

BEHAVIOR PROFILE: HEALTH CARE WORKERS DELIVER QUALITY SERVICES

HEALTH SYSTEMS STRENGTHENING GOAL BEHAVIOR	<p>Catalyze transformation of a holistic health system to sustain equitable improvements in health for all</p> <p>Health care workers deliver quality services</p> <p>📈 Percentage of health facilities that have reached 85% based on the supportive supervision tool composite score</p>
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BEHAVIOR ANALYSIS		STRATEGY	
BEHAVIOR AND STEPS	FACTORS	SUPPORTING ACTORS AND ACTIONS	POSSIBLE PROGRAM STRATEGIES
<p>What steps are needed to practice this behavior?</p> <p>Behavior</p> <p>Health care workers deliver quality services as per National Guidelines</p> <p>Steps</p> <ol style="list-style-type: none"> Adhere to test and treat guidelines Adhere to counseling guidelines – use of job aids, techniques, etc. Respect clients throughout testing, treatment and counseling Engage community members Provide supportive supervision Use policy documents 	<p>What factors may prevent or support practice of this behavior?</p> <div style="background-color: #1a3d4d; color: white; padding: 2px; margin-bottom: 5px;">STRUCTURAL</div> <p>Accessibility: Health care workers do not deliver quality services because they do not have sufficient operational funds at facility level to ensure availability of requisite resources needed for optimal service delivery.</p> <p>Accessibility: Health care workers do not deliver quality services because they do not have available essential commodities needed to provide holistic services at health facilities.</p> <p>Accessibility: Health care workers do not deliver quality services because they do not have essential equipment as required because of inadequate finances to procure.</p> <div style="background-color: #1a3d4d; color: white; padding: 2px; margin-bottom: 5px;">INTERNAL</div> <p>Self-Efficacy: Health care workers do not deliver quality services because they have inadequate training and orientation at the preservice level (both knowledge and skills) to meet requirement of service delivery.</p> <p>Knowledge: Health care workers do not deliver quality services because they have limited knowledge on quality service delivery approaches due to ineffective and inefficient training methodologies.</p> <p>Knowledge: Health care workers do not deliver quality services because they have limited access to critical printed materials (resources such as guidelines, job aids) to support reinforce knowledge and retention.</p> <p>Skills: Health care workers do not deliver quality services because they do not receive coaching, mentoring , supervision and monitoring requisite for quality service delivery.</p>	<p>Who must support the practice of this behavior, and what actions must they take?</p> <div style="background-color: #1a3d4d; color: white; padding: 2px; margin-bottom: 5px;">INSTITUTIONAL</div> <p>Policymakers: Lead the co-creation of harmonized quality improvement approach with all stakeholders (Health facility regulatory authority, private sector, civil society) to ensure that relevant national policies are effectively implemented and monitored at all levels.</p> <p>Managers: Undertake leads periodic facility equipment mapping exercise to identify essential equipment gaps and make budgetary allocation to fill critical gaps at all levels.</p> <p>Managers: Efficiently plan and match entrant health cadres knowledge to requisite skills during deployment.</p> <p>Managers: Explore effective and efficient ways to improve health care workers access to required guidelines, job aides, protocols.</p> <p>Regional and Districts Officers: Provide financial management capacity building to facility heads.</p> <p>Regional and Districts Officers: Ensure adequately plan, budget and supervise effective management of resources at facility level.</p> <p>Regional and Districts Officers: Adequately plan, implement and follow up on supportive supervision visits.</p> <p>Heads of Facilities: Adequately record, track and request needed commodities.</p>	<p>What strategies will best focus our efforts based on this analysis?</p> <p>📌 <i>Strategy requires Communication Support</i></p> <div style="background-color: #1a3d4d; color: white; padding: 2px; margin-bottom: 5px;">ENABLING ENVIRONMENT</div> <p>Financing: Apply results based financing approaches as incentive for facilities providing quality services.</p> <p>Institutional Capacity Building: Provide opportunities to facility management to build resource mobilization and financial management skills for facility operations.</p> <p>Institutional Capacity Building: Develop competency based pre-service training programs.</p> <p>Institutional Capacity Building: Establish holistic training models such as leadership led quality improvement at all levels to ensure efficient and effective health care workers capacity building.</p> <p>Policies and Governance: Critically review HRH policies and adopt policies to effectively align pre-service education with national policies and guidelines.</p> <p>Policies and Governance: Support MOH to ensure that regulatory agencies are supported to undertake the necessary regulatory reforms and sanctions to improve service delivery.</p> <p>Policies and Governance: Support MOH to utilize its convening platform to strengthen leadership and national governance of quality management structures and processes. 📌</p> <div style="background-color: #1a3d4d; color: white; padding: 2px; margin-bottom: 5px;">SYSTEMS, PRODUCTS AND SERVICES</div> <p>Products and Technology: Adopt holistic equipment inventory needs assessment, procurement and maintenance.</p> <p>Supply Chain: Support Quality Unit of MoH to strengthen linkages between quality of care and supply chain and ensure that MoH/GHS leadership implement effective supply chain policies to ensure availability of commodities to end users. 📌</p> <p>Quality Improvement: Adopt uniform national monitoring, evaluation, and learning of quality improvement approaches for continuous health systems strengthening.</p>