Overcoming Obstacles, Increasing Access
Improving Maternal and Infant Care

To strengthen maternal and infant health in rural Armenia, the PRIME II Project is applying a Performance Improvement (PI) approach to build the capacity of primary providers and facilities. A systematic methodology with associated tools, PI provides a step-by-step process for identifying performance gaps and selecting and designing interventions to close those gaps.

Focus on Primary-Level Services
PRIME's work in Lori, an administrative province of 280,000 people on Armenia's northern border with Georgia, is a component of the Project's assistance to the Ministry of Health (MOH) as part of national health sector reform. Since declaring independence from the Soviet Union in 1991, Armenia has been in a state of transition from highly specialized, hospital-oriented health care to a family medicine model emphasizing primary-level service delivery. PRIME is helping to improve the quality and accessibility of reproductive health (RH) services through policy and protocols development, system strengthening, in-service training, pre-service education and community outreach.

The health status of Armenia’s population is generally poor and use of RH services has declined, with growing trends toward delayed prenatal care, births at home, rising infant and maternal mortality and morbidity, and increasing prevalence of sexually transmitted infections. Rural areas in Lori are disproportionately affected by these obstacles to public health. Focusing on basic prenatal care, postpartum and infant care, recognition and management of complications and community education, PRIME's interventions target approximately half of the health care facilities in Lori including maternity hospitals, polyclinics, ambulatories and health centers (with doctors) and health posts staffed by nurses and midwives.

Performance Needs Assessment
As the initial step in the PI process, PRIME conducted a performance needs assessment of RH providers. Data collectors observed real and simulated client-provider interactions, assessed provider views on performance and defined critical performance gaps in all five performance factors:

• Clear performance expectations
• Timely performance feedback
• Adequate environment and tools
• Internal motivation and/or external incentives
• Knowledge and skills.
Defining Desired Performance

Defining desired performance for the various cadres of RH providers—an essential step in the PI approach—has necessitated an ongoing process with stakeholders at various levels of the health care system. National decision-makers are further along than local stakeholders, particularly obstetricians, in accepting new RH policies and protocols that expand the role of non-physicians in care provision. While working to validate national guidelines, PRIME has developed and validated project-based protocols to guide providers in Lori. PRIME intends to use project results to demonstrate the feasibility of greater levels of performance by nurses and midwives in offering basic reproductive and child health care.

Preliminary Results

PI interventions to close performance gaps have been under way since June 2003 in target facilities in Lori and preliminary results show encouraging gains in four of the performance factors:

Knowledge and Skills: A blended learning approach has been used to train 61 providers in two clinical skills modules, infection prevention and prenatal care. The approach includes checklists, a clinical practice environment, self-paced study in eight modules, facilitator mentoring and paired learning. Learners improved their knowledge assessment scores from 83% pre-module to 93% post-test in infection prevention and from 83% pre-module to 94% post-test in prenatal care.

Adequate Environment and Tools: PRIME has helped leverage equipment and supplies from USAID (equipment for rural health posts), International Relief and Development (basic drugs), Carelift International (equipment for referral maternity hospitals), and the Jinishyan Memorial Foundation (free client education materials).

Clear Performance Expectations, Timely Performance Feedback: To strengthen management and supportive supervision, PRIME has developed supervision guidelines including job descriptions, supervisory structures and tools.

This progress in quality improvement has been matched by increased use of services: average monthly prenatal care visits at target health posts have increased from 1.2 at baseline to 4.1 as of September 2003.