Standards-Based Management and Recognition
Facilitator’s Handbook

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JHPIEGO, an affiliate of The 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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INTRODUCTION

This implementation package was developed to accompany the field guide Standards-Based Management and Recognition—A Field Guide: A Practical Approach for Improving the Performance and Quality of Health Services. The purpose of this implementation package is to provide basic information and tools on how to improve the performance and quality of health services using a Standards-Based Management and Recognition (SBM-R) approach. This implementation package differs from a traditional training package in the following ways:

- **It is composed of three modules.** This allows facilitators flexibility in planning and implementing their programs over a period of months. Each module focuses only on key content and tasks related to a stage in the SBM-R process. Facilitators and participants should complete each module before beginning the next module (usually 3–5 months later), rather than working through all three modules at once.

- **The modules include minimal theoretical content.** The modules are meant to guide facilitators through the process. Little time is spent on lectures, and ample time is allotted for activities that allow participants to practice applying the principles. The process is meant to provide an opportunity for facilities involved in the SBM-R process to network, share gaps encountered and exchange or benchmark best practices and solutions to close the gaps.

- **The modules offer programmatic guidance.** This package includes more than materials needed for facilitating the modules. Each module offers practical next steps and activities to be implemented at the facility level between the workshops on the modules.

- **The modules provide suggestions for implementation.** Facilitators will need to revise the sessions and activities and make adjustments based on the programs they are supporting. Changes or adaptations may include a range of possibilities to tailor the training modules to program-specific needs. For example, the facilitators may want to expand on concepts around quality in a country where there are several quality initiatives and a “culture” of quality. Or they may need to allow more time on community participation if this is an important component of their program. When simultaneous translation is being used and consequently more time (possibly twice as much time) is needed for each activity, the number and length of the presentations and group exercises may have to be reduced. Facilitators should therefore be aware that these training modules are a suggested guide to the implementation process rather than a list of required activities that must be followed exactly. The modules have already been used successfully in several countries and regions, but minor adjustments may have to be made to meet the specific needs of country programs.
OVERVIEW OF THE SBM-R PROCESS

SBM-R is a practical management approach for improving the performance and quality of health services. It is the systematic utilization of performance standards as the basis for the organization and functioning of these services and the rewarding of compliance with standards through recognition mechanisms. SBM-R follows four basic steps:

- Setting standards of performance in an operational way
- Implementing the standards through a streamlined process
- Measuring progress to guide the improvement process toward these standards
- Recognizing the achievement of the standards

This process begins with the development of evidence-based operational standards in a specific area of health service delivery. The performance standards developed are included in an assessment tool that can be used for self-, peer, internal and external assessments at the facility level. Implementation of the assessment tool leads to identification of performance gaps to be reduced or eliminated. Health facility managers and providers can then analyze the causes of the gaps—lack of knowledge and skills, inadequate enabling environment (including resources and policies) and/or lack of motivation—and identify and implement appropriate interventions to close these gaps.

Local health workers are encouraged to focus on action and begin with simple interventions (the “low-hanging fruit”) in order to achieve early results, create momentum for change and gradually acquire change management skills to address more complex gaps.

Partial improvements are rewarded during the process using a combination of measures including feedback and social recognition (e.g., ceremonies, symbolic rewards). The facility’s overall achievement of compliance with standards is acknowledged through a recognition mechanism, which is usually designed by the ministry of health or other key stakeholders or institutions in each country program. This recognition normally involves institutional authorities and the community.

USING THE STANDARDS-BASED MANAGEMENT AND RECOGNITION IMPLEMENTATION PACKAGE

The field guide is designed to provide all of the essential information needed to implement SBM-R.

Each module contains all of the tools needed to facilitate the process, including: an introduction to the module, a suggested schedule, activity outline, handouts and exercises, presentation graphics, suggested next steps that programs can take, and an evaluation form for that module.
Training/Learning Methods

- Illustrated lectures and group discussions
- Individual and group exercises
- Role plays
- Simulations

Participant Selection Criteria

This modular training process is designed for SBM-R teams (coaches). The SBM-R coaches should primarily be local health care workers, including providers and managers from the facilities where the SBM-R initiative is being implemented. These health care workers should be from the services or units that the initiative is trying to improve (e.g., family planning, counseling and testing for HIV, labor and delivery, etc.). Managers and/or supervisors from the central, regional or district level are also welcome to participate, because they are important stakeholders needed to support the implementation and expansion strategies. The participants must be able to take part in each of the three workshops and, most important, they will need to lead the implementation of the process at their sites. It is essential, therefore, to identify champions who can start the change process and motivate others to join the initiative. Usually, a local team of four or five people from each site is a good start.

Criteria for Selecting Facilitators

This modular training process is designed to be conducted by the SBM-R facilitators, who are people with experience in implementing SBM-R initiatives. They are the connection among the SBM-R coordinating body, SBM-R teams (coaches) and the technical resources. It is recommended that each workshop have two SBM-R facilitators who complement each other’s skills and knowledge about the SBM-R implementation process and the technical content that the initiative aims to improve (e.g., maternal health, infection prevention, HIV/AIDS, family planning/reproductive health). It is strongly recommended that the same SBM-R facilitators conduct all three workshops with the same SBM-R teams.

Suggested Course Composition

- Up to 30 participants (e.g., SBM-R teams of five people from six facilities, or SBM-R teams of three people from 10 facilities)
- Two SBM-R facilitators
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- Two SBM-R facilitators
Introduction
MODULE ONE:
BEGINNING THE SBM-R PROCESS

INTRODUCTION

This module is the beginning of implementation of the SBM-R process. The facilitator should make sure that the following activities have been completed before beginning the module:

- Key stakeholders have been oriented to the SBM-R process.
- The SBM-R initiative has been designed for the country program.
- A performance standard assessment tool has been developed and approved by key stakeholders (if approval is pending, the tool can be used in draft form).
- A performance standard assessment tool has been pilot-tested and revised.
- The SBM-R coordinating body has been formed.
- The SBM-R teams of providers and managers (coaches), who are the participants for the workshop, have been selected.

The goal of this module is to enable participants to prepare for and initiate an SBM-R process in their facility or workplace. After completing this module, the participants will be able to:

- Promote the SBM-R process and implementation
- Conduct the baseline assessment at their facilities
- Identify performance gaps
Module One: Beginning the SBM-R Process

- Conduct an initial cause analysis of the performance gaps found
- Using the results of the baseline assessment, develop an operational action plan focused on rapid interventions
- Implement and monitor the SBM-R process at their facility
## Module One: Beginning the SBM-R Process

### SCHEDULE FOR MODULE ONE: PREPARATION AND BEGINNING OF THE PROCESS

<table>
<thead>
<tr>
<th>DAY 1</th>
<th>DAY 2</th>
<th>DAY 3</th>
<th>DAY 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opening</td>
<td>Warm-up</td>
<td>Warm-up</td>
<td>Warm-up</td>
</tr>
<tr>
<td>Participant introduction</td>
<td>Agenda for Day 2</td>
<td>Agenda for Day 3</td>
<td>Agenda for Day 4</td>
</tr>
<tr>
<td>Overview of the workshop</td>
<td>Setting the standards: Defining desired performance</td>
<td>Implementing the standards: Measuring actual performance (baseline assessment)</td>
<td>Promotion and agreement</td>
</tr>
<tr>
<td>Expectations and group norms</td>
<td>• Performance assessment tool</td>
<td>• Collection of information</td>
<td>Gap identification, initial cause analysis</td>
</tr>
<tr>
<td>Quality concepts</td>
<td>• Tool review</td>
<td>• Scoring and summary of information</td>
<td>Next steps</td>
</tr>
<tr>
<td>Standards-Based Management model</td>
<td>Warm-up</td>
<td>Feedback meeting and operational planning</td>
<td>Planning for baseline assessment</td>
</tr>
<tr>
<td>Introduction to change management</td>
<td>Warm-up</td>
<td>Key implementing groups</td>
<td>Evaluation and closing</td>
</tr>
</tbody>
</table>

**LUNCH**

<table>
<thead>
<tr>
<th>LUNCH</th>
<th>LUNCH</th>
<th>LUNCH</th>
<th>LUNCH</th>
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</thead>
<tbody>
<tr>
<td>3 hours</td>
<td>3 hours</td>
<td>3 hours</td>
<td></td>
</tr>
<tr>
<td>Warm-up</td>
<td>Warm-up</td>
<td>Warm-up</td>
<td></td>
</tr>
<tr>
<td>Introduction to change management (cont.)</td>
<td>Tool review (cont.)</td>
<td>Implementing the standards: Measuring actual performance (cont.)</td>
<td></td>
</tr>
<tr>
<td>Stakeholder analysis</td>
<td>Feedback on tool review</td>
<td>• Scoring and summary of information (cont.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Feedback meeting and operational planning</td>
<td></td>
</tr>
</tbody>
</table>

Note: The schedule is subject to change based on the workshop's progress and needs.
MODEL WORKSHOP OUTLINE

The workshop outline on page 1-5 is a model plan of the training to be delivered. It presents enabling objectives that participants must meet in order to accomplish the specific learning objectives described in the workshop syllabus. For each enabling objective, there are suggestions regarding appropriate learning activities, resources and materials needed. The facilitator may develop additional practice activities, case studies, role plays or other learning exercises specific to the country or group of participants.

The workshop outline is divided into four columns:

- **Time.** This section of the outline indicates the approximate amount of time to be devoted to each learning activity.

- **Objectives/Activities.** This column lists the enabling objectives and learning activities. Because the objectives outline the sequence of training, they are presented in the order in which they will be addressed in the workshop. The combination of the objectives and activities (introductory activities, small-group exercises, simulations, breaks, etc.) describes the flow of training.

- **Training/Learning Methods.** This column describes the various methods, activities and strategies the facilitator will use to transfer the knowledge and skills related to each enabling objective.

- **Resources/Materials.** The fourth column of the workshop outline lists the resources and materials needed to support the learning activities.

Note that the workshop schedule is based on the workshop outline, and that modifications made to one should be reflected in the other.
<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/ACTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAY 1, AM (240 minutes)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minutes</td>
<td><strong>Activity:</strong> Opening</td>
<td>Welcome by facilitators and representatives from the organization(s) sponsoring the workshop. Brief introduction on why this workshop is important for the overall program being implemented.</td>
<td></td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Activity:</strong> Introduce participants and facilitators.</td>
<td>Provide time for participants and facilitators to introduce themselves and share where they work and what they do there.</td>
<td>Copies of the table with the steps and phases of the SBM-R process</td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Activity:</strong> Provide an overview of the whole SBM-R modular process, then overview of Module One. <strong>Activity:</strong> Review workshop materials.</td>
<td>Briefly review the goals of the SBM-R initiative being implemented and explain about the SBM-R facilitated modular training. Review the objectives and workshop schedule for Module One. Distribute a copy of the SBM-R field guide to participants and briefly explain it to them.</td>
<td>Copies of Module One objectives and schedule for each participant</td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Activity:</strong> Identify participant expectations.</td>
<td>Discuss participant expectations with the group and list them on a flipchart. Identify which ones will be met in the workshop.</td>
<td>Flipcharts and markers</td>
</tr>
<tr>
<td>10 minutes</td>
<td><strong>Activity:</strong> Establish group norms.</td>
<td>Ask participants to brainstorm a list of norms to be followed during the workshop. Record them on a flipchart page. Tape it to the wall for reference throughout the workshop.</td>
<td>Flipcharts and markers</td>
</tr>
<tr>
<td>60 minutes</td>
<td><strong>Quality Exercise</strong></td>
<td><strong>Activity:</strong> Divide the participants into five small groups. Ask each group to respond to the five questions. Give each group 30 minutes to prepare a flipchart with their answers to the five questions. Then, assign each group one of the five quality questions to present. Each group will have 5 minutes to present to the larger group; the other groups can give any different responses they have to each question. The facilitator will summarize the presentations by the groups.</td>
<td>Facilitator's Handbook, &quot;What Is Quality&quot; Exercise</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe aspects of quality services.</td>
<td></td>
<td>Copies of the instructions for the quality exercise for the participants</td>
</tr>
<tr>
<td>20 minutes</td>
<td><strong>Quality Presentation</strong></td>
<td><strong>Presentation:</strong> Present “Quality Concepts.”</td>
<td>SBM-R field guide</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Define quality. <strong>Objective:</strong> Describe the importance of quality.</td>
<td></td>
<td>Facilitator’s Handbook, Presentation Graphics, “Quality Concepts”</td>
</tr>
<tr>
<td>15 minutes</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TIME</td>
<td>OBJECTIVES/ACTIVITIES</td>
<td>TRAINING/LEARNING METHODS</td>
<td>RESOURCE MATERIALS</td>
</tr>
<tr>
<td>-----------</td>
<td>---------------------------------------------</td>
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<tr>
<td>40 minutes</td>
<td><strong>SBM-R Model</strong></td>
<td><strong>Presentation:</strong> Present “Standards-Based Management and Recognition of Health Service Delivery.”</td>
<td><strong>Facilitator’s Handbook,</strong> Presentation Graphics, “Standards-Based Management and Recognition of Health Service Delivery” Copies of the presentation for the participants</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Define the SBM-R process.</td>
<td></td>
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</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe the four steps of the SBM-R process.</td>
<td></td>
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</tr>
<tr>
<td>10 minutes</td>
<td><strong>Landscape Exercise</strong></td>
<td><strong>Activity:</strong> Present the “Landscape” slide. Ask the large group what they think the landscape says about change. Follow instructions for the exercise.</td>
<td><strong>Facilitator’s Handbook,</strong> “Landscape” Exercise, Presentation Graphics, Landscape slide</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Identify elements in the change process.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 minutes</td>
<td><strong>Change Management</strong></td>
<td><strong>Presentation:</strong> Give “Change Management” presentation. Discuss different participants’ experiences with change.</td>
<td><strong>Facilitator’s Handbook,</strong> Presentation Graphics, “Change Management”</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe the change process.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe common challenges to change.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>60 minutes</td>
<td><strong>LUNCH</strong></td>
<td></td>
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<tr>
<td><strong>DAY 1, PM (180 minutes)</strong></td>
<td></td>
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<tr>
<td>10 minutes</td>
<td><strong>Warm-up</strong></td>
<td>To be determined by the facilitator</td>
<td></td>
</tr>
<tr>
<td>60 minutes</td>
<td><strong>Flag Exercise</strong></td>
<td><strong>Activity:</strong> Divide into small groups by facility. Ask each group to draw the vision of what they want the facility to be. Ask them to use only drawings, no words. Give the groups 30 minutes to prepare a flipchart with their vision. Each group will have 3–5 minutes to present to the larger group. The facilitator will summarize the presentations by the groups. Tell the groups that their vision can change throughout the process. Keep the flipchart pages from each group for use/review in Module Two.</td>
<td><strong>Flipchart and markers for each group</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Develop a “vision” for each facility for the SBM-R process.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 minutes</td>
<td><strong>Stakeholder Analysis</strong></td>
<td><strong>Presentation:</strong> Present “Stakeholder Analysis.”</td>
<td><strong>SBM-R field guide</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Define stakeholder analysis.</td>
<td></td>
<td><strong>Facilitator’s Handbook,</strong> Presentation Graphics, “Stakeholder Analysis”</td>
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<tr>
<td></td>
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<td></td>
<td>Copies of the presentation for the participants</td>
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</table>
# Module One Workshop Outline

<table>
<thead>
<tr>
<th>Time</th>
<th>Objectives/Activities</th>
<th>Training/Learning Methods</th>
<th>Resource Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>60 minutes</td>
<td><strong>Stakeholder Analysis</strong></td>
<td>Activity: Divide the participants into three small groups. Assign each group one of the stakeholders. Each group has 30 minutes to discuss and prepare a bulleted list of answers to the questions. Each group will then have 7 minutes to present. (Allow a total of 30 minutes for large group discussion.)</td>
<td>Facilitator’s Handbook, “Stakeholder Analysis” Exercise</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe strategies for working with stakeholders.</td>
<td>Resource Materials: Facilitator’s Handbook, “Stakeholder Analysis” Exercise Copies of the instructions for the participants</td>
<td></td>
</tr>
<tr>
<td>5 minutes</td>
<td><strong>Review of day’s activities</strong></td>
<td>The facilitator asks questions and answers participants’ questions related to content covered in Day 1, focusing on areas in need of strengthening.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>DAY 2, AM (240 minutes)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minutes</td>
<td><strong>Warm-up</strong></td>
<td>To be determined by the facilitator</td>
<td></td>
</tr>
<tr>
<td>5 minutes</td>
<td><strong>Agenda for Day 2</strong></td>
<td>Review agenda for Day 2</td>
<td>Flipchart with agenda for Day 2</td>
</tr>
<tr>
<td>40 minutes</td>
<td><strong>Setting Standards</strong></td>
<td>Presentation: Present “Setting Standards.”Respond to participants’ questions on the presentation.</td>
<td>SBM-R field guide Facilitator’s Handbook, Presentation Graphics, “Setting Standards” Copies of the presentation for the participants</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe how performance standards are set.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe qualities of operational performance standards.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>185 minutes</td>
<td><strong>Setting Standards (continued)</strong></td>
<td><strong>Group work:</strong> Divide the participants into small groups and provide each group with copies of different areas/sections of the assessment tool. Each group has 2 hours to review their area or areas of the tool. Each group will comment on format, different areas and standards, and verification criteria. Each group will prepare a brief presentation on their sections. Give one or two copies of the technical reference material to each group. <strong>Group presentations:</strong> Each group will present their feedback on their sections of the assessment tool for discussion with the larger group. Then spend a few minutes for larger group discussion. Tell the participants that they will have a 15-minute break during the group work.</td>
<td>Copies of selected areas/sections of the assessment tool for each group Facilitator’s Handbook, “Assessment Tool Review” Exercise Copies of the instructions for the participants Copies of the technical reference materials if appropriate (e.g., infection prevention manual, family planning guidelines, etc.)</td>
</tr>
<tr>
<td>60 minutes</td>
<td><strong>Lunch</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TIME</td>
<td>OBJECTIVES/ACTIVITIES</td>
<td>TRAINING/LEARNING METHODS</td>
<td>RESOURCE MATERIALS</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------------------------------------------</td>
<td>------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>DAY 2, PM (180 minutes)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minutes</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
<td></td>
</tr>
</tbody>
</table>
| 165 minutes  | Setting Standards (continued)                 | Group work: Give new sections/areas of the assessment tool to each group. Each group has 2 hours to review their section or sections of the tool. Each group will comment on format, different areas, performance standards and verification criteria. Each group will prepare a brief presentation on their sections.  
Group presentations: Each group will present their feedback on their sections of the assessment tool for discussion with the larger group. Then have the larger group spend a few minutes discussing the presentations.  
Tell the participants that they will have a 15-minute break during the group work.  
The facilitator will get copies of each section/area of the assessment tool with the feedback provided by each group in order to make adjustments to the tool as needed. | Copies of selected areas/sections of the assessment tool for each group |
| 5 minutes    | Review of day’s activities                    | The facilitator asks questions and answers participants’ questions related to content covered in Day 2, focusing on areas in need of strengthening. |                                                                                     |
| DAY 3, AM (240 minutes) |                                              |                                                                                         |                                                                                     |
| 10 minutes   | Warm-up                                       | To be determined by the facilitator                                                     |                                                                                     |
| 5 minutes    | Agenda for Day 3                              | Review agenda for Day 3                                                                 | Flipchart with agenda for Day 3                                                     |
| 20 minutes   | Implementing Standards                        | Presentation: Present “Implementing Standards: Measurement of Actual Performance.”  
Copies of the presentation for the participants |
## MODULE ONE WORKSHOP OUTLINE

<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/ACTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>120 minutes</td>
<td><strong>Implementing Standards (continued)</strong></td>
<td><strong>Activity:</strong> Set up at least two different stations (one station per facilitator, or some participants can help at the stations) for participants to practice observing in a simulated setting. Divide into small groups. Each station will have a master observer (usually, the facilitator or another person who knows the process) and one performer who can be volunteers from the group. Each group will have about 20–30 minutes to observe a “provider” performing tasks from the performance standards. Each person should mark “Y” or “N” or N/O for each verification criterion. Discuss the results and variations in results after each simulation, comparing them with the responses of the master observer. Repeat the exercise with the same group at the same station twice, and then rotate participants through the stations. Try to have different methods of data collection (direct observation, guided interview and/or clinical records review).</td>
<td>Copies of selected sections/areas of the assessment tool with the standard or group of standards to be observed for each participants. Materials to set up the stations.</td>
</tr>
<tr>
<td>15 minutes</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Implementing Standards (continued)</strong></td>
<td><strong>Discussion:</strong> Discuss the exercise in the large group. What was difficult? What did they like? What did they learn about observing performance? Review and consolidate the results obtained.</td>
<td></td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Implementing Standards (continued)</strong></td>
<td><strong>Presentation:</strong> Present “Scoring and Summary of Results.” Respond to participants’ questions on the presentation.</td>
<td><strong>Facilitator’s Handbook,</strong> Presentation Graphics, “Scoring and Summary of Results” Copies of the presentation for the participants</td>
</tr>
<tr>
<td>40 minutes</td>
<td><strong>Implementing Standards (continued)</strong></td>
<td><strong>Activity:</strong> Divide participants into small groups by facility. Distribute copies of the assessment tool and summary form to each group. Instruct them to score and complete the summary sheet for their sample performance standards. All groups have the same sample, so they should find the same results. They have 40 minutes to do this.</td>
<td>One copy of the assessment tool filled out with Y, N, N/O (all areas or selected areas) and the summary form for each group One calculator for each group</td>
</tr>
<tr>
<td>60 minutes</td>
<td>Lunch</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## MODULE ONE WORKSHOP OUTLINE

<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/ACTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAY 3, PM (180 minutes)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minutes</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
<td></td>
</tr>
<tr>
<td>30 minutes</td>
<td><strong>Implementing Standards (continued)</strong></td>
<td>Discuss scoring in the larger group for up to 30 minutes. Go over the summary form and check the number of standards achieved and percentage by area and in total. If there are disagreements in the results, go back to the assessment tool and review the problematic areas with the participants. All groups have the same sample, so they should find the same results. If possible, at the end of the scoring exercise give a calculator to each group as a gift that they can use during their assessments. It can serve as a small incentive.</td>
<td></td>
</tr>
<tr>
<td>20 minutes</td>
<td><strong>Implementing Standards (continued)</strong></td>
<td><strong>Objective</strong>: Describe how to conduct a feedback meeting after a baseline assessment. Present “Feedback and Operational Action Plan.” Respond to participants’ questions on the presentation.</td>
<td><strong>Facilitator’s Handbook</strong>, Presentation Graphics, “Feedback and Operational Action Plan” Copies of the presentation for the participants</td>
</tr>
<tr>
<td>55 minutes</td>
<td><strong>Implementing Standards (continued)</strong></td>
<td><strong>Objective</strong>: Practice conducting a feedback meeting after a baseline assessment. <strong>Activity</strong>: Divide participants into three small groups. Give each group a copy of a summary form with baseline results (results can be the same or different). Ask each group to prepare a role play on how to give feedback about the results to the facility staff. The groups will have 20 minutes to prepare the role play and 7 minutes to present. Facilitate the discussion in the larger group after all groups have presented.</td>
<td>Copies of the summary form for each group with baseline results</td>
</tr>
<tr>
<td>15 minutes</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>45 minutes</td>
<td><strong>Implementing Standards (continued)</strong></td>
<td><strong>Presentation</strong>: Present “Key Implementing Teams.” Brainstorm with participants about who should be part of each key implementing team in their SBM-R process.</td>
<td><strong>Facilitator’s Handbook</strong>, Presentation Graphics, “Key Implementing Teams” Copies of the presentation for the participants</td>
</tr>
<tr>
<td>5 minutes</td>
<td><strong>Review of day’s activities</strong></td>
<td>The facilitator asks questions and answers participants’ questions related to content covered in Day 3, focusing on areas in need of strengthening.</td>
<td></td>
</tr>
</tbody>
</table>
## MODULE ONE WORKSHOP OUTLINE

<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/ACTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAY 4, AM (240 minutes)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minutes</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
<td></td>
</tr>
<tr>
<td>5 minutes</td>
<td>Agenda for Day 4</td>
<td>Review agenda for Day 4</td>
<td>Flipchart with agenda for Day 4</td>
</tr>
<tr>
<td>60 minutes</td>
<td>Implementing Standards (continued)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Objective: Demonstrate how to promote the SBM-R process and create agreement.</td>
<td></td>
<td>Facilitator’s Handbook: “Promotion and Agreement” Exercise</td>
</tr>
<tr>
<td></td>
<td>Activity: Divide the participants into three small groups. Ask each group to prepare a role play on how to give feedback on assessment results to the facility. The groups will have 20 minutes to prepare the role play and 7 minutes to present. Facilitate the discussion in the larger group after all groups have presented.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>40 minutes</td>
<td>Implementing Standards (continued)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Objective: Describe simple methods to conduct initial cause analysis.</td>
<td></td>
<td>Facilitator’s Handbook, Presentation Graphics, “Gap Identification and Initial Cause Analysis” Copies of the presentation for the participants</td>
</tr>
<tr>
<td></td>
<td>Objective: List considerations when conducting operational planning.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Presentation: Present “Gap Identification and Initial Cause Analysis.”</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Respond to participants’ questions on the presentation.</td>
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<td></td>
</tr>
<tr>
<td>15 minutes</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>50 minutes</td>
<td>Implementing Standards (continued)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Objective: Agree upon next steps and assign responsible individuals.</td>
<td></td>
<td>Flipchart with suggested next steps</td>
</tr>
<tr>
<td></td>
<td>Present programmatic plan to participants. Discuss potential roles for their involvement. Identify tasks to be completed before Module Two.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 minutes</td>
<td>Baseline assessment</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Objective: Plan for baseline assessment.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>After establishing next steps, plan for baseline assessment. If possible, agree on:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• SBM-R teams</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Dates</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Support needed</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Make sure that you have enough copies of the assessment tools.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 minutes</td>
<td>Evaluation and Closing</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
EXERCISE: WHAT IS QUALITY?

1. What is quality in health services?

2. What are the advantages of a quality health service?

3. What are the obstacles to achieving quality?

4. How can we achieve quality in health services?

5. How can we verify quality?
EXERCISE: STAKEHOLDER ANALYSIS

Group 1: Facility managers

Group 2: Health providers

Group 3: Clients

Each group will discuss and answer the following questions about their stakeholders:

1. What are the interests of this group?

2. What is the strength of this group and its potential impact on the process?

3. What are the weaknesses of this group?

4. How can the participation and support of this group be achieved?
EXERCISE: ASSESSMENT TOOL REVIEW

Each group will:

- Review the assessment tool provided and comment on the following aspects:
  - Format
  - Areas/Sections
  - Performance standards
  - Verification criteria
- Prepare a brief presentation to provide feedback.
EXERCISE: PROMOTION AND AGREEMENT

Instructions
Each group will perform a role play of the visit/meeting for the promotion of and agreement on the standards-based management process at their facility.

Keep in mind that you have to present:

- Information on the objectives and development of the process (steps, duration)
- Advantages for the facility
- Commitments from the facility
- Assessment tool and assessment results
- Identification of counterparts for the process
EXERCISE: THE LANDSCAPE

Objective
To stimulate participants to think about daily changes and the barriers and facilitating factors in the change management process.

Time: 10–15 minutes

Materials
- Landscape drawing (see page 1-18) on a flipchart, transparency or presentation graphic

Instructions for the Facilitator
Use this exercise to introduce the concept of a change management process before the participants work on finishing their operational action plans. Using the sample landscape drawing provided, prepare in advance a flipchart page that contains the same elements; put the sample on a transparency or use the presentation graphic available on the CD-ROM. Have the drawing “hidden” (or covered) until the exercise begins.

Procedure
1. Show the drawing and ask the participants what they see in the drawing.
2. Allow time for the participants to look at the landscape and start telling what they see. They will probably say things like “it is a landscape” or “there are trees (birds, clouds, sun)” until they have described all the elements in the drawing.
3. Next, ask them what they think this landscape represents. They will probably give responses such as “nature cycle” or “there are areas where trees are growing better than the others.” Keep probing for additional ideas about the elements they describe.
4. Then discuss the drawing and make a comparison between changes in nature and the changes that they will need to implement in their facilities when they return.

Discussion Questions
1. How easy is it to make changes? How easy is it to change what we have been doing for years, and to replace old habits with new practices?
2. What are the obstacles to making changes? Can we anticipate some of them and strategize ways to overcome them? Are there obstacles that we cannot anticipate?
3. What are the factors that will help you in implementing new changes in infection prevention?
4. What are possible barriers to implementing changes in infection prevention practices?
Summarize the Main Points

It is important to keep in mind that changes occur every day in life and in nature. There are factors that facilitate change, such as team building and teamwork, knowledge and skills, leadership, standards and goals. There are also factors that make change difficult, such as people who are not trained, do not understand why changes are needed or do not feel they have a role in the process. Change is also difficult when the changes are not explained or when they are made by a few individuals rather than by a team. It is important to try to anticipate obstacles, have a clear goal, work in teams and be persistent. When we make small changes and see results, it creates momentum for other changes.
SUGGESTED NEXT STEPS TO BE IMPLEMENTED AFTER MODULE ONE

After Module One has been completed, here are common next steps that programs can take to move forward with the SBM-R process. At the end of the workshop, discuss with the group the suggested next steps and identify deadlines and people responsible for each one, and highlight the importance of completing these steps before starting Module Two.

<table>
<thead>
<tr>
<th>STEP OR ACTIVITY</th>
<th>PEOPLE RESPONSIBLE</th>
<th>DEADLINE</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Adjust/modify the tools according to the participants’ input, if necessary, and send copies of the assessment tools to each facility.</td>
<td>SBM-R facilitators</td>
<td>2 weeks</td>
</tr>
<tr>
<td>• Hold an internal meeting at each facility to promote/inform about the SBM-R process, baseline assessment and next steps, including the creation or expansion of SBM-R local teams (coaches) by area/section of the assessment tool.</td>
<td>Local SBM-R team</td>
<td>1 week</td>
</tr>
<tr>
<td>• Coordinate with each facility on dates and teams and support needed for the baseline assessments.</td>
<td>SBM-R facilitators</td>
<td>2 weeks</td>
</tr>
<tr>
<td>• Conduct baseline assessments, summary of results and feedback meetings.</td>
<td>Local SBM-R teams with support from SBM-R facilitators</td>
<td>During the next 4 weeks</td>
</tr>
<tr>
<td>• Analyze baseline results with small teams by area of the assessment tool (departments/wards/units), and develop action plans focusing on rapid interventions (the “low-hanging fruit”).</td>
<td>Local SBM-R teams with support from SBM-R facilitators</td>
<td>After baseline assessments</td>
</tr>
<tr>
<td>• Implement action plans.</td>
<td>Local SBM-R teams</td>
<td>After baseline assessments and before Module Two</td>
</tr>
<tr>
<td>• Conduct knowledge and/or skills update for the SBM-R local teams or providers from the facilities in the content area on which the SBM-R process is focusing (e.g., infection prevention, family planning/reproductive health, HIV/AIDS, maternal health).</td>
<td>SBM-R facilitators and technical resources (trainers and technical advisors)</td>
<td>Two courses between now and Module Two</td>
</tr>
<tr>
<td>• Conduct an internal monitoring assessment.</td>
<td>Local SBM-R teams with support from SBM-R facilitators</td>
<td>Right before Module Two (3–4 months after baseline assessment)</td>
</tr>
<tr>
<td>• Begin Module Two.</td>
<td>SBM-R facilitators</td>
<td>4–5 months after Module One</td>
</tr>
</tbody>
</table>
Module One: Beginning the SBM-R Process

FINAL EVALUATION

Please score each workshop component, circling the number that best reflects your opinion about the workshop, with 1 being the minimum score (worst), and 5 the maximum (best).

<table>
<thead>
<tr>
<th>WORKSHOP COMPONENT</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>General organization of the workshop</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Content of the workshop</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Sequence of content and activities</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Presentations</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Group work</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Time dedicated to each subject</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Supporting material</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Group participation</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Logistics</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

What would you suggest to improve this workshop?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Additional comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Thank you,
The Facilitators
QUALITY CONCEPTS

Slide 1

Quality Concepts

Slide 2

Objectives

• Define quality
• Explain the importance of quality
Module One: Beginning the SBM-R Process

Slide 3

Definition of Quality

The most desirable outcome of a health intervention in terms of:
- Maximum well-being for the client, considering:
  - Risks and benefits
  - Gains and loses
- Provider satisfaction
- Efficiency
- Individual and social balance

Slide 4

Importance of Quality

- Greater impact of health interventions
- Increasing focus on client rights
- Increasing need to meet regulations
- Increasing competition
- Increasing pressure for organizational efficiency
- Institutional viability and protection of assets
Module One: Beginning the SBM-R Process

Slide 5

Quality Framework

Social-cultural

Client

Civil Society

Provider

State

Context

Slide 6

Aspects of Quality

- Technical
- Interpersonal
- Environmental/amenities
Summary

- There are many factors to quality services
- What aspects of quality are most important to you?
STANDARDS-BASED MANAGEMENT AND RECOGNITION OF HEALTH SERVICE DELIVERY

Slide 1

Standards-Based Management and Recognition of Health Service Delivery

Slide 2

Objectives

- Define the Standards Based Management and Recognition (SBM-R) model
- Describe the four steps of the SBM-R model
What is SBM-R?

- Practical management approach for improving performance and quality of health services
- Based on use of operational, observable performance standards for on-site assessment
- Must be tied to reward or incentive program
- Consists of four basic steps

The Four Steps of SBM-R

1. Set Standards
2. Implement Standards
3. Measure Progress
4. Reward Achievements
Slide 5

Step One: Set the Performance Standards

Slide 6

Steps to Setting Standards

- Identify area of services to be improved
- Define core support and supply processes to provide these services
- Develop performance standards based on international guidelines, national policies or guidelines, and site-specific requirements
- Consider providers’ input and clients’ preferences
Module One: Beginning the SBM-R Process

Slide 7

Performance Standards

The standards tell providers not only what to do but also how to do it

Slide 8

Sample Performance Assessment Tool

<table>
<thead>
<tr>
<th>Area: Pregnancy Care</th>
<th>Verification Criteria</th>
<th>Y, N, NA</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The facility conducts a routine rapid assessment of pregnant women</td>
<td>Observe in the reception area or waiting room if the person who receives the pregnant woman: • Asks if she has or has had: - Vaginal bleeding - Headache or visual changes - Breathing difficulty - Severe abdominal pain - Fever • Immediately notifies the health provider if any of these conditions are present</td>
<td>_____</td>
<td>_____</td>
</tr>
</tbody>
</table>
Sample Summary Form of Assessment Tool for MNH - Hospital

<table>
<thead>
<tr>
<th>AREAS</th>
<th>STANDARDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care for pregnancy-related complications</td>
<td>17</td>
</tr>
<tr>
<td>Labor, delivery, immediate postpartum and newborn care</td>
<td>27</td>
</tr>
<tr>
<td>Support services (lab., blood bank, pharmacy)</td>
<td>28</td>
</tr>
<tr>
<td>Infection prevention</td>
<td>11</td>
</tr>
<tr>
<td>Information, education and communication</td>
<td>15</td>
</tr>
<tr>
<td>Human, physical and material resources</td>
<td>27</td>
</tr>
<tr>
<td>Management systems</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>139</td>
</tr>
</tbody>
</table>

Step Two: Implement the Standards
Module One: Beginning the SBM-R Process

Slide 11

Steps to Implement Standards

- Do baseline assessment
- Identify performance gaps
- Identify causes of gaps and interventions to correct them
- Implement interventions
- Begin and support change process

Slide 12

Implementation Cycle

Model Adapted from the International Society for Performance Improvement
**Baseline Assessment**

- Determines actual level of performance using the performance assessment tool
- Helps to identify performance gaps
- Once gaps are identified, identifies their causes

---

**In Order to Perform, a Performer Needs To:**

- **Know how to do**
- **Be enabled to do**
- **Want to do**
Module One: Beginning the SBM-R Process

Slide 15

<table>
<thead>
<tr>
<th>Capability</th>
<th>Opportunity</th>
<th>Motivation</th>
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<tbody>
<tr>
<td>(Know how to do)</td>
<td>(Be enabled to do)</td>
<td>(Want to do)</td>
</tr>
<tr>
<td>Knowledge, skills, information</td>
<td>Resources, tools, capacity</td>
<td>Inner drive, incentives</td>
</tr>
</tbody>
</table>

Slide 16

**Intervention Identification and Implementation**

- Once gaps are identified, do cause analysis to identify interventions
- Interventions should match the cause of the gap
- Implement selected interventions
Module One: Beginning the SBM-R Process

Slide 17

**Intervention Identification**

- **MOTIVATION**
  - Resources, Capacity
  - Knowledge, Skills, Information

- **INCENTIVES**
  - Strengthening of Management Systems, Provision of Resources
  - Training, Information

Slide 18

**Change Management Strategy**

- What makes change difficult?
- Performance standards are a tool for initiating and sustaining change
- Important to focus on actions and achievement of early results to help ease the change process
- Individuals can be powerful agents for or against change
Change Management Strategy

- The standards in the tools represent easy and hard challenges
- Changes start with the “low-hanging fruit”
- Managers and providers start with easiest tasks and then move to more difficult tasks, developing and increasing their change management skills
- Observe change process to identify new developments, initiatives and behaviors

“Multidimensional” Supervision and Support

- SBM-R process uses a variety of ways to supervise and support change process:
  - Self/internal
  - Peer/benchmarking
  - Supportive supervision (on demand), external assessment
  - Client involvement and community participation
- Bottom-up approach: based on local control, empowerment, motivation, advocacy, resource mobilization
Step Three: Measure Progress

- Encourage providers to self-assess
- Measure progress (internal monitoring)
- Bring facilities together to share challenges and successes
Module One: Beginning the SBM-R Process

Slide 23

Example: Total Results by Hospital, Honduras

2001-2004

- HRO
- HJMG
- HSMO

Graph showing percentage changes over the years.

Slide 24

Example: Hospital Results by Areas, Honduras

Graph showing percentage changes by areas.

0% 10% 20% 30% 40% 50% 60% 70% 80% 90%

EMEG EMB TP, P, PP Y S APOYO BIOSEG I.E.C RR.HH S.GER.
Module One: Beginning the SBM-R Process

Slide 25

Results from Seven Hospitals in Malawi

![Bar chart showing results from seven hospitals in Malawi](chart)

Slide 26

PROQUALI, Brazil

Compliance with standards of reproductive health care

![Bar chart showing compliance in the 13th Health Center-Bahia](chart)
Module One: Beginning the SBM-R Process

Slide 27

**PROQUALI Brazil:**
Results from Five Pilot Clinics

![Graph showing results from five pilot clinics](image)

Slide 28

![Photographs of PROQUALI Brazil](image)
Module One: Beginning the SBM-R Process

Slide 35

Step Four: Recognize and Reward Achievements

- Address motivational issues
- Decide upon incentives
- Implement incentive programs

Slide 36
Ways to Enhance Motivation

- Empowerment: Giving the tools to self-assess and implement
- Challenges: Establishing a clear goal
- Achievements: Easy to show results
- Healthy competition: Grouping facilities encourages sharing of experiences and some competition to succeed

Ways to Provide Recognition

- Feedback
- Social recognition
- Material recognition
Conferred by the Ministry of Health to Mzuzu Central Hospital in recognition of the achievement of standards of excellence in Infection Prevention practices Year 2004

UKHONDO NDI MOYO

Secretary for Health
Summary

- Four-step process
- Not as complicated as it may sound
- Puts the power in the hands of local providers and managers
- Requires multiple sources of supervision and support
LANDSCAPE EXERCISE
Slide 1

Change Management

Slide 2

Objectives

- Describe issues in change management
- Describe the change process
- Describe common challenges to change
Slide 3

**Change**

- When something stops being what it is and becomes something different
- Processes that occur permanently in nature and society
- Can be:
  - Quantitative and qualitative
  - External (organizational strategies, practices and systems) and internal (personal values, aspirations and behavior)
- There are forces that oppose and forces that contribute to change

Slide 4

**Challenges for Change**

- Initial challenges:
  - There is no time
  - There is no support
  - This is not relevant
  - There are no resources

*Adapted from: “The Dance of Change,” Peter Senge et al., 1999.*
Module One: Beginning the SBM-R Process

Slide 5

Challenges for Change

• Challenges during implementation:
  • This does not work
  • Nobody understands us

• Challenges for institutionalization:
  • Who is responsible
  • It was not my idea
  • What follows after this?


Slide 6

Contributing Forces

• Development of networks of committed persons
• More and better opportunities to achieve personal results
• Better results for the organization

Module One: Beginning the SBM-R Process

Slide 7

Change Management

- Development of vision and leadership
- Creation of consequences of performance
- Stakeholder analysis and management
- Team building

Slide 8

Change Management

- Continuous learning and improvement
- Resource mobilization
- Continuous feedback
- Client participation and community mobilization
Change Process

<table>
<thead>
<tr>
<th>STEPS</th>
<th>PHASES</th>
<th>MODULES</th>
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<tbody>
<tr>
<td>1. Promotion and agreement</td>
<td>PREPARATION AND BEGINNING THE PROCESS</td>
<td>MODULE 1</td>
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<tr>
<td>2. Measurement of actual</td>
<td></td>
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<td>performance</td>
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<td>3. Cause analysis</td>
<td>STRENGTHENING OF THE PROCESS</td>
<td>MODULE 2</td>
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<td>4. Intervention identification</td>
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<td>5. Implementation</td>
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<td>6. Verification</td>
<td>REINFORCING AND INSTITUTIONALIZING THE</td>
<td>MODULE 3</td>
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<tr>
<td>7. Recognition</td>
<td>PROCESS</td>
<td></td>
</tr>
</tbody>
</table>

Vision Development

- Should be created collectively rather than communicated
- An image of the future we want to create
- A force that pulls rather than pushes
- In constant evolution
- Shared vision serves to align all efforts toward a common goal
- Express vision through organizational values (principles that rule relationships)

Module One: Beginning the SBM-R Process

Slide 11

Leadership

- Helps to develop vision
- Reinforces organizational values
- Supports team building
- Provides constant feedback
- Motivates
- Supports and orients
- Stimulates participation and development of change and new ideas

Slide 12

Leader

The best leader is the one who does not stand out; rather, at the end of a job, people say “we did it”

Next is the type of leader whom people admire

Then, there is the leader whom people fear

And, finally, the leader whom people hate
Summary

- Change should be managed
- Change requires committed individuals
- Change is constant
STAKEHOLDER ANALYSIS

Slide 1

Stakeholder Analysis

Slide 2

Objectives

- Define stakeholder analysis
- Describe strategies for working with stakeholders
Module One: Beginning the SBM-R Process

Slide 3

Definition

- Groups or persons who are or believe that they are affected (positively or negatively) by the consequences of an action or process

Slide 4

Types

- Primary: are those directly involved, e.g., providers, administrators, managers, clients, government, donors
- Secondary: are those indirectly involved, e.g., professional, social and political organizations, media, universities
Module One: Beginning the SBM-R Process

Slide 5

**Interests**

- Providers: economic, social and psychological rewards; freedom from arbitrary decisions; working conditions
- Clients: quality of services or goods; quality assurance; technical information on services or goods; cost

Slide 6

**Management**

- Identify stakeholders
- Specify nature of interest
- Assess level of interest
- Assess strength of stakeholders and potential impact on project
- Manage the situation to obtain support and jointly work toward common goals (they are not the enemy)
Module One: Beginning the SBM-R Process

Slide 7

Strategies

• Incorporate their points of view
• Negotiate
• Pay particular attention to those who have more potential influence
• Build upon those who are in favor
• Neutralize those who are against
• Maintain contact and communication

Slide 8

Summary

• Need understanding of stakeholder interests
• Stakeholders must be involved in the process
• Pay special attention to those with potential influence
SETTING STANDARDS

Slide 1

Setting Standards

Definition of Desired Performance

Slide 2

Objectives

- Describe how performance standards are set
- Describe qualities of operational performance standards
Slide 3

Standards-Based Management and Recognition of Health Service Delivery

- Set Standards 1
- Implement Standards 2
- Measure Progress
- Reward Achievements

Slide 4

Step One: Setting the Standards

- Set Standards 1
**Module One: Beginning the SBM-R Process**

**Slide 5**

**Desired Performance**

Performance standards describe desired performance:
- What to do
- How to do it

**Slide 6**

**Standard Development**

- International and national guidelines are used as reference
- Relevant facility policies considered
- Process mapping used to guide tool development
Slide 7

"Operationalization" of Standards

Guidelines
("Reference" standards)

Assessment tool
("Operational" performance standards plus verification criteria)

Slide 8

Implementation Cycle

Desired performance → Gap → Cause analysis

Actual performance

Intervention identification & implementation

Model Adapted from the International Society for Performance Improvement
Module One: Beginning the SBM-R Process

Slide 9

Organizational Infrastructure and Standards

Standards areas
- Leadership and partnerships
- Human and material resources
  - Infrastructure
  - Management systems
- Direct client services

Adapted from the Canadian Council on Health Services Accreditation

Slide 10

Desired Performance

- Client Preferences
- Provider Inputs
- Service Delivery Guidelines
- National Policies/Priorities

Assessment Tool
Process maps are diagrams that show how services are delivered. The mapping shows:

- The major processes in place,
- Their key activities,
- The sequencing of these activities,
- The inputs required, and
- The outputs to be produced.

Ensures that the activities making up a particular process are properly understood

Ensures activities are well managed in order to deliver appropriate customer service
Module One: Beginning the SBM-R Process

Slide 13

Assessment Tool

Support Functions
- Lab, Blood Bank and Pharmacy
- Infection Prevention
- Information, Education and Communication
- Human, Physical and Material Resources
- Management Systems

Direct Services
- Pregnancy Complications
- Labor & Delivery
- Newborn Care

*Dots represent inputs, process steps (on the arrow), and outputs

Slide 14

“Operationalization” of Standards

- Must be consistent with reference (international and national) standards
- Integrates all the different aspects of provision of care
- Links to indicators that are:
  - Observable
  - Objectively verifiable
  - Practical
Module One: Beginning the SBM-R Process

Slide 15

Assessment Tool

- Lists key performance standards organized by area of services to clients and support functions
- Each performance standard has easily observable verification criteria with “yes,” “no” or “not applicable” options
- Objectively describes the desired level of performance
- Measures actual performance
- Helps identify performance gaps

Slide 16

Performance Assessment Tool

Area: Pregnancy Care

<table>
<thead>
<tr>
<th>Perf. Standard</th>
<th>Verification Criteria</th>
<th>Y, N, NA</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The facility conducts a routine rapid assessment of pregnant women</td>
<td>Observe in the reception area or waiting room if the person who receives the pregnant woman: • Asks if she has or has had: - Vaginal bleeding - Headache or visual changes - Breathing difficulty - Severe abdominal pain - Fever • Immediately notifies the health provider if any of these conditions are present</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Module One: Beginning the SBM-R Process

Slide 17

**Assessment Tool**

**Area: Infection Prevention**

<table>
<thead>
<tr>
<th>Perf. Standard</th>
<th>Verification Criteria</th>
<th>Y, N, N/A</th>
<th>Comments</th>
</tr>
</thead>
</table>
| 1. The cleaning equipment is decontaminated, cleaned and dried before reuse or storage. | Observe if the mops, buckets, brushes and cleaning cloths are:  
• Decontaminated by soaking for 10 minutes in 0.5% chlorine solution  
• Washed in detergent and water  
• Rinsed in clean water  
• Dried completely before reuse or storage | | |
| | | | |
| | | | |
| | | | |

Slide 18

**Considerations for Group Performance Standards in Areas**

- Are part of the same process of provision of care
- Are performed by the same people
- Happen at the same place
- Require the same materials
- Facilitate decision-making
Summary Assessment Tool for EOC

<table>
<thead>
<tr>
<th>AREAS</th>
<th>STANDARDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnancy complications</td>
<td>16</td>
</tr>
<tr>
<td>Labor, delivery, immediate postpartum and newborn care</td>
<td>27</td>
</tr>
<tr>
<td>Support services (lab., blood bank, pharmacy)</td>
<td>24</td>
</tr>
<tr>
<td>Infection prevention</td>
<td>18</td>
</tr>
<tr>
<td>Information, education and communication</td>
<td>05</td>
</tr>
<tr>
<td>Human, physical and material resources</td>
<td>23</td>
</tr>
<tr>
<td>Management systems</td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>123</td>
</tr>
</tbody>
</table>

Using the Assessment Tool

How can it be used?
- Baseline assessment
- Job aid for self-assessment and learning
- Peer assessment and learning
- Internal monitoring and supervision
- External assessment, supervision and evaluation
Summary

- Base performance standards on existing international and national references
- Consider institutional protocols
- Consider providers’ input and clients’ preferences
- Assessment tool must be observable and objective
- Field-test the assessment tool
- Assessment tool can be improved/adjusted periodically
- It can be used for self-, peer, internal or external assessment
IMPLEMENTING STANDARDS

Slide 1

Implementing Standards

Measurement of Actual Performance

Slide 2

Objectives

• Describe how to implement performance standards
• Describe the purpose and outcomes of a baseline assessment
• Practice data collection
Module One: Beginning the SBM-R Process

Slide 3

Using the Assessment Tool

Remember that the assessment tool can be used:
- For baseline assessment
- As a job aid for self-assessment and learning
- For peer assessment and learning
- For internal monitoring and supervision
- For external assessment, supervision and evaluation

Slide 4

Baseline Assessment

- First measurement of actual performance using the assessment tool
- Measures the level of actual performance using the tool in a health facility
- Establishes actual performance in percentage terms by area and total
- Methods used: structured direct observation, review of service and administrative records and documents, and interviews
What is structured observation?

- To systematically observe an act or an element of service delivery without intervening
- Tool is used to observe the elements and stages of a process or service delivery element in an organized fashion
- Immediate feedback is not provided
- Fundamental attitudes:
  - Respect
  - Objectivity

Document Review

- Part of assessing performance, usually built into the tool
- Identify sources of information: statistical records, service records, administrative forms, etc.
- Question key individuals to confirm or to clarify information, or to identify sources of information
- Using the assessment tool, review service records to identify how procedures and other relevant situations are handled
Module One: Beginning the SBM-R Process

Slide 7

**Interviews**

- Identify the staff who typically carry out a procedure or are responsible for a procedure
- Interview staff using the instrument
- Probe to get precise information
- Verify complementary items
- Do not suggest responses or assume responses not given

Slide 8

**Filling Out the Assessment Tool**

- Immediately register the information collected
- Register “Yes,” “No” or “Not Applicable” in the corresponding column
- Write down all pertinent comments, in a clear and concise fashion, highlighting issues and possible causes
Slide 9

**Filling Out the Assessment Tool**

- Register “Yes” if the item exists or is performed as it is described
- Register “No” if the item does not exist or is performed incorrectly or incompletely
- Register “NA” when the item requires a condition that does not exist
- Register “N/O” when the standard was not observed or not performed

Slide 10

**Initial Identification of Gap**

**Identify gaps by marking “N” for:**
- Practices not performed at all
- Practices performed incorrectly or incompletely

**In the Comments column:**
- If possible, summarize potential reasons why not done correctly
Summary

- Use the tool to assess existing performance
- Very straightforward, just fill in appropriate response
SCORING AND SUMMARY OF RESULTS

Slide 1

Scoring and Summary of Results

Slide 2

Objectives

- Describe how to score performance standards
- Practice scoring performance standards
Module One: Beginning the SBM-R Process

Slide 3

Scoring

- Scoring using the assessment tool:
  - Each standard is worth one point
  - For each standard to be “achieved,” all of the verification criteria should be “Yes” or “Not Applicable”

Slide 4

Sample of Scoring

<table>
<thead>
<tr>
<th>Area: HIV/AIDS Testing</th>
<th>Standard</th>
<th>Verification Criteria</th>
<th>Y, N, NA</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. AAAA</td>
<td>aaaaaaaaaaaaaaaaaaaaaa</td>
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<tr>
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<td></td>
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<td></td>
<td></td>
<td>aaaaaaaaaaaaaaaaaaaa</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. BBBB</td>
<td>bbbbbbbbbbbbbbbbbb</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>bbbbbbbbb</td>
<td>NA</td>
<td></td>
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<tr>
<td></td>
<td>3. CCCC</td>
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<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>ccccccccccccccccccccc</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>cccccccccccccccccc</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>ccccccccccccccc</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. DDDD</td>
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<td>N</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>ddddddddddd</td>
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</table>
Sample of Scoring

### Area: HIV/AIDS Testing

<table>
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<th>Standard</th>
<th>Verification Criteria</th>
<th>Y, N, NA</th>
<th>Comments</th>
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<tr>
<td>1. AAAA</td>
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</tr>
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<td>2. BBBB</td>
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<td>NA</td>
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<td>3. CCCC</td>
<td>cccccccccccccccccc</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>4. DDDDD</td>
<td>ddddddddddd</td>
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<td>N</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

---

Scoring

- Why only “yes” or “no”?
- Using a dichotomous (two-pronged) system simplifies scoring
- A rating scale would create a complicated scoring process and tool
How to Tabulate the Results

• Summarize the results using the “Summary of results” form
• Write the number of standards achieved per area and in total
• Calculate and write the percentage of standards achieved per area and in total

Sample Summary Form

<table>
<thead>
<tr>
<th>AREAS</th>
<th>NUMBER OF STANDARDS</th>
<th>STANDARDS ACHIEVED</th>
</tr>
</thead>
<tbody>
<tr>
<td>LABORATORY MANAGEMENT</td>
<td>08</td>
<td></td>
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<tr>
<td>LABORATORY LOGISTICS</td>
<td>05</td>
<td></td>
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<tr>
<td>LABORATORY SAFETY</td>
<td>07</td>
<td></td>
</tr>
<tr>
<td>HIV TESTING</td>
<td>17</td>
<td></td>
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<tr>
<td>QUALITY ASSURANCE</td>
<td>08</td>
<td></td>
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<tr>
<td>TOTAL</td>
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Sample Summary Form

<table>
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<th>AREAS</th>
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<th>STANDARDS ACHIEVED</th>
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<td>2</td>
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<tr>
<td>TOTAL</td>
<td>45</td>
<td>17</td>
<td>38</td>
<td></td>
</tr>
</tbody>
</table>

Summary

- Scoring is easy
- “Achieving” standards means “all or nothing”
FEEDBACK AND OPERATIONAL ACTION PLAN

Slide 1

Feedback and Operational Action Plan

Slide 2

Objectives

• Describe how to conduct a feedback meeting after a baseline assessment
• Describe how to prepare an operational action plan
Slide 3

**Feedback Meeting**

- Present to the facility staff the results in total and by area
- Orient the staff so that they can begin the implementation of solutions to simple gaps through rapid interventions
- Provide a copy of the results of the assessment tool and the summary form

Slide 4

**Providing Feedback**

- Always begin with the positive aspects
- Be specific and descriptive
- Give your impression and not that of others
- Respect providers' self-esteem
- Be interactive
Module One: Beginning the SBM-R Process

Slide 5

Rapid Interventions

It is helpful to begin with gaps that are easy to fix and do not require an elaborate cause analysis.

Why are rapid interventions important?
• Produce immediate results
• Produce a sense of empowerment
• Create momentum for change
• Increase change management skills

Slide 6

Preparing an Operational Workplan

• Prepare collaboratively with the local teams by area of the assessment tool
• Identify gaps that can be quickly addressed
• Identify what to do, who will do it, resources needed and deadline
• Team involvement is essential to make workplan a useful tool
Module One: Beginning the SBM-R Process

Slide 7

Operational Workplan

<table>
<thead>
<tr>
<th>GAP/CAUSE</th>
<th>INTERVENTION/ACTION</th>
<th>RESPONSIBLE</th>
<th>SUPPORT</th>
<th>DEADLINE</th>
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</tr>
</tbody>
</table>

Slide 8

SBM-R Teams

- Form SBM-R central team to guide overall process
- Form improvement teams by area of the assessment tool
- Each area team should develop an action plan beginning with rapid interventions
**Slide 9**

**Operational Strategy for Change**

- Expand implementation teams of committed people
- Identify champions
- Begin with areas of less resistance: change management skills develop gradually
- Try to concentrate your efforts to achieve results
- Progress gradually but in a sustained way
- Monitor progress periodically using the tool
- Provide feedback and reward achievements

**Slide 10**

**Summary**

- Feedback must be provided carefully and with respect
- Teamwork is essential for planning to move forward
- Begin with interventions easy to implement to build momentum
KEY IMPLEMENTING TEAMS

Slide 1

Key Implementing Teams

Slide 2

Objectives

- Identify the different teams involved in the SBM-R process
- Review the role of key implementing teams
Module One: Beginning the SBM-R Process

Slide 3

Key Implementing Teams

- Technical Resources
- Coordinating Body
- SBM-R Teams (coaches)
- External Assessors

Slide 4

Role of SBM-R Coordinating Body

- Define institutional goals and policies
- Approve norms and protocols
- Approve performance standards (assessment tool) and establish recognition criteria
- Designate the verification team (for external assessment)
- Select and/or approve the SBM-R teams (coaches)
Module One: Beginning the SBM-R Process

Slide 5

Role of SBM-R Coordinating Body

- Identify and/or approve technical resources
- Formalize the recognition process, including definition of consequences
- Advocate for resource allocation
- Monitor, support and evaluate the SBM-R initiative

Slide 6

Technical Resources

- Training
- Technical assistance
- Followup
Role of SBM-R Teams (Coaches)

- Inform, promote the SBM-R initiative
- Provide support for the baseline assessment; provide feedback
- Help with the identification of performance gaps, analysis of their causes and selection of interventions
- Provide support for mobilization of specialized technical assistance

Role of SBM-R Teams (Coaches)

- Provide support for resource mobilization
- Monitor progress: promote/support internal assessments and benchmarking
- Promote community mobilization and client participation activities
- Give support for internal promotion and recognition
Module One: Beginning the SBM-R Process

Slide 9

Role of External Assessors

- Prepare for the verification visit
- Evaluate the new actual performance of the facility using the assessment tool
- Summarize the results
- Recommend recognition of the facilities that achieve the required level of performance
- Provide feedback on the results to the facility
- Solve any potential disagreement on the results of the assessment

Slide 10

Summary

- SBM-R coordinating body manages process
- Coaches facilitate the process
- Technical resource experts assist with technical related input
- External assessors assess/verify performance for external recognition
GAP IDENTIFICATION AND INITIAL CAUSE ANALYSIS

Slide 1

Gap Identification and Initial Cause Analysis

Slide 2

Objective

- Describe gap identification
- Describe simple techniques to conduct initial cause analysis
- Identify types of interventions
Module One: Beginning the SBM-R Process

Slide 3

**Initial Identification of Gaps**

Identify gaps by marking “N” for:
- Practices not performed at all
- Practices performed incorrectly or incompletely

In the Comments column:
- If possible, summarize potential reasons why not done correctly

Slide 4

**Implementation Cycle**

Model Adapted from the International Society for Performance Improvement
Module One: Beginning the SBM-R Process

Slide 5

Capability (Know how to do)  →  Knowledge, skills, information

Opportunity (Be enabled to do)  →  Resources, tools, capacity

Motivation (Want to do)  →  Inner drive, incentives

Slide 6

Intervention Identification

MOTIVATION  →  INCENTIVES

Resources, Capacity  →  Strengthening of Management Systems, Provision of Resources

Knowledge, Skills, Information  →  Training, Information
Module One: Beginning the SBM-R Process

Slide 7

Techniques for Cause Analysis

Less structured approaches:
- Intuition: Immediate “sense” of cause
- Networking: Talking to others
- Experience: Based on opinion of experts

Slide 8

Remember that:
- There are factors that are under our control and there are factors that are outside of our control (resources, technical expertise, policies)
- We can begin the changes by addressing the factors that are under our control and produce rapid results
- We need to identify the sources of external assistance for the factors that are outside of our control
**Interventions can be:**

- Rapid interventions
- Interventions based on local resources
- Interventions that require external support

**Rapid Interventions**

Some causes of gaps are so evident that they do not require an elaborate cause analysis because the appropriate intervention is obvious.

Rapid interventions:

- Produce immediate results
- Produce a sense of empowerment
- Create momentum for change
- Increase change management skills
Module One: Beginning the SBM-R Process

Slide 11

**Benchmarking**

“Benchmarking is simply about making comparisons with other organizations and then learning the lessons that those comparisons throw up”

(The European Benchmarking Code of Conduct)

“Benchmarking is the process of identifying, understanding, and adapting outstanding practices from organizations anywhere in the world to help your organization to improve its performance”

(The Benchmarking Exchange)

Slide 12

**Networking**

Working interconnected with other partners
### Summary of Cause Analysis

<table>
<thead>
<tr>
<th>Method</th>
<th>Module</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less structured</td>
<td>Module 1</td>
</tr>
<tr>
<td>methods:</td>
<td></td>
</tr>
<tr>
<td>Simple</td>
<td></td>
</tr>
<tr>
<td>Direct</td>
<td></td>
</tr>
<tr>
<td>Semi-structured</td>
<td>Module 2</td>
</tr>
<tr>
<td>methods:</td>
<td></td>
</tr>
<tr>
<td>Systematic</td>
<td></td>
</tr>
<tr>
<td>Require some methodology</td>
<td></td>
</tr>
<tr>
<td>Structured methods:</td>
<td>We will not use these methods</td>
</tr>
<tr>
<td>Complex</td>
<td></td>
</tr>
<tr>
<td>Almost research or research</td>
<td></td>
</tr>
</tbody>
</table>

### Summary

- This is the stage for identifying gaps and basic causes
- The next module will address detailed cause analysis methods
- The next module will address more complicated interventions to resolve gaps
OVERVIEW OF THE SBM-R FACILITATED MODULAR TRAINING

Slide 1

Overview of the SBM-R Facilitated Modular Training

JHPIEGO
A Global Leader in Improving Health Care for Women and Families

Slide 2

<table>
<thead>
<tr>
<th>STEPS</th>
<th>PHASES</th>
<th>MODULES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Promotion and agreement</td>
<td>PREPARATION AND BEGINNING THE PROCESS</td>
<td>MODULE 1</td>
</tr>
<tr>
<td>2. Measurement of actual performance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Cause analysis</td>
<td>STRENGTHENING OF THE PROCESS</td>
<td>MODULE 2</td>
</tr>
<tr>
<td>4. Intervention identification</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Implementation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Verification</td>
<td>REINFORCING AND INSTITUTIONALIZING THE PROCESS</td>
<td>MODULE 3</td>
</tr>
<tr>
<td>7. Recognition</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
MODULE TWO: STRENGTHENING THE SBM-R PROCESS

INTRODUCTION

The goal of this module is to strengthen the SBM-R process. The facilitator should make sure that the following activities have been completed before beginning the module:

- The assessment tool has been modified according to feedback provided in Module One.
- An internal meeting has been conducted in each facility to promote and inform staff about the SBM-R process, the baseline assessment and the next steps, including the creation or expansion of SBM-R local teams (coaches) by area/section of the assessment tool.
- Baseline assessments and feedback meetings have been conducted in each facility.
- Central SBM-R teams and teams by area of the assessment tool have been formed in each facility.
- Performance gaps have been identified, an initial cause analysis has been conducted and action plans have been developed focusing on rapid interventions (the "low-hanging fruit").
- Knowledge and/or skills have been updated for the SBM-R local teams from the facilities in the content areas on which the SBM-R process is focusing (e.g., infection prevention, family planning/reproductive health, HIV/AIDS, maternal health).
- If possible, an internal monitoring assessment has been conducted to measure progress to date.
Module Two: Strengthening the SBM-R Process

- SBM-R teams have prepared a presentation to share, including results in total and by area of baseline assessment and second internal monitoring assessments, success stories, challenges and experience using the assessment tool.

By the end of this module, participants will be able to continue implementation of the SBM-R process at selected facilities, identifying gaps, analyzing causes of the gaps and identifying appropriate interventions.

The participants will be able to:

- Analyze data on performance gaps to identify additional areas for strengthening
- Conduct a detailed cause analysis
- Identify and develop an action plan to implement more complex interventions
- Network and share results with other participating facilities
- Plan and implement benchmarking visits
- Identify strategies to reward achievements
- Mobilize resources
## SCHEDULE FOR MODULE TWO: STRENGTHENING THE PROCESS

<table>
<thead>
<tr>
<th>DAY 1</th>
<th>DAY 2</th>
<th>DAY 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>4 hours</strong></td>
<td><strong>4 hours</strong></td>
<td><strong>4 hours</strong></td>
</tr>
<tr>
<td><strong>Opening</strong></td>
<td><strong>Warm-up</strong></td>
<td><strong>Warm-up</strong></td>
</tr>
<tr>
<td>Participant introduction</td>
<td><strong>Agenda for Day 2</strong></td>
<td><strong>Agenda for Day 3</strong></td>
</tr>
<tr>
<td>Overview of the workshop</td>
<td><strong>Implementing process (cont.):</strong></td>
<td><strong>Resource mobilization</strong></td>
</tr>
<tr>
<td>Expectations and group norms</td>
<td>• Identification and selection of interventions</td>
<td><strong>Next steps</strong></td>
</tr>
<tr>
<td>Review of the Standards-Based Management model</td>
<td>• Team building</td>
<td><strong>Evaluation and closing</strong></td>
</tr>
<tr>
<td><strong>Progress to date:</strong></td>
<td><strong>Progress to date (cont.)</strong></td>
<td></td>
</tr>
<tr>
<td>• Results (baseline and second monitoring assessments)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Experiences with measurements and use of the tool</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Success stories</td>
<td><strong>Implementing process:</strong></td>
<td></td>
</tr>
<tr>
<td>• Challenges</td>
<td>• Recognition of achievements</td>
<td></td>
</tr>
<tr>
<td><strong>LUNCH</strong></td>
<td><strong>LUNCH</strong></td>
<td></td>
</tr>
<tr>
<td><strong>3 hours</strong></td>
<td><strong>3 hours</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Warm-up</strong></td>
<td><strong>Warm-up</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Progress to date (cont.)</strong></td>
<td><strong>Measuring progress:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Implementing process:</strong></td>
<td>• Networking and benchmarking</td>
<td></td>
</tr>
<tr>
<td>• Identification of performance gaps and cause analysis</td>
<td><strong>Recognition of achievements</strong></td>
<td></td>
</tr>
</tbody>
</table>
MODEL WORKSHOP OUTLINE

The workshop outline on page 2-5 is a model plan of the training to be delivered. It presents enabling objectives that participants must meet in order to accomplish the specific learning objectives described in the workshop syllabus. For each enabling objective, there are suggestions for appropriate learning activities, resources and materials needed. The facilitator may develop additional practice activities, case studies, role plays or other learning exercises specific to the country or group of participants.

The workshop outline is divided into four columns:

- **Time.** This section of the outline indicates the approximate amount of time to be devoted to each learning activity.

- **Objectives/Activities.** This column lists the enabling objectives and learning activities. Because the objectives outline the sequence of training, they are presented in the order in which they will be addressed in the workshop. The combination of the objectives and activities (introductory activities, small-group exercises, practice, breaks, etc.) describes the flow of training.

- **Training/Learning Methods.** This column describes the various methods, activities and strategies the facilitator will use to transfer the knowledge and skills related to each enabling objective.

- **Resources/Materials.** The fourth column of the workshop outline lists the resources and materials needed to support the learning activities.

Note that the workshop schedule is based on the workshop outline, and that modifications made to one should be reflected in the other.
<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/ACTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAY 1, AM (240 minutes)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minutes</td>
<td><strong>Activity: Opening</strong></td>
<td>Welcome by facilitators and representatives from the organization(s) sponsoring the workshop. Brief introduction on why this workshop is important for the overall program being implemented.</td>
<td></td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Activity: Introduce participants and facilitators.</strong></td>
<td>Briefly introduce participants or facilitators.</td>
<td></td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Activity: Provide an overview of Module One and an overview of Module Two.</strong></td>
<td>Review the goals and objectives of Module One, and any key tasks that were to be implemented before starting this module. Review the objectives and schedule of Module Two.</td>
<td>Copies of the table with the steps and phases of the SBM-R process.</td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Activity: Identify participant expectations and group norms.</strong></td>
<td>Discuss participant expectations with the group and list them on a flipchart. Identify which will be met in the workshop. Review previous group norms and add as needed.</td>
<td>Copies of Module Two objectives and schedule for each participant.</td>
</tr>
<tr>
<td>30 minutes</td>
<td><strong>SBM-R Model</strong></td>
<td><strong>Presentation:</strong> Briefly present “Standards-Based Management and Recognition of Health Service Delivery.” Move quickly through content you feel is well understood, and spend more time on areas that you feel need further emphasis. Ask a lot of questions to assess what the participants remember so you can focus on areas of need.</td>
<td>Facilitator’s Handbook, Presentation Graphics, “Standards-Based Management and Recognition of Health Service Delivery”</td>
</tr>
<tr>
<td>30 minutes</td>
<td><strong>Group Work</strong></td>
<td><strong>Activity:</strong> Prepare to present baseline and internal monitoring results.</td>
<td>Facilitator’s Handbook, “Results, Successes and Challenges” Exercise</td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Break</strong></td>
<td></td>
<td>Flipchart and markers for the groups</td>
</tr>
<tr>
<td>110 minutes</td>
<td><strong>Presentations</strong></td>
<td>Each group will have approximately 10–15 minutes to present. Facilitate these group presentations and discussion. Note key challenges and common or outstanding successes on a flipchart. Allow teams to ask questions and discuss findings.</td>
<td></td>
</tr>
<tr>
<td>45 minutes</td>
<td><strong>LUNCH</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## MODULE TWO WORKSHOP OUTLINE

<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/ACTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DAY 1, PM (180 minutes)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minutes</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
<td></td>
</tr>
<tr>
<td>30 minutes</td>
<td>Presentations (cont.)</td>
<td>Each group will have approximately 10–15 minutes to present. Facilitate group presentations and discussion. Note key challenges and common or outstanding successes on a flipchart. Allow teams to ask questions and discuss findings.</td>
<td>Facilitator’s Handbook, Presentation Graphics, “Cause Analysis: Module Two” Copies of the presentation for participants Copies of The Memory Jogger™ II by M. Brassard and D. Ritter (Published by GOAL/QPC, Salem, New Hampshire, 1994) and The Team Memory Jogger™ (published by GOAL/QPC and Oriel Inc., 1995) for each participant or each team Flipcharts prepared with examples of selected cause analysis techniques</td>
</tr>
</tbody>
</table>
| 40 minutes | Implementing Standards (continued)  
**Objective:** Describe different methods for conducting a detailed cause analysis. | Present “Cause Analysis: Module Two.” Ask the group to identify which cause analysis methods discussed will be most useful for them. Ask questions to ensure a good understanding of the different methodologies. Tell the participants that they will receive a booklet with more detailed information on cause analysis techniques. During or after the presentation, distribute the booklet to the participants or teams. Have a flipchart prepared in advance with concrete examples of the following techniques:  
- Nominal group  
- Force field analysis  
- Fishbone diagram  
- Flowchart  
- Run chart  
- Pareto chart | |
| 15 minutes | Break | | |
| 45 minutes | Implementing Standards (continued)  
Group Work  
**Objective:** Apply different methods to complete cause analysis for site-specific problems. | Participants will continue to work in their facility groups. Distribute directions for “Performance Gaps and Cause Analysis” Exercise. Circulate and provide coaching/assistance. | Facilitator’s Handbook, “Performance Gaps and Cause Analysis” Exercise Copies of the instructions to each participant or group Flipchart and markers for each group |
| 35 minutes | Implementing Standards (continued)  
Group Work  
**Objective:** Apply different methods to complete cause analysis for site-specific problems. | Facilitate the discussion as the groups share their gaps and causes. | |
<p>| 5 minutes | Review of day’s activities | Ask questions; answer participants’ questions on content covered in Day 1, focusing on areas needing strengthening. | |</p>
<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/ACTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 min</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
<td>Flipchart with agenda for Day 2</td>
</tr>
<tr>
<td>40 min</td>
<td>Implementing Standards (continued)</td>
<td>Present “Selection of Interventions.”</td>
<td>Copies of the presentation for participants</td>
</tr>
<tr>
<td></td>
<td>Objective: Describe different types of interventions.</td>
<td>Respond to participants’ questions. Refer the participants to the SBM-R field guide</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Objective: Describe how to identify and select</td>
<td>for more information on types of interventions (table with examples of intervention</td>
<td></td>
</tr>
<tr>
<td></td>
<td>interventions based on gap causes.</td>
<td>by cause). Facilitators can get more information on this topic by consulting the</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>handout from Stolovitch and Keeps (1999). This handout can also be distributed to</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>participants if the facilitator wishes.</td>
<td></td>
</tr>
<tr>
<td>40 min</td>
<td>Implementing Standards (continued)</td>
<td>Participants will continue to work in their facility groups. Distribute directions</td>
<td>Facilitator’s Handbook, “Select Interventions” Exercise</td>
</tr>
<tr>
<td></td>
<td>Objective: Select appropriate interventions for</td>
<td>for “Select Interventions” Exercise. Circulate and provide coaching and assistance.</td>
<td>Copies of the instructions to each participant or group</td>
</tr>
<tr>
<td></td>
<td>identified gaps.</td>
<td></td>
<td>Flipchart and markers for each group</td>
</tr>
<tr>
<td>35 min</td>
<td>Implementing Standards (continued)</td>
<td>Facilitate a discussion as groups present their selected interventions.</td>
<td>Facilitator’s Handbook, “Select Interventions” Exercise</td>
</tr>
<tr>
<td></td>
<td>Objective: Select appropriate interventions for</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>identified gaps.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 min</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Objective: Describe the importance of team building.</td>
<td>Respond to participants’ questions.</td>
<td>Strategy and Planning” Copies of presentation for participants</td>
</tr>
<tr>
<td></td>
<td>Objectives: Describe the functions of teams in the SBM</td>
<td>Tell the participants that they will receive a booklet with more detailed information</td>
<td>Copies of The Memory Jogger™ and The Team Memory Jogger™ for each participant or</td>
</tr>
<tr>
<td></td>
<td>process.</td>
<td>on teamwork. During or after the presentation, give the booklet to the participants or</td>
<td>each team</td>
</tr>
<tr>
<td>40 min</td>
<td>Implementing Standards (continued)</td>
<td>Divide groups by facility again. Do the “Expanding the SBM-R Teams” Exercise.</td>
<td>Facilitator’s Handbook, “Expanding the SBM-R Teams” Exercise</td>
</tr>
<tr>
<td></td>
<td>Objectives: Form implementation teams and agree upon</td>
<td></td>
<td>Copies of the instructions to each participant or group</td>
</tr>
<tr>
<td></td>
<td>working procedures.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 min</td>
<td>Activity: Groups share their plans.</td>
<td>If there is time, each group has 5 minutes to share their plans. Then have a few</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>minutes of group discussion. Groups should hand a copy of their plans to the</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>facilitator.</td>
<td></td>
</tr>
<tr>
<td>TIME</td>
<td>OBJECTIVES/ACTIVITIES</td>
<td>TRAINING/LEARNING METHODS</td>
<td>RESOURCE MATERIALS</td>
</tr>
<tr>
<td>----------</td>
<td>-----------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>60 minutes</td>
<td>Lunch</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>DAY 2, PM (180 minutes)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minutes</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe principles of networking and benchmarking.</td>
<td>Respond to participants’ questions.</td>
<td>Copies of the presentation for participants</td>
</tr>
<tr>
<td>30 minutes</td>
<td>Measuring Progress (continued)</td>
<td>Participants will continue to work in their facility groups.</td>
<td><strong>Facilitator’s Handbook</strong>, “Develop a Benchmarking Plan” Exercise</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Develop a benchmarking plan.</td>
<td>Distribute directions from “Develop a Benchmarking Plan” Exercise. Circulate and provide coaching and assistance.</td>
<td>Copies of the instructions to each participant or group</td>
</tr>
<tr>
<td>20 minutes</td>
<td>Measuring Progress (continued)</td>
<td>Facilitate a discussion as groups share their plans or ask questions. Groups should hand a copy of the plans to the facilitator.</td>
<td><strong>Facilitator’s Handbook</strong>, “Develop a Benchmarking Plan” Exercise</td>
</tr>
<tr>
<td>15 minutes</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 minutes</td>
<td>Recognize and Reward Achievements</td>
<td>Divide participants into four or five small groups, not by facility. Distribute directions from the “Motivation” Exercise. Circulate and provide coaching and assistance.</td>
<td><strong>Facilitator’s Handbook</strong>, “Motivation” Exercise</td>
</tr>
<tr>
<td></td>
<td><strong>Group Work</strong></td>
<td></td>
<td>Copies of the instructions to each participant or group</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe personal motivation factors.</td>
<td></td>
<td>Individual cards (can be post-it notes)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flipchart and markers for each group</td>
</tr>
<tr>
<td>20 minutes</td>
<td>Activity: Groups share their presentations.</td>
<td>Facilitate the discussion as groups share their plans or ask questions.</td>
<td></td>
</tr>
<tr>
<td>30 minutes</td>
<td>Recognize and Reward Achievements</td>
<td>Present “Recognizing Achievements” and discuss. Respond to participants’ questions.</td>
<td><strong>Facilitator’s Handbook</strong>, Presentation Graphics, “Recognizing Achievements”</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe steps to recognizing achievements.</td>
<td></td>
<td>Copies of the presentation for participants</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Describe incentive strategies.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 minutes</td>
<td>Review of day’s activities</td>
<td>Ask questions and answer participants’ questions related to content covered in Day 2, focusing on areas in need of strengthening.</td>
<td></td>
</tr>
<tr>
<td>TIME</td>
<td>OBJECTIVES/ACTIVITIES</td>
<td>TRAINING/LEARNING METHODS</td>
<td>RESOURCE MATERIALS</td>
</tr>
<tr>
<td>----------</td>
<td>---------------------------------------</td>
<td>-----------------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
</tr>
<tr>
<td>DAY 3, AM (240 minutes)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 minutes</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
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</tr>
<tr>
<td>5 minutes</td>
<td>Agenda for Day 3</td>
<td>Review agenda for Day 3</td>
<td>Flipchart with agenda for Day 3</td>
</tr>
<tr>
<td>40 minutes</td>
<td>Resource Mobilization</td>
<td>Present “Resource Mobilization: A ‘Win-Win’ Strategy” and discuss. Provide an opportunity for the group to share ways they have done this successfully, or ideas for how they might successfully do it in the future. Share stories of how it has been done successfully in other places.</td>
<td>Facilitator’s Handbook, Presentation Graphics, “Resource Mobilization: A ‘Win-Win’ Strategy” Copies of the presentation for participants</td>
</tr>
<tr>
<td>40 minutes</td>
<td>Next Steps</td>
<td>Present the plan to participants. Discuss potential roles for their involvement. Identify tasks to be completed before Module Three.</td>
<td>Flipchart with next steps</td>
</tr>
<tr>
<td>30 minutes</td>
<td>Evaluation and Closing</td>
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</tbody>
</table>

**Note to the facilitator:** As you have some flexibility with time for Day 3 (the times allotted to the activities above do not add up to 240 minutes), you can decide how better to use this time. You can devote more time to presentations and activities than in the previous 2 days, add issues that you want to address with the SBM-R teams, compress the previous days and end in 3 days or just finish by mid-morning.
EXERCISE: RESULTS, SUCCESSES AND CHALLENGES

Participants will be grouped by their facilities. Each group will have an allotted time (to be determined by the facilitator) to finish preparing their presentations for the larger group. Each group should use a flipchart, overhead transparencies or PowerPoint presentation to share the following with the larger group:

1. Results of the baseline and other internal monitoring assessments by area and in total.

2. Experiences with measurement and using the tool. What worked well? What was difficult?

3. Success stories they can share, or difficult gaps/issues they have resolved.

4. Remaining challenges and difficulties. Gaps that are particularly difficult to address.
EXERCISE: PERFORMANCE GAPS AND CAUSE ANALYSIS

Participants will be grouped by their facilities. Each group will review the assessment tool and the summary of the results of the baseline and/or internal monitoring assessment (the latest) of their own facility. The group must identify:

- Performance gaps: Analyze the criteria not met and describe two performance gaps.
- Cause analysis: Identify the possible causes of one of the gaps described using one or more of the cause analysis methods presented.

The participants will have 45 minutes for the group work and 5 minutes to present. Each group should use the flipchart to make their presentations.
EXERCISE: SELECT INTERVENTIONS

Participants will be grouped by their facilities. Each group should do the following:

- Based on the performance gaps and causes identified, the group will recommend:
  - One rapid intervention that requires only immediate action,
  - One other important and appropriate intervention, and
  - Technical and administrative resources needed for each intervention.

- Document the interventions you agree on for your operational action plan (a template follows these instructions).

- Prepare a brief presentation to summarize your work for the group.

The participants will have 40 minutes for the group work and 5 minutes to present. Each group should use the flipchart to make their presentation.
EXERCISE: EXPANDING THE SBM-R TEAMS

Participants will be grouped by their facilities. Each group should do the following:

- Identify or review the members of the SBM-R central team in the facility.
- Identify or review the members of the SBM-R sub-committees by area/section of the assessment tool (departments, services, units).
- Outline working procedures for these committees. These should address each of the following:
  - Key contact information for the central SBM-R team (name, phone number, e-mail address),
  - Frequency and logistics of the meetings,
  - Frequency of monitoring assessments and action plans,
  - Who will coordinate efforts, and
  - Strategies for mobilizing resources.

Each group has 40–60 minutes to work. Depending on the time available, the facilitator will decide whether the small groups will report to the larger group. In any case, they should hand one copy of their plan to the facilitator.
Module Two: Strengthening the SBM-R Process

EXERCISE: DEVELOP A BENCHMARKING PLAN

Using the results from the last assessment, each group will follow the steps in the benchmarking process and develop a benchmarking plan for an area to be improved. They should either prepare a flipchart summarizing their presentation, or document their plan and read it aloud to the group, depending on time available.

Steps in the Benchmarking Process:

1. Identify the subject area to be reviewed and the gap to be closed.
2. Identify “best practices” potential partners. Select the type of benchmarking.
3. Contact the partners.
4. Select the “benchmarking team.”
5. Prepare for the benchmarking visit (information to be gathered, logistics).
6. Conduct the benchmarking visit.
7. Analyze the findings and make recommendations.
8. Implement and monitor the recommendations.

The group will have 30 minutes for the group work and 5 minutes to present later.
EXERCISE: MOTIVATION

Divide the group into four or five small groups; do not group participants by facility. In each group:

- The group will select a facilitator and a reporter.
- Each member of the group will write on a card the three factors that are the most important to increase her/his own motivation. The participants will not include their names on the cards.
- The facilitator will collect the individual cards and write down the factors selected on a flipchart.
- The group will list the factors presented, prioritizing them according to how frequently they were selected.

The group will have 30 minutes for the group work and 2–3 minutes to present.
<table>
<thead>
<tr>
<th>GAPS/CAUSES</th>
<th>INTERVENTIONS</th>
<th>RESPONSIBLE PERSON</th>
<th>SUPPORT</th>
<th>DEADLINE</th>
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<tbody>
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</tbody>
</table>
### SUGGESTED NEXT STEPS TO BE IMPLEMENTED AFTER MODULE TWO

After Module Two has been completed, there are next steps for moving forward with the SBM-R process. At the end of the workshop, discuss with the group the suggested next steps and identify deadlines and people responsible for each one, and highlight the importance of completing these steps before starting Module Three.

<table>
<thead>
<tr>
<th>STEP OR ACTIVITY</th>
<th>PEOPLE RESPONSIBLE</th>
<th>DEADLINE</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Brief key stakeholders on progress and begin to discuss incentives (SBM-R coordinating body, facility directors and administrators).</td>
<td>SBM-R facilitators and SBM-R teams (coaches)</td>
<td>As soon as possible</td>
</tr>
<tr>
<td>• Adjust/modify the tools according to the participants’ inputs if needed, and send copies of the assessment tools to each facility.</td>
<td>SBM-R facilitators/technical resources</td>
<td>2 weeks</td>
</tr>
<tr>
<td>• Expand the SBM-R teams (coaches), central SBM-R team and teams by area of the assessment tool.</td>
<td>SBM-R team</td>
<td>1 week</td>
</tr>
<tr>
<td>• Orient the SBM-R teams on the process and tool.</td>
<td>SBM-R team</td>
<td>2 weeks</td>
</tr>
<tr>
<td>• Analyze baseline or internal monitoring results with small teams by area of the assessment tool (departments/wards/units), and adjust action plans by area of the assessment tool.</td>
<td>SBM-R central teams with teams per area</td>
<td>2 weeks</td>
</tr>
<tr>
<td>• Implement and monitor action plans.</td>
<td>SBM-R central teams with teams per area</td>
<td>During next 3 months</td>
</tr>
<tr>
<td>• Conduct knowledge and/or skills update for the SBM-R local teams or providers from the facilities on the content area on which the SBM-R process is focusing (e.g., infection prevention, family planning/reproductive health, HIV/AIDS, maternal health).</td>
<td>SBM-R facilitators and technical resources (trainers and technical advisors)</td>
<td>One course between now and Module Three</td>
</tr>
<tr>
<td>• Plan and conduct benchmarking visits if appropriate.</td>
<td>SBM-R teams in coordination with other facilities</td>
<td>Before Module Three</td>
</tr>
<tr>
<td>• Conduct a new internal monitoring assessment.</td>
<td>SBM-R team (with support from SBM-R facilitators if needed)</td>
<td>3–4 months from now and before Module Three</td>
</tr>
<tr>
<td>• Develop the logo and the criteria for the recognition process and select the external assessment team.</td>
<td>SBM-R facilitators and SBM-R coordinating body</td>
<td>Next 3 months</td>
</tr>
<tr>
<td>• Begin implementation of internal recognition for the units/areas that achieve 60% or more of the performance standards.</td>
<td>SBM-R central team (with support from the SBM-R facilitators if needed)</td>
<td>Next 3 months</td>
</tr>
<tr>
<td>• Begin Module Three.</td>
<td>SBM-R facilitators</td>
<td>4–5 months after Module Two</td>
</tr>
</tbody>
</table>
FINAL EVALUATION

Please score each workshop component, circling the number that best reflects your opinion about the workshop, with 1 being the minimum score (worst), and 5 the maximum (best).

<table>
<thead>
<tr>
<th>WORKSHOP COMPONENT</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>General organization of the workshop</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Content of the workshop</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Sequence of content and activities</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Presentations</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Group work</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Time dedicated to each subject</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Supporting material</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Group participation</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Logistics</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

What would you suggest to improve this workshop?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Additional comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Thank you,
The Facilitators
Standards-Based Management and Recognition of Health Service Delivery

Objectives

- Define the Standards Based Management and Recognition (SBM-R) model
- Describe the four steps of the SBM-R model
**What is SBM-R?**

- Practical management approach for improving performance and quality of health services
- Based on use of operational, observable performance standards for on-site assessment
- Must be tied to reward or incentive program
- Consists of four basic steps

---

**The Four Steps of SBM-R**

1. Set Standards
2. Implement Standards
3. Measure Progress
4. Reward Achievements
Module Two: Strengthening the SBM-R Process

Slide 5

Step One: Set the Performance Standards

Slide 6

Steps to Setting Standards

- Identify area of services to be improved
- Define core support and supply processes to provide these services
- Develop performance standards based on international guidelines, national policies or guidelines, and site-specific requirements
- Consider providers’ input and clients’ preferences
Module Two: Strengthening the SBM-R Process

Slide 7

Performance Standards
The standards tell providers not only what to do but also **how to do it**

Slide 8

**Sample Performance Assessment Tool**

<table>
<thead>
<tr>
<th>Area: Pregnancy Care</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Perf. Standard</strong></td>
</tr>
<tr>
<td>1. The facility conducts a routine rapid assessment of pregnant women</td>
</tr>
<tr>
<td></td>
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</tbody>
</table>
## Sample Summary Form of Assessment Tool for MNH - Hospital

<table>
<thead>
<tr>
<th>AREAS</th>
<th>STANDARDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care for pregnancy-related complications</td>
<td>17</td>
</tr>
<tr>
<td>Labor, delivery, immediate postpartum and newborn care</td>
<td>27</td>
</tr>
<tr>
<td>Support services (lab., blood bank, pharmacy)</td>
<td>28</td>
</tr>
<tr>
<td>Infection prevention</td>
<td>11</td>
</tr>
<tr>
<td>Information, education and communication</td>
<td>15</td>
</tr>
<tr>
<td>Human, physical and material resources</td>
<td>27</td>
</tr>
<tr>
<td>Management systems</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>139</td>
</tr>
</tbody>
</table>

### Step Two: Implement the Standards

- Set Standards 1
- Implement Standards 2
**Steps to Implement Standards**

- Do baseline assessment
- Identify performance gaps
- Identify causes of gaps and interventions to correct them
- Implement interventions
- Begin and support change process

---

**Implementation Cycle**

Model Adapted from the International Society for Performance Improvement

- Desired performance
- Gap
- Cause analysis
- Intervention identification & implementation
- Actual performance
Baseline Assessment

- Determines actual level of performance using the performance assessment tool
- Helps to identify performance gaps
- Once gaps are identified, identifies their causes

In Order to Perform, a Performer Needs To:

- Know how to do
- Be enabled to do
- Want to do
Module Two: Strengthening the SBM-R Process

Slide 15

- **Capability** (Know how to do) → Knowledge, skills, information
- **Opportunity** (Be enabled to do) → Resources, tools, capacity
- **Motivation** (Want to do) → Inner drive, incentives

Slide 16

**Intervention Identification and Implementation**

- Once gaps are identified, do cause analysis to identify interventions
- Interventions should match the cause of the gap
- Implement selected interventions
**Module Two: Strengthening the SBM-R Process**

**Slide 17**

**Intervention Identification**

- **MOTIVATION**
  - Resources, Capacity

- **INCENTIVES**
  - Strengthening of Management Systems, Provision of Resources

- **Knowledge, Skills, Information**
  - Training, Information

**Slide 18**

**Change Management Strategy**

- What makes change difficult?
- Performance standards are a tool for initiating and sustaining change
- Important to focus on actions and achievement of early results to help ease the change process
- Individuals can be powerful agents for or against change
**Slide 19**

**Change Management Strategy**

- The standards in the tools represent easy and hard challenges
- Changes start with the “low-hanging fruit”
- Managers and providers start with easiest tasks and then move to more difficult tasks, developing and increasing their change management skills
- Observe change process to identify new developments, initiatives and behaviors

**Slide 20**

**“Multidimensional” Supervision and Support**

- SBM-R process uses a variety of ways to supervise and support change process:
  - Self/internal
  - Peer/benchmarking
  - Supportive supervision (on demand), external assessment
  - Client involvement and community participation
- Bottom-up approach: based on local control, empowerment, motivation, advocacy, resource mobilization
Step Three: Measure Progress

- Encourage providers to self-assess
- Measure progress (internal monitoring)
- Bring facilities together to share challenges and successes
Module Two: Strengthening the SBM-R Process

Slide 23

Example: Total Results by Hospital, Honduras

2001-2004

Baseline
1st internal
2nd internal
3rd internal

HRO
HJMG
HSMO

23

Slide 24

Example: Hospital Results by Areas, Honduras

2003
2004

EMEG
TP, P, P, Y
SAP
BIOSEG
IEC
RR HH
S GER

24
Results from Seven Hospitals in Malawi

PROQUALI, Brazil

Compliance with standards of reproductive health care

13th Health Center-Bahia
Module Two: Strengthening the SBM-R Process

Slide 27

PROQUALI Brazil:
Results from Five Pilot Clinics

Baseline 9 months 12 months 24 months

0 10 20 30 40 50 60 70 80 90 100

Slide 28
Step Four: Recognize and Reward Achievements

- Address motivational issues
- Decide upon incentives
- Implement incentive programs
**Ways to Enhance Motivation**

- Empowerment: Giving the tools to self-assess and implement
- Challenges: Establishing a clear goal
- Achievements: Easy to show results
- Healthy competition: Grouping facilities encourages sharing of experiences and some competition to succeed

**Ways to Provide Recognition**

- Feedback
- Social recognition
- Material recognition
Conferred by the Ministry of Health to Mzuzu Central Hospital in recognition of the achievement of standards of excellence in Infection Prevention practices Year 2004

UKHONDO NDI MOYO

Secretary for Health
Summary

• Four-step process
• Not as complicated as it may sound
• Puts the power in the hands of local providers and managers
• Requires multiple sources of supervision and support
CAUSE ANALYSIS

Slide 1

Objectives

- Describe different methods for conducting a detailed cause analysis
- List considerations for selecting the appropriate methods for cause analysis
- Practice cause analysis
Module Two: Strengthening the SBM-R Process

Slide 3

Where are we?

- Rapid cause analysis and interventions already completed
- More detailed cause analysis methods may be applied for more complex gaps
- Finding the root cause is essential to selecting appropriate interventions and applying preventive measures

Slide 4

Implementation Cycle

Model Adapted from the International Society for Performance Improvement
Remember that:

- There are factors that are under our control and there are factors that are outside of our control (resources, technical expertise, policies)
- We can begin the changes by addressing the factors that are under our control and produce rapid results
- We need to identify the sources of external assistance for the factors that are outside of our control

Slide 6

<table>
<thead>
<tr>
<th>Capability (Know how to do)</th>
<th>Knowledge, skills, information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opportunity (Be enabled to do)</td>
<td>Resources, tools, capacity</td>
</tr>
<tr>
<td>Motivation (Want to do)</td>
<td>Inner drive, incentives</td>
</tr>
</tbody>
</table>
Module Two: Strengthening the SBM-R Process

Slide 7

**Intervention Identification**

- **MOTIVATION** → **INCENTIVES**
- Resources, Capacity → Strengthening of Management Systems, Provision of Resources
- Knowledge, Skills, Information → Training, Information

Slide 8

**Techniques for Cause Analysis**

Less structured approaches:
- Intuition: Immediate “sense” of cause
- Networking: Talking to others
- Experience: Based on experts’ opinions
Module Two: Strengthening the SBM-R Process

Slide 9

More on Networking

- Sharing gaps and issues with others
- Discussing and sharing successful solutions

Slide 10

More on Experience

- Cannot be taught, can only be learned
- Use experience of others by consulting experts
- Get several opinions in order to avoid potential biases
Techniques for Cause Analysis

Semi-structured techniques:
- Brainstorming
- Nominal group technique
- Force field analysis
- Fishbone diagram
- Flowcharts
- Run charts (tracking trends)
- Pareto diagram

Brainstorming

Allows the generation of a large number of ideas on a subject without criticizing or judging them

Steps:
- Define and write down the issue to be analyzed
- The members of the team give their ideas on the issue
- Ideas are not criticized, judged or interpreted
- Write down the ideas on a flipchart, using the speakers' words
- Eliminate ideas that are duplicates
Module Two: Strengthening the SBM-R Process

Slide 13

Nominal Group Technique

Allows a team to quickly come to a consensus on the relative importance of issues by incorporating individual rankings of importance into a team’s final priorities

Steps:
- Generate the list of issues to be prioritized
- Write the issues on a flipchart or board, using letters to identify them
- Each member prioritizes the issues, assigning numbers to each letter according to their relative importance (number 1 is the least important)
- Combine the rankings of all team members by adding up the individual scores for each letter
- The issue selected is the one with the highest score

Slide 14

Force Field Analysis

Allows a team to identify the forces or factors that are in favor of or against the solution of an issue

Steps:
- Draw a large T on a flipchart
- Write down the desired situation at the top of the T
- On the left side of the T, list the forces or factors that drive you to the desired situation
- On the right side, list the forces or factors that restrain your movement toward the desired situation
- Prioritize the driving forces that should/can be strengthened and the restraining forces that should/can be removed
- Keep in mind that frequently it is more helpful to remove barriers
**Fishbone Diagram**

Allows a team to identify in graphic form all the possible causes related to an issue or condition to discover its root causes

**Steps:**
- Place the performance gap you wish to close in a box at the end of a horizontal arrow
- Draw major cause categories or steps in the production or service process and connect them with the backbone arrow using diagonal arrows
- Continue the same process for secondary, tertiary, etc. causes

---

**Flowchart**

Allows a team to identify the sequence of events in a process

**Steps:**
- Define the beginning and the end of the process
- Determine the steps in the process, put them in sequence and link them with arrows
- Use appropriate symbols for each step: oval for actions that begin or end the process, rectangle for actions during the process, diamond to indicate decision steps
Run Chart

Allows a team to study observed data for trends or patterns over a specified period of time, using a simple linear graph. The time scale is drawn on the horizontal axis and the variable to be measured is drawn on the vertical axis.

Pareto Chart

Allows a team to focus efforts on the issues that offer the greatest potential for improvement by showing their relative frequency or size in a descending bar graph.
Slide 19

**Types of Causes and Solutions**

- Symptoms ➔ Quick fixes
- Apparent cause ➔ Corrective measures
- Root cause ➔ Preventive measures

Slide 20

**Summary of Less Structured Techniques**

Look directly for the cause, asking:
- Myself (intuition)
- Colleagues (networking)
- Experts (experience)
Module Two: Strengthening the SBM-R Process

Slide 21

Summary of the More Structured Techniques

Look for the cause through systematic analysis:

- Dispersion (brainstorming, force field analysis, NGT, fishbone diagram, flowchart)
- Use of data (run chart, Pareto diagram)

Slide 22

Summary

- At this stage, we identify apparent and root causes using detailed cause analysis methods
- Based on the causes identified, we select and implement corrective and preventive measures
SELECTION OF INTERVENTIONS

Slide 1

Selection of Interventions

Slide 2

Objectives

- Describe different types of possible interventions
- Describe how to identify and select appropriate interventions based on the causes of the gaps
- Practice how to select interventions
Module Two: Strengthening the SBM-R Process

Slide 3

Implementation Cycle

- Desired performance
- Actual performance
- Gap
- Cause analysis
- Intervention identification & implementation

Model Adapted from the International Society for Performance Improvement

Slide 4

- Capability (Know how to do) → Knowledge, skills, information
- Opportunity (Be enabled to do) → Resources, tools, capacity
- Motivation (Want to do) → Inner drive, incentives
Slide 5

Intervention Identification

- MOTIVATION ➔ INCENTIVES
  - Resources, Capacity ➔ Strengthening of Management Systems, Provision of Resources
  - Knowledge, Skills, Information ➔ Training, Information

Slide 6

Types of Interventions

- Related to capability
- Related to opportunity (enabling environment)
- Related to motivation
Interventions Related to CAPABILITY

- Provision of information (job expectations and feedback)
- Job aids
- Natural experience learning
- On-the-job training/Structured OJT
- Simulation/Role play
- Classroom training/Laboratory practice
- Self-study/Distance learning (including multimedia)

Interventions Related to OPPORTUNITY (Enabling Environment)

- Provision of resources
- Selection of personnel
- Redistribution of responsibilities/workload
- Redesign of the work environment/workflow
- Elimination of elements that interfere with tasks
- Provision of managerial and technical support
Slide 9

**Interventions Related to MOTIVATION**

- Strengthening of motivation:
  - Internal response to external events, internal factors
- Provision of incentives/consequences:
  - Elements provided by the external environment to increase motivation
  - Consequences: occur after performance
  - Both can be positive and negative

Slide 10

**Interventions Related to MOTIVATION**

**Motivation**

Is greatly influenced by two factors:
- Value: how highly a person values the desired performance
- Confidence: how strongly a person feels he/she will be successful
Module Two: Strengthening the SBM-R Process

Slide 11

**Strengthening of Motivation**

- Empowerment
- Challenges
- Achievements
- Healthy competition

Slide 12

**Recognition as Incentive**

- Feedback
- Social recognition
- Material recognition
Remember that:

- Some interventions require special motivation: particularly those that take more time or more effort, or question old systems (because they create insecurity or uncertainty)
- People constantly look at cost-benefit analysis and opportunity-cost analysis—What is the benefit? What will it cost me?

Interventions can be:

- Rapid interventions
- Interventions based on local resources
- Interventions that require external support
Remember that:

- There are factors that are under our control and there are factors that are outside of our control (resources, technical expertise, policies)
- We can begin the changes by addressing the factors that are under our control and produce rapid results
- We need to identify the sources of external assistance for the factors that are outside of our control

Rapid Interventions

Some causes of gaps are so evident that they do not require an elaborate cause analysis because the appropriate intervention is obvious

Rapid interventions:
- Produce immediate results
- Produce a sense of empowerment
- Create momentum for change
- Improve change management skills
Sample Operational Workplan

<table>
<thead>
<tr>
<th>GAP/CAUSE</th>
<th>INTERVENTION/ACTION</th>
<th>RESPONSIBLE</th>
<th>SUPPORT</th>
<th>DEADLINE</th>
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Summary

- Identifying causes of the gaps helps you select appropriate interventions
- Some gaps can have more than one cause
- There are a variety of interventions to select from
- Incentives and recognition will be addressed later
TEAM BUILDING AND OPERATIONAL STRATEGY AND PLANNING

Slide 1

Team Building and Operational Strategy and Planning

JHPIEGO

A GLOBAL LEADER IN IMPROVING HEALTH CARE FOR WOMEN AND FAMILIES

Slide 2

Objectives

- Describe importance of team building
- Describe functions of teams in SBM-R process
Module Two: Strengthening the SBM-R Process

Slide 3

Teams

- Facility Implementing Teams:
  - Form a Central SBM-R Committee related to performance standard area, include representatives from each department
  - Form SBM-R Sub-Committees related to performance standards in each department, ward or unit
- Strengthen Technical Support Teams:
  inventory of technical resources in performance standard content area
- SBM-R coordinating body

Slide 4

SBM-R Team Examples

A hospital is working on infection prevention, and it forms the following implementing teams:
- A Central SBM-R Infection Prevention Committee, with representatives from each department
- Departmental SMB-R Infection Prevention Sub-Committees, organized in each ward
- If possible, the central committee and sub-committee will also be trained in IP so they can provide support to their facility in the SBM-R process and technical area (IP)
Slide 5

**Team Building: An Effective Team Member**

- Takes responsibility
- Follows through on commitments
- Contributes to discussions
- Actively listens to others
- Communicates her/his message clearly
- Gives useful feedback
- Accepts feedback

Slide 6

**Team Building: Getting a Good Start**

- Agreement on a purpose
- Identification of stakeholders
- Identification of limitations and expectations
- Agreements on team roles
- Agreements on ground rules
- Agreements on logistics (meetings)
Team Building: Getting the Work Done

- Complete operational action plans
- Have productive meetings (use agendas, clarify team members’ responsibilities)
- Use data/objective information to identify gaps
- Evaluate potential solutions
- Implement changes/mobilize resources
- Check progress/celebrate results
- Document the team’s work

Sample Operational Workplan

<table>
<thead>
<tr>
<th>GAP/CAUSE</th>
<th>INTERVENTION/ACTION</th>
<th>RESPONSIBLE</th>
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</table>
Team Building: Common Team Problems

- Conflict and disagreement
- Overbearing experts
- Lack of focus
- Too much agreement
- Poor participation
- Lack of follow-through

Operational Strategy

- Expand implementation teams of committed people
- Identify champions
- Begin with areas of less resistance: change management skills develop gradually
- Try to concentrate your efforts to achieve results
- Progress gradually but keep progressing
- Monitor progress periodically using the assessment tool
- Provide feedback and reward achievements
Summary

- SBM-R process is an investment over time
- Requires teams of committed individuals to move forward
- Success of each facility depends on internal factors
MEASURING PROGRESS: NETWORKING AND BENCHMARKING

Slide 1

Measuring Progress: Networking and Benchmarking

JHPIEGO
An Affiliate of Johns Hopkins University
A global leader in improving health care for women and families

Slide 2

Objectives

- Describe principles of networking and benchmarking
- Apply principles of benchmarking
Standards-Based Management and Recognition of Health Service Delivery

Step 3: Measure Progress

Set Standards
Implement Standards
3 Measure Progress
4 Reward Achievements

Set Standards
Implement Standards
3 Measure Progress
Module Two: Strengthening the SBM-R Process

Slide 5

Steps to Measure Progress

- Encourage providers to self-assess
- Measure progress (internal monitoring)
- Bring facilities together to share challenges and successes
- Networking and benchmarking are important for moving forward

Networking

Working interconnected with other partners
Principles of Networking

- Networking develops when there is a need for people to work together to help each other
- Could be formal (structured meetings) or informal (talking, phone calls)
- Usually is not hierarchical; people communicate as equals through the network, no one supervises it
- Everybody must benefit from their participation in the network

Principles of Networking (cont.)

- It is not “coordinated” by anybody (auto-coordination); it is not “directed” or “controlled” by anybody
- It is constantly changing
- It supports and facilitates change
Slide 9

Benchmarking

“Benchmarking is simply about making comparisons with other organizations and then learning the lessons that those comparisons throw up”
(The European Benchmarking Code of Conduct)

“Benchmarking is the process of identifying, understanding, and adapting outstanding practices from organizations anywhere in the world to help your organization to improve its performance”
(The Benchmarking Exchange)

Slide 10

Types of Benchmarking

- Internal benchmarking: Takes place within the same organization—perhaps between units or wards
- External benchmarking:
  - Process benchmarking: Partners are organizations, performing similar work, in which we have identified best practices. The focus is on improving specific processes and operations.
  - Generic benchmarking: Partners are drawn from different business sectors to improve similar functions or work processes.
  - International benchmarking: Partners are sought from other countries.
Why use benchmarking?

- An effective “wake-up call” and helps to make a strong case for change
- Practical ways in which changes in performance can be achieved by learning from others who have already undertaken comparable changes
- Encourages new ideas and helps people be open to new approaches and ideas
- Provides opportunities for staff to learn new skills and be involved in the change process from the beginning

Benchmarking Process

It usually includes:
- Identifying gaps in performance
- Comparing aspects of performance with that of best practitioners
- Seeking new ways to improve performance
- Following through with implementing improvements
- Following up by monitoring progress and reviewing the benefits
The Benchmarking Process: Step by Step

1. Using the assessment tool, identify subject areas to be reviewed and gaps to be closed.
2. Based on assessments results, identify “best practices” potential partners. Decide how you will benchmark.
3. Contact partners.
4. Select “benchmarking team.”
5. Prepare benchmarking visit (information to be gathered, logistics).
6. Conduct benchmarking visit.
7. Analyze findings and make recommendations.
8. Implement and monitor recommendations.

Benchmarking is not...

- Looking only at the “competition”
- Only comparing statistics
- A quick fix, done once and not again
- Copying without thinking
- Industrial tourism: It is not a pleasure trip!
Slide 15

**Success Factors in Benchmarking**

- Senior management support
- Objectives clearly defined at the beginning
- Objectives in line with time and resources available
- Benchmarking teams understand their organization’s performance before the visit
- Teams have the right skills and competencies
- Stakeholders are kept informed

Slide 16

**Summary**

- Networking opens the door for benchmarking opportunities
- Benchmarking is a process of learning from others’ successes and
- Applying what you’ve learned to your situation
Recognizing Achievements

Objectives

- Describe steps to recognize and reward achievements
- Describe incentive strategies for internal recognition
Step Four: Recognize Achievements

Steps to Recognize Achievements

- Address motivational issues
- Decide upon incentives
- Implement incentive programs
Module Two: Strengthening the SBM-R Process

Slide 5

Importance of Motivation

- Undertaking change requires motivation
- The SBM-R process incorporates a motivational element from the start: professional and personal development, empowerment, challenges, achievement

Slide 6

Motivation

- Empowerment
- Challenge
- Achievement
- Healthy competition
Slide 7

**Incentives/Recognition**

- Feedback
- Social recognition
- Material recognition

Slide 8

**Incentives/Recognition**

- Feedback: less expensive but of high impact; it can be oral or written; it must be continual, timely, specific and interactive
Incentives/Recognition

- Social recognition: symbolic rewards (but with predictive value), help to improve morale, can adopt the form of congratulations, trophies, certificates, celebrations, conferring of authority

Incentives/Recognition

- Material recognition: monetary or in-kind benefits such as performance-based salaries/budgets, professional development opportunities, medical equipment, etc.
Module Two: Strengthening the SBM-R Process

Slide 11

Branding

- Consists of creating a distinctive mark that identifies health facilities that deliver quality services
- It is usually done through the use of a quality logo, or seal of approval, that defines the SBM-R program to the public
- This symbol of quality is used in promotional communication campaigns that serve to recognize and reward those who have earned the right to display the logo through provision of high-quality services
- The logo can be used in the elements of the internal promotional campaign and in the external recognition process

Slide 12

Examples of Logos

PROQUALI, Brazil

UKHONDO SAVES LIVES
Internal Promotion Campaigns

Important because they:
• Reward progress and achievement of the standards
• Boost staff morale and motivation
• Raise awareness of the quality improvement process in the facility

Internal Promotion Campaigns: Elements

• Symbolic material for individuals: key rings, T-shirts, etc.
• Symbolic group rewards: trophy, plaques, photos for unit of the month
• Ceremonies
Internal Promotion Campaigns: Criteria

- Achievement of an agreed-upon percentage of the standards in one area
- Achievement of an agreed-upon percentage of the standards overall, for example:
  - 60-80% of achievement in one area (Pins)
  - Over 80% (T-shirts and trophy)

Internal Promotion Campaigns: Procedure

- Each sub-committee presents results of its internal assessment to the SBM-R central team; they will verify the results
- The SBM-R central team will coordinate the presentation of rewards
Slide 17

Internal Recognition

Slide 18

Internal Incentives
Module Two: Strengthening the SBM-R Process

External Recognition

- Required level of compliance with the standards needs to be defined by the SBM-R coordinating body and communicated to the participating facilities (e.g., achievement of 80% of all quality standards, including all essential standards as appropriate)
- Teams of external assessors need to be formed and trained
External Recognition Process (cont.)

- External assessment must take place
- Consequences need to be decided by the SBM-R coordinating body and communicated to the participating facilities (examples below):
  - Recognition, certification
  - Plaque
  - Symbolic monetary award
  - Other: community involvement, mass media dissemination

Summary

- Internal and external recognition is important: Must answer “What’s in it for me?”
- SBM-R coordinating body defined the recognition criteria and process for meeting standards
- Internal recognition is coordinated and implemented by the facility and SBM-R teams
- External recognition will be addressed in more detail in Module Three
RESOURCE MOBILIZATION: A “WIN-WIN” STRATEGY

Slide 1

Slide 2

Objectives

• Describe importance of mobilizing resources
• Share successes and challenges in this area
Module Two: Strengthening the SBM-R Process

Resource Mobilization

- What is resource mobilization?
  - Bringing resources from different sources to ensure the improvement of performance and quality of health services
- Why is it important?
  - Using resources from different sources helps performance and quality improvement interventions continue over time
  - In decentralization, resources for performance and quality improvement in health care must be obtained at the local level

Resource Mobilization

- How can the SBM-R teams contribute?
  - They are promoters and facilitators of the process
  - They work closely with the staff of the facilities to mobilize resources
Strategies for Resource Mobilization

1. Identify needs
   • Based on information and past experience

2. Identify potential sources of resources
   • Public
     • national
     • district
     • municipal
     • other health facilities/services

3. Identify potential sources of resources (cont.)
   • Private
     • commerce
     • industry
     • NGOs
     • clients
   • Community
     • social organizations
     • religious organizations
     • political organizations
     • community leaders
4. Select the adequate potential source
   • The selection of the source must correspond to the needs identified
   • Focus on the most approachable sources
   • Consider past experiences
   • Identify those sources that could benefit the most from providing support or donations

5. Identify and define the contact persons
   • Who has access to the sources (who is in the network)?
   • Access the networks identified during the stakeholder analysis

6. Means of communication
   • Letters
   • Visits
   • Phone calls
Module Two: Strengthening the SBM-R Process

Slide 9

Strategies for Resource Mobilization (cont.)

7. Negotiate
   • Identify benefits for all involved parties
   • Position the benefits in “win-win” terms
   • Establish concrete commitments
   • Provide assurance of good and proper utilization, protection and regular information on the donation or support received

Slide 10

Strategies for Resource Mobilization (cont.)

8. Acknowledge the support received
   • Plates or stickers
   • Official recognition
   • Public recognition through communication/community means
Module Two: Strengthening the SBM-R Process

Slide 11

Summary

• Requires effort
• Essential for obtaining needed supplies and equipment
• The SBM-R process facilitates and guides the resource mobilization strategy
• The SBM-R process may help identify budgeting changes at the facility level
MODULE THREE: INSTITUTIONALIZING THE SBM-R PROCESS

INTRODUCTION

This module focuses on institutionalizing the SBM-R process within the current health system. Before beginning this module, the facilitator should make sure that the following key steps have been implemented:

- Key stakeholders (SBM-R coordinating body, facility directors and administrators) have been briefed on progress and have begun to discuss incentives.
- Assessment tools have been modified as necessary.
- SBM-R teams (coaches) have been expanded and oriented to the SBM-R process at each facility (i.e., there is a central SBM-R team and small teams by area/section of the assessment tool).
- Internal monitoring results have been analyzed with small teams by area/section of the assessment tool (departments/wards/units), and action plans have been developed and implemented by area.
- Action plans have been implemented and monitored.
- The SBM-R local teams from the facilities have been updated in the content area on which the SBM-R process is focusing (e.g., infection prevention, family planning/reproductive health, HIV/AIDS, maternal health).
- Benchmarking visits have been conducted if appropriate.
Module Three: Institutionalizing the SBM-R Process

- A new internal monitoring assessment has been conducted.
- The logo and recognition process have been defined.
- Internal recognition campaigns for the units/areas that achieve 60% or more of the performance standards have been implemented if appropriate.

By the end of this module, participants will be able to continue implementation of the SBM-R process in selected facilities and develop a strategy for institutionalizing and scaling up the initiative. The participants will:

- Analyze results and experiences to date
- Identify and prioritize persistent performance gaps
- Identify appropriate interventions, including exchange of best practices through benchmarking
- Adjust operational work plans to strengthen local/facility teams and mobilize reinforcements
- Identify strategies to reward achievements and institutionalize the process
- Identify mechanisms to further involve the community in the process
- Identify strategies for scaling up the initiative
## Module Three: Institutionalizing the SBM-R Process

### SCHEDULE FOR MODULE THREE: REINFORCEMENT AND INSTITUTIONALIZATION OF THE PROCESS

<table>
<thead>
<tr>
<th>DAY 1</th>
<th>DAY 2</th>
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<tbody>
<tr>
<td>Opening</td>
<td>Warm-up</td>
</tr>
<tr>
<td>4 hours</td>
<td>4 hours</td>
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<tr>
<td>Participant introduction</td>
<td>Agenda for Day 2</td>
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<tr>
<td>Overview of the workshop</td>
<td>Updating of the operational work plan, including technical assistance and resources needed (cont.)</td>
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<tr>
<td>Expectations and group norms</td>
<td>Recognition of achievements</td>
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<tr>
<td>Review of the Standards-Based Management model</td>
<td>- Verification visit</td>
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<td>Progress to date:</td>
<td>- External recognition</td>
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<td>- Results (last monitoring assessments)</td>
<td>Community involvement</td>
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<td>- Experiences with measurements and use of the tool</td>
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<td>- Success stories</td>
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<td>- Challenges</td>
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<td>LUNCH</td>
<td>LUNCH</td>
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<tr>
<td>3 hours</td>
<td>3 hours</td>
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<tr>
<td>Warm-up</td>
<td>Warm-up</td>
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<tr>
<td>Progress to date (cont.)</td>
<td>Scale-up</td>
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<tr>
<td>Identification of persistent gaps and appropriate interventions</td>
<td>Next steps</td>
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<tr>
<td>Updating of the operational work plan, including technical assistance and resources needed</td>
<td>Evaluation and closing</td>
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</table>
MODEL WORKSHOP OUTLINE

The workshop outline on page 3-5 is a model plan of the training to be delivered. It presents enabling objectives that participants must meet in order to accomplish the specific learning objectives described in the workshop syllabus. For each enabling objective, there are suggestions regarding appropriate learning activities, resources and materials needed. The facilitator may develop additional practice activities, case studies, role plays or other learning exercises specific to the country or group of participants.

The workshop outline is divided into four columns:

- **Time.** This section of the outline indicates the approximate amount of time to be devoted to each learning activity.

- **Objectives/Activities.** This column lists the enabling objectives and learning activities. Because the objectives outline the sequence of training, they are presented in the order in which they will be addressed in the workshop. The combination of the objectives and activities (introductory activities, small-group exercises, clinical practice, breaks, etc.) describes the flow of training.

- **Training/Learning Methods.** This column describes the various methods, activities and strategies the facilitator will use to transfer the knowledge and skills related to each enabling objective.

- **Resources/Materials.** The fourth column of the workshop outline lists the resources and materials needed to support the learning activities.

Note that the workshop schedule is based on the workshop outline and that modifications to one should be reflected in the other.
<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/ACTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
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<tr>
<td>10 minutes</td>
<td><strong>Activity: Opening</strong></td>
<td>Welcome by facilitators and representatives from the organization(s) sponsoring the workshop. Brief introduction on why this workshop is important for the overall program being implemented.</td>
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<tr>
<td>15 minutes</td>
<td><strong>Activity: Introduce participants and facilitators.</strong></td>
<td>Briefly introduce participants or facilitators.</td>
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<tr>
<td>10 minutes</td>
<td><strong>Activity: Provide an overview of the previous modules completed and an overview of Module Three.</strong></td>
<td>Review the goals and objectives of Modules One and Two, and any key tasks that were to be implemented before starting this module. Review the objectives and schedule of Module Three.</td>
<td>Copies of the table with the steps and phases of the SBM-R process Copies of Module Three objectives and schedule for each participant Copies of the SBM-R field guide for new participants</td>
</tr>
<tr>
<td>15 minutes</td>
<td><strong>Activity: Identify participant expectations and group norms.</strong></td>
<td>Discuss participant expectations with the group and list them on a flipchart. Identify which ones will be met in the workshop. Review previous group norms and add norms as needed.</td>
<td>Flipcharts and markers</td>
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<tr>
<td>30 minutes</td>
<td><strong>SBM-R Model</strong> <strong>Objective: Review the SBM-R process.</strong></td>
<td><strong>Presentation: Briefly present “Standards-Based Management and Recognition of Health Service Delivery.” Move quickly through content you believe is well understood, and spend more time on areas that you believe need further emphasis. Ask a lot of questions to assess what the participants remember so you can focus only on areas of need.</strong></td>
<td>Facilitator’s Handbook, Presentation Graphics, “Standards-Based Management and Recognition of Health Service Delivery” Copies of the presentation for participants</td>
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<tr>
<td>15 minutes</td>
<td><strong>Break</strong></td>
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<td>30 minutes</td>
<td><strong>Group Work</strong> <strong>Activity: Prepare to present internal monitoring results.</strong></td>
<td>Provide time for the groups to finish preparing to present their findings from their internal monitoring assessments. Use the “Results, Successes and Challenges” Exercise to provide guidance. Each group will have approximately 10–15 minutes to present.</td>
<td>Facilitator’s Handbook, “Results, Successes and Challenges” Exercise, Module Two Flipchart and markers for the groups</td>
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<tr>
<td>115 minutes</td>
<td><strong>Presentations</strong> <strong>Activity: Each group presents results, successes and challenges.</strong></td>
<td>Each group has come prepared to present on the assigned issues. Facilitate these group presentations and discussion. Note key challenges and common or outstanding successes on a flipchart.</td>
<td>Facilitator’s Handbook, “Results, Successes and Challenges” Exercise, Module Three Flipchart and markers for the groups</td>
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<tr>
<td>60 minutes</td>
<td><strong>LUNCH</strong></td>
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### MODULE THREE WORKSHOP OUTLINE

<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/APTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
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<tr>
<td><strong>DAY 1, PM (180 minutes)</strong></td>
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<td>10 minutes</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
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<tr>
<td>60 minutes</td>
<td>Presentations continue</td>
<td>Each group has come prepared to present on the assigned issues. Facilitate these group presentations and discussion. Note key challenges and common or outstanding successes on a flipchart.</td>
<td>Facilitator’s Handbook, “Results, Successes and Challenges” Exercise Module Three</td>
</tr>
<tr>
<td>30 minutes</td>
<td>Review of Cause Analysis and Benchmarking</td>
<td>Present “Identification of Persistent Gaps, Cause Analysis and Selection of Interventions.” Ask each group to identify which of the cause analysis methods were most useful. As the groups present their methods, discuss how they used them and what they learned in the process.</td>
<td>Facilitator’s Handbook, Presentation Graphics, “Identification of Persistent Gaps, Cause Analysis and Selection of Interventions” Copies of the presentation for participants</td>
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<tr>
<td>15 minutes</td>
<td>Break</td>
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<tr>
<td>60 minutes</td>
<td>Identify persistent gaps.</td>
<td>Complete the “Identify and Plan for Persistent Gaps” Exercise.</td>
<td>Facilitator’s Handbook, “Identify and Plan for Persistent Gaps” Exercise Copies of the instructions for the participants</td>
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<td>5 minutes</td>
<td>Review of day’s activities</td>
<td>Ask questions and answer participants’ questions related to content covered in Day 1, focusing on areas in need of strengthening.</td>
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<td><strong>DAY 2, AM (240 minutes)</strong></td>
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<tr>
<td>10 minutes</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
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<tr>
<td>5 minutes</td>
<td>Agenda for Day 2</td>
<td>Review agenda for Day 2</td>
<td>Flipchart with agenda for Day 2</td>
</tr>
<tr>
<td>50 minutes</td>
<td>Identify persistent gaps.</td>
<td>Groups take turns presenting their plans and discuss them in the larger group. Facilitate the discussion. Summarize common persistent gaps that might need to be addressed (e.g., policies, equipment, etc.) with the SBM-R coordinating body or in another common forum.</td>
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<tr>
<td>TIME</td>
<td>OBJECTIVES/ACTIVITIES</td>
<td>TRAINING/LEARNING METHODS</td>
<td>RESOURCE MATERIALS</td>
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</tbody>
</table>
| 30 minutes | **Addressing Recognition**  
**Objective:** Describe the verification visit to receive external recognition. | Present “Verification Visit for External Recognition.”  
Copies of the presentation for each participant |
| 30 minutes | **Addressing Recognition (continued)**  
**Objective:** Discuss external recognition.  
**Objective:** Describe different types of recognition. | Present “Recognizing Achievements: External Recognition.”  
Copies of the presentation for each participant |
| 30 minutes | **Activity:** Plenary discussion            | Discuss with the larger group their ideas of what the SBM-R coordinating body has decided so far. Ask for their reaction. | Flipchart and markers |
| 15 minutes | **Break**                                   |                                                                                            |                                                                                  |
| 20 minutes | **Community Involvement**                  | Present “Community Involvement.”                                                          | **Facilitator’s Handbook**, Presentation Graphics, “Community Involvement”  
Copies of the presentation for the participants |
| 30 minutes | **Community Involvement (continued)**      | Distribute directions from “Community Involvement” Exercise. Circulate and provide coaching and assistance. | **Facilitator’s Handbook**, “Community Involvement” Exercise  
Copies of the instructions for each participant or group  
Flipchart and markers for each group |
<p>| 20 minutes | <strong>Community Involvement (continued)</strong>      | Groups present their work. Facilitate a discussion.                                       | <strong>Facilitator’s Handbook</strong>, “Community Involvement” Exercise |
| 60 minutes | <strong>Lunch</strong>                                   |                                                                                            |                                                                                  |</p>
<table>
<thead>
<tr>
<th>TIME</th>
<th>OBJECTIVES/ACTIVITIES</th>
<th>TRAINING/LEARNING METHODS</th>
<th>RESOURCE MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 minutes</td>
<td>Warm-up</td>
<td>To be determined by the facilitator</td>
<td>Facilitator’s Handbook, Presentation Graphics, “Scaling Up and Sustainability of SBM-R” Copies of the presentation for each participant</td>
</tr>
<tr>
<td>30 minutes</td>
<td><strong>Scaling Up and Sustainability</strong></td>
<td><strong>Objective:</strong> Describe factors that favor sustainability. <strong>Objective:</strong> Describe scaling up strategies.</td>
<td>Present “Scaling Up and Sustainability of SBM-R” and discuss options for the specific programmatic situation.</td>
</tr>
<tr>
<td></td>
<td><strong>Scaling Up and Sustainability (continued)</strong></td>
<td><strong>Objective:</strong> Discuss about ideas on scaling up.</td>
<td>Facilitate a plenary discussion on ideas and strategies for “Scaling Up and Sustainability.”</td>
</tr>
<tr>
<td></td>
<td><strong>Objective:</strong> Agree upon next steps and assign responsible individuals.</td>
<td>Discuss planned next steps in the process and identify responsible individuals.</td>
<td>Flipchart and markers</td>
</tr>
<tr>
<td>20 minutes</td>
<td><strong>Evaluation and Closing</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
EXERCISE: RESULTS, SUCCESSES AND CHALLENGES

Participants will have been instructed ahead of time to come ready to present on these issues. Each group should use a flipchart, overhead projector or PowerPoint presentations to present to others. Each group should share the following:

1. Results of the baseline assessment, any internal monitoring, any external monitoring.

2. Experiences with measurement and using the tool. What has changed over the process? What has become easier; what remains difficult?

3. Success stories they can share, or difficult problems they have resolved.

4. Remaining challenges and difficulties. Gaps that are particularly difficult to address.
EXERCISE: IDENTIFY AND PLAN FOR PERSISTENT GAPS

Each group will review the assessment tool and the summary of the results from the last monitoring assessment of their own facility. The group must identify:

- Persistent performance gaps: Analyze the criterion or criteria not met and describe two persistent performance gaps.
- Cause analysis: Identify the possible causes of the gaps described using the cause analysis methods presented.
- Operational work plan: Update the work plan with the appropriate intervention(s), including technical assistance and resources needed.
- Benchmarking plan: If the intervention includes benchmarking, prepare a plan using the steps provided in the presentation.

Steps of the Benchmarking Process:

1. Identify the subject area to be reviewed and the gap to be closed.
2. Identify “best practices” potential partners. Select the type of benchmarking.
3. Contact the partners.
4. Select the “benchmarking team.”
5. Prepare for the benchmarking visit (information to be gathered, logistics).
6. Conduct the benchmarking visit.
7. Analyze the findings and make recommendations.
8. Implement and monitor the recommendations.

The group will have 60 minutes for the group work and 5 minutes to present. Each group should use a flipchart to present to others.
EXERCISE: COMMUNITY INVOLVEMENT

Divide the participants into four small groups. Each group will identify mechanisms to facilitate community involvement in the following areas:

Group 1: Providing inputs on their perceptions and preferences on quality
Group 2: Participating in and supporting quality improvement activities
Group 3: Advocating for quality improvement in a specific initiative (e.g., maternal health, HIV/AIDS)
Group 4: Acting as source of control for quality

Each group will have 30 minutes to work and 5 minutes to present.
Module Three: Institutionalizing the SBM-R Process

SUGGESTED NEXT STEPS

After Module Three has been completed, there are common next steps to take to move the SBM-R process forward. At the end of the workshop, discuss with the group the suggested next steps (below), identify deadlines and people responsible for each one, and highlight the importance of completing them.

<table>
<thead>
<tr>
<th>STEP OR ACTIVITY</th>
<th>PEOPLE RESPONSIBLE</th>
<th>DEADLINE</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Brief key stakeholders on progress and begin to discuss incentives (SBM-R coordinating body, facilities directors and administrators).</td>
<td>SBM-R facilitators and SBM-R teams (coaches)</td>
<td>As soon as possible</td>
</tr>
<tr>
<td>• Adjust/modify the tools according to the participants’ input if necessary, and send copies of the assessment tools to each facility.</td>
<td>SBM-R facilitators/technical resources</td>
<td>2 weeks</td>
</tr>
<tr>
<td>• Review/expand the SBM-R teams (coaches), central teams and teams by area of the assessment tool.</td>
<td>SBM-R team</td>
<td>1 week</td>
</tr>
<tr>
<td>• Orient the SBM-R teams on the process and tool.</td>
<td>SBM-R team</td>
<td>2 weeks</td>
</tr>
<tr>
<td>• Analyze internal monitoring results with small teams by area of the assessment tool (departments/wards/units), and adjust action plans by area of the assessment tool.</td>
<td>SBM-R central teams with teams per area</td>
<td>2 weeks</td>
</tr>
<tr>
<td>• Implement and monitor action plans.</td>
<td>SBM-R central teams with teams per area</td>
<td>During next 3 months</td>
</tr>
<tr>
<td>• Plan and conduct benchmarking visits if appropriate.</td>
<td>SBM-R teams in coordination with other facilities</td>
<td>In the following months</td>
</tr>
<tr>
<td>• Conduct new internal monitoring assessment and start preparing for external verification.</td>
<td>SBM-R team (with support from SBM-R facilitators if needed)</td>
<td>3–4 months from now</td>
</tr>
<tr>
<td>• Request external verification if the results from internal monitoring meet or are close to the pre-determined level of compliance.</td>
<td>SBM-R teams with the SBM-R coordinating body</td>
<td>When appropriate</td>
</tr>
<tr>
<td>• Finalize the logo, the motto and the criteria for the recognition process and select the external assessment team.</td>
<td>SBM-R facilitators and SBM-R coordinating body</td>
<td>Next 3 months</td>
</tr>
<tr>
<td>• Conduct ongoing implementation of internal recognition for the units/areas that achieve 60% or more of the performance standards.</td>
<td>SBM-R central team (with support from the SBM-R facilitators if needed)</td>
<td>Next 3 months</td>
</tr>
<tr>
<td>• Train external assessors.</td>
<td>SBM-R facilitators</td>
<td>As soon as possible</td>
</tr>
<tr>
<td>• Provide technical assistance to the facilities to prepare for external verification.</td>
<td>SBM-R facilitators and technical resources</td>
<td>By request</td>
</tr>
<tr>
<td>• Start verification visits.</td>
<td>External assessors in coordination with the SBM-R coordinating body and facilitators</td>
<td>By request</td>
</tr>
</tbody>
</table>
Module Three: Institutionalizing the SBM-R Process

FINAL EVALUATION

Please score each workshop component, circling the number that best reflects your opinion about the workshop, with 1 being the minimum score (worst), and 5 the maximum (best).

<table>
<thead>
<tr>
<th>WORKSHOP COMPONENT</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>General organization of the workshop</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Content of the workshop</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Sequence of content and activities</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Presentations</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Group work</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Time dedicated to each subject</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Supporting material</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Group participation</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Logistics</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

What would you suggest to improve this workshop?
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Additional comments:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Thank you,

The Facilitators
Slide 1

Standards-Based Management and Recognition of Health Service Delivery

Slide 2

Objectives

- Define the Standards Based Management and Recognition (SBM-R) model
- Describe the four steps of the SBM-R model
What is SBM-R?

- Practical management approach for improving performance and quality of health services
- Based on use of operational, observable performance standards for on-site assessment
- Must be tied to reward or incentive program
- Consists of four basic steps

The Four Steps of SBM-R

1. Set Standards
2. Implement Standards
3. Measure Progress
4. Reward Achievements
Step One: Set the Performance Standards

Steps to Setting Standards

- Identify area of services to be improved
- Define core support and supply processes to provide these services
- Develop performance standards based on international guidelines, national policies or guidelines, and site-specific requirements
- Consider providers’ input and clients’ preferences
Module Three: Institutionalizing the SBM-R Process

Slide 7

Performance Standards

The standards tell providers not only what to do but also how to do it

Slide 8

Sample Performance Assessment Tool

Area: Pregnancy Care

<table>
<thead>
<tr>
<th>Perf. Standard</th>
<th>Verification Criteria</th>
<th>Y, N, NA</th>
<th>Comments</th>
</tr>
</thead>
</table>
| 1. The facility conducts a routine rapid assessment of pregnant women | Observe in the reception area or waiting room if the person who receives the pregnant woman:  
  - Asks if she has or has had:  
    - Vaginal bleeding  
    - Headache or visual changes  
    - Breathing difficulty  
    - Severe abdominal pain  
    - Fever  
  - Immediately notifies the health provider if any of these conditions are present |          | _____    |
Sample Summary Form of Assessment Tool for MNH - Hospital

<table>
<thead>
<tr>
<th>AREAS</th>
<th>STANDARDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care for pregnancy-related complications</td>
<td>17</td>
</tr>
<tr>
<td>Labor, delivery, immediate postpartum and newborn care</td>
<td>27</td>
</tr>
<tr>
<td>Support services (lab., blood bank, pharmacy)</td>
<td>28</td>
</tr>
<tr>
<td>Infection prevention</td>
<td>11</td>
</tr>
<tr>
<td>Information, education and communication</td>
<td>15</td>
</tr>
<tr>
<td>Human, physical and material resources</td>
<td>27</td>
</tr>
<tr>
<td>Management systems</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>139</td>
</tr>
</tbody>
</table>

Step Two: Implement the Standards
Module Three: Institutionalizing the SBM-R Process

Slide 11

**Steps to Implement Standards**

- Do baseline assessment
- Identify performance gaps
- Identify causes of gaps and interventions to correct them
- Implement interventions
- Begin and support change process

Slide 12

**Implementation Cycle**

Model Adapted from the International Society for Performance Improvement
Module Three: Institutionalizing the SBM-R Process

Slide 13

Baseline Assessment

- Determines actual level of performance using the performance assessment tool
- Helps to identify performance gaps
- Once gaps are identified, identifies their causes

Slide 14

In Order to Perform, a Performer Needs To:

Know how to do

Be enabled to do

Want to do
Module Three: Institutionalizing the SBM-R Process

Slide 15

- **Capability** (Know how to do) → Knowledge, skills, information
- **Opportunity** (Be enabled to do) → Resources, tools, capacity
- **Motivation** (Want to do) → Inner drive, incentives

Slide 16

**Intervention Identification and Implementation**

- Once gaps are identified, do cause analysis to identify interventions
- Interventions should match the cause of the gap
- Implement selected interventions
Slide 17

**Intervention Identification**

- MOTIVATION
- INCENTIVES
- Resources, Capacity
- Strengthening of Management Systems, Provision of Resources
- Knowledge, Skills, Information
- Training, Information

Slide 18

**Change Management Strategy**

- What makes change difficult?
- Performance standards are a tool for initiating and sustaining change
- Important to focus on actions and achievement of early results to help ease the change process
- Individuals can be powerful agents for or against change
Module Three: Institutionalizing the SBM-R Process

Slide 19

**Change Management Strategy**

- The standards in the tools represent easy and hard challenges
- Changes start with the “low-hanging fruit”
- Managers and providers start with easiest tasks and then move to more difficult tasks, developing and increasing their change management skills
- Observe change process to identify new developments, initiatives and behaviors

Slide 20

**“Multidimensional” Supervision and Support**

- SBM-R process uses a variety of ways to supervise and support change process:
  - Self/internal
  - Peer/benchmarking
  - Supportive supervision (on demand), external assessment
  - Client involvement and community participation
- Bottom-up approach: based on local control, empowerment, motivation, advocacy, resource mobilization
Slide 21

Step Three: Measure Progress

- Encourage providers to self-assess
- Measure progress (internal monitoring)
- Bring facilities together to share challenges and successes
Module Three: Institutionalizing the SBM-R Process

Slide 23

Example: Total Results by Hospital, Honduras

2001-2004

0 10 20 30 40 50 60 70 80

HRO HJMG HSMO

Baseline 1st internal 2nd internal 3rd internal

Slide 24

Example: Hospital Results by Areas, Honduras

EMEG EMB TP,PP Y S APOYO BIOSEG L.E.C. RR.HH S.GER.

0 10 20 30 40 50 60 70 80 90%

2003 2004
Slide 25

Results from Seven Hospitals in Malawi

![Bar chart showing the results from seven hospitals in Malawi. The chart compares different hospitals and years, indicating improvements in various health indicators.](image)

Slide 26

PROQUALI, Brazil

Compliance with standards of reproductive health care

13th Health Center-Bahia

![Bar chart showing compliance with standards of reproductive health care in Brazil. The chart compares different indicators and time periods.](image)
Module Three: Institutionalizing the SBM-R Process

Slide 27

PROQUALI Brazil: Results from Five Pilot Clinics

Baseline 9 months 12 months 24 months

Slide 28

SBM-R Facilitator’s Handbook
Module Three: Institutionalizing the SBM-R Process

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Slide 30
Module Three: Institutionalizing the SBM-R Process

Slide 31

Slide 32
Step Four: Recognize and Reward Achievements

Steps to Recognize Achievements

- Address motivational issues
- Decide upon incentives
- Implement incentive programs
Ways to Enhance Motivation

- Empowerment: Giving the tools to self-assess and implement
- Challenges: Establishing a clear goal
- Achievements: Easy to show results
- Healthy competition: Grouping facilities encourages sharing of experiences and some competition to succeed

Ways to Provide Recognition

- Feedback
- Social recognition
- Material recognition
Conferred by the Ministry of Health to Mzuzu Central Hospital in recognition of the achievement of standards of excellence in Infection Prevention practices Year 2004

UKHONDO NDI MOYO

Secretary for Health
Summary

- Four-step process
- Not as complicated as it may sound
- Puts the power in the hands of local providers and managers
- Requires multiple sources of supervision and support
IDENTIFICATION OF PERSISTENT GAPS, CAUSE ANALYSIS AND SELECTION OF INTERVENTIONS

Slide 1

Identification of Persistent Gaps, Cause Analysis and Selection of Interventions

Slide 2

Objectives

- Review key steps to cause analysis
- Review benchmarking
- Relate to experiences
Module Three: Institutionalizing the SBM-R Process

Slide 3

Implementation Cycle

- Desired performance
- Actual performance
- Gap
- Cause analysis
- Intervention identification & implementation

Model Adapted from the International Society for Performance Improvement

Slide 4

Capability (Know how to do) → Knowledge, skills, information
Opportunity (Be enabled to do) → Resources, tools, capacity
Motivation (Want to do) → Inner drive, incentives
Module Three: Institutionalizing the SBM-R Process

Slide 5

Types of Causes and Solutions

- Symptoms → Quick fixes
- Apparent cause → Corrective measures
- Root cause → Preventive measures

Slide 6

Techniques for Cause Analysis

Non-structured techniques:
- Intuition
- Networking
- Experience
Summary of Less Structured Techniques

Look directly for the cause, asking:

- Myself (intuition)
- Colleagues (networking)
- Experts (experience)

Techniques for Cause Analysis

Semi-structured techniques:

- Brainstorming
- Nominal group technique
- Force field analysis
- Fishbone diagram
- Flowcharts
- Run charts (tracking trends)
- Pareto diagram
**Summary of the More Structured Techniques**

Look for the cause through systematic analysis:
- Dispersion (brainstorming, force-field analysis, NGT, fish-bone diagram, flow-chart)
- Use of data (run chart, Pareto diagram)

**Remember that:**
- There are factors that are under our control and there are factors that are outside of our control (resources, technical expertise, policies)
- We can begin the changes by addressing the factors that are under our control and produce rapid results
- We need to identify the sources of external assistance for the factors that are outside of our control
Module Three: Institutionalizing the SBM-R Process

Slide 11

Intervention Identification

- MOTIVATION
- INCENTIVES
- Resources, Capacity
- Strengthening of Management Systems, Provision of Resources
- Knowledge, Skills, Information
- Training, Information

Slide 12

Types of Interventions

- Rapid interventions
- Interventions based on local resources
- Interventions that require external support
Review Benchmarking

“Benchmarking is simply about making comparisons with other organizations and then learning the lessons that those comparisons throw up”

(The European Benchmarking Code of Conduct)

“Benchmarking is the process of identifying, understanding, and adapting outstanding practices from organizations anywhere in the world to help your organization to improve its performance”

(The Benchmarking Exchange)

The Benchmarking Process

1. Identify subject area to be reviewed and gap to be closed
2. Identify “best practices” potential partners; select type of benchmarking
3. Contact partners
4. Select "benchmarking team"
5. Prepare benchmarking visit (information to be gathered, logistics)
6. Conduct benchmarking visit
7. Analyze findings and make recommendations
8. Implement and monitor recommendations
Summary

- You’ve applied simple cause analysis in the past; now it is time to use it to address persistent gaps
- What has been most useful to you from these processes?
Verification Visit for External Recognition

Verification

- It is the measurement of the new level of actual performance using the assessment tool in a health facility
- It permits the establishment of the new actual performance in percentage terms by area and total
- Structured direct observation is used, as well as the review of documents and administrative records and interviews
Slide 3

**Preparation of the Verification Visit**

- Receive the request from the facility
- Have information on the facility
- Explain to the facility what the verification visit consists of
- Coordinate dates with the facility
- Identify the counterparts in the facility
- Select the team that will conduct the visit and define their responsibilities
- Prepare the necessary material including the assessment tool
- Respect procedures and routines of the facility (schedules, attire, etc.)
- Do not interfere with the services provided to the public

Slide 4

**Feedback Meeting: Standards Achieved**

- Recommend to the SBM-R coordinating body whether or not the facility will receive recognition
- Agree with the facility on a date for the feedback meeting
- Present to the facility staff the results in total and by area
- Highlight the achievement of the standards
- Make recommendations on potential aspects to be strengthened
- Inform the facility about the procedures for recognition
Slide 5

Feedback Meeting: Standards Not Achieved

• Coordinate with the SBM-R coordinating body agreement on the results
• Agree with the facility on a date for the feedback meeting
• Present to the facility staff the results in total and by area
• Highlight the achievements and positive aspects
• Make recommendations on aspects to be strengthened

Slide 6

Feedback Meeting: Standards Not Achieved

• Inform the facility about the procedures for requesting a new verification visit:
  • If the facility achieved 60% or more of the standards in total, it could request a new verification visit focused only on the areas that did not meet the cut-off point within 3 months
  • If the facility achieved less than 60% of the standards in total, it requires a new complete verification visit after 3 months
In case of disagreements on the results of the assessment between the verification team and the facility staff, the verification team may:

- Re-verify the questioned standards within 30 days
- Request additional technical support if needed
Recognizing Achievements

External Recognition

JHPIEGO
An Affiliate of Johns Hopkins University
A Global Leader in Improving Health Care for Women and Families

Step Four: Recognize Achievements

Set Standards 1

Implement Standards 2

Measure Progress 3

Reward Achievements 4
Slide 3

Objectives

- Review importance of motivation and incentives
- Discuss external recognition

Slide 4

Importance of Motivation

- Undertaking change requires motivation
- The SBM-R process incorporates a motivational element from the start: professional and personal development, empowerment, challenges, achievement
Module Three: Institutionalizing the SBM-R Process

Slide 5

Motivation

- Empowerment
- Challenge
- Achievement
- Healthy competition

Slide 6

Incentives/Recognition

- Feedback
- Social recognition
- Material recognition
• **Feedback**: less expensive but of high impact, it can be oral or written, it must be continual, timely, specific and interactive

• **Social recognition**: symbolic rewards (but with predictive value) helps to improve morale, can adopt the form of congratulations, trophies, certificates, celebrations, conferring of authority
Slide 9

**Incentives/Recognition**

- **Material recognition**: monetary or in-kind benefits such as performance-based salaries/budgets, professional development opportunities, medical equipment, etc.

Slide 10

**Branding**

- Consists of creating a distinctive mark that identifies health facilities that deliver quality services
- It is usually done through the use of a quality logo, or seal of approval, that defines the SBM-R program to the public
- This symbol of quality is used in promotional communication campaigns that serve to recognize and reward those who have earned the right to display the logo through provision of high-quality services
- The logo can be used in the elements of the internal promotional campaign and in the external recognition process
Examples of Logos

PROQUALI, Brazil

UKHONDO SAVES LIVES

External Recognition

Important because it:

• Establishes clear consequences of performance
• Boosts staff morale and motivation
• Raises awareness of the quality improvement process nationally or regionally, and disseminates the SBM-R initiative
• Involves communities and clients
External Recognition: Elements

- Recognition, certification
- Plaque
- Symbolic monetary award
- Other: community involvement, mass media dissemination

External Recognition: Criteria

- Achievement of an agreed-upon percentage of the standards in each area and in total

- Achievement of an agreed-upon percentage of the standards overall, for example:
  - Achievement of 80% of quality standards in each area and in total (including all essential criteria as appropriate)
Module Three: Institutionalizing the SBM-R Process

Slide 15

External Recognition: Procedure

• Based on the results of an internal monitoring assessment, the facility requests an external verification visit
• The SBM-R coordinating body assembles the team of external assessors and coordinates the verification visit
• The external assessors conduct the verification visit

Slide 16

External Recognition: Procedure (cont.)

• The external assessors coordinate with the SBM-R coordinating body the agreement on recognition
• The external assessors give feedback to the facility on results
• The SBM-R coordinating body and the SBM-R team will coordinate the presentation of rewards
Recognition Ceremony in Malawi: Guests
Module Three: Institutionalizing the SBM-R Process

Slide 19

Recognition Ceremony Activities

- Tour of CSSD, Kitchen, Dental Unit, MCH/FP, Medical and Surgical Wards and Maternity

Slide 20

Recognition Ceremony Activities

- IP drama by Mzuzu Central Hospital drama group
Recognition Ceremony Activities

- Speeches

Recognition Ceremony Activities

- Presentation of awards – certificate and plaque

Conferred by the Ministry of Health to Mzuzu Central Hospital in recognition of the achievement of standards of excellence in Infection Prevention practices Year 2004
Summary

- Internal and external recognition is important: Must answer “What's in it for me?”
- “Branding” with a logo or seal identifies the SBM-R initiative to the public
- The external recognition process is coordinated by the SBM-R coordinating body
COMMUNITY INVOLVEMENT

Objective

• Describe importance of community involvement
Module Three: Institutionalizing the SBM-R Process

Slide 3

Quality Framework

Social-cultural

Client

Civil Society

Provider

State

Context

Slide 4

Implementation Wheel

Health system

Manager

Team

Self

FACILITY

External Environment

Client

Community
Slide 5

Types of Community Involvement

Clients, community and the civil society can participate:
- Providing inputs on their perceptions and preferences on quality
- Advocating for quality improvement
- Participating in and supporting quality improvement activities
- Acting as source of control for quality

Slide 6

Summary

- The community is involved initially, and throughout
- May provide useful input into the quality of services
SCALING UP AND SUSTAINABILITY OF SBM-R

Slide 1

Scaling Up and Sustainability of SBM-R

JHPIEGO
A GLOBAL LEADER IN IMPROVING HEALTH CARE FOR WOMEN AND FAMILIES

Slide 2

Objectives

- Describe factors that favor sustainability
- Describe scaling-up strategies
Factors that Favor Sustainability

• SBM-R is “naturally” integrated into the day-to-day regular service delivery or managerial duties (an “aid” to perform them in a better way); does not become an additional burden.
• SBM-R focuses on achieving results, early in the process, with relatively few additional resources, which attracts the attention of policymakers.
• SBM-R pays attention to motivating factors (recognition, consequences of performance).

Factors that Favor Sustainability

• SBM-R has been demonstrated to be a powerful tool for advocacy and resource mobilization.
• SBM-R does not require a heavy additional infrastructure for its implementation.
• SBM-R creates a system of multiple sources of support and control for the process (builds redundancies).
Central Level

Provincial Level

Health Units

Clients

Slide 6

Scaling Up

- Ensure consistency with organizational goals, which facilitates decisions on allocation of resources
- Keep the process relatively easy and streamlined; this makes it more replicable with little external support
- Provide concrete and practical tools
- Use a bottom-up approach by increasing empowerment of local and facility managers; rely on local implementation
- Involve clients and communities
- Ensure consequences of performance, motivation and incentives
Module Three: Institutionalizing the SBM-R Process

Slide 7

The Two Phases of Expansion

1. Creation of a critical mass of early adopters
2. Diffusion on a large scale


Slide 8

Creation of Critical Mass

- Most people are convinced about something new by their peers who already support it
- People are more likely to change when they can see results and when they can experiment a bit
- The rate of adoption of an innovation, or new change, “takes off” at about 10–20% adoption
Diffusion on a Large Scale

- Mass-media channels are rapid and efficient means of informing a large group about the change
- Simple new ideas are accepted easily
- Hardware (tools) and software (process) have to be appropriately “packaged” for mass distribution
- Incentives are critical
- Support/reinforcement infrastructure is necessary

Summary

- The start-up of change may be slow, but increases with a committed group to support it
- Mass media are an effective way to communicate to a larger group
- Changes are easier to adopt if they are simple and results can quickly be observed
APPENDIX: TOOLS FOR SELECTING INTERVENTIONS

Learning Interventions: The range of actions or events designed to help people acquire new skills and knowledge. **Table 1** offers a continuum of learning interventions.

<table>
<thead>
<tr>
<th>LEARNING INTERVENTIONS</th>
<th>DESCRIPTION</th>
<th>APPLICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Natural experience</td>
<td>The individual is placed in the natural environment and learns through real-life, trial and error events. This could also be labeled life experience.</td>
<td>Internship; assignment to a team; temporary job placement.</td>
</tr>
<tr>
<td>Experiential learning</td>
<td>As above. However, the individual also participates in structured debriefing sessions to reflect on experiences and draw conclusions.</td>
<td>Practicum; structured internship; field placement with coaching.</td>
</tr>
<tr>
<td>On-the-job training</td>
<td>The individual assumes an apprenticeship role while working in an operational setting. Guidance on how to perform is provided by coworkers and supervisors as needed.</td>
<td>Apprenticeship program; job placement with orientation and/or coaching on request.</td>
</tr>
<tr>
<td>Structured on-the-job training</td>
<td>As above except that the operating work environment has been systematically organized for learning. The individual has a learning plan and acquires new knowledge and skills with assistance from trained lead workers, sometimes called structured-on-the-job trainers.</td>
<td>Structured-on-the-job program.</td>
</tr>
<tr>
<td>Simulation</td>
<td>The individual performs as s/he would in real life. However, the setting is a recreation (low or high fidelity) of the natural environment.</td>
<td>In basket exercises; wargames; simulator practice.</td>
</tr>
<tr>
<td>Role play</td>
<td>The individual assumes the role of another or of himself/herself in a different setting and acts out feelings, reactions, responses to various scenarios.</td>
<td>Psycho and socio dramas; group role plays for sales, counseling or management.</td>
</tr>
<tr>
<td>Laboratory training</td>
<td>Similar to simulation training except that the laboratory does not necessarily recreate the work environment. The individual can practice a broad range of work activities not necessarily in normal job sequence.</td>
<td>Science experimentation; hardware repair practice; welding practice.</td>
</tr>
<tr>
<td>Classroom training (live or virtual)</td>
<td>The individual acquires skills and knowledge through guidance from an instructor in a formal class setting removed from the workplace.</td>
<td>Seminars; workshops; lectures; internet classes; videoconferencing.</td>
</tr>
<tr>
<td>Self-study</td>
<td>The individual acquires skills and knowledge through self-learning, guided by structured materials ranging from print to highly sophisticated multi-media systems.</td>
<td>Programmed instruction; CBT; interactive multimedia learning systems (CD-ROM; DVD; web-based).</td>
</tr>
</tbody>
</table>

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1 Source: Reproduced with permission from: Stolovitch HD and EJ Keeps. 1999. *Getting Results Through Performance Consulting*. Copyright © Harold D. Stolovitch and Erica J. Keeps 1999. All rights reserved.
Appendix A

Non-learning Interventions: Actions or events designed to change conditions that facilitate attainment of desired performance.

Anything that removes an obstacle or adds a facilitative element to the performance system qualifies as a non-learning intervention. Essentially, non-learning interventions fall into three major categories:

- job aids
- environmental
- incentives/consequences/motivation

Job aids are external memories. They contain information that the individual does not have to learn and remember.

Sample Job Aid — Monthly Public Transit Pass

<table>
<thead>
<tr>
<th>Number of Special Passes</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>8</th>
<th>6</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>42</td>
<td>84</td>
<td>126</td>
<td>168</td>
<td>210</td>
<td>252</td>
<td>294</td>
<td>336</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>26</td>
<td>66</td>
<td>110</td>
<td>152</td>
<td>194</td>
<td>236</td>
<td>278</td>
<td>360</td>
<td>362</td>
</tr>
<tr>
<td>2</td>
<td>52</td>
<td>94</td>
<td>136</td>
<td>178</td>
<td>220</td>
<td>262</td>
<td>304</td>
<td>346</td>
<td>388</td>
</tr>
<tr>
<td>3</td>
<td>78</td>
<td>120</td>
<td>162</td>
<td>204</td>
<td>246</td>
<td>288</td>
<td>330</td>
<td>372</td>
<td>414</td>
</tr>
<tr>
<td>4</td>
<td>104</td>
<td>146</td>
<td>188</td>
<td>230</td>
<td>272</td>
<td>314</td>
<td>356</td>
<td>398</td>
<td>440</td>
</tr>
</tbody>
</table>

Number of Adult Passes
Environmental interventions make up an extremely broad category. It encompasses all the adjustments one can make within the work environment, either by eliminating barriers that prevent performance or increasing support mechanisms for obtaining and enhancing desired accomplishments. Table 2 presents a range of environmental interventions.

Table 2. Environmental Interventions

<table>
<thead>
<tr>
<th>TYPE OF INTERVENTION</th>
<th>EXPLANATION</th>
<th>SPECIFIC INTERVENTION EXAMPLES</th>
</tr>
</thead>
</table>
| Provision of information | Lack of clarity of performance expectations and feedback on how one is performing according to expectations combine to form the number one cause of performance deficiencies in the work place. Other information factors that decrease performance are:  
  - lack of access to required information,  
  - unclear or unavailable policies or procedures,  
  - inaccurate and out-of-date information,  
  - lack of communication about products, events, decisions. | • Create standards for doing the job.  
• Harmonize conflicting standards.  
• Set unambiguous performance expectations.  
• Provide current catalogs and price lists.  
• Provide timely and specific information to the individual on how s/he is performing.  
• Develop a company policy on ethical practices. |
| Provision of resources | Without sufficient resources, the individual cannot perform as expected. | • Provide appropriate tools and equipment to perform the job as expected.  
• Provide sufficient time for task completion.  
• Provide access to supervisors, specialists and resource personnel.  
• Create workable, efficient procedures. |
| Redesign of the work environment | Inadequate organizational structure, communications systems, work processes and physical/administrative infrastructures create delays and inhibit optimal performance. | • Break down barriers between departments to increase cooperative, mutually beneficial decision-making and resource sharing.  
• Introduce e-mail.  
• Redesign work flow.  
• Eliminate bureaucratic procedures.  
• Introduce better lighting and sound buffers to decrease ambient noise levels.  
• Create networks to share files and peripherals. |
<table>
<thead>
<tr>
<th>TYPE OF INTERVENTION</th>
<th>EXPLANATION</th>
<th>SPECIFIC INTERVENTION EXAMPLES</th>
</tr>
</thead>
</table>
| Elimination of task interferences | The work environment creates conflicting priorities, and/or requires execution of tasks that may decrease performance on essential tasks. As an example, filling out sales and contact reports may decrease time with customers and hence, sales. | - Create weekly work priority sheets with a procedure and verification/approval process.  
- Assign tasks to individuals most capable and desirous of performing these and free up others to focus on other required tasks.  
- Audit tasks being performed and eliminate or reassign nonessential ones.  
- Set policies that reward accomplishment of priority tasks.  
- Increase support personnel.  
- Automate routine tasks.  
- Remove trivial tasks from essential workers. |
| Selection | Persons who do not have essential prerequisite skills and knowledge or appropriate characteristics and talents to perform drain the organization's resources. Training may improve performance somewhat but will rarely achieve desired results. The negative consequences to the individual, work colleagues and customers can be dramatic and costly when selection is inappropriate. | - Establish competency and characteristics requirements for the job along with performance-based measures for selection.  
- Create a performance-based assessment center.  
- Set clear performance goals (both behavior and accomplishments) with set checkpoints during a specified trial period.  
- Target recruitment to the widest range of high probability sources for appropriate candidates.  
- Train selection committee members on performance-based selection methods and provide clear examples of poor selection. |
| Provision of support | Performance, especially during early stages, requires encouragement, monitoring and support. Research shows that when early performance attempts fail, individuals soon return to previous patterns of behavior. | - Create initial meetings that cooperatively define expectations.  
- Encourage and reward initial performance attempts.  
- Build regular monitoring and support systems that include coaching.  
- Create a performance tracking system with specific supervisor intervention menus.  
- Recognize and publicize accomplishments.  
- Build in regular meetings to review performance and provide support.  
- Provide adequate resources to demonstrate support. |
### Table 3. Performance Intervention Selection

Based on the data collected during the assessment phase, identify relevant performance interventions:

<table>
<thead>
<tr>
<th>IF PERFORMERS...</th>
<th>CONSIDER...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack skills or knowledge essential for the job</td>
<td>Training</td>
</tr>
<tr>
<td>Lack job relevant skills or knowledge but may refer to readily accessible information, procedures, decision tables or information systems to perform at desired levels</td>
<td>Job aids</td>
</tr>
<tr>
<td>Lack clear performance expectations</td>
<td>Setting performance expectations</td>
</tr>
<tr>
<td>Lack unambiguous performance standards</td>
<td>Setting performance standards</td>
</tr>
<tr>
<td>Lack timely information on how well they are performing</td>
<td>Feedback systems</td>
</tr>
<tr>
<td>Lack appropriate prerequisite skills, knowledge, background or personal characteristics to rapidly meet performance levels</td>
<td>Selection</td>
</tr>
<tr>
<td>Face interferences that discourage or prevent desired performance</td>
<td>Elimination of task interferences</td>
</tr>
<tr>
<td>Have to work outside the accepted way the job has been structured to achieve desired performance levels</td>
<td>Job redesign</td>
</tr>
<tr>
<td>Face organizational obstacles (structural, communications, climate, administrative, infrastructural) that inhibit performance</td>
<td>Organizational redesign</td>
</tr>
<tr>
<td>Face physical obstacles that inhibit performance</td>
<td>Environmental redesign</td>
</tr>
<tr>
<td>Work with inefficient processes that inhibit desired performance</td>
<td>Process redesign</td>
</tr>
<tr>
<td>Are not meaningfully rewarded or are even punished for desired performance or do not perceive the reward system as fair and equitable</td>
<td>Incentives/Consequences</td>
</tr>
<tr>
<td>Do not value the desired performance, do not feel confident they can perform or do not feel challenged to perform</td>
<td>Motivation systems</td>
</tr>
<tr>
<td>Lack required tools, materials, supplies or support systems</td>
<td>Provision of resources</td>
</tr>
<tr>
<td>Lack access to information necessary to perform</td>
<td>Provision of information</td>
</tr>
<tr>
<td>Are not encouraged or supported by supervisors and/or management</td>
<td>Increased management support</td>
</tr>
<tr>
<td>Are not supported by appropriate specialists</td>
<td>Increased technical support</td>
</tr>
</tbody>
</table>