

9. Training VMMC Supervisors

Training VMMC Supervisors

1	2	3	4	5	6	7	8	9	10	11	12
---	---	---	---	---	---	---	---	---	----	----	----

Useful Tool	18 Quality Assessment Toolkit
Useful International Guidance Documents	8 WHO Manual for Male Circumcision under Local Anesthesia 12 Supervising Health Care Services: Improving the Performance of People

Objective(s): To ensure that VMMC supervisors have the supervision skills and specific technical knowledge about VMMC required for effective, supportive supervision

Description: For sustainability and integration of a VMMC program within the health system, it is envisioned that existing supervision systems will be strengthened and supported by key clinical and managerial site staff members who are responsible for their respective geographic locations. Supportive supervision is “a process that promotes quality at all levels of the health system by strengthening relationships within the system, focusing on the identification and resolution of problems, and helping to optimize the allocation of resources—promoting high standards, teamwork, and better two-way communication” [27]. The WHO MANUAL FOR MALE CIRCUMCISION UNDER LOCAL ANESTHESIA (see GUIDANCE DOCUMENT 8) includes tools used to assess providers before, during, and after service provision. In addition, a variety of Performance Improvement and QA materials have been developed that supervisors can use during their supportive supervision (see TOOL 18). Supervisors who are previously trained in supportive supervision need only the VMMC technical training, whereas supervisors who possess VMMC technical training may need only supportive supervision training (see GUIDANCE DOCUMENT 12).

Training VMMC Supervisors—Learning by Doing

VMMC training follows principles of competency-based training (CBT). CBT is different from traditional educational processes; it is learning by **doing**. VMMC training focuses on the specific knowledge, attitudes, and skills needed to provide the full package of services for clients. How the learner performs (e.g., demonstrated knowledge of the benefits of male circumcision and the role of partners; and most important, the ability to perform safe medical male circumcision) is emphasized rather than just what information the learner has acquired. Moreover, the VMMC training courses require that the clinical trainer facilitate and encourage learning rather than serve in the more traditional role of instructor or lecturer. Counseling and surgical skills competency are assessed objectively by evaluating overall performance. An essential component of VMMC training is **coaching** combined with supportive supervision, which uses positive feedback and problem-solving skills to encourage a positive learning climate. The coaching process ensures that the learners and providers receive **feedback** regarding performance: **Before practice**—supervisor/coach and learner/provider meet briefly before each practice session to review the skill/activity, including the steps/tasks, as described in the WHO MANUAL FOR MALE CIRCUMCISION UNDER LOCAL ANESTHESIA. **During practice**—the supervisor/coach observes, coaches, and provides feedback as the learner performs the steps/tasks outlined in the checklist. **After practice**—a feedback session should take place immediately after the visit/practice. Using the checklist, the supervisor/coach discusses the strengths of the provider’s performance and also offers specific suggestions for improvement.