



Process Map: Competency Assessment, eLearning and Post Training Evaluation

Ensuring a fit to work and fit for practice workforce through competency-based health workforce development

Background

Human resources for health form the foundation of an efficient and resilient health system. In the Philippines, significant variations in quality of healthcare service is attributed to uneven capacity of local government units to manage both the delivery of quality primary care services, which includes Family Planning & Maternal Child Health (FP/MCH) and Tuberculosis (TB) services, and the local health workforce. This fragmented distribution of a confident, fit-for-work and fit-for-practice workforce across the country directly impacts equitable distribution of quality health services among Filipino communities and the Philippines ability to fulfill national and global commitments to improve key health outcomes.

The passing of Republic Act 11223 or Universal Health Care Act provides an opportunity for strengthening the delivery of primary care services to the underserved and marginalized. The UHC ensures a “whole-of-society approach to health...centered on the needs and preferences of individuals, families and communities while addressing the broader health determinants”.¹ The UHC law also outlines improvements for health human resources management through the formulation and implementation of a National Health Human Resource Masterplan that will “provide policies and strategies for the appropriate generation, recruitment, retraining, regulation, retention and reassessment of health workforce based on population needs.” Such strategies include the development of clinical competencies and competency assessment measures for primary care services (including TB and FP/MCH).

The periodic and regular review of health worker knowledge, skills and attitudes in providing integrated primary care services as exemplified by TB and FP/MCH clinical services is critical in aligning health workforce competencies with health sector needs. But assessment cannot be done in silo; the results of routine competency assessments identify

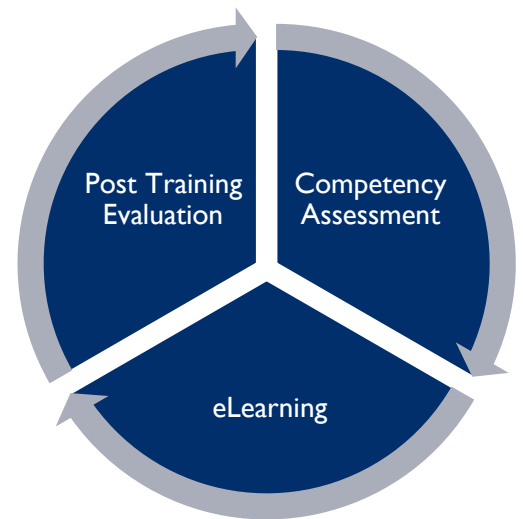
¹ 27 February 2019, WHO Fact Sheet Primary Health Care, retrieved from < <https://www.who.int/news-room/fact-sheets/detail/primary-health-care>>

learning needs, which can be matched with the learning outcomes of competency-based eLearning, and then followed with post-training evaluation to ensure that a practice-ready and work-ready primary care workforce is developed and maintained. In this project, work on FP /MCH and TB competency was accomplished to demonstrate the application of the proposed competency assessment tool.

Purpose of the Process Map

The purpose of this Process Map is to guide those using the competency assessment and eLearning developed by the Human Resources for Health in 2030 (HRH2030) Project, funded by USAID, and those implementing post-training evaluation to better understand how these three key components to health workforce development can build on each other and interact. This process map should be used as a reference when planning your health workforce development programs. The following describes the roles and responsibilities of each of the components.

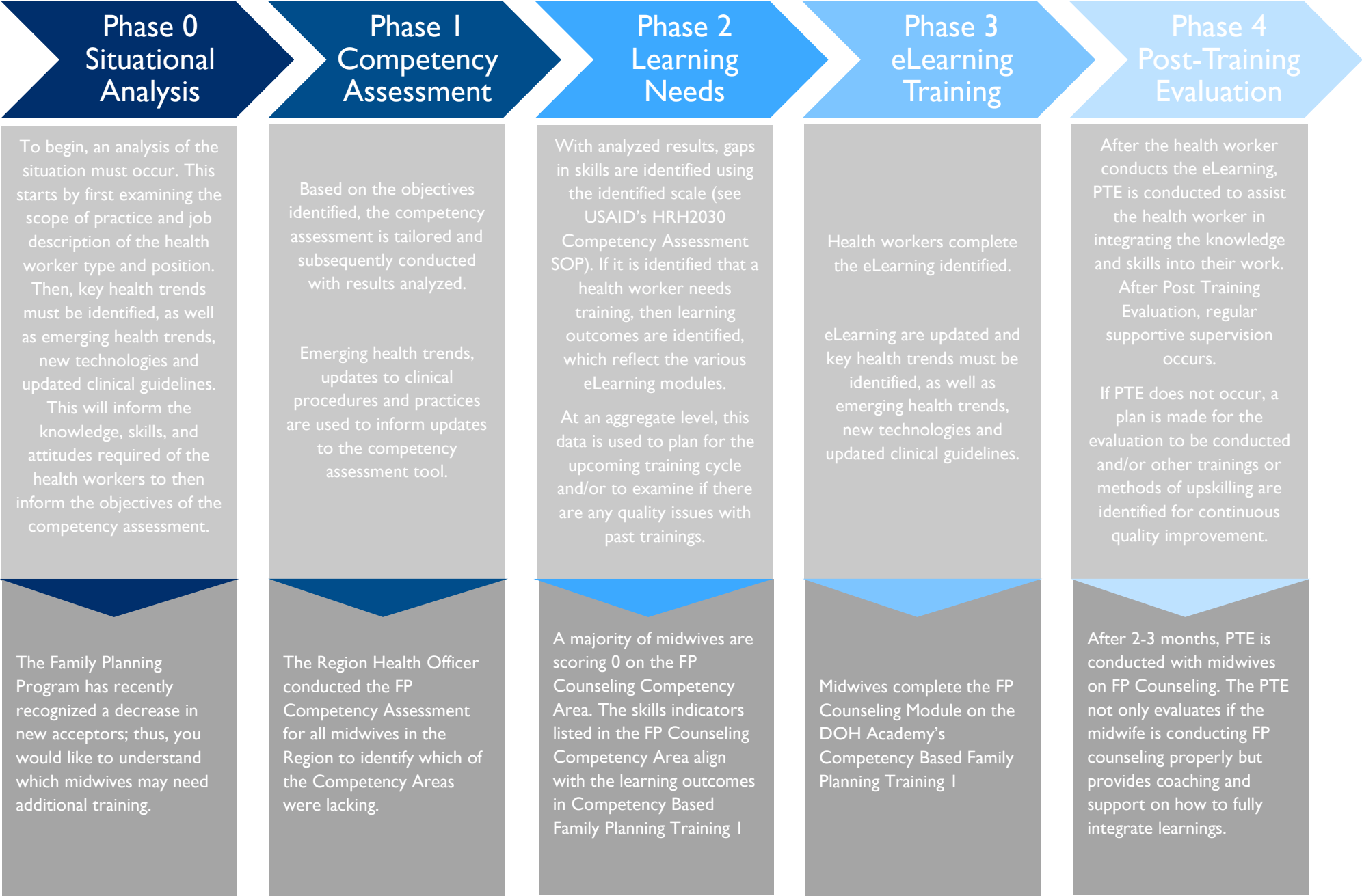
- Competency Assessment:** A competency assessment is a system for measuring and documenting personnel competency, to identify problems with employee performance and to correct these issues. The regular or periodic conduct this assessment ensures that the delivery of services correspond to the guaranteed quality of care expected at both private and public facilities. Also, this assessment allows for the systematic identification of performance gaps that may be addressed either through supportive supervision, mentoring, coaching or task-specific training. The assessment focuses on the measurement of health worker’s knowledge, skills and attitudes needed to perform a procedure, task or activity under different occasions and unexpected contexts. It also entails the observation of the practice and demonstration of skills associated with minimum standards of quality care. USAID’s HRH2030 developed a competency assessment package that provides Regional and National Level trainers and decision makers with the tools to assess the FP/MCH and TB skill set of the health workforce. It can also be used by managers as a coaching/mentoring guide and health workers as a tool for self-review.
- eLearning:** eLearning provides health workers with access to competency-based training to enhance the knowledge, skills, and attitudes of the health workforce. Through eLearning, health workers can not only reduce their time away from the clinic, but also increase availability and access to participation in evidence-based training that improves behavior change and self-efficacy. USAID’s HRH supported the development of several FP/MCH and TB eLearning modules, which will be available on the Department of Health Academy (<https://academy.doh.gov.ph/>).
- Post Training Evaluation:** Post Training Evaluation (PTE) is an integral part of any training program as it determines and assists the learners to integrate the knowledge and skills they acquired during the course to their job of providing health services. To benefit from this approach, it is recommended that PTE be conducted one to two months after training (the optimal time for identifying challenges in the learners’ environment and implementing strategies to overcome these challenges after eLearning). During the process, the trained health service provider is coached towards being able to integrate his/her learnings given existing working environment. After this period, integration will be difficult as mistakes would have become practice and thus, difficult to reverse while long periods of non-practice of the learned concepts and skills would have been lost and unlearned. Due to this, it is critical that PTE take place after a health worker undertakes eLearning. USAID’s HRH2030 created a PTE checklist and toolkit which compiles the various PTE guidance documents developed by the DOH and other stakeholders for reference by stakeholders when conducting post training follow up.

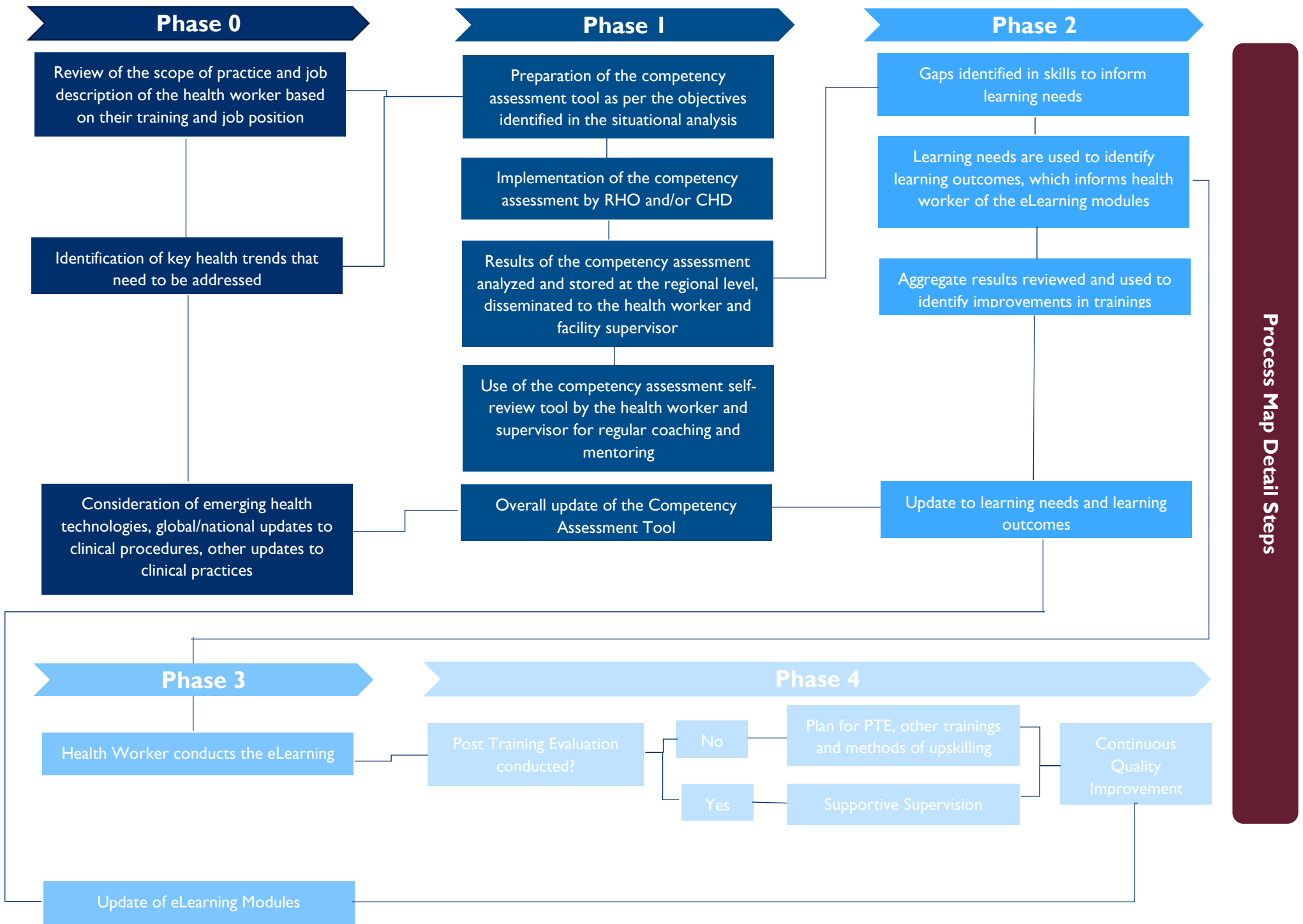


Process Map

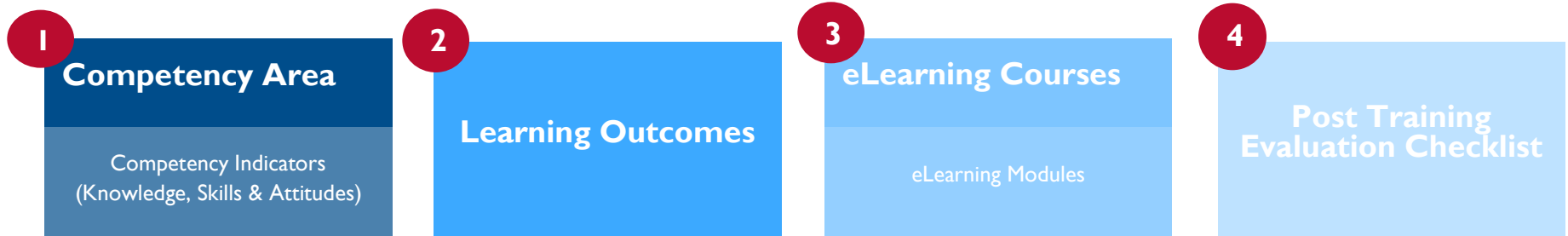
Process Map Overview

Provides an overview and example of how competency assessment, eLearning and PTE can be integrated for health workforce development.





Flow of Component Elements Competencies, eLearning Trainings and PTE



The competency assessment tool is broken down by three levels beginning with competency domain, which follow the primary care framework, followed by competency area and subsequently corresponding indicators. Based on the score of the health workers assessment (with competency indicators aggregating to a score for each competency area), decision makers will be able to pinpoint gaps in desired performance for each competency.

These gaps will inform decision makers on the learning outcomes that are needed for the health worker as each competency area can be linked to a learning outcome. It is important to look at the learning outcomes over eLearning courses or module titles as the learning outcomes demonstrate what the health worker will learn and thus decision makers can ensure that the eLearning prescribed to the health worker reflects their actual learning gaps and needs.

Once the learning outcomes are determined, the health worker will understand which eLearning s/he should participate in as each learning outcome is tied to an eLearning Module. This may result in the eLearning conducting the entire course or specific modules.

Post Training Evaluation should then be conducted using the specified post training evaluation checklist. Each checklist is tailored to the intended learning outcomes of the eLearning, and thus should reinforce the knowledge and skills learned during the eLearning.