PRIME II is helping the Rwanda Ministry of Health (MOH) build partnerships between reproductive health care providers and the communities they serve. In order to explore community and health worker definitions of quality, PRIME facilitated discussions with stakeholder groups including the MOH, mutuelle committees, health committees and elected officials. In addition, PRIME II worked with MOH staff at four pilot site health centers in two health districts, Byumba and Kabgayi, to explore definitions of quality. These dialogues revealed that community members and providers agree on a majority of issues—both clinical and social—that are related to quality of services. The two perspectives were brought together for the first time to identify quality of care issues and develop activities to address problems. This process was adapted from Save the Children’s Partnership Defined Quality (PDQ) approach, which is known in Rwanda as Partenariat pour l’amélioration de la Qualité (PAQ), or “Partnerships For Improved Quality.”

A January 2003 evaluation found that significant process results have been achieved in the six months since the introduction of PAQ in the four pilot health centers. Medicine is no longer out of stock; buffer stocks are in place; communication has increased between the health committee and PAQ members; mutuelle membership rates have increased from 5% to 20%; patients have a reduced waiting period; and health center cleanliness has improved. Between January and May 2003, PRIME II began PAQ activities in four additional health centers and their catchment areas and assisted the four original PAQ teams, according to plan, to start operating autonomously. PAQ will be expanded to 18 new sites in all seven PRIME II-supported health districts.

Ghana: Training of Community Health Officer Supervisors using On-the-Job Training Approach

The Ghana Health Service (GHS) is implementing community-based health planning and services (CHPS) to ensure accessible health care for the majority of the country’s rural population. An estimated 250 Community Health Officers (CHOs) in 28 districts provide a wide variety of basic services at the community level including family planning. The CHOs have different educational backgrounds, work experiences, and levels of skills, and are relatively new to their positions. Although PRIME conducted a two-week orientation for 170 CHOs and 80 of their immediate supervisors to prepare the CHOs, comprehensive and continuous post-training support is required in order for the CHOs to meet performance expectations.
From March 11-28, 2003, PRIME II supervision specialist Maj-Britt Dohlie helped the GHS strengthen on-the-job training (OJT) and supervisory skills for CHO supervisors. PRIME II conducted two OJT workshops in March 2003 for CHO supervisors from four regions: Greater Accra, Eastern, Central and Western. Pre- and post-tests indicated increased knowledge relating to OJT and supervision, with group scores rising from 45% to 71% for the first workshop and from 54% to 86% for the second. Each five-day workshop included theory as well as practice. Selected CHO supervisors visited a CHO to apply their new knowledge and skills, while other participants supported and observed the supervisor during the visit. At the end of the workshops, the supervisors developed solid plans to improve how they work. The workshops also offered an opportunity for peer learning among CHO supervisors from advanced areas and those working where CHPS has been slower getting off the ground. PRIME II will continue to support GHS through skills transfer workshops for the CHO supervisors. Six workshops are planned to train a minimum of 60 additional CHO supervisors through September 2004.

* Note: In the July-December 2002 PRIME Post the estimated number of CHOs was stated as 2500. The actual estimated number is 250.

Introducing the new Regional Director

PRIME II is pleased to announce that Laura Hoemeke has joined IntraHealth as the new Regional Director for West and Central Africa. Laura brings 14 years of experience in health communication and international health, beginning with three years as a Peace Corps health education volunteer in the Central African Republic. After receiving her MPH in International Health from Johns Hopkins University, Laura took a position with Africare where she carried out multiple child survival, malaria control, AIDS education, and food security programs in 15 African countries.

Laura joins us from USAID/Benin where she was the Technical Advisor for the Family Health Team and a Population Leadership Program Fellow. During her four years at the Mission, she worked closely with the MOH, various international agencies and with PRIME II’s Benin country office and regional office. Laura served as a technical liaison and was involved in policy development and implementation in maternal and child health, reproductive health and HIV/AIDS. Laura’s talents and experience, as well as her familiarity with PRIME and partners in the WCA region and Washington, will truly be an asset to the region and the PRIME II Project.