MENTORING IN OCB HIV/TB PROJECTS

September 2018
**THE FUNDAMENTAL QUESTIONS**

1. Why do we do MSF-MoH partnerships in HIV/TB MSF Projects?

2. What possible modalities exist to support performance within a partnership?

3. Do we believe mentoring will work as a training approach?

   → Is Mentoring = adequate & deliberate strategic choice?
WHY DO WE DO MSF-MOH PARTNERSHIP?

Partnership →
1. Increase access to HIV/TB care by increasing coverage
2. Increase quality of care when up-skilling HCW
3. Prepare exit strategy since it fosters sustainability (assumption)

Full hand-on / Substitution → Proof of concept (develop toolkit)
MSF-MOH PARTNERSHIP VS MENTORING

MSF ROLE IN SUPPORTING MoH HC PERFORMANCE

Support MoH in doing Supervision

Supportive Supervision activities

Mentoring

‘Quality Improvement’ (Iterative dashboards)

M&E

Tools
(Algorithms, Facility check-list, m-health simulated Patients, Job Aids…)
### Different Activities → Different Skills

#### Supportive / Formative Supervision Activities

- Patient flow and triage
- Clinic organization
- Case management observation
- Group (classroom) trainings
- Journal club
- Team meetings
- Review of referral decisions
- Support Patient monitoring & record-keeping

- Confidential Individual Feedback
- Clinical case review
- Bedside teaching (consultation, ward rounds)
- Morbidity and mortality rounds
- Assist with care & referral of complicated cases

#### Other Teams

- Infrastructure improvement
- Supply when stock-outs

#### M&E Team (D)

- Patient-centered data collection
- Facility aggregated data collection
- Data analysis
- Line-list of patients-of-interest production

#### Supervision (S)

- Feedback on Facility Performance (Dashboard)
- Reporting
- IPC
- Equipment & forms supply
- Stock-out monitoring
- Staffing & other HR management
- Patient satisfaction
- Finance (running costs, payment by performance)

#### Mentoring (M)

- Support Patient monitoring & record-keeping
AVAILABLE TO SUPPORT PROJECTS: A MENTORING TOOLKIT

- Mentoring Program Guide
- Mentoring Program F/U tool
- Training of Trainers/Mentors
- Mentoring Job Aide
- Mentors Supervision Tools
- Mentoring Tools (Mentors/ees/M&E)
LESSONS LEARNT: 8 SUCCESS FACTORS

- Program planning & structuring (opening/closing + Objectives)
- Selection & training of Mentors
- M&E
- Accreditation (or at least certification)
- Other factors?
- Prior communication & briefing w/ partner at all levels
- Support & involvement of leadership
- Formalisation by contract
- Share results / feedback on process w/ all levels of partner org.
1. PROGRAM PLANNING & STRUCTURING

NEEDS ANALYSIS
- Health Needs → Training Needs

PROGRAM STRUCTURE
- Around LEARNING OBJECTIVES
  - Within a TIMEFRAME - 3 phases

WHO → What tasks should they be able to do?
Where & When?
2. SELECTION & TRAINING OF MENTORS

Technical Skills
(Clinical/counselling/…)

Communication Skills

Teaching Skills
3. SUPPORT FROM LEADERSHIP

- Beneficiaries
- Mentees
- Mentors
- PMR & FieldCo
- MedCo
- HQ

SUCCESS
4. ACCREDITATION

- What’s in it for the mentee?
  - Accreditation / Academic or professional body
  - MSF/MoH joint Certification
  - MSF Certificate
- Set minimum standards
5. PRIOR COMMUNICATION WITH PARTNER

- All stakeholders
- At each level

Need to know:
- What to expect
- What they would commit to

To foster **BUY-IN**!
6. FORMALIZATION BY CONTRACT

- Formalize Commitments and expected outcomes
- At all levels of responsibility

→ MoUs / Agreements
7. M & E

**Mentee**
- Individual purpose (certificate)
  - attendance, progress in knowledge & competence
- Anonymous / aggregated for programmatic purposes (availability of services)

**M-M relationship**
- Confidential – to detect problematic relationships

**Mentor**
- Mostly for management & support purpose

**Impact**
- @ facility-level = process indicators
- @ community health level = outcome indicators
**IMPACT @ 2 LEVELS**

**Facility**
- Availability of services
- Good quality services
- Free through MoH

**Patients’ Health = output & outcome indicators**
- Patients are detected
- Started on treatment
- With adequate monitoring
- Retained into care
8. REPORTING & SHARING RESULTS

Log-Frame
- MSF-only
- Annual report?

Dashboard
- Relevant indicators for facility
- Print facility-centered one to show evolution
- Debrief on comparative achievements quarterly

Other (visually- / user-friendly) formats
- In order to aggregate data (confidentiality)
- For quarterly debriefing
- Consider if relevant