



# Supervising Healthcare Services: Improving the Performance of People

Course Handbook  
for Participants

**JHPIEGO** An Affiliate of  
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University

WORKING TO IMPROVE THE HEALTH OF WOMEN AND FAMILIES THROUGHOUT THE WORLD

JHPIEGO, an affiliate of Johns Hopkins University, builds global and local partnerships to enhance the quality of health care services for women and families around the world. JHPIEGO is a global leader in the creation of innovative and effective approaches to developing human resources for health.

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# **SUPERVISING HEALTHCARE SERVICES: IMPROVING THE PERFORMANCE OF PEOPLE**

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# OVERVIEW

Training interventions to improve worker performance are among the most important aspects in the development of human resources. Healthcare providers must have the knowledge, attitudes, and skills required to perform their jobs in a competent and caring manner. Training deals primarily with making sure that learners acquire the knowledge, attitudes, and skills needed to carry out specific procedures or activities (such as antenatal care, infection prevention and control, or counseling for voluntary HIV testing) and helping learners apply this procedure or activity on the job. The goal of training is to assist healthcare workers in learning to support and provide safe, high-quality reproductive health services through improved work performance.

## COMPETENCY-BASED TRAINING

This training course for supervisors is designed to enable learners to immediately apply, on the job, the new information and skill(s) they have learned, and thus improve their performance. The course uses a competency-based learning approach that focuses on the specific knowledge, attitudes, and skills needed to carry out a procedure or activity. Competency-based learning is learning by doing—learning that emphasizes how the learner performs (i.e., a combination of knowledge, attitudes, and most important, skills). The trainer assesses learners' skill competency by evaluating their overall performance.

Learning to perform a skill occurs in three stages:

*Skill acquisition:* The learner knows the steps and their sequence (if necessary) to perform the required skill or activity but needs assistance

*Skill competency:* The learner knows the steps and their sequence (if necessary) and can perform the required skill or activity

*Skill proficiency:* The learner knows the steps and their sequence (if necessary) and efficiently performs the required skill or activity

In the first stage, skill acquisition, learners attend a series of interactive and participatory sessions conducted by the trainer. The trainer involves the learners through a variety of learning methods including the use of questions, role plays, case studies, and problem-solving activities. In addition, the trainer demonstrates skills through role plays and with anatomic models or in simulations as learners observe and follow the steps in a competency-based learning guide (see below). As learners practice these skills, the trainer observes, provides feedback,

and encourages the learners to assess each other using the learning guide. Learners practice until they achieve skill competency and feel confident performing the procedure. The final stage, skill proficiency, occurs only with repeated practice over time.

## **ASSESSMENT OF KNOWLEDGE AND SKILLS**

Assessment of learners' knowledge and skills is an essential component of training and learning interventions. Learners should be aware of how and when they will be assessed. Assessment of their knowledge and skill performance should be made throughout the course using objective assessment methods, described below.

- Knowledge assessment occurs with the administration of a precourse questionnaire on the first day of the course. Learners score their own questionnaire because the purpose is to help them see the important content areas of the course.
- The trainer gives a postcourse questionnaire at the point during the course when all of the knowledge content has been presented. Learners must achieve a score of at least 85% to demonstrate that they have achieved the learning objectives. The trainer gives learners who did not achieve a score of at least 85% correct another opportunity to study and answer the items they missed.

This means that learners know, from the beginning of the course, the basis on which the trainer will assess their competency. Assessment of learning in competency-based training is

- dynamic, because learners receive continual feedback and have ample opportunity for review and discussion with the trainer; and
- less stressful, because learners know from the beginning what they are expected to learn.

This interactive approach is the essence of competency-based training—and it is distinctly different from traditional training. In competency-based training, the learner is an active participant in the learning process. The trainer acts as a coach and is also actively involved in transferring new knowledge, attitudes, and skills through demonstration and regular feedback:

- Before skills practice—The trainer and learners meet briefly before each practice session to review the skill/activity, including the steps or tasks that will be emphasized during the session.

- During skills practice—The trainer observes, coaches, and provides feedback to the learner as s/he performs the steps or tasks outlined in the learning guide.
- After skills practice—Immediately after practice, the trainer uses the learning guide to discuss the strengths of the learner’s performance and also offer specific suggestions for improvement.

## A SUPPORTIVE ENVIRONMENT FOR LEARNING

Competency-based training is most effective when there is a supportive environment at the learner’s workplace. In addition to the healthcare worker who attends the course and the trainer who conducts it, supervisors and co-workers play a critical role in helping create and maintain this environment. All of these individuals have responsibilities before, during, and after a training course. By working as partners, they can help sustain the knowledge and skills learned during training and, ultimately, the quality of clinical services. This process is called “transfer of learning.” It is described in the next section.

## TRANSFER OF LEARNING <sup>1</sup>

Transfer of learning is defined as *ensuring the knowledge and skills acquired during a learning intervention are applied on the job.*

The clinical knowledge and skills of providers are a critical factor in providing high-quality healthcare services. However, providers may acquire new knowledge and skills only to find that they are unable to use, or transfer, these new skills at their workplace. There are several inter-related factors that support good performance in the workplace, as described below.

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<sup>1</sup> Adapted from: PRIME II and JHPIEGO Corporation. 2002. *Transfer of Learning: A Guide for Strengthening the Performance of Health Care Workers*. IntraH: Chapel Hill, NC.

THE PERFORMANCE FACTORS	POSSIBLE INTERVENTIONS
1. Job expectations <i>Do providers know what they are supposed to do?</i>	Provide adequate performance standards and detailed job descriptions Create the necessary channels to communicate job roles and responsibilities effectively
2. Performance feedback <i>Do providers know how well they are doing?</i>	Offer timely, constructive, and comprehensive information about how well performance is meeting expectations
3. Physical environment and tools <i>What is the work environment like, and what systems are in place to support it?</i>	Develop logistical and maintenance systems to provide a satisfactory physical environment and maintain adequate supplies and equipment Design work space to suit activities
4. Motivation <i>Do people have a reason to perform as they are asked to perform? Does anyone notice?</i>	Seek provider input to identify incentives for good performance Provide positive consequences for good performance and neutral or negative consequences for below standard performance Encourage co-workers to support new skills
5. Skills and knowledge to do the job <i>Do providers know how to do the job?</i>	Ensure job candidates have prerequisite skills Provide access to trainers and information resources Offer appropriate learning opportunities

The final factor on the list, required knowledge and skills, is addressed primarily through training and learning interventions. Transfer of learning to the workplace is critical to improving job performance. The key individuals involved in this process include:

**Supervisors.** Responsible for monitoring and maintaining the quality of services and ensuring healthcare workers are properly supported in the workplace.

**Trainers.** Responsible for helping healthcare workers acquire the necessary knowledge and skills to perform well on the job.

**Healthcare workers.** Responsible for the delivery of high-quality services (e.g., clinicians, counselors, administrators, cleaners).

**Co-workers.** Responsible for supporting learners while they are engaged in training and as they apply new knowledge and skills at the workplace.

The “transfer of learning” process describes the tasks that supervisors, trainers, learners, and co-workers undertake before, during, and after training in order to assure transfer of knowledge and skills to the workplace. The goal is for learners to transfer 100% of their new knowledge and skills to their jobs. The following matrix outlines these

specific tasks. The tasks that trainers and learners should do during the learning experience appear **in bold** in the matrix.

## TRANSFER OF LEARNING MATRIX

	<b>Before Learning</b>	<b>During Learning</b>	<b>After Learning</b>
<b>Supervisors</b>	<ul style="list-style-type: none"> <li>• Understand the performance need</li> <li>• Participate in any additional assessments required for training</li> <li>• Influence selection of learners</li> <li>• Communicate with trainers about the learning intervention</li> <li>• Help learners create a preliminary action plan</li> <li>• Support and encourage learners</li> </ul>	<ul style="list-style-type: none"> <li>• Participate in or observe training</li> <li>• Protect learners from interruptions</li> <li>• Plan post-training debriefing</li> <li>• Provide supplies and space and schedule opportunities for learners to practice</li> </ul>	<ul style="list-style-type: none"> <li>• Monitor progress of action plans with learners and revise as needed</li> <li>• Conduct post-training debriefing with learners and co-workers</li> <li>• Be a coach and role model—provide encouragement and feedback</li> <li>• Evaluate learners' performance</li> <li>• Stay in contact with trainers</li> </ul>
<b>Trainers</b>	<ul style="list-style-type: none"> <li>• Validate and supplement the results of the performance needs assessment</li> <li>• Use instructional design and learning principles to develop or adapt the course</li> <li>• Send the course syllabus, objectives and pre-course learning activities in advance</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Provide work-related exercises and appropriate job aids</b></li> <li>• <b>Give immediate and clear feedback</b></li> <li>• <b>Help learners develop realistic action plans</b></li> <li>• <b>Conduct training evaluations</b></li> </ul>	<ul style="list-style-type: none"> <li>• Conduct follow-up activities in a timely manner</li> <li>• Help strengthen supervisors' skills</li> <li>• Facilitate review of action plans with supervisors and learners</li> <li>• Share observations with supervisors and learners</li> <li>• Maintain communication with supervisors and learners</li> </ul>
<b>Learners</b>	<ul style="list-style-type: none"> <li>• Participate in needs assessments and planning</li> <li>• Review course objectives and expectations and prepare preliminary action plans</li> <li>• Begin establishing a support network</li> <li>• Complete pre-course learning activities</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Participate actively in the course</b></li> <li>• <b>Develop realistic action plans for transferring learning</b></li> </ul>	<ul style="list-style-type: none"> <li>• Meet with supervisor to review action plan</li> <li>• Apply new skills and implement action plan</li> <li>• Use job aids</li> <li>• Network with other learners and trainers for support</li> <li>• Monitor your own performance</li> </ul>
<b>Co-workers and others</b>	<ul style="list-style-type: none"> <li>• Participate in needs assessments and discussions of the training's intended impact</li> <li>• Ask learners to bring back key learning points to share with the work group</li> </ul>	<ul style="list-style-type: none"> <li>• Complete learners' reassigned work duties</li> <li>• Participate in learning exercises at the request of learners</li> </ul>	<ul style="list-style-type: none"> <li>• Be supportive of learners' accomplishments</li> </ul>

As outlined in the matrix, transfer of learning is a complex process. An action plan can help make the process easier for all of the individuals involved. An action plan is a written document that describes the steps that supervisors, trainers, learners, and co-workers will complete to help maximize the transfer of learning.

An action plan should be initiated before the training intervention so that everyone who can support the transfer of learning is involved from the beginning. The learners refine their plan during the training course and usually do not complete it until after the course when they are using their new skills on the job. The content and layout of an action plan should support the users of the plan, especially the learners. In developing an action plan, keep in mind these important points:

- Write activities as discrete steps that are realistic, measurable, and attainable.
- Identify clear responsibilities for learners, supervisors, co-workers, and trainers.
- Develop a specific time schedule for completing activities.
- Identify resources necessary to complete the activities, including plans for acquiring those resources.
- Instruct learners to use a learning journal to help facilitate the development of an action plan. A learning journal is a notebook in which learners document issues, problems, additional skills they need to develop, and questions that arise as they apply their new knowledge and skills on the job.

Developing an action plan should be included in the training course. If it is not, however, learners can take the initiative to develop an action plan on their own. See page 7 for a sample of a completed action plan. This example is very detailed. This level of detail may not always be necessary, depending on the performance problem and the learning intervention being undertaken.

A blank action plan format can be found on page 9. Learners may copy this for their use or develop their own format.

## EXAMPLE OF A COMPLETED ACTION PLAN

**Action Plan Goal:** Implementation of the New National Guidelines for Essential Maternal and Neonatal Care (EMNC)

**Facility:** Mercy Hospital

ACTIVITY	WHO DOES IT?	RESOURCES NEEDED	DATE NEEDED	HOW TO MONITOR THE ACTIVITY	RESULT AND HOW TO MEASURE
Acquire sufficient quantities of the service delivery guidelines to serve the needs of the facility.	Sister-in-charge	Copies of the service provision guidelines	31 March 2004	Copies of the service provision guidelines are available and used by all staff.	By December 2004, 90% of doctors and nurses will be providing EMNC services according to new national service provision guidelines.  Observe clinical practice in comparison with clinical protocols.
Participate in the Orientation Seminar of the District Health Management Team (DHMT).	Sister-in-charge and senior nurse/midwife	Transport and daily expenses	21 April 2004	Sister-in-charge demonstrates familiarity with contents of service provision guidelines by conducting an accurate staff orientation.	
Conduct orientation of all staff from the Maternity Ward.	Sister-in-charge and senior nurse/ midwife	Copies of the service provision guidelines	31 May 2004	Staff demonstrates familiarity with contents of service provision guidelines through participatory discussion led by sister-in-charge.	
Form Job Aids Committee.	Senior nurse/ midwife	None	31 May 2004	Committee exists and is creating job aids.	
Have Job Aids Committee review guidelines and identify clinical protocols to post on the walls of the Maternity Ward.	Senior nurse/ midwife	Copies of the service provision guidelines, pen and paper	15 June 2004	Observe minutes of the meeting.	
Make enlarged photocopies of the selected clinical protocols.	Job Aids Committee representative	Transport and funds to make photocopies	21 June 2004	Photocopies exist.	
Post clinical protocols on the walls and show to staff.	Job Aids Committee representative	Tape	30 June 2004	Observe that protocols are posted on the walls and referred to on a regular basis.	



**EXAMPLE OF A BLANK ACTION PLAN**

**Performance Gap Addressed:** \_\_\_\_\_

**Action Plan Goal:** \_\_\_\_\_

**Facility:** \_\_\_\_\_

<b>ACTIVITY</b>	<b>WHO DOES IT?</b>	<b>RESOURCES NEEDED</b>	<b>DATE NEEDED</b>	<b>HOW TO MONITOR THE ACTIVITY</b>	<b>RESULT AND HOW TO MEASURE</b>



# INTRODUCTION

## COURSE DESIGN

The “Supervising Healthcare Services: Improving the Performance of People” course is designed to help supervisors of healthcare services improve the performance of the healthcare delivery system to ensure the provision of high-quality services. The course builds on each participant’s past knowledge and takes advantage of the individual’s high motivation to accomplish the learning tasks in the minimum time. Training emphasizes **doing**, not just knowing, and uses **competency-based evaluation** of performance, relying heavily on **followup** of participants at their place of work.

The development of a healthcare services supervisor has three components:

- **Clinical knowledge and skills update.** The healthcare services supervisor should have up-to-date knowledge about the services available at the healthcare delivery site. When appropriate, the supervisor should also be competent at providing these services. This knowledge and skills update should take place before the supervisor attends this supervision course, and is not necessarily offered in conjunction with this course.
- **Development of essential supervision skills.** This supervision course includes opportunities to practice essential supervision skills.
- **Application of supervision skills on the job.** The supervisor will return to the healthcare delivery site to apply the knowledge and skills acquired during this supervision course and receive followup visits by the trainer.

There is a **model course schedule** provided in this handbook. The design of the model course schedule is based on the assumption that those attending the course are healthcare services supervisors who have had their knowledge and skills updated. The model **course outline** in the trainer’s notebook describes how to conduct each session appearing in the course schedule.

- During the morning of the first day of the course, participants demonstrate their knowledge of supervision by completing a written test (**Precourse Questionnaire**).
- Classroom sessions focus on key aspects of supervision.

- Progress in knowledge-based learning is measured at the end of the course using a standardized written assessment (**Postcourse Questionnaire**).
- Progress in learning supervision skills, such as setting performance standards for a healthcare delivery facility and conducting a supervisory assessment, is documented through trainer observations.

It is recommended that the trainer, in facilitating this supervision course, frame the course around other ongoing interventions. This means that supervision training should not be taught as a stand-alone subject. Supervision training has been found to be much more effective if placed within the context of an area in the clinic that needs improvement, such as infection prevention—a cross-cutting area for strengthening in many healthcare facilities. Experience has shown that this kind of linkage provides a valuable opportunity for supervisors to return to the worksite and immediately “try out” their new skills, applying them to subjects in which they have recently been updated. This practice also allows for reinforcement of the skills, which in time can be easily transferred to the whole clinic.

## EVALUATION

This course is designed to produce competent supervisors of healthcare services. Qualification as a supervisor usually is attained through successful completion of the course, followed by one or more site visits by the trainer.

Qualification is a statement by the training organization that the participant has met the requirements of the course in knowledge, skills, and practice. Qualification does **not** imply certification. Personnel can be certified only by an authorized organization or agency.

Qualification is based on the participant’s achievement in three areas:

- **Knowledge**—A score of at least 85% on the Postcourse Questionnaire
- **Skills**—Satisfactory performance of essential supervision skills
- **Practice**—Demonstrated ability to supervise healthcare services

Responsibility for each participant’s becoming qualified is shared by the participant and the trainer. Therefore, from the outset, the trainer must be committed to following up on participants’ performance to help facilitate the transfer of training.

The evaluation methods used in the course are described briefly below:

- **Postcourse Questionnaire.** This knowledge assessment will be given at the time in the course when all subject areas have been presented. A score of 85 percent or more correct indicates knowledge-based mastery of the material presented in the reference manual. For participants scoring less than 85 percent on their first attempt, the trainer should review the results with each participant individually and provide guidance on using the reference manual to learn the required information. Participants scoring less than 85% can take the Postcourse Questionnaire again.
- **Skills.** Satisfactory performance of essential supervision skills observed during the course.
- **Practice.** Demonstrated ability to supervise healthcare services. Following the supervision course, the trainer will visit the supervisor to observe, coach, and assist the supervisor.

## **COURSE SYLLABUS**

### **Course Description**

This 5-day training will focus on essential supervision skills for the healthcare services supervisor. Topics presented include an introduction to supervision, defining desired performance, assessing performance, finding the root causes of performance gaps, selecting and implementing interventions, monitoring and evaluating performance, and working with people.

### **Course Goal**

To prepare healthcare services supervisors to improve the performance of the healthcare delivery system and to ensure the provision of high-quality services.

### **Participant Learning Objectives**

By the end of the training course, the participant will be able to:

1. Define the role of the supervisor in the performance and quality improvement process
2. Define desired performance for a healthcare delivery site
3. Assess performance
4. Find root causes of performance gaps

5. Select and implement appropriate interventions to improve performance
6. Monitor and evaluate performance
7. Work with people effectively

### **Training/Learning Methods**

- Illustrated lectures and group discussions
- Individual and group exercises
- Role plays
- Guided practice activities in supervision skills, with feedback from participants and trainers

**Learning Materials.** This course handbook is designed to be used with the following materials:

- Reference manual: *Supervising Healthcare Services: Improving the Performance of People* (JHPIEGO)
- The national service delivery guidelines for the country in which the course is being conducted (one copy for every four participants)
- Sample job descriptions from the country in which the course is being conducted
- International guidelines: *Managing Complications in Pregnancy and Childbirth: A Guide for Midwives and Doctors* (World Health Organization) or other international guidelines that may be appropriate (one copy to share, if available)

### **Participant Selection Criteria**

Participants for this course should be supervisors of healthcare services. In addition, they should be currently supervising services in a healthcare site.

## **Participant Precourse Assignment**

Participants should be sent a letter inviting them to attend the course. Based on discussions with their supervisor, they should bring the following with them to the course:

- A list of areas that work well within their facility, as well as a list of areas where there are problems or where improvements could be made (e.g., quality of services provided, logistics management, feedback from the community)
- A copy of their job description (if available)
- Facility or clinic guidelines or standards (if available)
- A list of action plan steps the participant and her or his supervisor would like to see implemented based upon the knowledge and skills acquired in this course

## **Methods of Evaluation**

### ***Participant***

- Pre- and Postcourse Questionnaires
- Action Plan and followup of supervisor by the trainer

### ***Course***

- Course Evaluation (to be completed by each participant)

## **Course Duration**

- 10 sessions in a 5-day sequence

## **Suggested Course Composition**

- Up to 20 healthcare supervisors
- 2 trainers of supervisors

**MODEL COURSE SCHEDULE FOR SUPERVISING HEALTHCARE SERVICES: IMPROVING THE PERFORMANCE OF PEOPLE (5 days, 10 sessions)**

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5
<b>A.M.</b>	<b>A.M.</b>	<b>A.M.</b>	<b>A.M.</b>	<b>A.M.</b>
<p><b>Opening:</b> Welcome and introductions</p> <p>Overview of the course (goals, objectives, schedule)</p> <p>Review course materials</p> <p>Identify participant expectations</p> <p>Precourse questionnaire</p> <p>Identify group and individual learning needs</p> <p><b>Activity:</b> What works and what does not</p>	<p>Agenda and opening activity</p> <p><b>Chapter 2: Defining Desired Performance:</b> Setting performance standards</p> <p><b>Activity:</b> Create a shared vision</p> <p><b>Activity:</b> Setting performance standards for something familiar to the participants (e.g., taxi, bus, market)</p> <p><b>Activity:</b> Setting performance standards for a healthcare facility</p>	<p>Agenda and opening activity</p> <p><b>Chapter 4: Finding Root Causes:</b> Finding causes of poor performance</p> <p><b>Discussion:</b> Why-Why Diagrams</p> <p><b>Chapter 5: Selecting and Implementing Interventions</b> This time is devoted to learning about specific interventions appropriate for those attending this course; examples include clinical, learning, transfer of training, motivational, logistic, leadership, environmental, communications, and management interventions</p>	<p>Agenda and opening activity</p> <p><b>Chapter 7: Working with People</b></p> <ul style="list-style-type: none"> <li>• Communication skills</li> <li>• Facilitating teamwork</li> <li>• Planning and facilitating productive meetings</li> <li>• Coordinating with multiple stakeholders</li> </ul> <p><b>Activity:</b> Role play demonstration: managing meetings</p>	<p>Agenda and opening activity</p> <p><b>Activity:</b> Complete and share a personal action plan</p>
<b>LUNCH</b>	<b>LUNCH</b>	<b>LUNCH</b>	<b>LUNCH</b>	<b>LUNCH</b>
<b>P.M.</b>	<b>P.M.</b>	<b>P.M.</b>	<b>P.M.</b>	<b>P.M.</b>
<p><b>Chapter 1: Introduction to Supervising Healthcare Services</b></p> <ul style="list-style-type: none"> <li>• What is supervision?</li> <li>• Who is a supervisor?</li> <li>• Supervisor responsibilities</li> <li>• Supervision for performance improvement and improvement in the quality of services</li> <li>• The performance improvement process</li> </ul> <p>Review of the day's activities</p> <p><b>Assignment:</b> Chapters 1–3</p>	<p><b>Activity:</b> Presentation of standards</p> <p><b>Chapter 3: Assessing Performance</b></p> <ul style="list-style-type: none"> <li>• What to assess</li> <li>• How to assess (self-assessment, peer assessment, supervisory assessment, client feedback, community perceptions, records and reports, comparing your services with others)</li> </ul> <p><b>Activity:</b> Assessment role play</p> <p>Review of the day's activities</p> <p><b>Assignment:</b> Chapters 4–6</p>	<p><b>Chapter 5: Selecting and Implementing Interventions</b> (continued)</p> <p><b>Chapter 6: Monitoring and Evaluating Performance</b></p> <ul style="list-style-type: none"> <li>• Monitoring and evaluation</li> <li>• Tools for monitoring and evaluating</li> </ul> <p>Review of the day's activities</p> <p><b>Assignment:</b> Chapter 7</p>	<p><b>Activity:</b> Postcourse Questionnaire</p> <p><b>Activity:</b> Develop a personal action plan</p> <p>Review of the day's activities</p> <p><b>Assignment:</b> Continue developing action plan</p>	<p><b>Course Summary</b></p> <p><b>Course Evaluation</b></p> <p><b>Closing Ceremony</b></p>

# PRECOURSE QUESTIONNAIRE

## HOW THE RESULTS WILL BE USED

The main objective of the **Precourse Questionnaire** is to assist both the **trainer** and the **participant** as they begin their work together in the course by assessing what the participants, individually and as a group, know about the course topics. This allows the trainer to identify topics that may need additional emphasis during the course. Providing the results of the precourse assessment to the participants enables them to focus on their individual learning needs. In addition, the questions alert participants to the content that will be presented in the course.

The questions are presented in the true-false format. A special form, the **Individual and Group Assessment Matrix**, is provided to record the scores of all course participants. Using this form, the trainer and participants can quickly chart the number of correct answers for each of the questions. By examining the data in the matrix, the group members can easily determine their collective strengths and weaknesses and jointly plan with the trainer how to best use the course time to achieve the desired learning objectives.

**For the trainer**, the questionnaire results will identify particular topics which may need additional emphasis during the learning sessions. Conversely, for those categories where 85 percent or more of participants answer the questions correctly, the trainer may elect to use some of the allotted time for other purposes.

**For the participants**, the learning objective(s) related to each question and the corresponding chapter(s) in the reference manual are noted beside the answer column. To make the best use of the limited course time, participants are encouraged to address their individual learning needs by studying the designated chapter(s).



## PRECOURSE QUESTIONNAIRE/ANSWER SHEET

**Instructions:** In the space provided, print a capital **T** if the statement is **true** or a capital **F** if the statement is **false**.

### INTRODUCTION TO SUPERVISING HEALTHCARE SERVICES

- |  |       |  |
|--|-------|--|
| 1. Supervision can be conducted internally by an on-site supervisor and externally through supervisory visits.   | _____ | Participant Objective 1<br>(Chapter 1) |
| 2. Healthcare supervisors work only at the district or regional levels.  | _____ | Participant Objective 1<br>(Chapter 1) |
| 3. Although healthcare supervisors should work to improve the quality of services, they should avoid giving feedback to staff about their performance. | _____ | Participant Objective 1<br>(Chapter 1) |
| 4. The goal of supervision for improvement of performance and the quality of services is the provision of high-quality services.                       | _____ | Participant Objective 1<br>(Chapter 1) |
| 5. The first step in the performance improvement process is to create a shared vision with stakeholders.   | _____ | Participant Objective 1<br>(Chapter 1) |

### DEFINING DESIRED PERFORMANCE

- |   |       |  |
|---|-------|--|
| 6. The primary purpose of a vision statement is to make sure all team members are working toward a common goal. | _____ | Participant Objective 2<br>(Chapter 2) |
| 7. The supervisor is responsible for writing all of the performance standards for the facility.                 | _____ | Participant Objective 2<br>(Chapter 2) |
| 8. Job descriptions can be used to set performance standards.   | _____ | Participant Objective 2<br>(Chapter 2) |
| 9. Standards must be flexible.  | _____ | Participant Objective 2<br>(Chapter 2) |
| 10. "A clean surface must be available for the birth of a baby" is an example of a performance standard.        | _____ | Participant Objective 2<br>(Chapter 2) |

### ASSESSING PERFORMANCE

- |  |       |  |
|--|-------|--|
| 11. To find out how your clinic is doing, you need to periodically assess various areas within the facility. | _____ | Participant Objective 3<br>(Chapter 3) |
| 12. Asking a colleague to evaluate your performance is known as a self-assessment.                           | _____ | Participant Objective 3<br>(Chapter 3) |
| 13. Asking what community members think of or need from your clinic is a method of facility assessment.      | _____ | Participant Objective 3<br>(Chapter 3) |

- |   |       |  |
|---|-------|--|
| 14. Clients' feedback on facility performance is not as important as other feedback because they often have no choice but to visit your facility. | _____ | Participant Objective 3<br>(Chapter 3) |
| 15. Supervisors should avoid reviewing case records for information because this will often upset the staff members who completed the record.     | _____ | Participant Objective 3<br>(Chapter 3) |

**FINDING ROOT CAUSES**

- |  |       |  |
|--|-------|--|
| 16. Root cause analysis is used to determine how individuals are performing.   | _____ | Participant Objective 4<br>(Chapter 4) |
| 17. One approach for identifying the causes of performance problems is to use the why-why method.                                      | _____ | Participant Objective 4<br>(Chapter 4) |
| 18. One of the key factors that affects performance is job expectations.   | _____ | Participant Objective 4<br>(Chapter 4) |
| 19. Because worker motivation is personal, the supervisor should <b>not</b> consider this as a factor that affects worker performance. | _____ | Participant Objective 4<br>(Chapter 4) |

**SELECTING AND IMPLEMENTING INTERVENTIONS**

- |   |       |  |
|---|-------|--|
| 20. Interventions are designed to “close” the performance gap and improve the quality of services.                    | _____ | Participant Objective 5<br>(Chapter 5) |
| 21. Using a checklist to assess worker performance is an example of an intervention to improve knowledge and skills.  | _____ | Participant Objective 5<br>(Chapter 5) |
| 22. Posting client satisfaction data is an example of an intervention you can use to provide feedback on performance. | _____ | Participant Objective 5<br>(Chapter 5) |
| 23. In the selection of interventions to improve performance, the focus should be only on what doesn't work.          | _____ | Participant Objective 5<br>(Chapter 5) |
| 24. Cultural acceptability is one consideration when you are selecting an intervention to improve performance.        | _____ | Participant Objective 5<br>(Chapter 5) |
| 25. An action plan is a tool you can use when planning an intervention.   | _____ | Participant Objective 5<br>(Chapter 5) |
| 26. The question of how interventions will be paid for is <b>not</b> a consideration.                                 | _____ | Participant Objective 5<br>(Chapter 5) |
| 27. People always act positively to change that may result from performance improvement interventions.                | _____ | Participant Objective 5<br>(Chapter 5) |

## MONITORING AND EVALUATING PERFORMANCE

- |  |       |  |
|--|-------|--|
| 28. It is important to know if the performance improvement interventions being implemented are producing the intended results.                   | _____ | Participant Objective 6<br>(Chapter 6) |
| 29. Monitoring and evaluation activities always require elaborate study designs.   | _____ | Participant Objective 6<br>(Chapter 6) |
| 30. Evaluation refers to how much things have changed due to implementing interventions.   | _____ | Participant Objective 6<br>(Chapter 6) |
| 31. Obtaining client feedback is a method you can use as a monitoring tool.  | _____ | Participant Objective 6<br>(Chapter 6) |
| 32. Comparing your facility with others is <b>not</b> considered a monitoring and evaluation tool.   | _____ | Participant Objective 6<br>(Chapter 6) |
| 33. Monitoring should be started when you are identifying performance gaps, and should occur on an ongoing basis.                                | _____ | Participant Objective 6<br>(Chapter 6) |
| 34. Monitoring and evaluation are a natural part of a continual process for improving performance and quality at a healthcare delivery facility. | _____ | Participant Objective 6<br>(Chapter 6) |

## WORKING WITH PEOPLE

- |  |       |  |
|--|-------|--|
| 35. All staff members should be free to express and explain their views and should be encouraged to do so.                                   | _____ | Participant Objective 7<br>(Chapter 7) |
| 36. In terms of developing a team, the larger the team the better.   | _____ | Participant Objective 7<br>(Chapter 7) |
| 37. You are conducting a meeting with some of your staff. The first thing to ask is, "What would you like to talk about during the meeting?" | _____ | Participant Objective 7<br>(Chapter 7) |
| 38. Community members are considered healthcare facility stakeholders.   | _____ | Participant Objective 7<br>(Chapter 7) |
| 39. As a supervisor, you are responsible for making all of the decisions and should avoid negotiating with staff.                            | _____ | Participant Objective 7<br>(Chapter 7) |
| 40. There is nothing the supervisor can do to decrease healthcare workers' resistance to change.   | _____ | Participant Objective 7<br>(Chapter 7) |



**SUPERVISING HEALTHCARE SERVICES: IMPROVING THE PERFORMANCE OF PEOPLE  
INDIVIDUAL AND GROUP ASSESSMENT MATRIX**

**COURSE:** \_\_\_\_\_ **DATES:** \_\_\_\_\_ **TRAINER(S):** \_\_\_\_\_

Question Number	CORRECT ANSWERS (Participants)																								CATEGORIES	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24		
1																										INTRODUCTION TO SUPERVISING HEALTHCARE SERVICES
2																										
3																										
4																										
5																										
6																										DEFINING DESIRED PERFORMANCE
7																										
8																										
9																										
10																										
11																										ASSESSING PERFORMANCE
12																										
13																										
14																										
15																										

Question Number	CORRECT ANSWERS (Participants)																								CATEGORIES	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24		
16																										FINDING ROOT CAUSES
17																										
18																										
19																										
20																										SELECTING AND IMPLEMENTING INTERVENTIONS
21																										
22																										
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25																										
26																										
27																										
28																										MONITORING AND EVALUATING PERFORMANCE
29																										
30																										
31																										
32																										
33																										
34																										

Question Number	CORRECT ANSWERS (Participants)																								CATEGORIES	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24		
35																										WORKING WITH PEOPLE
36																										
37																										
38																										
39																										
40																										



# LEARNING EXERCISES

## INTRODUCTION

Learning exercises, including case studies and role plays, focus on different areas of knowledge and skill development. Exercises can include directions for activities, problems to solve, and the like. Case studies emphasize knowledge, while role plays develop behaviors. Both, however, provide participants with the opportunity to safely explore options and develop their problem-solving skills. Few trainers need to be convinced of their value as training tools. Nevertheless, case studies and role plays are often under- or inappropriately used. Learning exercises:

- must be based on clear learning objectives,
- often require participants to have some prior knowledge of or previous experience with the situation presented,
- allow participants to share experiences and learn from one another,
- require the trainer to carefully monitor both content and group process within each small group as the groups work to solve the problem presented, and
- must be thoroughly discussed to maximize learning and impact.

During practice, attention should be given to:

- giving clear, complete instructions for the activity;
- monitoring the small groups as they work; and
- ensuring adequate sharing among groups, not only of their answers but also of how they arrived at those answers.

Once participants become more comfortable using exercises, case studies, and role plays, they will realize that case studies and role plays are not only excellent training tools, but are also a lot of fun!

## EXERCISE 1

### CASE STUDY: WHAT IS GOING ON WITH INFECTION PREVENTION?

#### Directions

Read and analyze this case study individually. When others in your group have finished reading it, answer the questions. When all the groups have finished, we will discuss the situation and the answers each group developed.

#### Case Study

Two nurses from a district hospital were trained in a regional workshop on infection prevention. Topics covered during the training included handwashing, correct use of gloves, decontamination of instruments, correct disposal of sharps, and waste disposal.

Two months after training was completed, a regional supervisor visited the hospital and found the following:

- Nurses wore the same pair of gloves and examined several patients before changing them.
- Used syringes were accumulating in an open basin for eventual disposal.
- Laborers were disposing of waste using no protective hand covering.
- The decontamination solution was not being mixed according to infection prevention guidelines.

#### Questions

- Why do you think that these practices were occurring despite the training that the nurses received?
- Does this mean that the course was not effective?

## EXERCISE 2

### WHAT IS MY GREATEST PERFORMANCE BLOCK?<sup>1</sup>

#### Directions

Think about your own work. What is your greatest performance block? What would you change to make the biggest difference in your own performance? Look at the following list. Your trainer is going to ask you to **choose only one** of the following, so chose carefully.

I would perform better if: **(Choose only one)**

1. I had better tools and resources to work with.
2. There was greater organizational and management support encouraging me and enabling me to do a better job.
3. I had a better understanding of the expectations for my job.
4. I received regular feedback about how I am doing so I could know where I need to improve.
5. I received more and better training to do my job.
6. I had better financial and non-financial incentives and consequences for my performance.

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<sup>1</sup>*Adapted from:* Stolovitch HD and EJ Keeps. 1999. *Getting Results Through Performance Consulting*. (Workshop handout).

## EXERCISE 3

### SETTING PERFORMANCE STANDARDS FOR YOUR FACILITY

#### Directions

In your groups, determine a priority area in one of your work settings where performance standards need to be set. You can take an issue identified on Day One or identify an issue that is important to several people in your group. Standards for clinical procedures exist. Therefore, have groups choose nonclinical areas for developing standards such as:

- Client flow
- Record keeping
- Cleanliness of common areas
- Sharps disposal

(The participants may have other suggestions.)

Working together as a group, write three to five performance standards, with indicators, that would be appropriate for your facility. (Refer to the examples posted on the walls as you write your performance standards.) Remember to include supplies, equipment, and infrastructure necessary for performance.

Write your standards and indicators on a flipchart and be prepared to share them with the larger group.

#### Questions

As you present your performance standards back to the larger group, please answer the following questions:

- Who else would you speak with before making these final?
- How would you use these standards at your facility and how would you make sure that the staff is aware they exist?
- Comment on the process of creating performance standards as a group exercise.

## EXERCISE 4

### ASSESSING FACILITY PERFORMANCE: A SERIES OF ROLE PLAYS

#### Directions

The focus of **Chapter Three** is on how to assess facility performance to determine if standards are being met. Although there are a number of approaches described in the chapter, we are using role plays to focus on four of them.

The purpose of these assessments is to identify specific performance gaps or areas that need improvement. At the same time, you may identify areas in which performance is strong. Using one of the problems identified on Day One and posted on the wall, your group should prepare a role play to show the other groups how the assessment method you have been assigned works. Be creative. Have fun. Just make sure that it is clear how the assessment works. Directions for each of the four groups are described below.

- **Peer assessment role play.** One staff member (e.g., service provider) is assessing another. The group may use a clinical skill requiring an anatomic model and instruments, or may decide to use counseling as the focus of the role play. The group will also need a performance checklist. Be sure that at the end of your role play the areas requiring improvement (i.e., the “gaps”) are clear to those observing.
- **Supervisory assessment role play.** Although there are several approaches described in the chapter, the focus of your role play will be on observing clinical practice. One of your group will play the role of the supervisor while the other is a service provider. A third can play the role of the client. The group may use a clinical skill requiring an anatomic model and instruments, or may decide to use counseling as the focus of the role play. The group will also need a performance checklist. Be sure that at the end of your role play that the areas requiring improvement (i.e., the “gaps”) are clear to those observing.
- **Client feedback.** This role play should focus on an interview with a client. Be sure to include positive feedback as well as suggestions for improving the performance of the facility. Be sure that at the end of your role play the areas requiring improvement (i.e., the “gaps”) are clear to those observing.

- **Community perceptions.** This role play should focus on a meeting with several community members. Be sure to include positive feedback as well as suggestions for improving the performance of the facility. Be sure that at the end of your role play the areas requiring improvement (i.e., the “gaps”) are clear to those observing.

# SUPERVISING HEALTHCARE SERVICES: IMPROVING THE PERFORMANCE OF PEOPLE COURSE EVALUATION

(To be completed by **Participants**)

Please indicate your opinion of the course components using the following rate scale:

**5–Strongly Agree      4–Agree      3–No Opinion      2–Disagree      1–Strongly Disagree**

COURSE COMPONENT	RATING
1. The Precourse Questionnaire helped me to study more effectively.	
2. The classroom sessions and exercises were adequate for learning performance improvement skills for supervisors.	
3. I am now confident defining desired performance.	
4. I am now confident assessing performance.	
5. I am now confident finding root causes.	
6. I am now confident selecting and implementing interventions.	
7. I am now confident monitoring and evaluating performance.	
8. I am now confident working with people.	
9. I am now confident in applying the performance improvement process to improve the quality of services at a healthcare facility.	

**ADDITIONAL COMMENTS** (use reverse side if needed)

1. What topics (if any) should be **added** (and why) to improve the course?

2. What topics (if any) should be **deleted** (and why) to improve the course?

