corrective actions to address barriers to success. The monitoring process is also a way to build staff competency in defining and implementing quality programs, solving problems and creating teams.

MONITORING FOR QUALITY ASSURANCE

Regular monitoring also makes a critical contribution to quality assurance in community based programs. Quality assurance is a process for developing and maintaining high quality programs with the involvement, commitment and cooperation of staff and partners. It focuses on achieving desired health outcomes and ensuring client satisfaction in a cost-effective manner. An effective quality assurance process starts with a clear and shared understanding of program objectives and a plan for routine measurement of progress through monitoring.

PERFORMANCE IMPROVEMENT REVIEW PACKAGE (PIR): A QUALITY ASSURANCE TOOL FOR COMMUNITY BASED PROGRAMS

PIR, developed by Initiatives Inc. for the USAID-funded SEATS Project, is a comprehensive self-assessment process for monitoring program performance and ensuring quality in community-based programs. PIR assesses program quality on six dimensions: management and organization, supply systems, sustainability, service quality, community commitment and quantitative service statistics or results. Using feedback obtained through staff, community, service provider, manager, supervisor and client interviews and observations, PIR helps organizations appraise program quality from multiple angles, thus enabling a holistic program review.

As an internal review, PIR helps to build staff capacity to establish and manage a quality assurance process that collects and analyzes information, involves partners and provides direction for actions to improve program performance. PIR helps program staff and partners identify programmatic strengths and weaknesses, develop a corrective plan of action and create a graphic representation of change over time. Most importantly, the PIR process allows for a continual upgrading of the knowledge, skills and confidence of service providers, supervisors and managers.

The total PIR package includes the conceptual framework, guidance for planning and implementing a review, review instruments and guidance for reporting results.

THE PIR CONCEPTUAL FRAMEWORK

Successful programs have strong management and organization; a consistent and complete supply system; are sustainable; deliver high quality service; enjoy support, participation and dedication from the community; and have strong measurable results. The PIR conceptual framework embodies all of these

essential elements. In addition, the conceptual framework provides the foundation for the PIR review instruments and ensures that all factors contributing to program success are addressed. PIR reviews the following program elements:

- Management and Organization refers to the capacity of an organization to effectively staff, finance, plan and implement an integrated family planning program.
- Supply System covers the information necessary to maintain effective commodity support: consistent stock and distribution, adequate storage and acceptable methods for calculating needs.
- Sustainability is a result of good partnerships, comprehensive plans, strong financial systems, community promotion and client satisfaction.
- Quality of Service is dependent upon skills and technical competence of providers and supervisors, an effective referral system and client satisfaction.
- Community Commitment measures the community's contact with NGO staff, its role in decision-making about the family planning project and its knowledge of family planning.
- Results address three critical quantitative factors in measuring program success: client follow-up, effective referral, and Couple Years of Protection (CYP).

The PIR Instruments

A set of eight data collection instruments makes up the information-gathering component of the PIR Package. Instruments cover the whole scope of an integrated project from internal management issues to client and community experience and opinions. In all, the instruments are designed to provide a broad “snapshot” of program performance at all levels. Included in the set of data collection instruments are:

- Instrument 1: Record Review
- Instrument 2a: Manager Interview
- Instrument 2b: Supervisor Interview
- Instrument 3: Community Interview
- Instrument 4: Service Provider Interview
- Instrument 5: Client Interview
- Instrument 6a: CBD-New Client Observation
- Instrument 6b: CBD-Continuing Client Observation

The PIR Process

PIR steers organizations through a 4-step self-assessment process that enables them to gather information from program staff and clients and to analyze and interpret this information in order to assess the strengths and weaknesses of the integrated program. Data collection, analysis and decision-making are carried out in a participatory fashion, involving partners, i.e. government representatives, health clinic or referral site staff, or NGO partners, in defining appropriate program improvement strategies.

The 4-step PIR approach to project monitoring includes:

Step 1: Planning. Preparation consists of scheduling the monitoring exercise with CBDs, partners, and the community; creating a budget; assembling the monitoring team and conducting the monitoring team planning meeting. Typically, the program manager or supervisor organizes the review. During this phase, the monitoring team gathers to discuss the schedule, assignments and logistics of the data collection exercise, and to review, adapt and translate the instruments as needed.

Step 2: Data Collection. The team uses the set of PIR instruments to guide interviews, observations and record reviews. The interview instruments assist the team to assess basic knowledge and obtain the views of managers, providers, clients and communities. Guided observations measure performance against expectations, completing the picture of service delivery by providing concrete evidence of competence, supply and service quality and community involvement in and support of the program. The record review adds valuable information about structure, financial management and sustainability, and about how

management, supervisors and CBDs use and share information.

Excerpts from Instrument 6A: CBD-New Client Observation

CBD Counseling at Session Opening

- 1) At the beginning of the consultation, did the service provider:
- a) Greet the client? Yes No
 - b) Treat the client respectfully? Yes No
 - c) Arrange for privacy? Yes No
- 2) Did the service provider ask the client:
- a) If she is breastfeeding? Yes No
 - b) If he or she has a history of high blood pressure? Yes No
 - c) Whether he or she has a regular partner? Yes No
 - d) What his or her future child bearing plans are? Yes No
 - e) What family planning methods he or she knew of or used? Yes No
 - f) About his or her interest in a particular family planning method? Yes No
- 3) During the consultation, did the service provider:
- a) Discuss the client's health? Yes No
 - b) Acknowledge and respond to the client's concerns? Yes No
 - c) Clarify any misinformation the client may have had about FP? Yes No

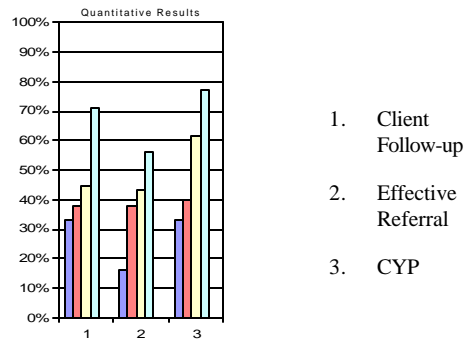
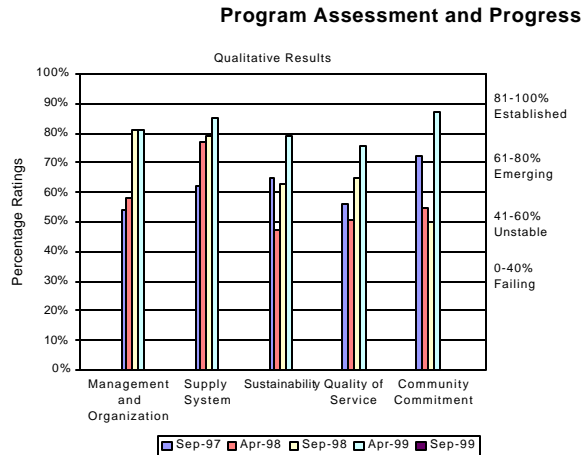
Step 3: Data Analysis. The team gathers to review data and create a list of problems or issues that need to be addressed. For example, using information from the above CBD-Client Observation, the following problems were identified.

Instrument Section Problems/Issues	
<p>a. Client counseling at Session opening</p>	<p>- CBD does not ask about client blood pressure history or breast feeding status</p> <p>- CBD does not ask about FP knowledge or method interest</p> <p>- CBD does not ask about client's overall health</p>

PIR lists the criteria that define high quality programs to help team members assess each instrument. After problems have been identified, teams can also translate the qualitative data in each instrument section to number ratings. In PIR this translation is called scoring. In addition to scoring instruments, the team analyzes data by compiling quantitative results, discussing problems, and preparing a graphic presentation of program performance.

An example of data represented quantitatively would look like this:

PROGRESS CHART EXAMPLE:



Step 4: Preparing an Improvement Plan.

Results are reviewed during a summary meeting that brings together the data collection team, CBDs, community representatives and other partners to discuss the results of the monitoring review. Action plans for addressing problems and improving program quality are defined and assignments for specific actions determined. The summary meeting is also a forum for continuing education.

The following action plan example is based on the information previously provided in instrument 6a.

ACTION PLAN EXAMPLE

Quality of Service			
Problem/Issue	Action	Responsible Party	Deadline
CBD does not take client history or preference for FP methods	CBD training and role playing	Supervisor	March
	CBD checklist for client meetings	Supervisor	March
	Increased CBD-client observations	Supervisor	March

EXAMPLES OF LESSONS LEARNED FROM PIR

A two-year field test of PIR with organizations providing integrated family planning services has shown it to be an effective tool for improving program performance, staff skills and knowledge, and community involvement and commitment. With appropriate adaptations, it has the potential for assisting other organizations with their community-based initiatives, e.g., safe motherhood or AIDS prevention and care.

The following represents some of the key lessons learned during the field test of PIR:

Management & Organization: Participation in routine program reviews helps build staff capacity and knowledge in family planning, problem solving, program management and relationships with partners.

Supply System: Community based workers have difficulty calculating supply needs. Supply systems function more effectively when they are as simple as possible and supervisors are trained to provide support to community workers.

Sustainability: Integrated programs are a cost-effective way of serving people. With lower costs, integrated programs face fewer sustainability challenges. Nonetheless, organizations need to make sustainability plans and put them into action in the first few months of the program since the establishment of sustainable programs takes time.

Quality of Service: CBD counseling and follow-up skills improve when supervisors have the experience,

training and motivation to provide support, review records and discuss problems with providers. Overall performance of CBDs and supervisors improves when they participate in regular structured reviews and receive feedback on performance.

Community Commitment: When community based workers provide consistent, quality services, even poor communities are willing to support programs financially.

EXPERIENCE FROM THE FIELD

CASP-PLAN, an NGO partner of PLAN India, implements a Maternal Health and Child Survival Project in a south Delhi slum area backed by 3 clinics and 87 volunteer Health Guides (HGs). They participated in a year-long study using the PIR process, conducted at 6 month intervals. Baseline use of Instrument 2b and 4 revealed that supervisors were uncertain about their roles, had limited training in supervision or contraceptive methods and spent little time in fostering community cooperation. The action plan called for supervisory training and increased communication among the community, HGs and supervisors. Six months later, community commitment shot up from 60 to 88%, supervisors expressed increased confidence and HGs expressed greater satisfaction with supervisors, receiving more time for problem solving discussions. Over the period of the study, quality of service rose from 44 to 59%. Review team members were able to clearly see program weaknesses and propose corrective actions.

CASP-PLAN India

PUBLICATIONS:

1. COPE Services: A process and Tools for Quality Improvement in Family Planning and Other Reproductive Health Services AVSC International, 1998
2. Integrating RH into NGO Programs Vol 1: Family Planning Lyons, J.V., Huddart, J.A. SEATS Project/Initiatives Inc 1997
3. Performance Improvement Review: A Quality Assurance Tool for Community Based Programs, Initiatives Inc. 1999

WEB LINKS FOR RH INFORMATION:

www.avsc.org
www.msh.erc.org
www.jsi.seats.org
www.initiativesinc.com

ISSUES WELCOMES CONTRIBUTIONS :

Send short articles, comments and suggestions to initiatives@att.net or mail to: Donna Bjerregaard, Editor, RHI Issues, Initiatives Inc. 276 Newbury Street, Boston, MA 02116

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