

# PASSPORT

## Out of Ghana . . .

comes a process to set standards for training sites.

By Kama Garrison

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Here's the scenario: You're in Ghana, West Africa—a low-resource setting—and you need to have clinical training sites where health-care workers can learn and practice their skills. How do you go about ensuring that the appropriate environment exists to facilitate skill transfer? One way is to set facility standards prior to the training to assess whether you can transform the existing clinics into clinical training sites.

In Ghana, a team of representatives from the Ministry of Health and the

JHPIEGO Corporation faced a challenge: Hundreds of midwives needed to receive training each year, but their clinical training sites were in need of improvements.

Many employees expressed doubt that their clinics could handle the additional burden of training. JHPIEGO and MOH needed to develop a clear and simple process that defined the desired standards to provide more-effective training for health personnel. Here's the five-step process.

**Step 1: Revisit skills.** Most professions assume several skills, so it's necessary to examine carefully the skills that you plan to train. Clearly identify the targeted skills with a representative group of stakeholders, including supervisors and employees who perform the particular job.

Although the decision about which skills to teach was probably made before you were called in, it's important to discuss them again to

- ensure that you have consensus among the parties involved
- engage employees in the decisions
- encourage employees to take responsibility for their training.

In Ghana, conversations with representatives from the nursing and midwifery schools, clinics, and district Ministry of Health brought to light a discrepancy between which skills required training and what employees believed the infrastructure, supplies, and staff could support. For example, although training was requested for certain maternal emergency procedures, many employees believed their clinics weren't equipped to provide that type of emergency care.

**Step 2: Cluster categories.** Keeping in mind the skills requiring training, ask the core group to describe what a model training site would look like. A facilitation technique that works well is the clustering activity.

Divide stakeholders into groups of three to four. If job levels are an issue, group participants accordingly. (For example, we placed all of the MOH officials in one group and all of the physicians in another group.) Ask participants to brainstorm words or phrases that describe their requisites for a training site, using large sheets of paper on which to write five to seven of the most important site characteristics.

Post the sheets on a wall, and have participants read them. Reconvene, and read each sheet aloud. Determine, as a group, which characteristics are related and cluster them into common areas. For example, group together all words and phrases related to coaching and mentoring skills.

Once you've categorized all of the characteristics, select a title that describes each cluster. Most likely, you'll have clusters specific to the organization, processes within the organization, and individual skills necessary to run the organization. Those individual clusters



Two health workers attending to a client at a birthing center; MNH Program clinical training on mothers and neonates.

become the basis for developing work-site performance standards.

That activity worked well in Ghana because group members agreed on what was essential for a clinical training site and because everyone had an opportunity to state his or her view.

**Step 3: Cross-reference.** Categories that evolve from the clustering activity are usually similar between clinical training sites. They also tend to focus on each site's infrastructure, staff and skills, supplies and equipment, and services or products.

Form groups of two to four, and ask them to cross-reference the list of categories and the skills requested in step 1.

The Ghanaian group divided into small groups. Each group addressed one or two of the requested skills and went through the categories to determine the minimum requirements for teaching those skills on site.

Here's an example: In a health-care facility, you may need to teach prenatal examination skills. Review each category formed in step 2 for the skill "prenatal examination," asking these questions:

- What kind of infrastructure is needed (type of exam room, number of exam rooms, waiting areas, toilet facilities, training areas, and so forth)?
- Which employees are involved in the exam process?
- What supplies are required?
- What services are offered?

Thus, each group creates a training checklist for the required skills they selected.

**Step 4: Exchange documents.** To give everyone a chance to provide feedback (and for some objectivity), ask the groups to trade documents on an ongoing basis.

**Step 5: Synthesize standards.**

After breaking down each skill, make a list of desired standards for each of the categories defined in the clustering activity.

The MOH and JHPIEGO representatives developed their list into an assessment instrument for the clinics and continue using it to assess a clinic's potential as a future training site. The ministry is also considering using the assessment to supervise the clinics already approved as clinical training sites to keep standards high.

A lot of work? Yes. But if you skip the steps, you waste time trying to train at a worksite that can't support your effort.

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