Male Circumcision Quality Assurance Workshop: Day One

PREPARATION

Review Facilitator's Guide

A pretest may be completed by the participants in advance of the workshop or on the first day. The value of testing in advance is to determine the knowledge level of the participants, so that the materials can be adjusted to their needs prior to the workshop. When the test is given during the workshop, the results will be used to evaluate learning that occurred during the workshop. The same test may be used at the completion of the workshop to determine knowledge gained or a new set of similar questions can be developed.

Objectives Day One:

- 1. To introduce concepts about quality and quality assurance/improvement (QA/QI) principles and practice QI approaches.
- 2. To practice using a communication plan.
- 3. To identify roles and responsibilities of Quality Facilitators and Team Leaders.

Activities

Activity 1.1 Quality chocolate

Activity 1.2 Communication planning

Activity 1.3 Roles of Team Leader & Quality Facilitator

Activity 1.4 Team building: Broken squares

Materials for Activities

Activity 1.1 One piece of chocolate or piece of candy for each participant

Activity 1.2 Communication planning sheets

Activity 1.4 Broken squares puzzles and participant instructions

Handouts

Provide copies for each participant of:

- The agenda
- WHO Male Circumcision Quality Assurance Guide
- WHO Quality Assessment Toolkit
- Course handout

Stages of team development (may be included in course handout or handed out separately during the presentation)

EDUCATION TIME	6 hours		
DAY 1	Opening	Workshop Overview	45 minutes
WORKSHOP	Session 1	Background Information	1 hour

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AGENDA OVERVIEW	Session 2	Introduction to Quality Assurance	1 hour & 35 minutes
	Session 3	Working in Teams	40 minutes
	Session 4	Facilitating Quality	1 hour & 45 minutes
	Closing	Evaluation	15 minutes

Session details	Remarks about session details
Opening session 45 minutes	Workshop Overview
Session Objectives	To set the stage for the workshop activities and clarify expectations.
Slide set #1 (Day 1 slides)	
Introductions	WELCOME participants to the workshop.
	Introductions:
	<u>Icebreaker # 1</u> The Name Game
	Time allocation: approximately 15 minutes
	1. Ask all players to form a large circle (if the group is too large, form two or more circles of at least 10 people in each).
	2. Identify a volunteer to start the game and this first volunteer says his or her name.
	3. Proceeding in a clockwise fashion, repeat the previous names that have been given and add your own to the end of the list.
	4. By the end of the circle, the last person will have to try to remember the names of all others in the circle.
	ICEBREAKER # 2 GETTING TO KNOW (ABOUT 15 MINUTES)
	1. Ask participants to stand and to find a participant who they do not know.
	2. Ask each to spend one minute to learn about each other.
	3. Each participant will then introduce the person they 'interviewed'.
Objectives and	REVIEW the workshop objectives and expected outcomes.
Expected Outcomes	DESCRIBE the teaching and learning methods to be used and emphasize the need for each individual's participation to ensure effective learning.
Ground Rules	DISCUSS the ground rules of the workshop.
	ASK the group the ground rules that they would like to see in place; the facilitator may add to the list after this.

	Each group should set their own ground rules. These rules provide structure for the group and can be used to keep order. Ground rules might include the following:	
Workshop Agenda	REVIEW the agenda of the workshop	
Expectations	Trainers need to determine the participants' expectations at the outset of the workshop. This is commonly done by asking each participant to identify their expectations and listing these on a flipchart. If there are expectations that will not be met during the workshop, the trainer needs to clarify this issue with the participants. If possible, the trainer should provide the participants with alternatives to achieving their expectations. The expectations also guide the trainer in focusing the content to meet the participants' needs. The expectations are reviewed with the participants at the end of the workshop to affirm that their expectations have been met.	
	ASK each participant for their expectations for this workshop.	
	LIST on a flipchart.	
	COMPARE participants' expectations to the workshop objectives and content.	
	IDENTIFY 1) which expectations will be addressed, and 2) if any expectations are not within the scope of the workshop, inform the participants where they can get the desired information or experience.	
Key messages	An open and supportive atmosphere allows for better learning.	
	This is a shared learning experience to achieve the objectives/outcomes set out and those of the participants.	
	There is an agenda, but it can be shaped to some degree by the participants	

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Session 1 1 hour	Background
Session Objectives	 At the end of this session, participants will be able to: 1. Relate the importance of implementing safe, effective male circumcision services. 2. Describe the activities in progress related to implementing quality male circumcision services within the region/country.
Male Circumcision for HIV prevention: Implementation of services	Male Circumcision for HIV prevention: The Evidence, WHO/UNAIDS Recommendations and UN Actions Note: If countries implement the workshop, and national recommendations exist, these should also be presented.
	Progress in implementing male circumcision services: Country specific information Note: The content of the session needs to be specific to the country or region facilitating the workshop. Content might include:
	 Status of countries/facilities in terms of implementing quality male circumcision services? What has been done to expand/scale up services to date?
	What has been the experience with quality assurance to date?

Session 2	Introduction to Quality Assurance
1 hour, 30 minutes	This education to Educity Assurance
Session Objectives	At the end of this session, participants will:
	 Describe the various perspectives of quality: the client, health care provider, management, and community. Describe how the principles of quality relate to male circumcision service delivery. Explain the purpose of setting standards for male circumcision services.
What is Quality?	What is Quality?
	Activity: Quality Chocolate / Candy
Activity 1.1 Quality	This activity is a fun way to break the ice and assist the participants to think about quality as it relates to something they know - chocolate.
Chocolate	 GIVE each participant a chocolate or piece of candy. ASK the participants to discuss the following points with a partner: How would you describe the quality of the chocolate? (POINT: each individual has their own perspective) How was the quality achieved? (POINT: standards!) How could the quality be improved? (POINT: Quality can always be improved) ASK the participants to share the results of their discussion. Use this activity as a lead in to a discussion on quality.
	A different option is to have each participant identify what they believe is "quality holiday lodging" to their partner. Their responses may include camping, B&Bs, 5 star hotels, etc. This will make the point that each individual has their own perspective of a quality experience. Using this example, the facilitator can ask the following questions: • How does the Marriott (or other major local chain) maintain the same quality for their facilities? (POINT: standards) • How do they improve their quality? (POINT: Survey users) This section should be interactive, eliciting ideas from the participants about quality. This section is important in laying the foundation for quality.

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Four Principles of Quality Improvement

Four Principles of Quality Improvement

INDICATE that there are four quality principles that provide a foundation for quality improvement:

- 1. Client focus
- 2. Teams
- 3. Systems and Processes
- 4. Use of Data

REVIEW the following principles:

1. Client Focus:

Questions for the participants:

- **1. ASK** the group to individually think back to a time when they experienced quality of care/services in the hospital, either as a patient or a family member.
- 2. ASK the participants:

How would you describe the quality of care/services? What was important to you and/or your family?

After the discussion, point out four common areas of client focus

- **Dignity and respect**: Taking into account the values, beliefs and cultural backgrounds of patients into the planning and delivery of care; resolving complaints and conflicts as soon as possible
- Information sharing: Encouraging patients to share their thoughts & questions; and healthcare professionals providing information regarding illness & treatment options in ways that the patient can understand
- **Participation**: Preparing and supporting patients/families to participate in care at the level they choose
- **Continuity**: Providing care across the continuum of care between home, hospital, primary health care, and community.

2. Teams

 Quality improvement activities are best carried out in multidisciplinary teams. Each member of the staff is valuable in the care and treatment of clients and each member has a role in providing quality care for the client. Inasmuch as health care is not the responsibility of a single individual; the quality team includes representatives from the staff as well as the community.

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 Each team member brings a different set of knowledge, experiences and skills, providing better understanding of an issue or process. Involving all levels of staff creates a sense of accountability and ownership. Teams provide a greater number of ideas for solutions. And, when people work together, they are more committed to the solutions agreed upon.

3. Systems and Processes:

ASK the group, "What is a system?" "What is a process?"

POINT OUT that a healthcare facility is made up of systems and processes. Quality improvement focuses on how well these systems and processes are working to provide care/treatment.

ASK for some examples, e.g. a pharmacy system includes processes such as ordering, dispensing, administering, evaluating, storing medications; or a registration system includes recording information, filing...

If this concept is difficult for the group, relate the concept to something they already know. Use the body as an example. Ask the group what are the systems of the body (Answers: circulatory, pulmonary, etc.) Then, ask what are the processes of one of these systems, e.g., the circulatory system pumps blood, the pulmonary systems oxygenates blood.

Deming's Rule

Deming's Rule

- 1. Edward Deming is often referred to as the "father of quality improvement". Dr. Deming suggested that 85% of the problems in an organization are related to the systems and that only 15% of the problems were under the control of the worker.
- 2. Instead of blaming the individual trying to work within these systems (most health care workers are trying to do a good job), a quality focus is about engaging the staff in activities to find ways to improve, prevent, or detect ineffective or problematic processes.

For example:

Client registration frequently takes "too long" - do we blame the client or the registration staff or should we look at the system of registering clients and find ways to improve it?

4. Data

Sound decisions are made with the appropriate information; therefore, quality improvement solutions and actions are based on data. The quality process is based on collecting data to assess performance, identify strengths and gaps in performance,

Day 1 Page 8 of 17 and to find solutions to improve performance and meet the standards. The measure of success is based on comparing the baseline measurement with the measurement after the improvement has been implemented. Decisions regarding services are based on data collected in the community and the facility.

INDICATE that these principles will be discussed throughout the workshop.

Quality Triangle

Quality Triangle

DESCRIBE the quality triangle:

POINT OUT that the center of the triangle is "QA" or quality assurance.

EXPLAIN that there are three core activities to ensuring quality:

- Defining quality –quality is defined through standards (thus, the WHO male circumcision standards).
- measuring quality to determine if standards are being met, the need to be measured (thus, the WHO male circumcision tool kit)
- Improving quality when standards are not met, there needs to be a means (system) of taking action to meet the standards. (thus, the quality improvement workshop to develop skills in quality approaches.)

Defining Quality: Standards

Standards

POINT OUT:

- A standard is defined as a written expectation.
- Standards are generally designed around systems; and classified as addressing a system's inputs, the processes the organization carries out, or the outcomes it expects from its care or services (based on current practice). Quality programs are based on setting and measuring compliance to standards.
- Provide an example to illustrate some of the inputs, processes, and outcomes.

ASK the group to identify inputs, processes, and outcomes for performing male circumcision. The answers will be similar to these:

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Inputs	Processes	Outcomes
 Trained Physician Sterile instruments Consent forms 	 Obtaining a consent Sterilize equipment Aseptic technique Performing circumcision 	 Informed consent obtained Circumcision completed with no complications

Male circumcision for HIV prevention standards

Male Circumcision Standards

REVIEW the ten WHO (or those developed nationally) male circumcision standards, emphasizing that they are systems-based and cover the minimum package. (Do not spend time discussing each standard).

The ten standards cover management, the minimum package of services, medicines, supplies and logistics, provider competency, client assessment, client information and education, surgical care, infection prevention and control, continuity of care, record keeping, monitoring and evaluation.

Key point: The intent is to link the development of the MC standards to the quality concepts that were just presented.

Communication of Standards

DISTRIBUTE copies of the communication planning sheets.

INDICATE that the success of the implementation of male circumcision standards depends on an effective communication plan.

Communication of Standards

DEFINE a target population as an individual/organization that has an interest in the process or outcome of male circumcision service standards.

ASK the group what individuals or groups are involved in the process. (Answers might include the client, staff at the facility, community members, NGOs, etc.)

POINT out that teams have no problem identifying persons internal to the clinic who need information; however, often individuals/groups external to the organization may be forgotten. The team needs to consider both of these populations in the plan. Social change agents also need to be identified and involved.

REVIEW the communication planning sheet, which includes an example of how to complete the form.

Activity: Communication Planning

- Form groups of 6-8 individuals.
- Assign each group one target population
- Task: Communicating the need to implement the male circumcision standards
- Each small group is to complete a communication plan for their assigned population.

Discussion: ASK two groups to present their plans.

INDICATE that after a team has implemented their plan, they will

need to evaluate how effective the plan was in meeting the communication needs. This plan should be developed as a follow up to this workshop.

Activity 1.2 Communication

Planning

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Session 3	Working in Teams
40 minutes	
Session Objectives	At the end of this session, participants will be able to:
	 Describe the benefits of working in a team. Describe characteristics of an effective team. Describe the roles of each member in the team. Differentiate the role of the team leader from the facilitator.
Why work in teams?	ASK the group what the benefits are of working in teams.
teams?	REFLECT on the groups input and DESCRIBE the benefits of working on teams such as:
	having a more complete working knowledge of the process,
	a more open atmosphere with less blaming of others for problems,
	a greater number of ideas to resolve problems and
	a greater acceptance and higher implementation rate of solutions.
	ASK the participants to remember a group that they worked with that was highly effective. What made that team effective? Have them share these points.
	DESCRIBE the various characteristics of an effective team such as:
	has a clear goal and role definition,
	sensitivity to each other's needs and expressions,
	clear expectations and preparation,
	a high level of interest and commitment, and
	interruptions are avoided or kept to a minimum.

Session 4	Facilitating Quality Improvement	
2 hours		
Session	At the end of this session, participants will be able to:	
Objectives	 Describe their role as a quality facilitator. Describe stages of team development and the actions that can be taken to work through these stages. 	
Facilitating Quality Improvement	INDICATE that they will be working with quality teams at facilities. This is a key principle of quality (relate to the discussion of quality principles and the information in the QA guide). They will be functioning as the Quality Facilitator and the chair of the quality team is the Team Leader. It is important that each understand their roles.	
Activity 1.3	Activity: Roles of the Team Leader and QI Facilitator	
Team Leader vs. Quality Facilitator	 Form groups of 6-8 individuals. Ask the groups to list the roles of the Team Leader and QI Facilitator on a flip chart. ASK one group to share their results. 	
	INVITE group discussion regarding the roles.	
	PRESENT the slides to reinforce understanding:	
	 Team Leader The team leader is the person who manages the team: calling and conducting meetings, handling or assigning administrative details, coordinating all team activities, and overseeing preparations for reports and presentations. 	
	 The team leader should be interested in solving the problems that prompted the project, and be good at working with individuals and groups. Ultimately, it is the leader's responsibility to create and maintain communication channels and work processes that enable team members to do their work. 	
	 The leader's role is not to make all the decisions but simply to lead the team through its work, ensuring that the team meets its goals. The team leader builds an agenda including the topics for discussion; time needed for each topic, and seeks input of the team. 	
	Effective team leaders:	
	 Communicate effectively Give praise and recognition Criticize constructively and address problems Make decisions with input from others 	

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- Give team members information they need to do their jobs
- Set team goals collaboratively
- Keep team focused through follow-up
- Make themselves available and accessible
- Represent the team and defend their actions when appropriate

Quality Facilitator

The Quality facilitator observes team processes and gives both supportive and constructive feedback to the team about the way they interact and the way work gets done - a mentor

Manages the quality process

- Helps interpret standards
- Teaches quality methods
- Facilitates team work
- Guides problem-solving

Characteristics of an effective facilitator

- Knowledge of male circumcision standards
- Group process skills
- Able to use quality methods
- Teaching skills
- Good at asking questions

Facilitation guidelines:

- Set ground rules
- Stay neutral in the team
- Encourage participation by all
- Help team reach consensus
- Assist with team building
- Observe group processes
- Intervene to address issues of group communication
- Give feedback
- Reflect feelings and ideas back to the team
- Help team keep on track

Active listening behaviours:

- Being quiet, no interrupting or taking over the conversation
- Using body language such as leaning forward, nodding head, and open gestures, to communicate interest and understanding
- Maintaining eye contact
- Restating the person's words
- Using encouraging words, such as "I see" and "yes" to encourage free flow of conversation
- Using open-ended questions to encourage the other person to elaborate their thoughts and feelings

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- Asking for clarification when needed
- Summarizing various points
- Being non-judgmental

Three additional roles are typically well understood: recorder, time keeper and the team member.

Recorder

The recorder maintains the team's minutes and agendas, as well as coordinates the preparation of reports and documents. Many times the recorder for a meeting rotates among the members.

Time Keeper

In meetings, the time keeper watches the time and reminds the team of how much time remains for a particular agenda item as well as how much time remains in the meeting. If the discussion is taking more time than anticipated these reminders will prompt the team to adjust the agenda accordingly, if necessary. This role often rotates, too.

Team Members

Team members are responsible for contributing fully, sharing their knowledge and expertise, and participating in all meetings and discussions. They are responsible for carrying out their assignments on time and applying the steps of the quality improvement process.

Each team member is expected to:

- Attend and participate in all team meetings
- Help build the agenda
- Help evaluate and improve the meeting process
- Share experience and knowledge
- Participate in team activities
- Complete assignments on time

Stages of Team Development

Stages of Team Development

As a team develops, it goes through fairly predictable stages. These stages were first identified by Tuckman and labeled: Forming, Storming, Norming, Performing. **REFER** to handout.

DESCRIBE the stages of team development.

Stage 1: Forming

When a team is forming, members cautiously explore acceptable group behavior. People's roles change from "individual" to "member." They may challenge the authority of

Day 1 Page 15 of 17 the leader, but they also tend to be dependent on them for orientation and direction.

Stage 2: Storming

The Storming stage is critical to effective group development, but may be experienced as a difficult time for the team. The task seems harder than they expected. Some team members become impatient and argumentative. Others may resist collaborating with each other.

If the team is committed to its task and purpose, this stage provides the opportunity for individuals to establish their own expertise within the group. They will forge ways of working with one another, and come to respect one another's point of view.

Stage 3: Norming

During this stage, members begin to accept the team, their roles on the team, and the individuality of fellow members. Conflict is reduced as members become more cooperative, realize their common goals, and get to know each other better.

Stage 4: Performing

At this stage, the team starts diagnosing and solving problems, and choosing and implementing changes. Members accept each other's strengths and weaknesses, and know their own roles. The facilitator helps the team to perform more self-evaluation and accept leadership, facilitation, and training responsibilities.

INDICATE that teams may move back and forth between stages and that when team members change, it can be expected that the team will need to readjust.

Teambuilding

Teambuilding

INTRODUCE the concept of team building.

- The process of deliberately helping a group develop into a cohesive and effective unit is called team building. Team building activities should be suited to the type of team that has been formed, the strengths of individual team members, as well as to the stages of team development.
- Team building is a *process*, not an *event*, and requires many experiences over time. Initially most teams require facilitation and training to reach their full potential.
- A Quality Facilitator may contribute to team building using his or her facilitation skills, providing training, and/or conducting specific team building activities. In the latter case, there are many different team-building activities that teams can use;

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coaches can help to determine which are appropriate. **Activity 1.4 Activity:** Team building **Teambuilding** Broken squares or another teambuilding activity may be used. **FOLLOW** the instructions for the selected activity See handout. **ASK** the group for feedback on their experience. **KEY POINTS:** Quality facilitators work closely with the team leader. Quality facilitators guide the team processes. • The effectiveness of teams is influenced by the team leader, QA facilitator, team composition, and structure of the team (meeting regularly, agenda, minutes). Teambuilding is an important activity toward improving team effectiveness and achieving goals. Closing Evaluation of the day. Various methods could be used. A simple method is to **ASK** the group to identify what they learned that they do not want to forget, the most useful or interesting, the things that went well and the things that could have been improved. **LIST** these items on post-it notes, and then attach to flip chart.

(Use this feedback to make adjustments if needed in the agenda for

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the second day).