SUPPORTIVE SUPERVISORY VISITS: a key tool in ensuring quality in family planning interventions.

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Introduction

- The society for Family Health Nigeria in collaboration with PSI are implementing a FP program named the Women’s Health Project (WHP)

- The project is managing a franchise of private facilities with trained providers
SSV

- Support supervisory visits are periodic visit by the field staff to the franchise facilities under the project

- Aim
  - To support and facilitate the facilities in ensuring that quality of service standards are met
  - To coach/mentor the providers by using skills and knowledge assessment tools
  - To build providers confidence by supervising/simulating IUCD/Implant insertions
Methodology

- Supervisory session plan
- Facility assessment.
- Provider skill & knowledge assessment.
- Coaching
- Mentoring
- Observation
- Feed-back
Aim: to ensure appropriate organization of work, prioritization and effective management of time and resources

- **Date of visit** (for the purpose of assessing the provider, a date is agreed which is convenient for the provider)

- **Core activities** (these are activities that must be covered every visit. Such activity is given high priority over everything else. For e.g. assessment/coaching on infection prevention protocols to the clinic staff)
Supervisory session plan contd

- **Selected activities** (these are activities that you may or may not cover depending on the availability of time and the provider. For e.g. counseling refresher)

- **Notes from previous visit** (these are gaps identified during the last visit that needs follow-up)

- **Program support activities** (includes replenishment of products & IEC materials)
Facility assessment

- Graded tools & checklist are used to assess the counseling room, insertion room, infection prevention protocols, equipments, data and record-keeping

- Facility is supported to ensure all quality indicators are in place
Graded tools & checklist are used to assess the providers’ knowledge on the FP methods especially the LTMs: duration, efficacy, mechanism of action, side-effect & complication.

Providers’ skill is assessed either on a live client or a pelvic model. Provider is assessed on counseling, insertion, removal, follow-up & infection prevention protocols.
Methodology contd

- **Coaching**
  On-the-job with pelvic models, live clients, IEC materials etc

- **Mentoring**

- **Observation** of the provider during counseling and insertion.

- **Feedback**: All gaps identified, mutually agreed plan with project staff & service provider, documented with timelines & persons responsible.
Result

- On-the-job coaching = increased competence & confidence of the provider = increase IUCD services
- Increased competence & confidence of provider = increased client flow & functional family planning unit
- Competent providers built their skill to a proficiency level.
- Improved client safety due to better infection prevention practices and eligibility screening of clients
A family planning provider in Abuja Nigeria improving her skill through practice on a pelvic model during a support supervisory visit (SSV)

The insertion standard of practice (SOP) and checklist is beside her to guide her
Pictures speaks

- The field clinical staff observing an IUCD insertion on a pelvic model

- The field staff using the checklist to address any gap in the service provider’s skill
Picture speaks

- The family planning service provider providing IUCD services on a client
  The use of drapes for privacy was adhered to

- The clinical field staff documenting on the agreed action plan with the service provider
The family planning service provider providing implant services on a client; while the field clinical staff observes her skill using the checklist.

Facility assessment during support supervisory visit. An improvised hand-washing facilities in place.
Facility assessment for quality indicators
The SSVs have proved to be an invaluable means of on the job coaching for providers and through on-going series of SSV, providers have been found to exhibit more confidence and proficiency in providing quality family planning services.
Questions?